

Section I
 Notice of Development of Proposed Rules
 and Negotiated Rulemaking

NONE

Section II
 Proposed Rules

DEPARTMENT OF HEALTH

Board of Hearing Aid Specialists

RULE NO.: RULE TITLE:

64B6-6.001 Thirty-Day Trial Period

PURPOSE AND EFFECT: Development: to up-date 30 day cancellation refund consistent with statute.

SUMMARY: Development: to up-date 30 day cancellation refund consistent with statute.

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: 484.044(1), 484.0512 FS.

LAW IMPLEMENTED: 484.0512 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: Ashleigh Irving, Executive Director, Board of Hearing Aid Specialists, 4052 Bald Cypress Way, Bin # C08, Tallahassee, Florida 32399-3258.

THE FULL TEXT OF THE PROPOSED RULE IS:

64B6-6.001 Thirty-Day Trial Period.

(1) A person selling a prescription hearing aid(s) in the State of Florida must provide the purchaser with written notice of the 30-day trial period and money-back guarantee as provided in Section 484.0512, F.S. The terms and conditions of the guarantee as well as the total amount available for refund shall be provided in writing to the purchaser prior to the signing of the contract.

(2) The guarantee shall permit the purchaser to cancel the purchase for a valid reason within 30 days of the receipt of the prescription hearing aid(s). A valid reason shall be defined as failure by the purchaser to achieve satisfaction from use of the prescription hearing aid(s), so long as the prescription hearing aid(s) is returned to the seller within the 30-day trial period in good working condition.

(3) If the prescription hearing aid must be repaired, remade, or adjusted during the 30-day trial period, the running of the 30-day trial period is suspended one day for each 24-hour period that the prescription hearing aid is not in the purchaser's possession. A repaired, remade, or adjusted prescription hearing aid must be claimed by the purchaser within three working days after notification of availability. The running of the 30-day trial period resumes on the day the purchaser reclaims the repaired, remade, or adjusted prescription hearing aid or on the fourth day after notification of availability.

(4) In the event of cancellation within the 30-day trial period, the seller may retain a charge not to exceed ~~\$300~~ ~~\$150~~ on a monaural fitting, and ~~\$600~~ ~~\$200~~ on a binaural fitting for ear molds and services provided to fit the prescription hearing aid. In addition, the purchaser may be charged a cancellation fee not to exceed 5% of the total purchase price.

(5) This rule shall be reviewed, and if necessary, repealed, modified, or renewed through the rule making process five years from the effective date.

Rulemaking Authority 484.044(1), 484.0512 FS. Law Implemented 484.0512 FS. History—New 10-4-94, Formerly 61G9-6.0010, Amended 9-14-97, Amended _____.

NAME OF PERSON ORIGINATING PROPOSED RULE:
 Board of Hearing Aid Specialists

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Hearing Aid Specialists
 DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 21, 2023
 DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAR: November 22, 2022

DEPARTMENT OF CHILDREN AND FAMILIES

Mental Health Program

RULE NOS.:	RULE TITLES:
65E-5.100	Definitions
65E-5.120	Forms
65E-5.1303	Discharge from Receiving and Treatment Facilities
65E-5.1703	Emergency Treatment Orders for the Administration of Phychotropic Medications
65E-5.260	Transportation
65E-5.2601	Transportation Exception Plan
65E-5.270	Voluntary Admission
65E-5.280	Involuntary Examination
65E-5.2801	Minimum Standards for Involuntary Examination Pursuant to Section 394.463, F.S

PURPOSE AND EFFECT: Amendments align these Baker Act rules with recent statutory changes to Chapter 394, F.S., provide additional clarity for providers and other stakeholders, and update rules to meet current best practice guidelines.

SUMMARY: Amendments include: (1) Updates definitions to add new definitions and removes obsolete definitions; (2) Eliminates distinctions between mandatory and recommended; (3) Allows providers to make formatting modifications to forms; (4) Adds discharge planning requirements; (5) Allows telehealth as a mode for an ETO Order; (6) Extends ETO’s from 24 to 48 hours for state mental health treatment facilities; (7) Adds language to ensure providers comply with Chapter 39 F.S.; (9) Simplifies the form that LEO and others are required to complete and submit to receiving facilities when taking an individual into custody for involuntary examination under a Baker Act or involuntary admission under the Marchman Act; (10) Adds new clinical review process to verify voluntary assent of minors; (11) Requires submission of data through new Baker Act data collection portal; (12) Requires submission of transportation form when individual transported to a receiving facility; and (13) Expands scope of psychiatric nurses to conduct Baker Act examinations and discharges.

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.

A SERC has not been prepared.

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 used a checklist to conduct an economic analysis and determine if there is an adverse impact or regulatory costs associated with this rule that exceeds the criteria in section 120.541(2)(a), F.S. Based upon this analysis, the Department has determined that the proposed rule is not expected to require 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: 394.457(5), 394.46715 FS

LAW IMPLEMENTED: 394.455, 394.457, 394.4573, 394.459, 394.4598, 394.4599, 394.460, 394.462, 394.4625, 394.463, F.S. 394.4655, 395, 400, 400.102(1) 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: Elizabeth Floyd. Elizabeth can be reached at Elizabeth.Floyd@myflfamilies.com.

THE FULL TEXT OF THE PROPOSED RULE IS:

65E-5.100 Definitions.

As used in this chapter the following words and phrases have the following definitions:

(1) “Advance directive” as defined means a witnessed written document described in Section 765.101, F.S.

(2) “Assent” is an affirmative agreement by the minor to remain at the receiving facility for examination and treatment.

(3)(2) “Assessment” means the systematic collection and integrated review of individual-specific data. It is the process by which individual-specific information, such as examinations and evaluations, are gathered, analyzed, monitored, and documented to develop the individual’s recovery person’s individualized plan of treatment and to monitor recovery. Assessment specifically includes efforts to identify the individual’s person’s key medical and psychological needs, competency to consent to treatment, patterns of a co-occurring mental illness and substance use disorder abuse, as well as clinically significant neurological deficits, traumatic brain injury, organicity, physical disability, developmental disability, need for assistive devices, and physical or sexual abuse or trauma.

(4) “Care coordination” as defined in Section 394.4573(1)(a), F.S.

~~(3) Certified recovery specialist means an individual credentialed by the Florida Certification Board as a Certified Recovery Peer Specialist, Certified Recovery Peer Specialist—Adult, Certified Recovery Peer Specialist—Family, Certified Recovery Peer Specialist—Veteran, or Certified Recovery Support Specialist.~~

(5) “Clinical review for minors” means the process of collecting and analyzing information about a minor presenting for voluntary admission or transfer to voluntary status at a receiving facility. The review must include an interview with the minor, and may include collection of collateral information, for the purpose of determining if the minor voluntarily assents to the admission or transfer. The clinical review shall be conducted by a qualified professional or registered nurse or clinical staff with at least a master’s degree in psychology, social work, counseling education, mental health counseling, or marriage and family therapy.

(6)(4) “Discharge plan” means a written plan describing the proposed aftercare needs and how they will be met, including living arrangements, transportation, physical health, treatment, and recovery supports. the plan developed with and by the person which sets forth how the person will meet his or her needs, including living arrangements, transportation, aftercare, physical health, and securing needed psychotropic medications for the post discharge period of up to 21 days.

(7)(5) “Emergency treatment order (ETO)” means a written emergency order for psychotropic medications, as described in Rule 65E-5.1703, F.A.C.; or a written emergency order for seclusion or restraint, as described in subsection (7) of Rule 65E-5.180, F.A.C.

(8)(6) “Examination” means the integration of the physical examination required under Section 394.459(2), F.S., with other diagnostic activities to determine if the individual person is medically stable and to rule out abnormalities of thought, mood, or behavior that mimic psychiatric symptoms but are due to non-psychiatric medical causes such as disease, infection, injury, toxicity, or metabolic disturbances. Examination includes the identification of individual specific person specific risk factors for treatment, such as elevated blood pressure, organ dysfunction, substance use abuse, or trauma.

(9) “Facility” as defined in Section 394.455, F.S.

(10)(7) “Health care proxy” means a competent adult who has not been expressly designated by an advance directive to make health care decisions for a particular incapacitated individual, but is authorized pursuant to Section 765.401, F.S., to make health care decisions for such individual.

(11)(8) “Health care surrogate” means any competent adult expressly designated by a principal’s advance directive to make

health care decisions on behalf of the principal upon the principal’s incapacity.

(12) “High utilization” means an individual experiencing an increased utilization of acute behavioral health services demonstrated by:

a. Three (3) or more evaluations or admissions into a crisis stabilization unit or inpatient psychiatric hospital within 180 days; or

b. Acute care admissions that last 16 days or longer.

(13) “Individual” or “Individual receiving services” means any person receiving services in any substance use or mental health treatment facility, program, or service which is operated, funded, or regulated by the Department.

(14) “Managing entity” as defined in Section 394.9082(2)(e), F.S.

(15) “No-wrong-door model” as defined in Section 394.4573(1)(d), F.S.

~~(9) Person means an individual of any age, unless statutorily restricted, with a mental illness served in or by a mental health facility or service provider.~~

(16)(10) “Personal Safety Plan” is a form used to document information regarding calming strategies that the individual person identifies as being helpful in avoiding a crisis. The plan also lists identified triggers that are identified that may signal or lead to agitation or distress.

(17) “Physician” as defined in Section 394.455, F.S.

(18)(11) “Pro re nata (PRN)” means an individualized order issued at the discretion of a physician as circumstances require, for the care of an individual person which is written after the person has been seen by the practitioner, which order sets parameters for attending staff to implement according to the circumstances set out in the order. A PRN order shall not be used as an emergency treatment order.

(19)(12) “Protective medical devices” mean a specific category of medical restraint that includes devices, or combinations of devices, to restrict movement for purposes of protection from falls or complications of physical care, such as geri-chairs, posey vests, mittens, belted wheelchairs, sheeting, and bed rails. The requirements for the use and documentation of use of these devices are for specific medical purposes rather than for behavioral control.

(20) “Psychiatric nurse” as defined in Section 394.455, F.S.

(21) “Qualified professional” as defined in Section 394.455, F.S.

(22) “Receiving facility” as defined in Section 394.455, F.S.

(23) “Receiving system” means one or more facilities serving a defined geographic area which are responsible for assessment and evaluation, both voluntary and involuntary, and treatment, stabilization, or triage for patients who have a mental

illness, a substance use disorder, or co-occurring disorders, as authorized in Section 394.461(5), F.S.

~~(24)(13)~~ “Recovery Plan” or ~~may also be referred to as a~~ “service plan” or “treatment plan.” ~~means~~ A recovery plan is a written strength-based plan developed by the individual person and his or her recovery team to facilitate achievement of the individual’s person’s recovery goals. This plan is informed by based on assessment data, and describes the individual’s identifying the person’s clinical, rehabilitative, and support needs and activity service needs, the strategy for meeting those needs, The recovery plan specifies measurable documented treatment goals and objectives, and documented progress in meeting specified goals and objectives.

~~(25)(14)~~ “Recovery Team” or ~~may also be referred to as~~ “service team” or “treatment team.” ~~means~~ A recovery team is an assigned group of individuals with specific responsibilities identified in on the recovery plan who support and facilitate an individual’s a person’s recovery process. Team members may include the person, psychiatrist, guardian/guardian advocate, community case manager, family member, peer specialist and others as determined by the person’s needs and preferences.

~~(26)~~ “Restraint” as defined in Section 394.455, F.S.

~~(27)~~ “Seclusion” as defined in Section 394.455, F.S.

~~(28)(15)~~ “Seclusion and Restraint Oversight Committee” ~~means~~ is a group of staff members or volunteers that monitors the use of seclusion and restraint in a facility in order to assist in safely reducing the use of these practices. Members are selected by the administrator and include, but are not limited to, the administrator or designee, medical director or a physician designated by the medical director, quality assurance staff, and a certified recovery specialist, if available. If no certified recovery specialist is employed by the facility, a volunteer certified recovery specialist may be selected by the administrator.

~~(29)~~ “Signature “- means either a written or electronic signature.

~~(30)(16)~~ “Standing order” means a broad protocol or delegation of medical authority that is generally applicable to a group of individuals persons, hence not individualized. As limited by this chapter, it prohibits improper delegations of authority to staff that are not authorized by the facility, or not permitted by practice licensing laws, to independently make such medical decisions; such as decisions involving determination of need, medication, routes, dosages for psychotropic medication, or use of restraints or seclusion upon an individual a person.

~~(31)~~ “Telehealth” as defined in Section 456.47(1), F.S.

~~(32)~~ “Transportation plan” means a plan that describes methods of transport to a facility within the designated receiving system for individuals subject to involuntary examination or involuntary admission and may identify

responsibility for other transportation to a participating facility when necessary and agreed to by the facility, as described in Section 394.462, F.S.

Rulemaking Authority 394.457(5), 394.46715 FS. Law Implemented 394.455, 394.457, 394.4655 FS. History—New 11-29-98, Amended 4-4-05, 1-8-07, 5-7-08, 4-9-13. Amended _____.

65E-5.120 Forms.

All forms referred to in this chapter are available from the Department’s department’s website, <http://www.myflfamilies.com/service-programs/mental-health/baker-act-forms>. ~~http://www.def.state.fl.us/mentalhealth/laws/index.shtml~~, by scrolling down to and clicking on “Baker Act Forms” under “Baker Act Handbook,” or may be obtained from the department’s district or regional mental health program offices. Single copies of all the forms or a disk containing electronic copies of all the forms are also available from district or regional offices. All Recommended forms incorporated in this Rule Chapter contain are those which are incorporated by reference because they provide a list of the information necessary to comply with the statutory and rule requirements. Forms may be modified for the following purposes: to accommodate electronic health record formats; for provider and individual identification; and, for electronic signatures and dates. All forms shall be maintained in the individual’s clinical record. Mandatory forms are incorporated by reference and the specific form is required and may not be altered.

