

59A-8.0097 Personnel Training and Validation Requirements

(1) Home Health Aide and Certified Nursing Assistant (CNA) Training Requirements. Home health aides and CNA's must receive training prior to providing services and each calendar year thereafter as required. Home health aides and CNAs performing tasks delegated by a registered nurse (RN) may require additional training to ensure that they can adequately perform the tasks in the home setting. Training may be provided as in-service training unless otherwise specified in statute. Medicare and Medicaid agencies should check federal regulations for additional in-service training requirements.

(a) Cardiopulmonary Resuscitation (CPR). Home health aides and CNAs must obtain and maintain current cardiopulmonary resuscitation (CPR) certification from an instructor or training provider approved to provide CPR training by the American Red Cross, the American Heart Association, the National Safety Council, or an organization whose training is accredited by the Commission on Accreditation for Pre-Hospital Continuing Education, in which the student is required to demonstrate, in person, that they are able to perform cardiopulmonary resuscitation as part of the training.

(b) Alzheimer's Disease and Related Disorders (ADRD). Home health agency personnel who will provide direct care to patients must complete a 2 hour training course in Alzheimer's disease and dementia-related disorders in accordance with section 400.4785, F.S. The training provider and curriculum must meet the requirements in Rule 58A-8.001, F.A.C., and be approved by the Florida Department of Elder Affairs. The home health agency must have documentation of training on file.

1. ADRD training must address the following subject areas:

a. Understanding Alzheimer's disease and related disorders;

b. Communicating with patients who have alzheimer's disease or related disorders;

c. Behavior management;

d. Promoting the client's independence in activities of daily living; and

e. Developing skills to work with family and caregivers.

2. A detailed description of the subject areas that must be included in an ADRD curriculum which meets the requirements of Rule 58A-8.001, F.A.C., can be found in "Training Guidelines for the Special Care of Home Health Agency Patients with Alzheimer's Disease and Related Disorders," July 2005, incorporated in Rule 58A-8.001, F.A.C., and available from the Department of Elder Affairs, 4040 Esplanade Way, Tallahassee, Florida 32399-7000.

(c) HIV/AIDS Training. Pursuant to Section 381.0035, F.S., all home health agency employees, with the exception of employees subject to the requirements of Section 456.033, F.S., must complete a one-time education course on HIV and AIDS, including the topics prescribed in Section 381.0035, F.S. New employees must obtain the training within 30 days of employment. The home health agency must have documentation of training on file.

(d) Additional training may include courses pertinent to home health services such as:

1. Abuse, Neglect and Exploitation

2. Diabetes

3. Dysphagia

4. End-of-Life Care

5. Ethics

6. Heart Health and Disease

7. Health Insurance Portability and Accountability Act of 1996 (HIPAA) Compliance

8. Incontinence and Constipation

9. Kidney Disease

10. Patient Education

11. Personal Care

12. Readmissions: Preventing a Trip Back to the Hospital

13. Respiratory Disorders

14. Seizures and Strokes

15. Skin Care: Guidelines for Ensuring Skin Integrity

16. Tube Feeding and Oral Care

17. Urinary Catheter Care

(e) Skin and Wound Care Management.

1. Home health aides and CNAs providing routine preventative skin care and applying or removing bandages pursuant to Section 400.488, F.S., must complete an initial 2-hour training course in skin and wound care management prior to assuming this responsibility and a 2-hour training course annually thereafter.

2. Training must cover state law and rule requirements with respect to the following:

a. Principles of healthy skin care management;

b. Interventions that reduce the risk of pressure injury based on evidence based skin risk assessments;

c. Components of comprehensive skin/wound assessment;

d. Categories of topical wound management;

e. Interventions and associated wound characteristics that support wound healing;

f. Characteristics of wound etiologies including moisture associated skin injury, pressure injury, and venous, arterial, and neuropathic ulcers;

g. Principles of safe negative pressure wound therapy;

h. Appropriate support surface application; and

i. Documentation of wound care.

(2) Medication Administration

(a) A medication administration route is the path through which medication or prescribed formula is delivered to a patient. For the purposes of this rule, routes of administration are defined as follows:

1. "Enteral" means medication or prescribed enteral formula is delivered by a gastrostomy jejunostomy tube via the body's gastrointestinal system.

