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1	A bill to be entitled
2	An act relating to child protection and child welfare
3	services; amending s. 20.19, F.S.; requiring the
4	secretary of the department to appoint an Assistant
5	Secretary for Child Welfare; providing requirements
6	for such position; revising the duties, appointment,
7	and membership of community alliances; amending s.
8	39.001, F.S.; revising the purposes of ch. 39, F.S.;
9	providing for the provision of services for medically
10	complex children; conforming cross-references;
11	amending s. 39.01, F.S.; defining the terms "impending
12	danger", "medical neglect", "present danger", "safety
13	plan", and "sibling"; revising the definition of
14	"comprehensive assessment", "diligent efforts by a
15	parent", "preventive services", and "reunification
16	services"; deleting the term "district administrator";
17	conforming cross-references; creating s. 39.2015,
18	F.S.; requiring the Department of Children and
19	Families to conduct specified investigations using
20	critical incident rapid response teams; providing
21	requirements for such investigations; providing
22	requirements for the team; authorizing the team to
23	access specified information; requiring the
24	cooperation of specified agencies and organizations;
25	providing for reimbursement of team members; requiring
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26 a report of the investigation; requiring the secretary to develop specified quidelines for investigations and 27 28 provide training to team members; requiring the 29 secretary to appoint an advisory committee; requiring 30 a report from the advisory committee to the Secretary of Children and Families; requiring the secretary to 31 32 submit such report to the Governor and the 33 Legislature; amending s. 39.202, F.S.; authorizing 34 access to specified records in the event of the death 35 of a child which was reported to the department's 36 child abuse hotline; creating s. 39.2022, F.S.; 37 providing legislative intent; requiring the department to publish specified information on its website if the 38 39 death of a child is reported to the child abuse 40 hotline; prohibiting specified information from being 41 released; providing requirements for the release of 42 information in the child's records; prohibiting 43 release of information that identifies the person who reports an incident to the child abuse hotline; 44 45 amending 39.301, F.S.; authorizing the use of safety 46 plans; providing requirements for use of safety plans; 47 amending s. 39.303, F.S.; revising legislative intent; 48 providing requirements for a child protection team 49 that evaluates a report of medical neglect and assesses the health care needs of a medically complex 50

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51 child; creating s. 39.3068, F.S.; providing 52 requirements for an investigation of medical neglect; 53 amending s. 39.402, F.S.; requiring the department to make a reasonable effort to keep siblings together 54 55 when they are placed in out-of-home care under certain 56 circumstances; providing for sibling visitation under 57 certain circumstances; amending s. 39.501, F.S.; 58 requiring compliance with a safety plan to be 59 considered when deciding a petition for dependency; 60 amending s. 39.604, F.S.; requiring children age birth to 3 to attend for five days a week a licensed early 61 education or child care program in which they are 62 enrolled; requiring the inclusion of attendance at a 63 64 licensed early education or child care program in a child's safety plan; amending s. 39.701, F.S.; 65 66 requiring the court to consider contact among siblings 67 in judicial reviews; authorizing the court to remove 68 specified disabilities of nonage at judicial reviews; 69 amending s. 39.802, F.S.; requiring a petition for the 70 termination of parental rights to be signed under oath 71 stating the petitioner's good faith in filing the 72 petition; amending s. 383.402, F.S.; requiring the 73 review of all deaths of children which occur in the 74 state and are reported to the department's child abuse 75 hotline; revising the due date for a report; providing