Rulemaking Authority 394.457(5) FS. Law Implemented 394.457(5) FS. History—New 11-29-98, Amended 4-4-05. Amended _____.

65E-5.1303 Discharge from Receiving and Treatment Facilities.

(1) The individual shall actively be involved in and assisted with discharge planning activities. Before discharging a person who has been admitted to a facility, the person shall be encouraged to actively participate in treatment and discharge planning activities and shall be notified in writing of his or her right to seek treatment from the professional or agency of the person’s choice and the person shall be assisted in making appropriate discharge plans. The person shall be advised that, pursuant to Section 394.460, F.S., no professional is required to accept persons for psychiatric treatment.

(2) Discharge planning and procedures shall include the requirements in Section 394.468(2), F.S. In addition, the facility shall and document consideration of the following:

(a) The individual’s person’s transportation resources;

(b) The individual’s person’s access to stable living arrangements;

(c) If the individual is experiencing homelessness, notification to the managing entity or the individual’s Medicaid managed care plan to assist with care coordination and housing

~~resources available in the community; How assistance in securing needed living arrangements or shelter will be provided to individuals who are at risk of re-admission within the next 3 weeks due to homelessness or transient status and prior to discharge shall request a commitment from a shelter provider that assistance will be rendered;~~

(d) Assistance in obtaining a timely aftercare appointment for needed services, including continuation of prescribed psychotropic medications. Aftercare appointments for psychotropic medication, care coordination, and case management shall be requested to occur not later than seven (7) days after the expected date of discharge. ~~If~~ if the discharge is delayed, the facility shall ~~will~~ notify the aftercare provider. The facility shall coordinate with the aftercare service provider and shall document the aftercare planning;

(e) To ensure an individual's ~~a person's~~ safety and provide continuity of prescribed essential psychotropic medications, such prescribed psychotropic medications, prescriptions, or multiple partial prescriptions for psychotropic medications, or a combination thereof, shall be provided to an individual when appropriate ~~a person~~ when discharged to cover the intervening days until the first scheduled psychotropic medication aftercare appointment, ~~or for a period of up to 21 calendar days, whichever occurs first.~~ Discharge planning shall address the availability of and access to prescribed psychotropic medications in the community;

(f) The individual person shall be provided education and written information about his or her illness and psychotropic medications including other prescribed and over-the-counter medications, the common side-effects of any medications prescribed and any adverse clinically significant drug-to-drug interactions common between that medication and other commonly available prescribed and over-the-counter medications;

(g) The individual person shall be provided with any needed resources and services and community-based peer support services that are available in the community ~~contact and program information about and referral to any community-based peer support services in the community;~~

(h) The individual shall be referred to substance use treatment programs, trauma or abuse recovery focused programs, or other self-help groups, if indicated by assessments ~~person shall be provided contact and program information about and referral to any needed community resources;~~

(i) The individual shall be provided with resource information on the National Suicide Prevention Lifeline and local Mobile Response Team services; Referral to substance abuse treatment programs, trauma or abuse recovery focused programs, or other self help groups, if indicated by assessments; and,

(j) The individual person shall be provided information about advance directives, including resources to assist with preparation and use; and how to prepare and use the advance directives.

(k) For individuals who are diagnosed with an intellectual or developmental disability according to Chapter 393, F.S., the facility shall ensure that the parents or guardians have information on how to access appropriate resources from the Agency for Persons with Disabilities, and shall assist with a referral when indicated.

(l) The facility staff shall assist the individual in making appointments, upon request or when indicated.

~~(3) Should a person in a receiving or treatment facility meet the criteria for involuntary outpatient placement rather than involuntary inpatient placement, the facility administrator may initiate such involuntary outpatient placement, pursuant to Section 394.4655, F.S., and Rule 65E-5.285, F.A.C., of this rule chapter.~~

~~(3)(4)~~ Receiving and treatment facilities shall have written discharge policies and procedures which shall contain:

(a) Agreements or protocols for transfer and transportation arrangements between facilities;

(b) Protocols for assuring that current medical and legal information, including medication administered on the day of discharge, is transferred before or with the individual person to another facility; and,

(c) Policy and procedures which address continuity of services and access to necessary psychotropic medications.

(4) The provider shall implement policies and procedures outlining their strategies for how they will comprehensively address the needs of the following individuals to avoid or reduce future use of crisis stabilization services:

(a) Individuals who demonstrate a high utilization of receiving facility services; or

(b) Adults awaiting involuntary placement into a state mental health treatment facility (SMHTF) or awaiting discharge from a SMHTF back into the community; or

(c) Children and adolescents awaiting admission into a psychiatric residential treatment facility (PRTF) or awaiting discharge from a PRTF back into the community.

(5) The policies and procedures for individuals meeting the criteria in subsection (4) shall consist of the following:

(a) A warm hand-off to one of the following: a case manager, or a care coordinator.

(b) The warm hand-off process includes:

1. Engaging the individual in the referral process;

2. Providing transparency of the referral process and the information being shared on behalf of the individual; and

3. Documenting the post discharge follow-up with the aftercare provider, or care coordinator, or case manager, or insurer.

~~(6)(5)~~ When a state mental health treatment facility has established an anticipated discharge date for discharge to the community which is more than seven days in advance of the individual's person's actual discharge, at least seven (7) days notice must be given to the community agency which has been assigned case management responsibility for the implementation of the individual's person's discharge plan. When an impending discharge is known seven (7) days or less prior to the discharge, the staff of the state mental health treatment facility shall give verbal and written notice of the impending discharge to the community case management agency within one (1) working day after the decision to discharge is made. ~~Form Recommended form~~ CF-MH 7001, (insert date) ~~Jan. 98~~, "State Mental Health Facility Discharge Form," which is incorporated by reference and available at <https://www.flrules.org/Gateway/reference.asp?No=Ref-XXX>, may be used for this purpose, ~~and may be obtained online at~~ <https://www.flrules.org/Gateway/reference.asp?No=Ref-02361>, ~~http://www.myflfamilies.com/service-programs/mental-health/baker-act-forms.~~

~~(7)(6)~~ On the day of discharge from a state mental health treatment facility, the referring physician, or his or her designee, within the requirements of section 394.4615, F.S., and the policies and procedures required by subsection ~~(3)~~ ~~(4)~~ of this rule, shall immediately notify the community aftercare provider or entity responsible for dispensing or administering medications. ~~Form Recommended form~~ CF-MH 7002, (insert date) ~~Feb. 05~~, "Physician to Physician Transfer," which is incorporated by reference and available at <https://www.flrules.org/Gateway/reference.asp?No=Ref-XXX> as referenced in subsection 65E-5.1302(2), F.A.C., may be used for this purpose, ~~and may be obtained online at~~ <https://www.flrules.org/Gateway/reference.asp?No=Ref-02362>, ~~http://www.myflfamilies.com/service-programs/mental-health/baker-act-forms.~~

Rulemaking Authority 394.457(5), 394.46715 FS. Law Implemented 394.4573, 394.459(11), 394.460 FS. History—New 11-29-98, Amended 4-4-05, 4-9-13. Amended

65E-5.1703 Emergency Treatment Orders for the Administration of Psychotropic Medications.

(1) An emergency treatment order for the administration of psychotropic medications shall be consistent with the least restrictive treatment interventions, ~~including the emergency administration of psychotropic medications or the emergency use of restraints or seclusion. Use of seclusion or restraint in an emergency situation is addressed in subparagraph 65E-5.180(7)(a)3., F.A.C., and is not addressed in this rule. This rule pertains only to the use of psychotropic medication in an emergency situation.~~

(a) The issuance of an emergency treatment order requires a physician's review of the individual's person's condition for causal medical factors, such as the following: ~~insufficiency of psychotropic medication blood levels, as determined by drawing a blood sample; medication interactions with psychotropic or other medications; side effects or adverse reactions to medications; organic, disease or medication based metabolic imbalances or toxicity; or other biologically based or influenced symptoms.~~

1. Insufficient blood levels of psychotropic medication;

2. Medication interactions with psychotropic or other medications;

3. Side effects or adverse reactions to medications;

4. Organic, disease or medication based metabolic imbalances or toxicity; or

5. Other biologically based or influenced symptoms.

(b) through (c) No change.

~~(d) The use of an emergency treatment order must be consistent with the least restrictive treatment requirements, and, Absent absent~~ more appropriate interventions, an emergency treatment order is for immediate administration of rapid response psychotropic medications to a person to expeditiously treat symptoms, that if left untreated, present an immediate danger to the safety of the individual person or others.

(2) An emergency treatment order for psychotropic medication supersedes the individual's person's right to refuse psychotropic medication if based upon the physician's assessment that the individual is not capable of exercising voluntary control over his or her own symptomatic behavior and that these uncontrolled symptoms and behavior are an imminent danger to the individual person or to others in the facility. When emergency treatment with psychotropic medication is ordered for a minor or an incapacitated or incompetent adult, facility staff shall document attempts to promptly contact the guardian, guardian advocate, or health care surrogate or proxy to obtain express and informed consent for the treatment in advance of administration where possible and if not possible, as soon thereafter as practical.

(3) The physician's initial order for emergency treatment may be by telephone or by telehealth but such a verbal order must be reduced to writing upon receipt and signed by a physician within 24 hours.

(4) Each emergency treatment order shall only be valid and shall be authority for emergency treatment only for a period not to exceed 24 hours. For state mental health treatment facilities, emergency treatment orders are valid for 48 hours.

(5) Standing orders, PRN orders, or other similar protocol are prohibited for emergency treatment.

~~(6)(5)~~ The need for each emergency treatment order must be documented in the individual's person's clinical record in the progress notes and in the section used for physician's orders

and must describe the specific behavior which constitutes a danger to the individual person or to others in the facility, and the nature and extent of the danger posed.

~~(6) Upon the initiation of an emergency treatment order the facility shall, within two court working days, petition the court for the appointment of a guardian advocate pursuant to the provisions of Section 394.4598, F.S., to provide express and informed consent, unless the person voluntarily withdraws a revocation of consent or requires only a single emergency treatment order for emergency treatment.~~

~~(7) If two emergency treatment orders are a second emergency treatment order is issued for the same individual person within any seven (7) day period, the petition for the appointment of a guardian advocate pursuant to the provisions of Section 394.4598, F.S., to provide express and informed consent shall be filed with the court within two (2) court working days day.~~

(8) While awaiting court action, treatment may be continued without the consent of the individual person, but only upon the daily written emergency treatment order of a physician who has determined that the individual's person's behavior each day during the wait for court action continues to present an immediate danger to the safety of the individual person or others and who documents the nature and extent of the emergency each day of the specific danger posed. Such orders may not be written in advance of the demonstrated need for same.

(9) To assure the safety and rights of the individual person, and since emergency treatment orders by a physician absent express and informed consent are permitted only in an emergency, any use of psychotropic medications other than rapid response psychotropic medications requires a detailed and complete justification for the use of such medication. Both the nature and extent of the imminent emergency and any orders for the continuation of that medication must be clearly documented daily as required above.

(10) For children in the care and custody of the Department, policies and procedures shall include requirements for working with child protective investigators and case managers and obtaining necessary court authorizations to comply with section 39.407, F.S. and Chapter 65C-35, F.A.C., which are incorporated herein by reference.

Rulemaking Authority 394.457(5), 394.46715 FS. Law Implemented 394.459(3), 394.4598, 394.463(2)(f), 394.46715 494.46715 FS.. History—New 11-29-98, Amended 4-4-05, 4-9-13. Amended

65E-5.260 Transportation.

(1) Each law enforcement officer or other transporter who takes an individual into custody for involuntary examination under the Baker Act or involuntary admission under the Marchman Act shall provide the receiving facility or access

center the original or an electronic copy of one of the following:

(a) Form CF-MH 3001, (insert date), "Ex Parte Order for Involuntary Examination," which is incorporated by reference in 65E-5.280, F.A.C., or other form provided by the court;

(b) Form CF-MH 3052a, (insert date), "Report of a Law Enforcement Officer Initiating Involuntary Examination," which is incorporated by reference in 65E-5.280, F.A.C.;

(c) Form CF-MH 3052b, (insert date), "Certificate of Professional Initiating Involuntary Examination," which is incorporated by reference in 65E-5.280, F.A.C., and

(d) All forms required by Section 397.321(19), F.S.

~~Each law enforcement officer who takes a person into custody upon the entry of recommended form CF MH 3001, Feb. 05, "Ex Parte Order for Involuntary Examination," which is incorporated by reference and may be obtained pursuant to Rule 65E 5.120, F.A.C., of this rule chapter, or other form provided by the court, or the execution of mandatory form CF-MH 3052b, June 2016, "Certificate of Professional Initiating Involuntary Examination,"~~

~~<http://www.flrules.org/Gateway/reference.asp?No=Ref-07005>, which is hereby incorporated by reference and may be obtained pursuant to Rule 65E 5.120, F.A.C., of this rule chapter, or completion of mandatory form CF MH 3052a, June 2016, "Report of a Law Enforcement Officer Initiating Involuntary Examination,"~~

~~<http://www.flrules.org/Gateway/reference.asp?No=Ref-07004>, which is incorporated by reference and may be obtained pursuant to Rule 65E 5.120, F.A.C., of this rule chapter, shall ensure that such forms accompany the person to the receiving facility for inclusion in the person's clinical record.~~

(2) The designated law enforcement agency or other transporter shall transport the individual person to the most appropriate nearest receiving facility pursuant to the county's approved transportation plan as required by statute, documenting this transport on Form mandatory form CF-MH 3100, (insert date) Feb. 05, "Transportation to Receiving Facility," which is hereby incorporated by reference and available at <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX> may be obtained pursuant to Rule 65E 5.120, F.A.C., of this rule chapter. The designated law enforcement agency may decline to transport individual person to a receiving facility if the county has contracted with an emergency medical transport service or private transport company, and the law enforcement agency and the emergency medical transport service or private transport company only if the provisions of Section 394.462(1), F.S., apply. When the designated law enforcement agency and the medical transport company agree that the continued presence of law enforcement personnel is not necessary for the safety of the individual person or others. Part II of Form

~~mandatory form~~ CF-MH 3100, “Transportation to Receiving Facility,” as ~~referenced in subsection 65E 5.260(2), F.A.C.,~~ documenting reflecting the agreement between law enforcement and the transport service shall accompany the individual person to the receiving facility. When the transportation is conducted by a mental health overlay program or a mobile crisis response service, the program or service shall complete Part III of Form CF-MH 3100 “Transportation to Receiving Facility,” which shall accompany the individual to the receiving facility. The completed form shall be retained in the individual’s person’s clinical record.