2. "Inhaled" means medication is administered as nose drops or nose spray, or medication is inhaled by mouth, such as with an inhaler or nebulizer.

3. "Ophthalmic" means solution or ointment medication is instilled into the eye or applied on or around the eyelid.

4. "Oral" means medication including, but not limited to, tablet, capsule, liquid, or powder form is introduced into the gastrointestinal tract by mouth.

5. "Otic" means solutions or ointment medication is placed in the outer ear canal or applied around the outer ear.

6. "Parenteral" means medication is injected into the body through some route other than the digestive tract, such as subcutaneous, intra-dermal, intra-muscular, or intravenous administration.

7. "Rectal" means any medication including, but not limited to, capsule, enema, gel, or suppository administered via the rectum.

8. "Topical" means medication including, but not limited to, salve, lotion, ointment, cream, spray, shampoo, or solution applied locally to a body part.

9. "Transdermal" means a patch containing a pre-measured or measured amount of topical medication that is absorbed into the body via the epidermis (outer layer of skin).

10. "Vaginal" means any medication including, but not limited to, capsule, cream, or ointment that is administered via the internal vagina. This route does not include medications applied to the epidermis external to the vagina.

(b) Assistance with Self-Administered Medication.

1. Home health aides and CNAs assisting with self-administered medication, pursuant to Section 400.488, F.S., must receive a minimum of 2 hours of training (which can be part of the 40 hour home health training) prior to assuming this responsibility.

2. Training must cover state law and rule requirements with respect to the following:

a. Assistance with self-administration of medications in the home;

b. Procedures and techniques for assisting the patient with self-administration of medication;

c. How to read a prescription label and providing the right medications to the right patient;

d. The importance of taking medications as prescribed;

e. Common medications;

f. Recognition of side effects and adverse reactions;

g. Procedures to follow when patients appear to be experiencing side effects and/or adverse reactions;

h. Documentation and record keeping; and

i. Medication storage and disposal.

3. Training must include verification that each CNA and home health aide can read the prescription label and instructions. Individuals who cannot read must not be permitted to assist with prescription medications.

4. Training shall include demonstration of proper techniques, including techniques for infection control, and ensure home health aides and CNAs have adequately demonstrated that they have acquired the skills necessary to provide such assistance.

5. Other courses taken in fulfillment of this requirement must be documented and maintained in the home health aide's and the CNA's personnel files.

(c) Medication Administration and Medication Error Prevention.

1. Home health aides and CNAs administering medication pursuant to Sections 400.489, 400.490 and 464.2035, F.S. must complete an initial 6-hour basic medication administration training course prior to assuming this responsibility and a 2-hour training course annually thereafter.

2. Basic medication administration training must be provided by an RN licensed under chapter 464, F.S. or a physician licensed under chapter 458 or chapter 459, F.S. who has been in practice for at least 2 years.

3. Training must cover state law and rule requirements with respect to the following:

a. Procedures for the safe administration of medication;

b. Requirements for labeling medication;

c. Documentation and recordkeeping;

d. Storage and disposal of medication;

e. Informed-consent requirements and records;

f. Common medication errors;

g. Recognition of side effects and adverse reactions; and

h. Procedures to follow when patients appear to be experiencing side effects and/or adverse reactions.

4. The training shall require the home health aide or CNA to demonstrate, in person, the ability or technique to:

a. Read and understand a prescription label;

b. Administer oral dosage forms, rectal dosage forms, topical and transdermal dosage forms, and topical ophthalmic, otic and nasal dosage forms;

c. Measure liquid medications, break scored tablets, and crush tablets in accordance with prescription directions;

d. Recognize the need to obtain clarification of an "as needed" prescription order;

e. Recognize a medication order which requires judgment or discretion, and to advise the patient or the patient's health care provider of the inability to assist in the administration of such orders;

f. Complete a medication observation record;

g. Retrieve and store medication;

h. Recognize the general signs of adverse reactions to medications and report such reactions;

5. Training must include verification that each home health aide or CNA can read the prescription label and any instructions. Individuals who cannot read must not be permitted to administer medications.

6. Home health aides and CNAs administering prescribed enteral formula pursuant to Sections 400.489, 400.490 and 464.2035, F.S. must complete an 2-hour prescribed enteral formula administration training course prior to assuming this responsibility and a 2-hour training course annually thereafter.