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76 a directive to the Division of Law Revision and 77 Information; amending s. 402.40, F.S.; providing for a 78 specialization through the certification process; 79 creating s. 402.402, F.S.; providing definitions; 80 providing education requirements for child protection and child welfare personnel; creating s. 402.403, 81 82 F.S.; establishing a tuition exemption program for 83 child protective investigators and supervisors; 84 providing eligibility requirements; creating s. 85 402.404, F.S.; establishing a student loan forgiveness program for child protective investigators and 86 supervisors; providing eligibility requirements; 87 providing requirements for the program; authorizing 88 89 community-based care lead agencies to provide student 90 loan forgiveness to case managers employed a 91 community-based care lead agency or its subcontractor; 92 amending s. 409.165; enhancing provision of care to 93 medically complex children; amending s. 409.967; 94 revising standards for Medicaid managed care plan 95 accountability in regard to services for dependent 96 children; creating part V of ch. 409, F.S.; creating 97 s. 409.986, F.S.; providing legislative findings and 98 intent; providing child protection and child welfare 99 outcome goals; defining terms; creating s. 409.987, 100 F.S.; providing for the procurement of community-based

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101	care lead agencies; providing requirements for
102	contracting as a lead agency; creating s. 409.988,
103	F.S.; providing the duties of a community-based care
104	lead agency; providing licensure requirements for a
105	lead agency; creating s. 409.998; providing for
106	community based care oversight by community alliances;
107	authorizing the establishment of direct-support
108	organizations; creating s. 409.990, F.S.; providing
109	general funding provisions; providing for a matching
110	grant program and the maximum amount of funds that may
111	be awarded; requiring the department to develop and
112	implement a community-based care risk pool initiative;
113	providing requirements for the risk pool;
114	transferring, renumbering, and amending s. 409.16713,
115	F.S.; transferring provisions relating to the
116	allocation of funds for community-based lead care
117	agencies; conforming a cross-reference; creating s.
118	409.992, F.S.; providing requirements for community-
119	based care lead agency expenditures; creating s.
120	409.993, F.S.; providing findings; providing for lead
121	agency and subcontractor liability; providing
122	limitations on damages; transferring, renumbering, and
123	amending s. 409.1675, F.S.; transferring provisions
124	relating to receivership from community-based
125	providers to lead agencies; conforming cross-

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126 references and terminology; creating s. 409.996, F.S.; 127 providing duties of the department relating to 128 community-based care and lead agencies; creating s. 129 409.997, F.S.; providing goals for the department and 130 specified entities; requiring the department to 131 maintain a comprehensive, results-oriented 132 accountability system; providing requirements; 133 requiring the department to establish a technical 134 advisory panel; providing requirements for the panel; 135 requiring the department to make the results of the 136 system public; requiring a report to the Governor and 137 the Legislature; creating s. 827.10, F.S.; defining 138 terms; establishing the criminal offense of unlawful 139 abandonment of a child; providing criminal penalties; 140 providing exceptions; creating s. 1004.615, F.S.; 141 establishing the Florida Institute for Child Welfare; 142 providing the purpose of the institute; requiring the 143 institute to contract and work with specified 144 entities; providing duties and responsibilities of the 145 institute; providing for the administration of the 146 institute; requiring a report to the Governor and the 147 Legislature by a specified date; providing for a task 148 force and report; requiring the task force to 149 establish workgroups on specified topics; amending s. 150 1009.25, F.S.; exempting tuition and fees for

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YEAR PCB HFS 14-03a ORIGINAL 151 specified child protective investigators and child 152 protective investigation supervisors; amending s. 153 39.01, F.S.; conforming a cross-reference; providing 154 an effective date. 155 156 Be It Enacted by the Legislature of the State of Florida: 157 158 Section 1. Present subsections (3) through (5) of section 159 20.19, Florida Statutes, are redesignated as subsections (4) 160 through (6), respectively, a new subsection (3) is added to that section, and subsections (2) and (4) of that section are 161 162 amended, to read: 163 Department of Children and Families.-There is 20.19 164 created a Department of Children and Families. 165 (2)SECRETARY OF CHILDREN AND FAMILIES; DEPUTY SECRETARY.-166 (a) The head of the department is the Secretary of 167 Children and Families. The secretary is appointed by the 168 Governor, subject to confirmation by the Senate. The secretary 169 serves at the pleasure of the Governor. 170 The secretary shall appoint a deputy secretary who (b) 171 shall act in the absence of the secretary. The deputy secretary is directly responsible to the secretary, performs such duties 172 173 as are assigned by the secretary, and serves at the pleasure of 174 the secretary. 175 (3) ASSISTANT SECRETARIES.-Page 7 of 115 PCB HFS 14-03a