Rulemaking Authority 394.457(5) FS. Law Implemented 394.462, 394.463 FS. History—New 11-29-98, Amended 4-4-05, 1-8-07, 7-5-16. Amended _____.

The following rules are hereby repealed:

65E-5.2601 Transportation Exception Plan.

Rulemaking Authority 394.457(5) FS. Law Implemented 394.462(3) FS. History—New 11-29-98, Amended 4-4-05. Repealed _____.

65E-5.270 Voluntary Admission.

(1) The following applies to voluntary admission of adults:

(a) Providers must complete Form Recommended form CF-MH 3040, (insert date), “Application for Voluntary Admission - Adults,” which is hereby incorporated by reference and _____ available _____ at <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX>, as ~~referenced in paragraph 65E 5.1302(1)(b), F.A.C.,~~ may be used to document an application of a competent adult for admission to a receiving facility. ~~Recommended form CF-MH 3097, Feb. 05, “Application for Voluntary Admission – Minors,” which is incorporated by reference and may be obtained pursuant to Rule 65E 5.120, F.A.C., of this rule chapter, may be used to document a guardian’s application for admission of a minor to a receiving facility.~~

(b) ~~Form Recommended form~~ CF-MH 3098, (insert date) Feb.—05, “Application for Voluntary Admission – State Treatment Facility,” which is hereby incorporated by reference and _____ available _____ at <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX> may be obtained pursuant to Rule 65E 5.120, F.A.C., of this rule chapter, may be used to document an application of a competent adult for admission to a state treatment facility. ~~Any application for voluntary admission shall be based on the person’s express and informed consent.~~

(c)(~~a~~) Any application for voluntary admission shall be based on the individual’s express and informed consent. Form Recommended form CF-MH 3104, (insert date), “Certification of Individual’s Person’s Competence to Provide Express and Informed Consent,” which is hereby incorporated by reference and _____ available _____ at

<http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX> as ~~referenced in paragraph 65E 5.170(1)(e), F.A.C.,~~ may be used to document the competence of an individual a person to give express and informed consent to be on voluntary status. The original of the completed form shall be retained in the individual’s person’s clinical record.

(d)(~~b~~) ~~Form Recommended form~~ CF-MH 3104, “Certification of Individual’s Person’s Competence to Provide Express and Informed Consent,” incorporated in this Rule, as referenced in paragraph 65E 5.170(1)(e), F.A.C., may be used to document a person applying for transfer from involuntary to voluntary status is competent to provide express and informed consent. The original of the completed form shall be filed in the individual’s person’s clinical record. A change in legal status must be followed by notice sent to individuals pursuant to Section 394.4599, F.S.

(2) The following applies to voluntary admission of minors:

(a) Form CF-MH 3097, (insert date), “Application for Voluntary Admission – Minors,” which is hereby incorporated by reference and available at <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX>, must be used to document a parent or legal guardian’s application for admission of a minor to a receiving facility.

(b) Before a minor is admitted to a receiving facility on voluntary status, the receiving facility shall complete a clinical review to determine the voluntariness of the minor’s assent. The clinical review shall consist of the following:

1. Interview the minor and review the reason(s) the minor is presenting for admission, with consideration to age, intellectual/developmental disabilities, and language skills, and

2. Explain to the minor the facility’s admission and examination process in language appropriate for age and developmental level.

(c) If the minor’s voluntary assent is verified by the facility as a result of the clinical review, Part II of Form CF-MH 3097, “Application for Voluntary Admission – Minors” must be completed.

(d) If the minor’s assent is not verified during the clinical review, or if the child is not capable of assenting, the receiving facility must:

1. Release the minor to their parent or legal guardian with appropriate follow up referrals, in accordance with rule 65E-5.1303, F.A.C.; or

2. If the minor meets the criteria for involuntary examination, a professional authorized by Section 394.463(2), F.S., must initiate and complete Form CF-MH 3052b, “Certificate of Professional Initiating Involuntary Examination”, which is incorporated by reference in rule 65E-5.280, F.A.C., and the facility shall adhere to the involuntary examination standards in rule 65E-5.2801, F.A.C.

(e) Form CF-MH 3097, “Application for Voluntary Admission – Minors,” incorporated in this Rule must be used to document a minor applying for transfer from involuntary to voluntary status as set forth in paragraphs (2)(a) through (d) above.

(f) The original completed form(s) shall be filed in the minor’s clinical record.

(3)(2) ~~All individuals~~ ~~Persons~~ on voluntary status shall be advised of their right to request discharge. ~~Form Recommended forms~~ CF-MH 3051a, (insert date) ~~Feb-05~~, “Notice of Right of Individual Person on Voluntary Status to Request Discharge from a Receiving Facility,” which is incorporated by reference and available at <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX> may be obtained pursuant to Rule 65E 5.120, F.A.C., of this ~~rule chapter~~, or CF-MH 3051b, (insert date) ~~Feb-05~~, “Notice of Right of Individual Person on Voluntary Status to Request Discharge from a Treatment Facility,” which is incorporated by reference and available at <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX>, may be obtained pursuant to Rule 65E 5.120, F.A.C., of this ~~rule chapter~~ and used to document the giving of such advice. A copy of the notice or its equivalent shall be given to the ~~individual person~~ and to the individual’s person’s parent or legal guardian if a minor, with the original of each completed application and notice retained in the individual’s person’s clinical record.

(4)(3) ~~The initial~~ ~~Documenting the~~ assessment of an individual identified each person pursuant to Section 394.4615(1)(b), F.S., shall be done prior to moving the individual person from his or her residence to a receiving facility for voluntary admission. ~~Form Recommended form~~ CF-MH 3099, (insert date) ~~Feb-05~~, “Certification of Ability to Provide Express and Informed Consent for Voluntary Admission and Treatment of Selected Individuals Persons from Facilities Licensed under Chapter 400, F.S.,” which is incorporated by reference and available at <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX>, may be obtained pursuant to Rule 65E 5.120, F.A.C., of this ~~rule chapter~~ and used for this purpose. If the facility licensed under Chapter 400, F.S. did not first arrange for completion of an independent evaluation of the resident’s competence to provide express and informed consent to admission and treatment before moving the individual, the receiving facility shall notify the Agency for Health Care Administration by using Form CF-MH 3119, (insert date), “Notification of Non-Compliance with Required Certificate,” which is incorporated by reference and available at <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX>.

(5)(4) If an individual a competent adult or the guardian of a minor refuses to consent to mental health treatment, the

individual person shall not be eligible for admission on a voluntary status. ~~An individual A person~~ on voluntary status who refuses to consent to or revokes consent to treatment shall be discharged from a designated receiving or treatment facility within 24 hours after such refusal or revocation, unless the person is transferred to involuntary status or unless the refusal or revocation is freely and voluntarily rescinded by the person. When an individual a person refuses or revokes consent to treatment, facility staff shall document this immediately in the person’s clinical record. ~~Form Recommended form~~ CF-MH 3105, (insert date) ~~Feb-05~~, “Refusal or Revocation of Consent to Treatment,” which is incorporated by reference and available at <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX>, may be obtained pursuant to Rule 65E 5.120, F.A.C., of this rule chapter may be used for this purpose. Should an individual a competent person withdraw his or her refusal or revocation of consent to treatment, the individual person shall be asked to complete Part II of ~~Form recommended form~~ CF-MH 3105, “Refusal or Revocation of Consent to Treatment,” as ~~referenced in subsection 65E 5.270(4), F.A.C.~~, or similar documentation, and the original shall be retained in the individual’s person’s clinical record.

(6)(5) An oral or written request for discharge made by any individual person following admission to the facility shall be immediately documented in the individual’s person’s clinical record. ~~Form Recommended forms~~ CF-MH 3051a, “Notice of Right of Individual Person on Voluntary Status to Request Discharge from a Receiving Facility,” as ~~referenced in subsection 65E 5.270(2), F.A.C.~~, or CF-MH 3051b, “Notice of Right of Individual Person on Voluntary Status to Request Discharge from a Treatment Facility,” as ~~referenced in subsection 65E 5.270(2), F.A.C.~~, which are incorporated in this Rule, may be used for this purpose. This form may also be completed by a relative, adult friend, or attorney of the individual person.

(7)(6) When an individual a person on voluntary status refuses treatment or requests discharge and the facility administrator makes the determination that the individual person will not be discharged within 24 hours from a designated receiving or treatment facility, a petition for involuntary inpatient placement or involuntary outpatient placement shall be filed with the court by the facility administrator. ~~Form Recommended form~~ CF-MH 3032, (insert date), “Petition for Involuntary Inpatient Placement,” which is incorporated by reference and available at <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX>, as ~~referenced in subparagraph 65E 5.170(1)(d)1., F.A.C.~~, or ~~Form recommended form~~ CF-MH 3130, (insert date), “Petition for Involuntary Outpatient Placement,” which is incorporated by reference and available at <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX>,

as referenced in subparagraph 65E 5.170(1)(d)2., F.A.C., may be used for this purpose. The first expert opinion by a psychiatrist shall be obtained on the petition form within 24 hours of the request for discharge or refusal of treatment to justify the continued detention of the individual person and the petition shall be filed with the court within 2 court working days after the request for discharge or refusal to consent to treatment was made.

~~(7) If a person is delivered to a receiving facility for voluntary examination from any program or residential placement licensed under the provisions of Chapter 400, F.S., without first arranging an independent evaluation of the resident's competence to provide express and informed consent to admission and treatment, as required in Sections 394.4625(1)(b) and (c), F.S., the receiving facility shall notify the Agency for Health Care Administration by using recommended form CF MH 3119, Feb. 05, "Notification of Non-Compliance with Required Certificate," which is incorporated by reference and may be obtained pursuant to Rule 65E 5.120, F.A.C., of this rule chapter.~~

Rulemaking Authority 394.457(5), 394.46715 FS. Law Implemented 394.4599, 394.4625, 400, 400.102(1) FS. History—New 11-29-98, Amended 4-4-05. Amended _____.

65E-5.280 Involuntary Examination.

(1) Court Order. Sworn testimony shall be documented by using Form recommended form CF-MH 3002, (insert date) July 2020, "Petition and Affidavit Seeking Ex Parte Order Requiring Involuntary Examination," which is incorporated by reference and available at <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX> to ~~http://www.flrules.org/Gateway/reference.asp?No=Ref-11920~~, or other form used by the court. Documentation of the findings of the court on Form recommended form CF-MH 3001, (insert date), July 2020 "Ex Parte Order for Involuntary Examination," which is incorporated by reference and available at <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX> ~~http://www.flrules.org/Gateway/reference.asp?No=Ref-11919~~, or other order used by the court, shall be used when there is reason to believe the criteria for involuntary examination are met. The ex parte order for involuntary examination shall accompany the individual to the receiving facility. ~~The receiving facility shall send a copy of CF MH 3001, "Ex Parte Order for Involuntary Examination," within five (5) business days to the Baker Act Reporting Center using their Secure File Transfer Protocol to: https://www.usf.edu/ebes/baker-act/providers/electronicsubmission.aspx.~~

(2) Law Enforcement.

(a) If a law enforcement officer in the course of his or her official duties initiates an involuntary examination, the officer shall complete Form the mandatory form CF-MH 3052a,

"Report of Law Enforcement Officer Initiating Involuntary Examination," (insert date) July 2020, which is incorporated by reference and available at <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX> ~~http://www.flrules.org/Gateway/reference.asp?No=Ref-11922~~.

(b) ~~Form Mandatory form~~ CF-MH 3052a, "Report of Law Enforcement Officer Initiating Involuntary Examination" shall accompany the individual to the receiving facility.

(3) Professional Certificate.

(a) A professional authorized by Section 394.463(2)(a)3., F.S., who determines, after personally examining an individual believed to meet the involuntary examination criteria within the preceding 48 hours, that the criteria are met, is authorized to execute Form the mandatory form CF-MH 3052b, "Certificate of Professional Initiating Involuntary Examination," (insert date) July 2020, which is incorporated by reference and available at <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX> ~~http://www.flrules.org/Gateway/reference.asp?No=Ref-11923~~.

(b) Form Mandatory form CF-MH 3052b, "Certificate of Professional Initiating Involuntary Examination," shall be executed immediately after it is completed by arranging for transportation to a designated receiving facility. The Certificate ~~and~~ is valid throughout the state. The completed certificate shall accompany the individual to a receiving facility.

(4) Emergency Medical Conditions.

(a) ~~Form Recommended form~~ CF-MH 3101, (insert date) July 2020, "Hospital Determination that Individual Does Not Meet Involuntary Placement Criteria," which is incorporated by reference and available at <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX>, ~~http://www.flrules.org/Gateway/reference.asp?No=Ref-11924~~ may be used to document the results of the examination prescribed in Section 394.463(2)(h), F.S.

(b) Receiving facilities shall develop policies and procedures that expedite the transfer of individuals referred from non-designated hospitals after examination or treatment of an emergency medical condition, within the 12 hours required by Section 394.463(2)(i), F.S. These policies and procedures shall address the following:

1. Identify any medical conditions that exceed the facility's capacity to admit;

2. Express how the facility will accept transfers for mental health evaluation regardless of bed availability to determine if criteria are met;

3. Describe how the facility will conduct mental health evaluations through telehealth while the individual remains at the non-designated hospital; and

4. Address how the facility will expedite accepted transfers of the individual, in accordance with the County Transportation Plan.