7. Prescribed enteral formula administration training must be provided by an RN licensed under chapter 464, F.S. or a physician licensed under chapter 458 or chapter 459, F.S. who has been in practice for at least 2 years.

(d) Medication Administration Course Curriculum and Training Requirements.

1. The Medication Administration Training curricula is for the Basic Medication Administration course and the Prescribed Enteral Formula Administration course.

2. Basic Medication Administration course curriculum requirements. The initial 6-hour medication administration course curriculum must include:

- a. Safe storage, handling, and disposal of medications;
- b. Understanding medication instructions;
- c. Medical indications and purposes of commonly used medications;
- d. Common side effects;
- e. Symptoms of adverse reactions;
- f. Proper administration of medications, including the following administration routes:
 - (I) Oral;
 - (II) Enteral;
 - (III) Transdermal;
 - (IV) Ophthalmic;
 - (V) Otic;
 - (VI) Rectal;
 - (VII) Inhaled; and
 - (VIII) Topical.
- g. Safety and sanitation while administering medication;
- h. Medication administration documentation and recordkeeping;
- i. Medication errors and error reporting;
- j. Administrative documentation requirements including, but not limited to:
 - (I) Authorizations; and
 - (II) Consents.
- k. Offsite medication procedures; and
- l. Validation requirements.

3. Web-Based course curriculum requirements. The Basic Medication Administration course may be completed via web-based distance learning. In addition to the requirements in paragraphs (c) and (d), the course must comply with the following curriculum requirements:

- a. Demonstrate effective communication and interaction between the student and course provider including course provider response and/or feedback within 24 hours of a student's inquiry or request, how communication and interaction promotes student involvement, and that the course measures learning and addresses comprehension of course content at regular intervals;
- b. Monitor student enrollment, participation, and course completion;
- c. Provide for in-person simulation of otic, transdermal, and topical medication administration routes;
- d. Be able to satisfactorily demonstrate that stated course hours (minimum of 6) are consistent with the actual course hours spent by the student to complete the course;
- e. Assure qualified instructors will be available to answer questions and provide students with necessary support during the course; and
- f. Require the student to complete a statement at the end of the course indicating they personally completed each module/session of instruction.
- g. To meet the requirements for competency in otic, transdermal, and topical medication administration, the delegating nurse may supervise the simulation of administration routes for the completion of the initial training for web-based courses only.

4. Prescribed Enteral Formula Administration Course Requirements. The Prescribed Enteral Formula Administration training must:

- a. Not be less than two hours in length;
- b. Include didactic, demonstration, and return demonstration elements; and
- c. Be limited to no more than 6 participants for each class;
- d. The Prescribed Enteral Formula Administration course curriculum must cover:
 - (I) Safe storage, handling, and disposal of prescribed enteral formulas;

(II) Understanding prescribed enteral formula administration instructions;

(III) Proper administration of prescribed enteral formulas;

(IV) Evidence-based practice guidelines for enteral medication administration;

(V) Symptoms of adverse reactions; and

(VI) Validation requirements.

e. The Prescribed Enteral Formula Administration course may not be provided via web-based training.

5. Medication Administration Course Training Requirements. The medication administration course trainer must require the home health aide or CNA to demonstrate, in person, the ability to:

a. Read and understand a prescription label;

b. Administer oral, rectal, topical and transdermal dosage forms, and topical ophthalmic, otic and nasal dosage forms;

c. Measure liquid medications, break scored tablets, and crush tablets in accordance with prescription directions;

d. Recognize the need to obtain clarification of an “as needed” prescription order;

e. Recognize a medication order which requires judgment or discretion, and to advise the patient or the patient’s health care provider of the inability to assist in the administration of such orders;

f. Complete a medication observation record;

g. Retrieve and store medication;

h. Recognize the general signs of adverse reactions to medications and report such reactions;

6. A home health aide or CNA who wishes to administer medication to home health agency patients must:

a. Complete a basic medication administration course, including validation by simulation for the otic, transdermal, and topical administration routes as part of the course. If the home health aide or CNA is not given the opportunity to obtain the required validation, they may obtain on-site validation from the delegating RN by either simulation or with an actual patient using the patient’s medication;

b. Complete a two-part, Medication Administration Competency Exam, AHCA Form 3110-XXXX, July 2022 within three calendar days of completing the basic medication administration course, achieving a score of at least 85% on the course content section of the exam and 100% on the medication administration record section of the exam. If the individual fails to obtain a passing score on the first attempt, they may be permitted by the course trainer to retake the exam. If the individual fails to obtain a passing score on the second attempt, they must retake the basic medication administration course prior to being permitted to take the exam again. If the individual fails to take the exam within three calendar days, they must take the course again in order to sit for the exam; and

c. Obtain validation pursuant to paragraph (3), prior to being permitted to assist in basic medication administration.