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176 (a) Child Welfare
177 1. The secretary shall appoint an Assistant Secretary for
178 Child Welfare to lead the department in carrying out its duties
179 and responsibilities for child protection and child welfare. The
180 individual appointed to this position shall serve at the
181 pleasure of the secretary.
182 2. The assistant secretary must have at least 7 years of
183 experience working in organizations delivering child protective
184 or child welfare services.
185 (b) Substance Abuse and Mental Health
186 <del>(c)</del> 1. The secretary shall appoint an Assistant Secretary
187 for Substance Abuse and Mental Health. The assistant secretary
188 shall serve at the pleasure of the secretary and must have
189 expertise in both areas of responsibility.
190 2. The secretary shall appoint a Director for Substance
191 Abuse and Mental Health who has the requisite expertise and
192 experience to head the state's Substance Abuse and Mental Health
193 Program Office.
194 <u>(5)</u> (4) COMMUNITY ALLIANCES.—
195 (a) The department shall, in consultation with local
196 communities, establish a community alliance or similar group of
197 the stakeholders, community leaders, client representatives and
198 funders of human services in each county to provide a focal
199 point for community participation and governance of community-
200 based services. An alliance may cover more than one county when
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201 such arrangement is determined to provide for more effective 202 representation. The community alliance shall represent the 203 diversity of the community. 204 The duties of the community alliance include, but are (b) 205 not limited to: 206 1. Providing independent, community-focused, oversight of 207 child protection and child welfare services and the local system of community-based care, as described in s. 409.998. 208 209 2.1. Joint planning for resource utilization in the community, including resources appropriated to the department 210 211 and any funds that local funding sources choose to provide. 212 3.2. Needs assessment and establishment of community 213 priorities for service delivery. 214 4.3. Determining community outcome goals to supplement 215 state-required outcomes. 216 5.4. Serving as a catalyst for community resource 217 development. 218 6.5. Providing for community education and advocacy on issues related to delivery of services. 219 7.6. Promoting prevention and early intervention services. 220 221 The department shall ensure, to the greatest extent (C) possible, that the formation of each community alliance builds 222 223 on the strengths of the existing community human services 224 infrastructure. 225 (d) The initial membership of the community alliance in a Page 9 of 115 PCB HFS 14-03a

PCB HFS 14-03a ORIGINAL YEAR 226 county shall be composed of the following, who shall be appointed by the entities they represent: 227 228 1. A representative from the department, who shall serve 229 as an ex officio-member. 230 1.2. A representative from county government. 231 2.3. A representative from the school district. 232 3.4. A representative from the county United Way. 233 4.5. A representative from the county sheriff's office, unless the county sheriff's office is providing child protective 234 235 services, in which case the representative shall serve as an ex 236 officio member. 237 5.6. A representative from the circuit court corresponding 238 to the county. 239 6.7. A representative from the county children's board, if one exists. 240 7. An advocate for persons receiving child protection and 241 242 child welfare services chosen by the secretary. 243 8. A representative from the community-based care lead 244 agency, who shall serve as an ex-officio member. 245 At any time after the initial meeting of the community (e) 246 alliance, the community alliance shall adopt bylaws and may 247 increase the membership of the alliance to include the state 248 attorney for the judicial circuit in which the community 249 alliance is located, or his or her designee, the public defender 250 for the judicial circuit in which the community alliance is Page 10 of 115 PCB HFS 14-03a

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251 located, or his or her designee, and other individuals and 252 organizations who represent funding organizations, are community 253 leaders, have knowledge of community-based service issues, or 254 otherwise represent perspectives that will enable them to 255 accomplish the duties listed in paragraph (b), if, in the 256 judgment of the alliance, such change is necessary to adequately 257 represent the diversity of the population within the community 258 alliance service circuits.