(c) For facilities operating as a county's central receiving facility, in accordance with section 394.4573(2)(b)2.a., F.S., and in addition to the requirements in (4)(b):

1. The facility will accept requests for transfer that are within their medical capacity as outlined in their established policy and procedures for following medical clearance for the purpose of conducting an examination;

2. The policies and procedures shall also address how the facility will determine an appropriate disposition as follows:

a. Coordinate and facilitate a transfer to another more appropriate facility or service;

b. Admission to a receiving facility; or

c. Release to the community with follow-up appointments to appropriate community based services and supports.

(d)(e) The 72-hour involuntary examination period set out in Section 394.463(2)(g), F.S., shall not be exceeded. In order to document the 72-hour period has not been exceeded, ~~Form recommended form~~ CF-MH 3102, (insert date) July 2020, "Request for Involuntary Examination After Stabilization of Emergency Medical Condition," which is incorporated by reference and available at <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX>, <http://www.flrules.org/Gateway/reference.asp?No=Ref-11925> may be used for this purpose. The form may be sent to a designated receiving facility at which appropriate medical treatment is available.

(5) The Department requires specific data to identify trends and patterns experienced by individuals served under Part I of Chapter 394, F.S., to be included in required reports, to support justifications for program funding and to implement the provisions of Section 394.463(2)(e), F.S. ~~Web-based Baker Act Data Collection Form CF-MH 3118, (insert date), titled "Baker Act Data Collection Form," which is incorporated by reference and available at~~ <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX>, shall be completed in its entirety by the assessor conducting the initial screening and only submitted one time from the admitting facility for the episode of care. Effective July 1, 2023, designated ~~Designated~~ receiving facilities shall submit ~~send the required data~~ within five (5) business days ~~through the Department's statewide Baker Act data collection portal, which can be accessed at~~ <https://dcfapps.myflfamilies.com/BakerAct>, ~~mandatory form CF MH 3118, "Cover Sheet to Department of Children and Families," which is hereby incorporated by reference and available at~~ <http://www.flrules.org/Gateway/reference.asp?No=Ref-11929>, ~~to the Baker Act Reporting Center using their Secure File Transfer Protocol to: https://www.usf.edu/cbes/baker-act-for-providers/electronicsubmission.aspx. Instructions on training requirements and how to submit the Baker Act data, petitions, and forms may be found at~~

<https://www.myflfamilies.com/service-programs/samh/crisis-services/training/badc.shtml> ~~https://www.usf.edu/cbes/baker-act-for-providers/electronicsubmission.aspx~~ or by calling (813)974-1010. The Baker Act Data Collection Form CF-MH 3118 must be accompanied by one of the following:

(a) Form CF-MH 3001, "Ex Parte Order for Involuntary Examination," or other order provided by the court;

(b) ~~Form Mandatory form~~ CF-MH 3052a, "Report of Law Enforcement Officer Initiating Involuntary Examination;" or

(c) ~~Form Mandatory form~~ CF-MH 3052b, "Certificate of Professional Initiating Involuntary Examination; and;"

(d) Form CF-MH 3100, "Transportation to Receiving Facility," if the individual is transported by a law enforcement officer, medical transport, mental health overlay program, or mobile response team.

(6) If a person is delivered to a receiving facility for an involuntary examination from any program or residential services provider licensed under the provisions of Chapter 400 or 429, F.S., without an ex parte order, ~~Form the mandatory form~~ CF-MH 3052a, "Report of Law Enforcement Officer Initiating Involuntary Examination," or ~~Form mandatory form~~ CF-MH 3052b, "Certificate of Professional Initiating Involuntary Examination," the receiving facility shall notify the Department by the method and timeframe required by Section 394.463(2)(b), F.S. The receiving facility may use ~~Form recommended form~~ CF-MH 3119, July 2020, "Notification of a Facility's Non-Compliance," which is hereby incorporated by reference in Rule 65E-5.270, F.A.C., and available at <http://www.flrules.org/Gateway/reference.asp?No=Ref-11928>, for this purpose.

(7) ~~Documentation that each completed form was submitted within the required five (5) business days shall be retained in the person's clinical record.~~

(7)(8) ~~Form Recommended form~~ CF-MH 3045, (insert date) July 2020, "Notice of Individual's Admission for Involuntary Examination," which is incorporated by reference and available at <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX>, <http://www.flrules.org/Gateway/reference.asp?No=Ref-11921>, may be used when notifying authorized individuals of an individual's involuntary admission to a receiving facility.

(8) Documentation, written or electronic, as maintained by the provider in their electronic health records, that each completed form was submitted within the required five (5) business days shall be retained in the person's clinical record. Rulemaking Authority 394.457(5) FS. Law Implemented 394.463 FS. History—New 11-29-98, Amended 4-4-05, 1-8-07, 7-5-16, 5-4-20. Amended _____.

65E-5.2801 Minimum Standards for Involuntary Examination Pursuant to Section 394.463, F.S.

The involuntary examination is also known as the initial mandatory involuntary examination.

(1) Whenever an involuntary examination is initiated by a circuit court, a law enforcement officer, or a mental health professional as provided in section 394.463(2), F.S., an examination by a physician or clinical psychologist or psychiatric nurse must be conducted and documented in the person's clinical record. The examination, conducted at a facility licensed under chapter 394 or 395, F.S., must contain:

(a) A thorough review of any observations of the person's recent behavior;

(b) A review of ~~Form mandatory form~~ CF-MH 3100, "Transportation to Receiving Facility," ~~which is incorporated in Rule 65E-5.260 as referenced in subsection 65E-5.260(2), F.A.C., and one of the following forms which are incorporated in 65E-5.280, F.A.C.: Form recommended form~~ CF-MH 3001, "Ex Parte Order for Involuntary Examination," ~~as referenced in subsection 65E-5.260(1), F.A.C., or other form provided by the court, or Form mandatory form~~ CF-MH 3052a, "Report of Law Enforcement Officer Initiating Involuntary Examination," ~~as referenced in subsection 65E-5.260(1), F.A.C., or Form mandatory form~~ CF-MH 3052b, "Certificate of Professional Initiating Involuntary Examination," ~~as referenced in subsection 65E-5.260(1), F.A.C.~~

(c) through (d) No change.

(2) If the physician or clinical psychologist or psychiatric nurse conducting the initial mandatory involuntary examination determines that the person does not meet the criteria for involuntary inpatient placement or involuntary outpatient placement, the person can be offered voluntary placement, if the person meets criteria for voluntary admission, or released directly from the hospital providing emergency medical services. Such determination must be documented in the person's clinical record.

(3) If not released, ~~Form recommended form~~ CF-MH 3040, "Application for Voluntary Admission - Adults," ~~which is incorporated in Rule 65E-5.270 as referenced in paragraph 65E-5.1302(1)(b), F.A.C., or Form recommended form~~ CF-MH 3097, "Application for Voluntary Admission - Minors," ~~which is incorporated in Rule 65E-5.270 as referenced in subsection 65E-5.270(1), F.A.C., may be used if the person wishes to apply for voluntary admission.~~

(4) If not released and the person wishes to transfer from involuntary to voluntary status, ~~Form recommended form~~ CF-MH 3104, "Certification of ~~Individual's Person's~~ Competence to Provide Express and Informed Consent," ~~which is incorporated in rule 65E-5.270 as referenced in paragraph 65E-5.170(1)(e), F.A.C., documenting the person is competent to provide express and informed consent, may be used for this purpose.~~

(5) through (6) No change.

(7) After the initial mandatory involuntary examination, the person's clinical record shall include:

(a) An intake interview;

(b) ~~Form The mandatory form~~ CF-MH 3100, "Transportation to Receiving Facility," ~~which is incorporated in Rule 65E-5.260 as referenced in subsection 65E-5.260(1), F.A.C., and one of the following forms which are incorporated in 65E-5.280, F.A.C.: Form recommended form~~ CF-MH 3001, "Ex Parte Order for Involuntary Examination," ~~as referenced in subsection 65E-5.260(1), F.A.C., or other form provided by the court, or Form mandatory form~~ CF-MH 3052a, "Report of Law Enforcement Officer Initiating Involuntary Examination," ~~as referenced in subsection 65E-5.260(1), F.A.C., or Form mandatory form~~ CF-MH 3052b, "Certificate of Professional Initiating Involuntary Examination," ~~as referenced in subsection 65E-5.260(1), F.A.C.; and,~~

(c) No change.

(8) Disposition Upon Initial Mandatory Involuntary Examination.

(a) The release of a person from a receiving facility requires the documented approval of a psychiatrist, clinical psychologist, or if the receiving facility is a hospital, the release may also be approved by an attending emergency department physician after the completion of an initial mandatory involuntary examination. ~~Form Recommended form~~ CF-MH 3111, (insert date) ~~Feb. 05~~, "Approval for Release of Person on Involuntary Status from a Receiving Facility," which is incorporated by reference and available at <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX>, ~~may be obtained pursuant to Rule 65E-5.120, F.A.C., of this rule chapter~~ may be used for this purpose. A copy of the form used shall be retained in the person's clinical record.

(b) In order to document a person's transfer from involuntary to voluntary status, ~~Form recommended form~~ CF-MH 3040, "Application for Voluntary Admission - Adults," ~~which is incorporated in Rule 65E-5.270 as referenced in paragraph 65E-5.1302(1)(b), F.A.C., or Form recommended form~~ CF-MH 3097, "Application for Voluntary Admission - Minors," ~~which is incorporated by reference in Rule 65E-5.270 as referenced in subsection 65E-5.270(1), F.A.C., completed prior to transfer, may be used.~~

(c) A person for whom an involuntary examination has been initiated shall not be permitted to consent to voluntary admission until after examination by a physician to confirm his or her ability to provide express and informed consent to treatment. ~~Form Recommended form~~ CF-MH 3104, "Certification of ~~Individual's Person's~~ Competence to Provide Express and Informed Consent," ~~which is incorporated in Rule 65E-5.270 as referenced in paragraph 65E-5.170(1)(e), F.A.C., may be used for documentation.~~

(d) If the facility administrator, based on facts and expert opinions, believes the person meets the criteria for involuntary inpatient or involuntary outpatient placement or is incompetent to consent to treatment, the facility shall initiate involuntary placement within 72 hours of the person’s arrival by filing a petition for involuntary placement. ~~Form Recommended form CF-MH 3032, “Petition for Involuntary Inpatient Placement,” which is incorporated in Rule 65E-5.270 as referenced in subparagraph 65E-5.170(1)(d)1, F.A.C., or CF-MH 3130, “Petition for Involuntary Outpatient Placement” which is incorporated by reference in Rule 65E-5.270 as referenced in subparagraph 65E-5.170(1)(d)2, F.A.C.,~~ may be used for this purpose. Such petition shall be signed by the facility administrator or designee within the 72-hour examination period. The petition shall be filed with the court within the 72-hour examination period or, if the 72 hours ends on a weekend or legal holiday, no later than the next court working day thereafter. A copy of the completed petition shall be retained in the person’s clinical record and a copy given to the person and his or her duly authorized legal decision-maker or representatives.

(e) When a person on involuntary status is released, notice shall be given to the person’s guardian or representative, to any individual who executed a certificate for involuntary examination, and to any court which ordered the person’s examination with a copy retained in the person’s clinical record. ~~Form Recommended form CF-MH 3038, (insert date) Feb. 05, “Notice of Release or Discharge,” which is incorporated by reference and available at <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX>, may be obtained pursuant to Rule 65E-5.120, F.A.C., of this rule chapter~~ may be used for this purpose.

Rulemaking Authority 394.457(5), 394.46715 FS. Law Implemented 394, 394.463, 394.4655, 395 FS. History—New 11-29-98, Amended 4-4-05. Amended.

NAME OF PERSON ORIGINATING PROPOSED RULE:
William Hardin
NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Shevaun L. Harris
DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 23, 2023
DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAR: April 4, 2023

DEPARTMENT OF CHILDREN AND FAMILIES

Mental Health Program

RULE NO.: 65E-5.350
RULE TITLE: Eligibility Criteria and Procedures for Designation of Baker Act Receiving Facilities

PURPOSE AND EFFECT: Amendments align the eligibility criteria and procedures for designation as a Baker Act receiving facility with current law, practice, and policies.

SUMMARY: Amendments include: (1) removes duplicative language that is in statute, (2) clarifies language to make clear, (3) adds collection of data, (4) incorporates form CF-MH 3125, Application for Designation as a Baker Act Receiving Facility, and (5) allows the Department and community to plan for closures to reduce and minimize service interruption.

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.

A SERC has not been prepared.

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 used a checklist to conduct an economic analysis and determine if there is an adverse impact or regulatory costs associated with this rule that exceeds the criteria in section 120.541(2)(a), F.S. Based upon this analysis, the Department has determined that the proposed rule is not expected to require 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: 394.461(6)

LAW IMPLEMENTED: 394.461

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: Elizabeth Floyd. Elizabeth can be reached at Elizabeth.Floyd@myflfamilies.com.

THE FULL TEXT OF THE PROPOSED RULE IS:

65E-5.350 Eligibility Criteria and Procedures for Designation of Baker Act Receiving Facilities.