7. A home health aide or CNA who wishes to administer prescribed enteral formulas must:

a. Be authorized to provide basic medication administration, in accordance with s. 400.489, F.S.;

b. Complete a Prescribed Enteral Formula Administration course in accordance with this rule;

c. Complete a two-part, Prescribed Enteral Formula Administration Competency exam, AHCA Form 3110-XXXX, July 2022 within three calendar days of completing the Prescribed Enteral Formula Administration course, achieving a score of at least 85% on the course content section of the exam and 100% on the simulated return demonstration. If the individual fails to obtain a passing score on the first attempt, they may be permitted by the course trainer to retake the exam. If the individual fails to obtain a passing score on the second attempt, they must retake the Prescribed Enteral Formula Administration course prior to being permitted to take the exam again;

d. Obtain validation focused on prescribed enteral formula administration pursuant to paragraph (3), in addition to the basic medication administration training course and validation.

8. An RN licensed under chapter 464 or a physician licensed under chapter 458 or chapter 459 who conducts the Basic Medication Administration training course or Prescribed Enteral Formula Administration training course may obtain the exams by sending a request to HQAHomeHealth@ahca.myflorida.com.

(3) Validation and Revalidation Requirements.

(a) A home health aide or CNA must be assessed and validated as competent to administer medication by an

RN licensed under chapter 464 or a physician licensed under chapter 458 or chapter 459 after obtaining a passing score on the appropriate competency exam.

(b) Successful assessment and validation require that the home health aide or CNA demonstrate their capability to correctly administer medication in a safe and sanitary manner in an on-site patient-setting using the patient's prescribed medications, except for simulated routes, which include otic, transdermal, and topical administration routes.

(c) A home health aide or CNA who is validated for administration routes other than otic, transdermal, or topical routes, may obtain validation for these three routes via on-site validation by an RN licensed under chapter 464 or a physician licensed under chapter 458 or chapter 459 by either simulation or with an actual patient using the patient's medication.

(d) A home health aide or CNA who wishes to administer prescribed enteral formula medication must obtain a separate validation specific to prescribed enteral formula administration in addition to the validation required for the basic medication administration.

(e) The home health aide or CNA must achieve a score of 100% proficiency in the validation prior to being approved to provide basic medication administration or prescribed enteral formula administration.

(f) A home health aide or CNA must successfully complete the initial validation for primary non-simulated medication administration routes within 180 days of completing the medication administration course, including basic medication administration training and prescribed enteral formula administration course, if applicable.

(g) Validation for Basic Medication Administration includes a demonstration of the following proficiencies:

1. The ability to comprehend and follow medication instructions on a prescription label, physician's order, and properly complete a medication administration record form;

2. The ability to administer medication by oral, transdermal, ophthalmic, otic, rectal, inhaled, enteral, or topical administration routes;

3. The ability to obtain pertinent medication information, including the purpose of the medication, its common side effects, and symptoms of adverse reactions to the medication, either from the package insert that comes from the pharmacy, or other professionally recognized medication resource, and to maintain this information for easy access and future reference;

4. The ability to write legibly, convey accurate information, and communicate with home health agency staff and other health care providers through the applicant's writings in a manner that ensures the health, safety, and well-being of the patients;

5. The ability to comply with medication administration record-keeping requirements;

6. The ability to effectively communicate in a manner that permits health care providers and emergency responders to adequately and quickly respond to emergencies;

7. Knowledge of the proper storage and handling of medications;

8. Knowledge of proper disposal of expired or unused medications;

9. Knowledge of special requirements relating to storage and disposal of controlled medications;

10. Knowledge of requirements for obtaining authorizations for medication administration assistance and informed consent for medication administration assistance; and

11. Training on the correct positioning and use of any adaptive equipment or use of special techniques required for the proper administration of medication.

