



Brian L. Robare, Chair

Janegale Boyd, President/CEO

Proposed Change to Rule 58A-5.019 (4), F.A.C., Assisted Living Staffing Standards

This proposal for revision to Rule 58A-5.019(4), FAC would give continuing care and fee-for-service multi-level retirement communities the ability to offer assisted living services to residents living independently. It would clarify that the staffing mandates applicable to apartments and other residential units designated for independent living but licensed as ALFs to allow residents to age in place applies only to those residents receiving assisted living services. This proposed change would make it easier for retirement communities to offer their residents a creative and often more preferable option to relocating to a traditional ALF or nursing home on campus.

The proposal for change is added to Rule 58A-5.019 (4), F.A.C., Staffing Standards as follows:

(f) For retirement communities that license apartments or other residential units designated for independent living as assisted living for the purpose of allowing residents to age in place, the staffing requirements in rule shall apply only to residents who are receiving assisted living services. Such retirement communities must have a traditional assisted living facility on the same campus as units designated for independent living and retain a log listing the names of residents living in independent living units who are receiving assisted living services, the unit numbers in which recipients receiving services reside, the dates the contract for services started and ended, and documentation that minimum staffing requirements were met. The log must be available to surveyors upon request. Contracts for such residents must be retained for five years. All other records must be retained for at least two years from the date of termination of assisted living services.

(g)-(f) Facilities holding a limited mental health, extended congregate care, or limited nursing services license must also comply with the staffing requirements of Rule 58A-5.029, 58A-5.030, or 58A-5.031, F.A.C., respectively.

The transfer to a more acute level of care is inevitable for some seniors, but not all. This proposal provides a "common sense" and cost-effective alternative to a free standing ALF that allows residents to "age in place" in retirement communities that have the capacity and desire to be more flexible. The goal is simple – to allow seniors to remain in their home and for the facility to meet their needs in the least restrictive environment without getting a home health license – something that is economically unfeasible for small retirement communities.