(1) ~~Facilities shall not begin operations as a Baker Act receiving facility until licensed by AHCA and designated in accordance with this rule chapter and with Chapters 394 or 395, F.S. General Provisions. Pursuant to Sections 394.455(26) and 394.461, F.S., only facilities designated by the department are permitted to involuntarily hold and treat persons for a mental illness, except as required by 42 USC 1395 for all hospitals providing emergency services for access, assessment, stabilization and transfer.~~

~~(2) Designation as a private receiving or treatment facility shall not entitle the facility to receive any funding appropriated for the Baker Act. Such funding is based solely on a contract between the department and the facility, specifically for this purpose.~~

~~(2)(3) Two types of licensed civil facilities are authorized to provide acute psychiatric treatment and are eligible to apply for designation as receiving facilities. Since designation to receive persons under Chapter 394, Part I, F.S., does not distinguish between the capacity to serve adults and minors, All all designated facilities are required to provide emergency services, consistent with their facility's licensure to individuals persons regardless of age, except as provided for under subsection (7) (4), of this rule.~~

~~(a) Hospitals licensed under the authority of Chapter 395, F.S., to provide psychiatric care may be designated as either public or private receiving facilities.~~

~~(b) Facilities licensed under the provisions of Chapter 394, Part IV, F.S., shall only be designated as public receiving facilities and may include only crisis stabilization units (CSU) and children's crisis stabilization units (CCSU). Short term residential treatment facilities (SRT) are not free standing emergency care units and may only be designated collectively with a CSU or CCSU as part of a public receiving facility.~~

~~(3) The following types of facilities are authorized to provide acute psychiatric treatment and are eligible to apply for designation as receiving facilities:~~

~~(a) Hospitals;~~

~~(b) Crisis Stabilization Units (CSU);~~

~~(c) Children's Crisis Stabilization Units (CCSU); and~~

~~(d) Short-term Residential Treatment Facilities (SRT).~~

~~(4) Designated Baker Act receiving facilities shall contribute data to the Florida Health Information's Exchange Encounter Notification Services through AHCA.~~

~~(5) SRT facilities may be designated as a receiving facility if they are connected to a county or regional Behavioral Health Receiving System, and are programmatically integrated with a designated CSU or CCSU.~~

~~(4) Specific Circumstances for Designation. Pursuant to the exceptions authorized under Section 394.462(3), F.S., for transportation purposes, and at the discretion of the department's district or regional office with the approval of the~~

~~mental health and substance abuse program supervisor, a facility designation may be modified or restricted to specify services for just adults or for just children, consistent with its license and subject to inclusion and subsequent approval by required parties as part of an approved transportation exemption plan.~~

~~(6)(5) Application and Supporting Documentation for Designation as a Receiving Facility. In order to apply for designation as a receiving facility, An an applicant must complete and submit mandatory form CF-MH 3125, (insert date) Feb. 05, "Application for Designation as a Baker Act Receiving Facility," which is hereby incorporated by reference and available at <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXX>. Applications may be submitted through the Department's statewide electronic licensing and designation system. may be obtained in accordance with Rule 65E 5.120, F.A.C., of this rule chapter. Required application information includes:~~

~~(a) A copy of the facility's license issued pursuant to Chapter 394 or 395, F.S., evidencing its eligibility to apply for designation;~~

~~(b) A current certificate of good standing for the applicant organization issued by the Florida Secretary of State;~~

~~(c) Documentation of the applicant's governing authority action authorizing the application for designation;~~

~~(d) Description of proposed psychiatric services including any distinct programs to be provided to each of the following consumer age groups, and the projected numbers of persons to be served in each following group:~~

~~1. Minors below 10 years of age,~~

~~2. Minors between the ages of 10 to 17 years,~~

~~3. Adults,~~

~~4. Persons 60 or more years of age; and,~~

~~5. Other specific populations.~~

~~(e) The corresponding street address for each reception and treatment location for the above services must be provided. Designation is limited to only the locations specified in the application and approved by the department; and,~~

~~(f) Documentation of community need for maintaining or expanding the present level of designated facilities' services to meet the existing need, and why the applicant is best suited to meet this need.~~

~~1. The information may address the public's need for specific services for minors, aged, blind or hearing impaired persons. Evidence of such need may include: Certificate of Need data and other information published by the Agency for Health Care Administration, the organization's or community's utilization of available or licensed bed capacity, geographical accessibility information, input from local governmental agencies, or information on the specific needs of persons if the particular specialty services offered are accredited or certified~~

by a nationally recognized body for that specific population or service.

2. The applicant shall describe local need and accommodation of that need for indigent and low income individuals and families receiving the facility's services. The applicant shall describe how it shall protect economically vulnerable persons received for involuntary examination or treatment from exorbitant charges and billings for services. A statement comparing representative facility charges and billings for individuals who are uninsured or without a third party payer who are held under the provisions of the Baker Act to otherwise similar representative charges and billings for group health care members and insurers shall be included.

3. The applicant shall describe local need and accommodation of that need for indigent and low income individuals and families being discharged from the facility in need of continuing psychotropic medications. The applicant shall describe how it shall directly provide, or otherwise assist the person in ensuring continuity of availability of necessary psychotropic medications until a scheduled aftercare psychotropic medication appointment.

(g) Documentation of key facility protocols to assure all involved practitioners and staff are knowledgeable of, and implement, person's legal rights, key psychiatric care, records standards, complaint reporting, investigation and reviews to maintain a consistently high level of compliance with applicable Baker Act laws, ethical principles, and rights protections;

(h) Description of how the facility's physical structure, staffing and policies offers frequent, if not daily, opportunity for persons to have exercise, fresh air and sunshine, except as individually restricted and documented in the person's clinical record and within the physical limitations of the facility;

(i) Description of how the facility's discharge planning policies provide for continuity of psychotropic medication availability until post discharge follow up services are scheduled; and,

(j) For general hospitals, a description of the means utilized to create or approximate a distinct psychiatric emergency reception and triage area that minimizes individual's exposure to undue and exacerbating environmental stresses while awaiting or receiving services.

(6) Application Process for Designation. All facilities desiring to obtain, or to retain, designation as a receiving facility must complete and submit mandatory form CF MH 3125, "Application for Designation as a Receiving Facility," as referenced in subsection 65E 5.350(5), F.A.C., for departmental review. All receiving facility designations shall be subject to departmental review and authorization in accordance with the provisions of Chapter 394, Part I, F.S., and this chapter after receipt of the application.

~~(a) The department's district or regional office is responsible for receipt of the application, reviewing the application, requesting additional information as needed, verifying essential information, and forwarding the information along with the recommendation of the mental health and substance abuse program supervisor to the Secretary for final action. Applications received that are incomplete will be returned by certified mail with a letter informing the applicant of missing items. The district or region will seek and review pertinent information from any source such as:~~

~~1. Accreditation status and submission of the latest survey report of any applicable accrediting bodies;~~

~~2. Relevant history of compliance with the Baker Act and other related protection laws protecting persons served by mental health facilities;~~

~~3. Agency for Health Care Administration (AHCA) licensure reports and complaint investigation findings against the facility or professionals associated with the facility;~~

~~4. Actions, findings or reports of the Florida Local Advocacy Council, and other district or regional consumer complaint offices;~~

~~5. Florida Abuse Hotline receipt, or lack or receipt, of complaints and actions;~~

~~6. Actions initiated by any state enforcement authority including the Florida Attorney General's Office, the Florida Department of Law Enforcement, the Florida Department of Insurance, and statewide or local State's Attorneys Offices; and;~~

~~7. Actions initiated by any federal law enforcement or investigative authority including the federal Department of Health and Human Services, the federal Centers for Medicare and Medicaid Services, and the Federal Bureau of Investigation against the facility, its employees, privileged personnel or contractors, subcontractors, or operators relating to services, billings or operations.~~

~~(b) The district or region, upon receipt of a properly completed application, shall schedule and advertise a public meeting for purposes of obtaining public input and information on the initial designation of the applicant.~~

~~(c) In meeting the local need for designated facilities, priority shall be given to facilities with management that consistently exhibits high levels of compliance with Chapter 394, Part I, F.S., this rule chapter, and related protection laws in Chapters 395, 415, 458, and 817, F.S., as documented in state agencies' files.~~

~~(d) The submission of the district or region's recommendation to the Secretary must include a listing of the key information sources and pertinent factors relied upon in making the recommendation and a summary of the comments and information received at the public meeting.~~

~~(e) Within 60 days of receiving the recommendation from the district or region, the Secretary, or the Secretary's designee, will review the district or region recommendation and supporting documentation and will issue final departmental action with regard to the application which may be approved, denied, or returned to the district or region for additional information or processing.~~

~~(f) The designation shall be for 3 years.~~

(7) Application Re-Applications for Renewal of Designation or Change of Address.

(a) An application for renewal designation ~~A re-application~~ must be submitted ~~for re-designation~~ every 3 calendar years, after approval of initial applications or 90 calendar days in advance of the relocation of a facility to a new address. ~~The designation is valid only for the address to which it was issued.~~

(b) The A renewal application for renewal designation shall be submitted forwarded to the Department department at least 60 calendar 90 days prior to the expiration of its existing designation.

(c) An application for re-designation ~~A re-application~~ must be submitted by a facility to the Department within 30 calendar days of upon a change of ownership, controlling ownership of the facility or of the contractual management entity for the psychiatric service. ~~Failure to submit notification to the department of changes of controlling ownership or a change in the management entity within 30 days after the change will terminate the facility's designation 60 days after the effective date of the action changing the control of ownership or management.~~

(d) Any change in the name of a facility, that remains under the same ownership and management, must be reported in writing to the Department's department's district or regional office within 30 calendar days after the effective date of the change. Upon receipt of the notification, the Department department will issue a letter confirming receipt of the notification and extending designation until a replacement certificate of designation showing the correct facility name is received by the facility. ~~Failure to provide such notification to the district or region within 30 days of the change will result in the withdrawal of the designation upon the expiration of the 60th day following the facility name change.~~

(8) Certificate of Designation.

(a) Upon approval by the Secretary or the Secretary's his or her designee, the Department department shall issue a Certificate of Designation certificate of designation which shall include the following information on its the face ~~of the Certificate of Designation~~:

1. Effective ~~commencement~~ date and expiration date,

2. Name of the owner and licensee as stated on the facility license issued by AHCA the Agency for Health Care Administration; and,

3. Street address of where services are provided.

(b) The certificate shall be prominently displayed to the general public at the service site. ~~Designation provided by this certificate is invalid if the information on the certificate is not correct or the information provided in the submitted application is false or misleading.~~

(9) Facilities shall provide the Department with a written notice 120 days prior to surrendering their designation and shall include a written transition plan to minimize disruptions in access to crisis care in the community. At a minimum the transition plan shall address the following:

(a) The specific reasons for surrendering the designation as a receiving facility;

(b) Collaborative plan with the regional managing entity and surrounding counties to ensure continuity of crisis care in the community;

(c) The date when the receiving facility will no longer accept admissions for Baker Act examinations;

(d) Identification of any agreements with other receiving facilities to accept transfers or expand bed capacity; and

(e) Identification of any agreements with other community providers to admit individuals to hospital diversion programs such as short-term residential treatment, Community Action Teams, or Florida Assertive Community Treatment.

Rulemaking Authority 394.461(6) ~~394.461(5)~~ FS. Law Implemented 394, Part I, IV, 394.455(26), 394.461, 394.461(4), 394.462(3), 395, 415, 458, 817 FS. History—New 11-29-98, Amended 4-4-05. Amended

NAME OF PERSON ORIGINATING PROPOSED RULE:

Courtney Smith

NAME OF AGENCY HEAD WHO APPROVED THE

PROPOSED RULE: Shevaun L. Harris

DATE PROPOSED RULE APPROVED BY AGENCY

HEAD: March 23, 2023

DATE NOTICE OF PROPOSED RULE DEVELOPMENT

PUBLISHED IN FAR: April 4, 2023

Section III

Notice of Changes, Corrections and Withdrawals

DEPARTMENT OF HEALTH

Division of Medical Quality Assurance

RULE NO.:

64B-2.001

RULE TITLE:

Practitioner Profile

NOTICE OF CHANGE

Notice is hereby given that the following changes have been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S., published in Vol. 49 No. 39, February 27, 2023 issue of the Florida Administrative Register.

64B-2.001 Practitioner Profile.

The Practitioner Profile shall consist of:

(1) through (9) No change.

(10) “Florida Birth-Related Neurological Injury Compensaton Association (NICA)” shall consist of physicians licensed pursuant to Chapters 458 or 459, F.S., indicating a yes or no ~~affirmation~~ as proof of payment of the assessment required pursuant to Section 766.314, F.S.

(11) No change.

Rulemaking Authority 456.004, 456.044 FS. Law Implemented 456.039, 456.0391, 456.041, 456.042, 456.043, 456.044, 456.045, 456.046 FS. History—New 8-12-99, Amended 9-2-01, 6-16-03, 3-28-05, _____.

**Section IV
Emergency Rules**

NONE

**Section V
Petitions and Dispositions Regarding Rule
Variance or Waiver**

DEPARTMENT OF MANAGEMENT SERVICES

E911 Board

RULE NO.: RULE TITLE:

60FF1-5.013 Call Handling System Maintenance

NOTICE IS HEREBY GIVEN that on April 03, 2023, the E911 Board, received a petition for variance or waiver filed by Kevin Sowell on behalf of Santa Rosa County. The Petitioner is seeking a variance of paragraph 60FF1-5.013(4)(a), F.A.C., which states, to participate in this program, each medium and large county must submit its documented CHS maintenance cost for one system for the fiscal year beginning October 1 and ending September 30 by January 1 of the following year. Comments on this petition should be filed with Leon Simmonds, Chairman, E911 Board, 4030 Esplanade Way, Suite 135F, Tallahassee, Florida 32399-0950, within 14 days of publication of this notice.

A copy of the Petition for Variance or Waiver may be obtained by contacting: Leon Simmonds, E911 Board, at 4030 Esplanade Way, Suite 135F, Tallahassee, Florida 32399-0950, or telephone: (850)922-4135, or by electronic mail, Leon.Simmonds@dms.myflorida.com.

DEPARTMENT OF MANAGEMENT SERVICES

E911 Board

RULE NO.: RULE TITLE:

60FF1-5.002 Rural County Grants

NOTICE IS HEREBY GIVEN that on March 28, 2023, the E911 Board, received a petition for variance or waiver filed by

Tim Stanley on behalf of Glades County. The Petitioner is seeking a variance of paragraph 60FF1-5.002(3)(a), F.A.C., which states, for Rural County Grants, the expiration of the right to incur costs, request payment and/or final reimbursement of funding is two years from the award notification date. Comments on this petition should be filed with Leon Simmonds, Chairman, E911 Board, 4030 Esplanade Way, Suite 135F, Tallahassee, Florida 32399-0950, within 14 days of publication of this notice.