(h) Validation for Prescribed Enteral Formula Administration includes demonstration of the following proficiencies:

1. The ability to comprehend and follow prescribed enteral formula instructions on a physician's order and properly complete a medication administration record form;

2. The ability to administer prescribed enteral formula by the enteral administration route;

3. The ability to write legibly, convey accurate information, and comply with medication administration record-keeping requirements;

4. The ability to communicate in a manner that permits health care providers and emergency responders to adequately and quickly respond to emergencies;

5. Knowledge of the proper storage and handling of prescribed enteral formulas;

6. Adequate training on the correct positioning and use of any adaptive equipment or use of special techniques required for the proper administration of prescribed enteral formulas.

(i) Subsequent validations for additional routes may be completed by the home health aide or CNA following their initial validation(s). If the home health aide or CNA obtains a subsequent validation, they must ensure the RN licensed under chapter 464 or a physician licensed under chapter 458 or chapter 459 documents the subsequent validation(s) on the home health aide's or CNA's original validation certificate.

(4) To maintain the ability to administer medication, a home health aide or CNA must attend an annual in-service training course and be revalidated annually, subject to the following qualifications:

(a) Annual In-service Training:

1. Home health aides and CNAs that administer medications must attend a 2-hour annual in-service training course in basic medication administration, prior to the expiration of their current validation. The training must be conducted by a registered nurse licensed under chapter 464 or a physician licensed under chapter 458 or chapter 459. Upon successful completion of the basic medication administration annual in-service training course, the registered nurse or physician shall issue a Certificate of Completion for Basic Medication Administration Annual In-Service Training to the home health aide or CNA.

2. Home health aides and CNAs that administer prescribed enteral formulas must attend an annual in-service training course in Prescribed Enteral Formula Administration prior to their revalidation. This course is required in addition to the Basic Medication Administration annual in-service training course. Upon successful completion of the Prescribed Enteral Formula Administration annual in-service training, the RN or physician must issue a Certificate of Completion for Prescribed Enteral Formula Administration Annual In-Service Training to the home health aide or CNA.

(b) Annual Revalidation Requirements.

1. Effective and Expiration Dates:

a. Primary Routes.

(I) The effective date of a home health aide's or CNA's primary route validation is the date that the home health aide or CNA successfully completed the initial validation for that route.

(II) The expiration date of a home health aide's or CNA's primary route validation is one year from the effective date of the initial validation received for a primary route of medication administration.

b. All Other Routes, Except Otic, Transdermal, and Topical Routes.

(I) The effective date of a home health aide or CNA's non-primary route(s), except otic, transdermal, and topical routes, is the date of the most recent validation for that specific route, regardless of when the home health aide or CNA successfully completed the initial validation for that specific route.

(II) The expiration date for a home health aide or CNA's non-primary route(s), except otic, transdermal, and topical routes, is one year from the date of the most recent validation.

c. Otic, Transdermal, and Topical Routes.

(I) The effective date of a home health aide or CNA's otic, transdermal, and topical routes is the date the home health aide or CNA successfully completed the initial validation by simulation or with an actual patient.

(II) Otic, transdermal, and topical routes do not expire.

(III) A home health aide or CNA who is validated for otic, transdermal, or topical routes is not required to be revalidated for those three routes, unless the validation for the home health aide's or CNA's primary medication administration route expires.

2. If the home health aide or CNA's validation for the all administration routes other than the primary route expire, the home health aide or CNA is not required to complete the required courses in subparagraph 7. In this case, the home health aide or CNA may continue to administer medications or supervise the administration of medications for routes which the home health aide or CNA maintains a current validation.

3. If the home health aide or CNA's validation for the primary routes expires, the home health aide or CNA must complete the required courses in subparagraph 7. and be revalidated for the primary route and all other routes, regardless of whether the non-primary route validations have expired, prior to being permitted to continue

administering medications or supervising administration of medications.