(f) A member of the community alliance, other than a member specified in paragraph (d), may not receive payment for contractual services from the department or a community-based care lead agency.

(g) Members of the community alliances shall serve without compensation, but are entitled to receive reimbursement for per diem and travel expenses, as provided in s. 112.061. Payment may also be authorized for preapproved child care expenses or lost wages for members who are consumers of the department's services and for preapproved child care expenses for other members who demonstrate hardship.

(h) Members of a community alliance are subject to the
provisions of part III of chapter 112, the Code of Ethics for
Public Officers and Employees.

(i) Actions taken by a community alliance must be
consistent with department policy and state and federal laws,
rules, and regulations.

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(j) Alliance members shall annually submit a disclosure statement of services interests to the department's inspector general. Any member who has an interest in a matter under consideration by the alliance must abstain from voting on that matter.

281 All alliance meetings are open to the public pursuant (k) 282 to s. 286.011 and the public records provision of s. 119.07(1). 283 Section 2. Paragraphs (o) and (p) are added to subsection (1) of section 39.001, Florida Statutes, and paragraphs (b), 284 285 (c), (g), and (k) of that subsection is amended, present 286 paragraphs (f) through (h) of subsection (3) of that section are 287 redesignated as paragraphs (g) through (i), respectively, and a 288 new paragraph (f) is added to that subsection, and present 289 subsections (4) through (11) of that section are redesignated as 290 subsections (5) through (12), respectively, a new subsection (4) is added to that section, and paragraph (c) of present 291 292 subsection (8) and paragraph (b) of present subsection (10) of 293 that section are amended, to read:

294 39.001 Purposes and intent; personnel standards and 295 screening.-

(1) PURPOSES OF CHAPTER.—The purposes of this chapter are:
 (b) To recognize that most families desire to be competent
 caregivers and providers for their children and that children
 achieve their greatest potential when families are able to
 support and nurture the growth and development of their

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301 children. Therefore, the Legislature finds that policies and 302 procedures that provide for prevention and intervention through 303 the department's child protection system should be based on the 304 following principles:

305 1. The health and safety of the children served shall be 306 of paramount concern.

307 2. The prevention and intervention should engage families308 in constructive, supportive, and nonadversarial relationships.

309 3. The prevention and intervention should intrude as 310 little as possible into the life of the family, be focused on 311 clearly defined objectives, and take the most parsimonious path 312 to remedy a family's problems, keeping the safety of the child 313 or children as the paramount concern.

314 4. The prevention and intervention should be based upon
315 outcome evaluation results that demonstrate success in
316 protecting children and supporting families.

317 (c) To provide a child protection system that reflects a
318 partnership between the department, other agencies, <u>the courts</u>,
319 <u>law enforcement</u>, service providers, and local communities.

(g) To ensure that the parent or legal custodian from whose custody the child has been taken assists the department to the fullest extent possible in locating relatives suitable to serve as caregivers for the child and providing all medical and educational information, or consent for access thereto, needed to help the child.