A copy of the Petition for Variance or Waiver may be obtained by contacting: Leon Simmonds, E911 Board, at 4030 Esplanade Way, Suite 135F, Tallahassee, Florida 32399-0950, or telephone: (850)922-4135, or by electronic mail, Leon.Simmonds@dms.myflorida.com.

DEPARTMENT OF MANAGEMENT SERVICES

E911 Board

RULE NO.: RULE TITLE:

60FF1-5.013 Call Handling System Maintenance

NOTICE IS HEREBY GIVEN that on April 04, 2023, the E911 Board, received a petition for variance or waiver filed by Michael Tucker on behalf of Flagler County. The Petitioner is seeking a variance of paragraph 60FF1-5.013(4)(a), F.A.C., which states, to participate in this program, each medium and large county must submit its documented CHS maintenance cost for one system for the fiscal year beginning October 1 and ending September 30 by January 1 of the following year. Comments on this petition should be filed with Leon Simmonds, Chairman, E911 Board, 4030 Esplanade Way, Suite 135F, Tallahassee, Florida 32399-0950, within 14 days of publication of this notice.

A copy of the Petition for Variance or Waiver may be obtained by contacting: Leon Simmonds, E911 Board, at 4030 Esplanade Way, Suite 135F, Tallahassee, Florida 32399-0950, or telephone: (850)922-4135, or by electronic mail, Leon.Simmonds@dms.myflorida.com.

DEPARTMENT OF HEALTH

Board of Dentistry

RULE NO.: RULE TITLE:

64B5-2.013 Dental Examination

NOTICE IS HEREBY GIVEN that on April 04, 2023, the Board of Dentistry, received a petition for variance or waiver filed by Jan Groth regarding paragraph 64B5-2.013(1)(b), F.A.C., which requires all parts of the ADEX shall be completed within eighteen (18) months from the initial start of any portion of the examination. A failure to complete all parts of the examination within eighteen (18) months will require the applicant to retake the entire examination. Petitioner took the ADEX exam as it was provided within the curriculum at the University of Minnesota School of Dentistry. The Petitioner request that the board accept the ADEX results which will allow

the Petitioner to finish the application process and be granted licensure to practice Dentistry in the State of Florida. Comments on this petition should be filed with the Board of Dentistry within 14 days of publication of this notice.

A copy of the Petition for Variance or Waiver may be obtained by contacting: Jessica Sapp, Executive Director, Board of Dentistry/MQA, 4052 Bald Cypress Way, Bin #C04, Tallahassee, Florida 32399-3258; Jessica.Sapp@flhealth.gov

DEPARTMENT OF FINANCIAL SERVICES

NOTICE IS HEREBY GIVEN that on April 03, 2023, the Department of Financial Services, Division of State Fire Marshal (Department), received a petition for Variance from the restrictions in Fla Admin Code paragraph 69A-21.104(2)(g), allowing the Petitioner's proposed blended curriculum for its Fire Extinguisher Technician Certification Course.

A copy of the Petition for Variance or Waiver may be obtained by contacting: Sarah Marcos, Office of the General Counsel, 200 E. Gaines Street, Tallahassee, Florida 32399, (850) 413-4229, Sarah.Marcos@myfloridacfo.com

Section VI

Notice of Meetings, Workshops and Public Hearings

DEPARTMENT OF EDUCATION

The Florida Department of Education announces a public meeting to which all persons are invited.

DATE AND TIME: April 19, 2023, 9:00 a.m.

PLACE: Attendees may join the meeting in person at Lively Technical College located at 500 Appleyard Drive, Tallahassee, Florida 32304. A virtual option will also be made available for those unable to attend in person. Interested persons may join the virtual meeting from their computer, tablet or smartphone at: <https://attendee.gotowebinar.com/register/5847138393996723804>. Webinar ID: 730-441-107. Attendees may also join the virtual meeting using their phone. Call-in Number: +1 (213) 929-4232; Access Code: 627-738-404.

GENERAL SUBJECT MATTER TO BE CONSIDERED: The meeting of the State Apprenticeship Advisory Council will focus on data reporting, legislative updates, and other state updates pertaining to registered apprenticeship and preapprenticeship in Florida.

A copy of the agenda may be obtained by contacting: A copy of the agenda may be obtained at <https://www.fldoe.org/academics/career-adult-edu/apprenticeship-programs/state-apprenticeship-advisory-council/agenda.stml> or by contacting the Division of Career and Adult Education at (850) 245-0446 or Chancellor2@fldoe.org.

For more information, you may contact: Kathryn Wheeler at (850) 245-9038 or at Kathryn.Wheeler@fldoe.org

DEPARTMENT OF LAW ENFORCEMENT

Criminal Justice Standards and Training Commission

The Region XIV Trust Fund announces a public meeting to which all persons are invited.

DATE AND TIME: April 27, 2023, 10:00 a.m.

PLACE: Microsoft Teams

GENERAL SUBJECT MATTER TO BE CONSIDERED: Discuss interest and other relevant matters related to the Region XIV Trust Fund.

A copy of the agenda may be obtained by contacting: Allison Ma, (305) 237-1327.

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 24 hours before the workshop/meeting by contacting: . 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: Allison Ma, (305) 237-1327.

EXECUTIVE OFFICE OF THE GOVERNOR

The Florida Gubernatorial Fellows Program Board of Directors announces a public meeting to which all persons are invited.

DATE AND TIME: May 2, 2023, 9:00 a.m.

PLACE: The Florida Capitol and via Zoom

GENERAL SUBJECT MATTER TO BE CONSIDERED: General program updates, votes on awards, annual budget, and MOU/bylaw updates.

A copy of the agenda may be obtained by contacting: Miranda Lloyd, miranda.lloyd@laspbs.state.fl.us.

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 24 hours before the workshop/meeting by contacting: Miranda Lloyd, miranda.lloyd@laspbs.state.fl.us. 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: Miranda Lloyd, miranda.lloyd@laspbs.state.fl.us.

REGIONAL PLANNING COUNCILS

South Florida Regional Planning Council

The South Florida Regional Planning Council announces a public meeting to which all persons are invited.

DATE AND TIME: Monday, April 17, 2023, 10:30 a.m.

PLACE: 1 Oakwood Boulevard, Suite 250, Hollywood, FL 33020

Join Zoom Meeting

<https://us06web.zoom.us/j/87676010617?pwd=ZXRUBDFmWmtpSWFXbFZIYU0zREdxZz09>

Meeting ID: 876 7601 0617

Passcode: 946450

Find your local number:

<https://us06web.zoom.us/j/87676010617?pwd=ZXRUBDFmWmtpSWFXbFZIYU0zREdxZz09>

<https://us06web.zoom.us/j/87676010617?pwd=ZXRUBDFmWmtpSWFXbFZIYU0zREdxZz09>

GENERAL SUBJECT MATTER TO BE CONSIDERED:

Regular Monthly Meeting.

A copy of the agenda may be obtained by contacting:

Administration at the South Florida Regional Planning Council, 1 Oakwood Boulevard, Suite 250, Hollywood, Florida 33020; (954) 924-3653; or sfadmin@sfrpc.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: Administration at the South Florida Regional Planning Council, 1 Oakwood Boulevard, Suite 250, Hollywood, Florida 33020; (954) 924-3653; or sfadmin@sfrpc.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.

For more information, you may contact: Administration at the South Florida Regional Planning Council, 1 Oakwood Boulevard, Suite 250, Hollywood, Florida 33020; (954) 924-3653; or sfadmin@sfrpc.com

METROPOLITAN PLANNING ORGANIZATIONS

Orlando Urban Area

The Central Florida MPO Alliance announces a public meeting to which all persons are invited.

DATE AND TIME: Friday, April 14, 2023, 10:00 a.m.

PLACE: MetroPlan Orlando, 250 South Orange Avenue, Suite 200, Orlando, FL 32801

GENERAL SUBJECT MATTER TO BE CONSIDERED:

Regularly scheduled Central Florida MPO Alliance (CFMPOA) meeting

A copy of the agenda may be obtained by contacting: Lisa Smith, Senior Board Services Coordinator, 407-481-5672, ext. 307, email: lsmith@metroplanorlando.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 3 days before the workshop/meeting by contacting: Lisa Smith, Senior Board Services Coordinator, 407-481-5672, ext. 307, email: lsmith@metroplanorlando.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: Lisa Smith, Senior Board Services Coordinator, 407-481-5672, ext. 307, email: lsmith@metroplanorlando.org

WATER MANAGEMENT DISTRICTS

St. Johns River Water Management District

The St. Johns River Water Management District announces a public meeting to which all persons are invited.

DATE AND TIME: Thursday, April 6, 2023, 9:00 a.m.

PLACE: District Headquarters, 4049 Reid Street (Hwy 100 West), Palatka, FL 32177

GENERAL SUBJECT MATTER TO BE CONSIDERED: The April 6, 2023 District Auditor Selection Committee (Committee) meeting published on March 16, 2023 (ID#17549548) to receive oral presentations for Request for Proposals 38510 for independent financial auditor services has been CANCELLED because the Committee has decided not to hear oral presentations.

A copy of the agenda may be obtained by contacting: No agenda.

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Board of Pilot Commissioners

The Board of Pilot Commissioners announces a telephone conference call to which all persons are invited.

DATE AND TIME: April 14, 2023, 11:00 a.m.

PLACE: 1(888)585-9008, participant passcode: 491089625

GENERAL SUBJECT MATTER TO BE CONSIDERED:

General Board Business

A copy of the agenda may be obtained by contacting: Board of Pilot Commissioners, 2601 Blair Stone Rd., Tallahassee, FL 32399, (850)717-1982.

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: Board of Pilot Commissioners, 2601 Blair Stone Rd., Tallahassee, FL 32399, (850)717-1982. 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: Board of Pilot Commissioners, 2601 Blair Stone Rd., Tallahassee, FL 32399, (850)717-1982.

DEPARTMENT OF HEALTH

Board of Chiropractic Medicine

The Board of Chiropractic Medicine announces a public meeting to which all persons are invited.

DATE AND TIME: Tuesday, April 18, 2023, 11:30 a.m.

PLACE: <https://meet.goto.com/207804661>

GENERAL SUBJECT MATTER TO BE CONSIDERED:

General board business, to include licensure

A copy of the agenda may be obtained by contacting:

<https://floridaschiropracticmedicine.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: . 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: MQA.Chiropractic@flhealth.gov

DEPARTMENT OF HEALTH

Division of Children's Medical Services

The State CADR Death by Suicide Case Review Feasibility Ad Hoc Committee *Update* announces a public meeting to which all persons are invited.

DATE AND TIME: Update to meeting times-All State CADR Death by Suicide Case Review Feasibility Ad Hoc Committee will now occur from 11:00 a.m. to 12:30 p.m. Dates will remain the same as previously posted in 3/15/2023 Vol. 49/51

PLACE: Same-No Change

GENERAL SUBJECT MATTER TO BE CONSIDERED: To evaluate opportunities to examine child death by suicide cases in an effort to develop data-informed prevention initiatives.

A copy of the agenda may be obtained by contacting: Joshua.Thomas@flhealth.gov

For more information, you may contact: Joshua.Thomas@flhealth.gov

DEPARTMENT OF CHILDREN AND FAMILIES

Mental Health Program

The Department of Children and Families, Substance Abuse and Mental Health Program Office announces a public meeting to which all persons are invited.

DATE AND TIME: April 19, 2023, 9:00 a.m. – 1:00 p.m. EST
Call-in (audio only): 1-412-912-1530, Phone Conference ID: 342 352 160

PLACE: Virtual meeting via Microsoft Teams. The access links are listed below and also available on the Department of Children and Families calendar of events located here:

<http://www.myflfamilies.com/news-and-events/public-events-meetings>

[https://teams.microsoft.com/l/meetup-](https://teams.microsoft.com/l/meetup-join/19%3ameeting_YmM1Y2MzODAtNTk2Yy00MWNILT)

[join/19%3ameeting_YmM1Y2MzODAtNTk2Yy00MWNILT](https://teams.microsoft.com/l/meetup-join/19%3ameeting_YmM1Y2MzODAtNTk2Yy00MWNILT)

[hmNDMtYmU3YTRjZWU1ZmZh%40thread.v2/0?context=](https://teams.microsoft.com/l/meetup-join/19%3ameeting_YmM1Y2MzODAtNTk2Yy00MWNILT)

[%7b%22id%22%3a%22f70dba48-b283-4c57-8831-](https://teams.microsoft.com/l/meetup-join/19%3ameeting_YmM1Y2MzODAtNTk2Yy00MWNILT)

[cb411445a94c%22%2c%22oid%22%3a%2217953c17-4f9a-](https://teams.microsoft.com/l/meetup-join/19%3ameeting_YmM1Y2MzODAtNTk2Yy00MWNILT)

[4e32-bc08-3423060da39f%22%7d](https://teams.microsoft.com/l/meetup-join/19%3ameeting_YmM1Y2MzODAtNTk2Yy00MWNILT)

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Commission on Mental Health and Substance Abuse is meeting, in accordance with Section 394.9086, F.S. The Commission is comprised of individuals appointed by the Governor, President of the Senate, and Speaker of the House. Discussion topics will include the status of Florida's behavioral health system of care and opportunities to further examine the current methods of providing mental health and substance use services in the state. Specifically, the group will confer on ways to better improve the effectiveness of current practices, procedures, and programs, in providing such services; identify any barriers or deficiencies in the delivery of such services; and recommend changes to existing laws, rules and policies.