4. Home health aides and CNAs must, at least annually, through demonstration, be assessed and revalidated as competent to:

a. Administer medication, not including prescribed enteral formula;

b. Administer prescribed enteral formulas, if previously validated for prescribed enteral formula administration. This revalidation is in addition to the required revalidation for Basic Medication Administration.

c. A home health aide or CNA must be revalidated annually within the 60 days preceding the expiration of their current validation.

d. Home health aides and CNAs who fail to acquire revalidation for the primary route of administration before the expiration of their validation for the primary route must retake the Basic Medication Administration Course and obtain current validation for their primary route within 180 days of completion of the Basic Medication Administration Course, prior to continuing to administer medication.

e. Home health aides and CNAs who fail to acquire revalidation for prescribed enteral formula administration before the expiration of their validation must retake the prescribed enteral formula administration course and successfully revalidate within 180 days of completion of the Prescribed Enteral Formula Administration Course, prior to continuing to administer prescribed enteral formulas.

f. Home health aides and CNAs must successfully complete revalidation for their primary non-simulated medication administration routes within 60 days of completion of the annual in-service training for Basic Medication Administration and Prescribed Enteral Formula Administration.

5. A home health aide or CNA may only administer medication through an administration route for which the home health aide or CNA holds a current, active validation.

6. When a patient is prescribed a medication requiring an administration route that the home health aide or CNA has not yet been validated or for which his or her validation has expired, the home health aide or CNA must obtain a validation for that specific administration route before administering the medication to the patient via that route.

(c) Temporary Validation.

1. When a patient or patient is prescribed a medication requiring an administration route for which the home health aide or CNA has not been revalidated, the home health aide or CNA may obtain a temporary revalidation for only that specific administration route and only that specific patient from a registered nurse licensed under chapter 464 or a physician licensed under chapter 458 or chapter 459, if:

a. The prescribed medication is necessary to ensure the health and safety of the patient or patient;

b. The home health aide or CNA or the delegating registered nurse attempts and is unable to contact a home health aide or CNA who is able to administer the medication at the appropriate dosage times and who is validated for the specific administrative route;

c. The home health aide or CNA obtains a validation in that administration route from a registered nurse licensed under chapter 464 or a physician licensed under chapter 458 or chapter 459 as soon as possible within 30 days of the date the temporary validation was signed by the medical professional;

d. The registered nurse licensed under chapter 464 or a physician licensed under chapter 458 or chapter 459 documents the validation utilizing a document with the nurse or physician's letterhead on it indicating:

(I) That the nurse or physician validated the home health aide or CNA;

(II) The date of validation;

(III) The route of administration validated;

(IV) The length of time the temporary validation is necessary in order to ensure the patient obtains the medication as prescribed and to provide time for the home health aide or CNA to either obtain a revalidation from a registered nurse licensed under chapter 464 or a physician licensed under chapter 458 or chapter 459 or for the delegating registered nurse to locate a home health aide or CNA who is validated in the appropriate procedure to administer the medication. Under no circumstances shall a temporary validation last longer than 30 days from the date of validation.

2. A Temporary Validation can only be obtained for the following routes:

a. Oral;

b. Enteral, except for prescribed enteral formulas;

c. Transdermal;

d. Ophthalmic;

e. Otic;

f. Rectal;

g. Inhaled; and

h. Topical.

3. If the patient is prescribed an enteral formula, the home health aide or CNA must obtain the required training and validation specific to prescribed enteral formula administration before administering prescribed enteral formula.

4. Once trained and validated on one nebulizer or intermittent positive pressure breathing machine, a home health aide or CNA is not required to train on subsequent machines of the same type to qualify as validated for nebulizers or intermittent positive pressure breathing machines.

5. Trained and validated home health aides and CNAs must maintain the original certificates indicating successful completion of training and validation. Employers of home health aides and CNAs must maintain a copy of the training certificate and proof of current validation of each home health aide and CNA providing medication administration.

6. A home health agency that offers medication administration services delegated by an RN to a home health aide or CNA is responsible for maintaining a record of the individuals's training certification and annual validation and for making such records available for AHCA review upon request.

(5) Training and Validation Documentation and Monitoring. Except as otherwise noted, certificates, or copies of certificates, of any training or validation required by this rule must be documented in the facility's personnel files. The documentation must include the following:

a. The title of the training program,

b. The subject matter of the training program,

c. The training program agenda,

d. The number of hours of the training program,

e. The trainee's name, dates of participation, and location of the training program,

f. The training provider's name, dated signature and credentials, and professional license number, if applicable.

g. Home health aides and CNAs shall not obtain or attempt to obtain a passing grade on either the training course exam or validation through fraud, deceit, false statements, or misrepresentation of material facts, whether such statements are made knowingly or negligently.

Rulemaking Authority 400.488, 400.489, 400.497 FS. Law Implemented 400.488, 400.489, 400.490, FS. History--New