A copy of the agenda may be obtained by contacting: The agenda and meeting materials will be forth coming. For information on the Commission please visit the Commission website:

[https://www.myflfamilies.com/services/substance-abuse-and-mental-health/other-directories-and-](https://www.myflfamilies.com/services/substance-abuse-and-mental-health/other-directories-and-links/commission-mental-health-and)

[links/commission-mental-health-and-](https://www.myflfamilies.com/services/substance-abuse-and-mental-health/other-directories-and-links/commission-mental-health-and)

[links/commission-mental-health-and-](https://www.myflfamilies.com/services/substance-abuse-and-mental-health/other-directories-and-links/commission-mental-health-and)

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: Aaron Platt at Aaron.platt@myflfamilies.com or

(850) 717-4331. 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: Aaron Platt at Aaron.platt@myflfamilies.com or (850) 717-4331.

DEPARTMENT OF CHILDREN AND FAMILIES

Mental Health Program

The Department of Children and Families, Statewide Office for Suicide Prevention announces a public meeting to which all persons are invited.

DATE AND TIME: Tuesday, April 25, 2022, 2:00 p.m. – 3:30 p.m. EST

PLACE: Virtual meeting via Microsoft Teams. The access link is listed below and also available on the suicide prevention calendar located here:

<https://www.myflfamilies.com/suicideprevention>.
https://teams.microsoft.com/dl/launcher/launcher.html?url=%2F_%23%2F1%2Fmeetup-join%2F19%3Ameeting_OGRjZjlhMDQtYmJjOC00MDdjLWJiYzgtZjIxYzNmYWE3YjA2%40thread.v2%2F0%3Fcontent%3D%257b%2522Tid%2522%253a%2522f70dba48-b283-4c57-8831-cb411445a94c%2522%252c%2522Oid%2522%253a%25220385a23d-1579-4fe4-8d7e-84c933c8694a%2522%257d%26anon%3Dtrue&type=meetup-join&deeplinkId=d9bca4c1-e8fe-4a7a-b1de-4e58c04154f2&directDI=true&msLaunch=true&enableMobilePage=true&suppressPrompt=true

GENERAL SUBJECT MATTER TO BE CONSIDERED: Meeting of the Florida First Responder Suicide Deterrence Task Force. The purpose of the Task Force is to make recommendations on how to reduce the incidence of suicide and attempted suicide among employed or retired first responders in the state. The purpose of the meeting is to provide updates on the progress of recommendations from the First Responder Suicide Deterrence Task Force 2021 & 2022 annual reports and to put forth new recommendations.

A copy of the agenda may be obtained by contacting: Anna Sever at Anna.Sever@myflfamilies.com or (850) 717-4039.

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 3 days before the workshop/meeting by contacting: Anna Sever at Anna.Sever@myflfamilies.com or (850) 717-4039. 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: Anna Sever at Anna.Sever@myflfamilies.com or (850) 717-4039.

FLORIDA HOUSING FINANCE CORPORATION

The Florida Housing Finance Corporation announces a workshop to which all persons are invited.

DATE AND TIME: April 18, 2023, 10:00 a.m.

PLACE: 227 N. Bronough Street, Tallahassee, Florida 32301.

The workshop will also be available by webinar. The registration information for the webinar is posted to the following website :

<https://www.floridahousing.org/programs/developers-multifamily-programs/competitive/2023/2023-211>

GENERAL SUBJECT MATTER TO BE CONSIDERED: This workshop will begin discussions regarding the Viability Loan Funding through SB102, the Live Local Act, with the opportunity for the public to provide comments and suggestions.

A copy of the agenda may be obtained by contacting: Jean Salmonsens, (850)488-4197.

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: Jean Salmonsens, (850)488-4197. 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.

FLORIDA MEDICAL MALPRACTICE JOINT UNDERWRITING ASSOCIATION

The FMMJUA Audit Committee announces a public meeting to which all persons are invited.

DATE AND TIME: Tuesday, April 18, 2023, 3:00 p.m.

PLACE: Doubletree, 101 S Adams St. Tallahassee, FL 32301.

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Audit Committee of the Florida Medical Malpractice Joint Underwriting Association will receive and consider business properly brought before the Committee.

A copy of the agenda may be obtained by contacting: For more information, you may contact: frankie@fmmjua.org or call 850-385-8114.

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: For more information, you may contact: frankie@fmmjua.org or call 850-385-8114. 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: For more information, you may contact: frankie@fmmjua.org or call 850-385-8114.

FLORIDA MEDICAL MALPRACTICE JOINT UNDERWRITING ASSOCIATION

The FMMJUA Audit Committee announces a public meeting to which all persons are invited.

DATE AND TIME: Tuesday, April 18, 2023, 3:00 p.m.

PLACE: Doubletree, 101 S Adams St. Tallahassee, FL 32301.

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Audit Committee of the Florida Medical Malpractice Joint Underwriting Association will receive and consider business properly brought before the Committee.

A copy of the agenda may be obtained by contacting: For more information, you may contact: frankie@fmmjua.org or call 850-385-8114.

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: For more information, you may contact: frankie@fmmjua.org or call 850-385-8114. 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: For more information, you may contact: frankie@fmmjua.org or call 850-385-8114.

FLORIDA MEDICAL MALPRACTICE JOINT UNDERWRITING ASSOCIATION

The FMMJUA Compensation Committee announces a public meeting to which all persons are invited.

DATE AND TIME: Tuesday, April 18, 2023, immediately following the C&U Committee meeting.

PLACE: Doubletree, 101 S Adams St. Tallahassee, FL 32301.

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Compensation Committee of the Florida Medical Malpractice Joint Underwriting Association will receive and consider business properly brought before the Committee.

A copy of the agenda may be obtained by contacting: For more information, you may contact: frankie@fmmjua.org or call 850-385-8114.

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: For more information, you may contact: frankie@fmmjua.org or call 850-385-8114. 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: For more information, you may contact: frankie@fmmjua.org or call 850-385-8114.

FLORIDA MEDICAL MALPRACTICE JOINT UNDERWRITING ASSOCIATION

The FMMJUA Board of Governors announces a public meeting to which all persons are invited.

DATE AND TIME: Wednesday, April 19, 2023, 9:00 a.m.

PLACE: Doubletree, 101 S Adams St. Tallahassee, FL 32301.

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Board of Governors of the Florida Medical Malpractice Joint Underwriting Association will receive and consider quarterly reports from the Association's Investment Counsel, General Counsel, Servicing Carrier, Audit Committee, Claims Committee, Compensation Committee, General Manager, and such other business properly brought before the Board.

A copy of the agenda may be obtained by contacting: For more information, you may contact: frankie@fmmjua.org or call 850-385-8114.

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: For more information, you may contact: frankie@fmmjua.org or call 850-385-8114. 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: For more information, you may contact: frankie@fmmjua.org or call 850-385-8114.

CENTER FOR INDEPENDENT LIVING IN CENTRAL FLORIDA, INC.

The Center for Independent Living in Central Florida, Inc. announces a public meeting to which all persons are invited.

DATE AND TIME: April 13, 2023, 4:00 p.m.

PLACE: 720 N Denning Drive, Winter Park, FL 32789

GENERAL SUBJECT MATTER TO BE CONSIDERED: Strategic Planning.

A copy of the agenda may be obtained by contacting: Maria Diaz, 407-961-5541.

MRGMIAMI

The Florida Department of Transportation announces a public meeting to which all persons are invited.

DATES AND TIMES: Virtual Meeting on Wednesday, April 19, 2023, at 5:30 p.m. In-Person Meeting on Wednesday, April 26, 2023 from 5:00 p.m. to 6:30 p.m.

PLACE: To participate in the virtual Public Meeting from your computer, tablet or smartphone please register using the link: <https://bit.ly/SR607EmersonAve-PIM>.

Participants can also use their phone by dialing in to +1 (562) 247-8422; Access code: 709-898-716.

The in-person Public Meeting will take place at the Lakewood Park Branch Library, 7605 Santa Barbara Drive, Fort Pierce, FL 34982.

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Florida Department of Transportation (FDOT) will hold a Public Meeting regarding the design of the State Road (SR) 607/Emerson Avenue resurfacing from north of SR 614/Indrio Road to south of 25th Street SW. The project identification number is 447651-1-52-01. The Public Meeting will be offered in two different formats: virtual and in-person.

The virtual public meeting will include a formal presentation followed by a question-and-answer session. The in-person public meeting will be held in an open house format with no formal presentation. Comments and questions will be answered in the order received. If your question is not answered during the event, a response will be provided in writing following the meeting. Questions and comments may also be submitted prior to the meeting by emailing the Project Manager.

A copy of the agenda may be obtained by contacting: FDOT Project Manager, Leslie Wetherell P.E., at (954) 777-4438 or via email at: Leslie.Wetherell@dot.state.fl.us.

Public participation is solicited without regard to race, color, national origin, age, sex, religion, disability or family status.

A copy of the agenda may be obtained by contacting: FDOT Project Manager, Leslie Wetherell P.E., at (954) 777-4438 or via email at: Leslie.Wetherell@dot.state.fl.us.

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: Leslie Wetherell, P.E. at (954) 777-4438 or in writing at FDOT, 3400 West Commercial Boulevard, Fort Lauderdale, Florida 33309 or by email at: Leslie.Wetherell@dot.state.fl.us. 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: FDOT Project Manager, Leslie Wetherell P.E., at (954) 777-4438 or via email at: Leslie.Wetherell@dot.state.fl.us.

QUEST CORPORATION OF AMERICA, INC.

The Florida Department of Transportation (FDOT) announces a public meeting to which all persons are invited.

DATE AND TIME: Thursday, April 13, 2023, 5:30 p.m.

PLACE: Virtually on GoTo Webinar; By phone; In-Person at Embassy Suites by Hilton Orlando Lake Buena Vista

GENERAL SUBJECT MATTER TO BE CONSIDERED: A public meeting will be held regarding project plans on State Road (S.R.) 535 from north of U.S. 192 to south of International Drive. (FPID no. 445299-1)

The purpose of this project is to improve traffic operations and safety along this segment of S.R. 535. The public meeting is being held to present information and receive community feedback.

The Department is offering multiple ways for the community to participate in the meeting. All participants, regardless of platform they choose, will receive the same information on the proposed project.

Virtual Option: Interested persons may join from a computer, tablet, or mobile device at 5:30 p.m. For this option, advance registration is required by visiting <http://bit.ly/3SYuFxE>. Once registered, participants will receive a confirmation email containing information about joining the meeting online. Please use Chrome or Microsoft Edge as your internet browser to register or attend this webinar. If joining online, please allow adequate log-in time to view the presentation in its entirety.

Phone Option (Listen Only): Participants may join the meeting in listen-only mode by dialing 1-877-309-2071 and entering the passcode 959-658-675 when prompted.

In-Person Open House Option: Participants may attend in person by going to Embassy Suites by Hilton Orlando Lake Buena Vista South, 4955 Kyns Heath Road, Kissimmee, FL 34746 anytime between 5:30 p.m. and 7 p.m. to view a looping presentation and project displays, speak with project team members, and submit comments or questions. If attending in person, please remember to follow all safety and sanitation guidelines. If you are feeling unwell, please consider attending the meeting virtually or by phone.

All meeting materials, including the presentation, will be available on the project website at www.CFLRoads.com/project/445299-1 prior to the meeting.

FDOT is sending notices to all property owners, business owners, interested persons and organizations to provide the opportunity to offer comments and express their views regarding this project and the proposed improvements.

Public participation is solicited without regard to race, color, national origin, age, sex, religion, disability, or family status.

Persons wishing to express their concerns relative to FDOT compliance with Title VI may do so by contacting Melissa McKinney, FDOT District Five Title VI Coordinator, at Melissa.McKinney@dot.state.fl.us.

Information about this project is also available online at www.cflroads.com. Simply type 445299-1 in the search box, click "go" and then select the project. We encourage you to participate in the S.R. 535 Improvements public meeting.

A copy of the agenda may be obtained by contacting: n/a

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: FDOT Project Manager Kevin Powell at 386-943-5425, by email at Kevin.Powell@dot.state.fl.us. 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: FDOT Project Manager Kevin Powell by phone at 386-943-5425, by email at Kevin.Powell@dot.state.fl.us, or U.S. mail at Florida Department of Transportation, 719 South Woodland Blvd., MS 542, DeLand, FL 32720.

ALLIANCE FOR AGING, INC.

The Alliance for Aging, Inc. announces a public meeting to which all persons are invited.

DATE AND TIME: April 19, 2023, 4:00 p.m.

PLACE:

<https://us02web.zoom.us/j/89143548377?pwd=RTZodHlxa1hQNHhxQm01RUJjSUFIUT09>

GENERAL SUBJECT MATTER TO BE CONSIDERED:
Board of Directors meeting.

A copy of the agenda may be obtained by contacting: Rhina Jaar, jaarr@allianceforaging.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 3 days before the workshop/meeting by contacting: Rhina Jaar. 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).

Section VII

**Notice of Petitions and Dispositions
Regarding Declaratory Statements**

**DEPARTMENT OF BUSINESS AND PROFESSIONAL
REGULATION**

NOTICE IS HEREBY GIVEN that Department of Business and Professional Regulation, Division of Professions has received the petition for declaratory statement from Robert Wesley Sutton. The petition seeks the agency's opinion as to the applicability of section 468.841, F.S. as it applies to the petitioner.

Petitioner requests a declaratory statement as to whether he is entitled to an exemption from licensure as a mold assessor and mold remediator based on his status as a sovereign citizen.

A copy of the Petition for Declaratory Statement may be obtained by contacting: Department of Business and

Professional Regulation, Agency Clerk's Office, 2601 Blairstone Road, Tallahassee, FL 32399-2202, (850)717-1183, AGC.Filing@MyFloridaLicense.com.

Please refer all comments to: Brooke Adams, Chief Legal Counsel, 2601 Blair Stone Road, Tallahassee, FL 32399, (850)717-1513, Brooke.Adams@myfloridalicense.com.

DEPARTMENT OF FINANCIAL SERVICES

NOTICE IS HEREBY GIVEN that Department of Financial Services, Division of State Fire Marshal (Department) has received the petition for declaratory statement from Don Bosko, on April 3, 2023. The petition seeks the agency's opinion as to the applicability of 2016 Edition of NFPA 13 as it applies to the petitioner.

The Petition asks for a declaratory statement concerning the fire inspector's interpretation of the 2016 Edition of NFPA 13, requiring that Beef O'Brady install sprinklers inside the premises for a cooler that is outside, not inside the premises.

A copy of the Petition for Declaratory Statement may be obtained by contacting: Sarah Marcos, Office of the General Counsel, 200 E. Gaines Street, Tallahassee, Florida 32399, (850)413-4229, Sarah.Marcos@myfloridacfo.com.

Please refer all comments to: Sarah Marcos, Office of the General Counsel, 200 E. Gaines Street, Tallahassee, Florida 32399, (850)413-4229, Sarah.Marcos@myfloridacfo.com.

DEPARTMENT OF FINANCIAL SERVICES

NOTICE IS HEREBY GIVEN that Department of Financial Services, Division of State Fire Marshal (Department) has received the petition for declaratory statement from Phillip Green, on March 29, 2023. The petition seeks the agency's opinion as to the applicability of F.S.633.202(18) as it applies to the petitioner.

The Petition asks: 1) Does 633.202(18) intend to allow a local AHJ to consider a two-way telephone as equivalent for fire department communications? Does 633.202(18) intend to allow a local AHJ to consider a DVRS as an equivalent for fire department communications?

A copy of the Petition for Declaratory Statement may be obtained by contacting: Sarah Marcos, Office of the General Counsel, 200 E. Gaines Street, Tallahassee, Florida 32399, (850)413-4229, Sarah.Marcos@myfloridacfo.com.

Please refer all comments to: Sarah Marcos, Office of the General Counsel, 200 E. Gaines Street, Tallahassee, Florida 32399, (850)413-4229, Sarah.Marcos@myfloridacfo.com.

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 ENVIRONMENTAL PROTECTION
 DEP ITB 2023019 - Street Sweeper for the Florida Keys Overseas Heritage Trail

The Florida Department of Environmental Protection is requesting Bids for a Street Sweeper for the Florida Keys Overseas Heritage Trail. The Department will post notice of any changes or additional meeting(s) on the Vendor Information Portal (VIP) in accordance with section 287.042(3), Florida Statutes, and will not re-advertise any notice in the Florida Administrative Register (FAR). Access the VIP at: <https://vendor.myfloridamarketplace.com/>

FISH AND WILDLIFE CONSERVATION COMMISSION
 GRAHAM SPRING BANK RESTORATION.
 BID NO: FWC 22/23-98C.
 TITLE: GRAHAM SPRING BANK RESTORATION.

The Florida Fish and Wildlife Conservation Commission is seeking competitive pricing stabilize eroding banks at Graham Spring, in accordance with the contract documents and Chapter 255 of the Florida Statutes.

To review the bid details:

- Visit <https://vendor.myfloridamarketplace.com/>
- Select Search Advertisements.
- Enter FWC 22/23-98C into the Agency Advertisement Number box.
- Click the Search button.
- Select the solicitation to view the advertisement details.
- Download files made available in the advertisement details page.

NOTE: The MyFloridaMarketPlace Vendor Information Portal (link provided above) is the posting location for all new and changing information regarding this solicitation. Interested bidders should continue to monitor this site for the entirety of the solicitation process.

Direct all questions to the Procurement Manager: KYLE DOVE, Florida Fish & Wildlife Conservation Commission, 1875 ORANGE AVENUE EAST, Tallahassee, FL 32311-6160, Kyle.Dove@MyFWC.com, (850)617-9602.

DEPARTMENT OF FINANCIAL SERVICES

Division of State Fire Marshal
 Department of Financial Services
 Notice of Invitation to Bid
 Department of Financial Services
 Agency Ad. No. 2223-03 ITB FM
 (VIP Ad. No. ITB-04750)

Electrical Services at the Florida State Fire College

The Department of Financial Services (Department) is issuing this Invitation to Bid (ITB) to solicit Responses from one or more entities (Respondents) that are qualified and capable of providing Electrical Services at the Florida State Fire College. The solicitation will be administered through the MyFloridaMarketPlace (MFMP) Vendor Information Portal (VIP). The submitted Response must comply with the terms and conditions stated in the ITB.

Point of Contact/Procurement Officer: All questions must be in writing and should reference the above solicitation number and title. Submit all questions to Procurement Officer, Nikki Willis-Somerset, via email at DFSPurchasing@myfloridacfo.com.

Response Due Date/Time: 5/9/2023 at 4:00 p.m., to the Procurement Officer identified, at the following email address: DFSPurchasing@myfloridacfo.com

The Department reserves the right to issue amendments, addenda, and changes to the timeline and specifically to any public meeting identified within the solicitation. The Department will post notice of any changes regarding this solicitation or additional meetings within the VIP in accordance

with Section 287.042(3), Florida Statutes, and will not re-advertise the notice in the Florida Administrative Register (FAR). To access the VIP go to the following web address: <https://vendor.myfloridamarketplace.com/>

ADA Requirements: Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in any meeting is asked to advise the agency at least 48 hours before the meeting by contacting: Procurement Officer – see above. 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).

JE DUNN CONSTRUCTION

FDLE Tampa Regional Operations Center Renovation

JE Dunn Construction Company (CGC-062145), the Construction Manager, requests Bids on 05/09/2023 by 2:00 pm, based on the Permit Set Design documents dated 11/29/2022 by Wilder Architecture, Inc. Drawings and Specifications will be posted to the JE Dunn SmartBid Plan Room but will not be available for your download and review until the NDA document is signed and returned by 3:00 pm, 4/7/2023. This NDA will be posted to the SmartBid site for immediate download. For consideration to receive an Invitation to Bid (ITB) for this project please contact the Sr. Preconstruction & Estimating Manager, Eric DeSmet at eric.desmet@jedunn.com. There will be an online Pre-Bid meeting on 4/18/2023 at 2:00 pm, the link for this will be sent out by separate SmartBid notification. The site Walk-through meetings are Mandatory, this will be your only opportunity to see the project, these will be: Friday 4/21/2023 from 12:00 pm to 6:00 pm for “Non-Critical” Trades (Sitework, Tree Removal, Stucco, Painting, Flooring, Elevator, Roofing, Landscape/Irrigation). Saturday 4/22/2023 from 8:00 am to 12:00 pm for “Critical” Trades (Demolition, Mechanical, Electrical, Fire Protection, Controls, Plumbing, Glazing, Drywall, and Acoustical). This walk-through will be limited to 2 ea. representatives from each Trade Partner. A Non-Sworn Contractor Background Waiver must be completed and returned to JE Dunn by 3:00pm, 4/7/2023 in order to attend the site visit. This Background Waiver will be posted to the SmartBid site for immediate download, refer to FS435 Employment Screening document for requirements. All awarded Trade Partner workers on-site will be required to pass a Level 2 background check by the FDLE and must wear the approval badge while on site. There will be a check-in/check-out procedure daily when working in the secure areas. The scope of services includes selective renovations of the 112,000 SF existing building, parking lot repairs, ADA upgrades, internal & perimeter security upgrades, glazing replacement, select interior finishes, HVAC modifications & new equipment, and new electrical service. All subcontracts in excess of

\$100,000 are required to include a Payment and Performance Bond or be entered the JE Dunn Subcontractor Default Insurance Program. Firms registered with the Office of Supplier Diversity are encouraged to participate in this project. Trade Partners must have successfully completed no less than two projects of similar size and scope in the last five years.

**CHILDREN’S SERVICES COUNCIL OF LEON COUNTY
Invitation to negotiate (ITN) Family Resource Center Management**

The Children’s Services Council of Leon County (CSC Leon) invites responses to an Invitation to Negotiate for the creation and management of Family Resource Centers. The full ITN is available at <http://cscleon.org/announcements>. Responses are due by 2:00 p.m. on Friday, May 5, 2023. Submit responses to the Director of Finance and Operations, Dina Snider, at procurement@cscleon.org.

**Section XII
Miscellaneous**

DEPARTMENT OF STATE

Index of Administrative Rules Filed with the Secretary of State Pursuant to subparagraph 120.55(1)(b)6. – 7., F.S., the below list of rules were filed in the Office of the Secretary of State between 3:00 p.m., Wednesday, March 29, 2023 and 3:00 p.m., Tuesday, April 4, 2023.

Rule No.	File Date	Effective Date
40C-4.091	3/31/2023	**/**/****
40C-41.043	3/31/2023	**/**/****
61E1-2.001	3/29/2023	4/18/2023
61E1-3.001	3/29/2023	4/18/2023
61G15-19.001	3/31/2023	4/20/2023
64B2-17.006	4/3/2023	4/23/2023
64B18-17.001	3/30/2023	4/19/2023
64W-4.001	3/31/2023	4/20/2023
64W-4.002	3/31/2023	4/20/2023
64W-4.003	3/31/2023	4/20/2023
64W-4.004	3/31/2023	4/20/2023
64W-4.005	3/31/2023	4/20/2023
64W-4.006	3/31/2023	4/20/2023

64W-4.007	3/31/2023	4/20/2023
68B-14.0036	4/3/2023	4/1/2023
68B-14.0043	4/3/2023	4/1/2023
69A-52.001	4/3/2023	4/23/2023
LIST OF RULES AWAITING LEGISLATIVE APPROVAL SECTIONS 120.541(3), 373.139(7) AND/OR 373.1391(6), FLORIDA STATUTES		
Rule No.	File Date	Effective Date
5K-4.020	12/10/2021	**/**/****
5K-4.035	12/10/2021	**/**/****
5K-4.045	12/10/2021	**/**/****
40C-4.091	3/31/2023	**/**/****
40C-41.043	3/31/2023	**/**/****
60FF1-5.009	7/21/2016	**/**/****
62-6.001	5/10/2022	**/**/****
62-600.405	11/16/2021	**/**/****
62-600.705	11/16/2021	**/**/****
62-600.720	11/16/2021	**/**/****
64B8-10.003	12/9/2015	**/**/****
65C-9.004	3/31/2022	**/**/****
69L-7.020	10/22/2021	**/**/****

DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

Division of Motor Vehicles

Establishment of Mx Mud Cleaner USA Inc., d/b/a Scooter Ave, line-make RIYA

Notice of Publication for a New Point

Franchise Motor Vehicle Dealer in a County of More than 300,000 Population

Pursuant to Section 320.642, Florida Statutes, notice is given that Peace Industry Group (USA), Inc., intends to allow the establishment of Mx Mud Cleaner USA Inc., d/b/a Scooter Ave, as a dealership for the sale of motorcycles manufactured by Zhejiang Riya Motorcycle Co., Ltd. (line-make RIYA) at 1914 North Dixie Highway, Lake Worth, (Palm Beach County), Florida 33460, on or after May 4, 2023.

The name and address of the dealer operator(s) and principal investor(s) of Mx Mud Cleaner USA Inc are dealer operator(s): Marcio Andreoli, 1942 Northeast 6th Street, Deerfield Beach, Florida 33441; principal investor(s): Marcio Andreoli, 1942 Northeast 6th Street, Deerfield Beach, Florida 33441.

The notice indicates intent to establish the new point location in a county of more than 300,000 population, according to the latest population estimates of the University of Florida, Bureau of Economic and Business Research.

Certain dealerships of the same line-make may have standing, pursuant to Section 320.642, Florida Statutes, to file a petition or complaint protesting the application.

Written petitions or complaints must be received by the Department of Highway Safety and Motor Vehicles within 30 days of the date of publication of this notice and must be submitted to: Sondra L. Howard, Administrator, Dealer License Section, Department of Highway Safety and Motor Vehicles, Room A-312, MS65, Neil Kirkman Building, 2900 Apalachee Parkway, Tallahassee, Florida 32399-0635.

A copy of such petition or complaint must also be sent by US Mail to: Meireidith Huang, Peace Industry Group (USA), Inc., 2885 Pacific Drive Suite B, Norcross, Georgia 30071.

If no petitions or complaints are received within 30 days of the date of publication, a final order will be issued by the Department of Highway Safety and Motor Vehicles approving the establishment of the dealership, subject to the applicant's compliance with the provisions of Chapter 320, Florida Statutes.

AGENCY FOR HEALTH CARE ADMINISTRATION

Certificate of Need

NOTICE OF BATCHED APPLICATION RECEIPT AND NOTICE OF TENTATIVE PUBLIC HEARINGS

The Agency for Health Care Administration has received and accepted the following Certificate of Need applications for review in the batched Hospice review cycle with an application due date of March 29, 2023

County: Franklin District: 2B

CON #10734 Application Receipt Date: 3/29/2023

Applicant/Facility/Project: VITAS Healthcare Corporation of Florida – New hospice program

County: Alachua District: 3A

CON #10735 Application Receipt Date: 3/29/2023

Applicant/Facility/Project: Arc Hospice of Florida, LLC – New hospice program

Also, IF REQUESTED, tentative public hearings have been scheduled as follows:

PROPOSAL: CON #10734 District: 2B

DATE/TIME: Wednesday, May 10, 2023 @ 1:00 p.m. – 3:00 p.m.

PLACE: Big Bend Health Council, Inc.

403 East 11th Street
Panama City, Florida 32401

PROPOSAL:CON #10735 District: 3A

DATE/TIME: Tuesday, May 9, 2023 @ 10:00 a.m. – 12:00
p.m.

PLACE: WellFlorida Council, Inc.
1785 NW 80th Boulevard
Gainesville, Florida 32606

Public hearing requests must be in writing and be received at the Agency for Health Care Administration, CON Office, 2727 Mahan Drive, Mail Stop 28, Tallahassee, Florida, 32308, attention James B. McLemore, by 5:00 p.m., April 19, 2023. In lieu of requesting and attending a public hearing, written comments submitted to the agency relative to the merits of these applications will become part of the official project application file. Pursuant to 59C-1.010(3), F.A.C., written comments must be received by April 26, 2023.

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.