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326	(k) To make every possible effort, <u>if <del>when</del> two or more</u>
327	children who are in the care or under the supervision of the
328	department are siblings, to place the siblings in the same home;
329	and in the event of permanent placement of the siblings, to
330	place them in the same adoptive home or, if the siblings are
331	separated while under the care or supervision of the department
332	or in a permanent placement, to keep them in contact with each
333	other.
334	(o) To preserve and strengthen families who are caring for
335	medically complex children.
336	(p) To provide protective investigations that are
337	conducted by trained persons in a complete and fair manner, are
338	promptly concluded, and consider the above purposes and general
339	protections provided in law.
340	(3) GENERAL PROTECTIONS FOR CHILDRENIt is a purpose of
341	the Legislature that the children of this state be provided with
342	the following protections:
343	(f) Access to sufficient home and community-based support
344	for medically complex children to allow them to remain in the
345	least restrictive and most nurturing environment, which includes
346	sufficient home and community-based services in an amount and
347	scope comparable to those the child would receive in out-of-home
348	care placement.
349	(4) SERVICES FOR MEDICALLY COMPLEX CHILDRENThe
350	department shall maintain a program of family-centered services
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351	and supports for medically complex children. The purpose of the
352	program is to prevent abuse and neglect of medically complex
353	children while enhancing the capacity of families to provide for
354	their children's needs. Program services must include outreach,
355	early intervention, and provision of home and community-based
356	services such as care coordination, respite care, and direct
357	home care. The department shall work with the Agency for Health
358	Care Administration and the Department of Health to provide
359	needed services.
360	(9)-(8) OFFICE OF ADOPTION AND CHILD PROTECTION
361	(c) The office is authorized and directed to:
362	1. Oversee the preparation and implementation of the state
363	plan established under subsection $(10)$ $(9)$ and revise and update
364	the state plan as necessary.
365	2. Provide for or make available continuing professional
366	education and training in the prevention of child abuse and
367	neglect.
368	3. Work to secure funding in the form of appropriations,
369	gifts, and grants from the state, the Federal Government, and
370	other public and private sources in order to ensure that
371	sufficient funds are available for the promotion of adoption,
372	support of adoptive families, and child abuse prevention
373	efforts.
374	4. Make recommendations pertaining to agreements or
375	contracts for the establishment and development of:
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a. Programs and services for the promotion of adoption,
support of adoptive families, and prevention of child abuse and
neglect.

379 b. Training programs for the prevention of child abuse and 380 neglect.

381 c. Multidisciplinary and discipline-specific training
 382 programs for professionals with responsibilities affecting
 383 children, young adults, and families.

384

d. Efforts to promote adoption.

385

e. Postadoptive services to support adoptive families.

386 Monitor, evaluate, and review the development and 5. 387 quality of local and statewide services and programs for the 388 promotion of adoption, support of adoptive families, and 389 prevention of child abuse and neglect and shall publish and 390 distribute an annual report of its findings on or before January 391 1 of each year to the Governor, the Speaker of the House of 392 Representatives, the President of the Senate, the head of each 393 state agency affected by the report, and the appropriate 394 substantive committees of the Legislature. The report shall 395 include:

396

a. A summary of the activities of the office.

b. A summary of the adoption data collected and reported
to the federal Adoption and Foster Care Analysis and Reporting
System (AFCARS) and the federal Administration for Children and
Families.

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401 c. A summary of the child abuse prevention data collected
402 and reported to the National Child Abuse and Neglect Data System
403 (NCANDS) and the federal Administration for Children and
404 Families.

405 d. A summary detailing the timeliness of the adoption
406 process for children adopted from within the child welfare
407 system.

e. Recommendations, by state agency, for the further
development and improvement of services and programs for the
promotion of adoption, support of adoptive families, and
prevention of child abuse and neglect.

f. Budget requests, adoption promotion and support needs,and child abuse prevention program needs by state agency.

414 6. Work with the direct-support organization established415 under s. 39.0011 to receive financial assistance.

416

(11) (10) FUNDING AND SUBSEQUENT PLANS.-

417 (b) The office and the other agencies and organizations 418 listed in paragraph (10)(a) (9)(a) shall readdress the state 419 plan and make necessary revisions every 5 years, at a minimum. 420 Such revisions shall be submitted to the Speaker of the House of Representatives and the President of the Senate no later than 421 June 30 of each year divisible by 5. At least biennially, the 422 423 office shall review the state plan and make any necessary 424 revisions based on changing needs and program evaluation 425 results. An annual progress report shall be submitted to update Page 17 of 115

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426 the state plan in the years between the 5-year intervals. In 427 order to avoid duplication of effort, these required plans may 428 be made a part of or merged with other plans required by either 429 the state or Federal Government, so long as the portions of the 430 other state or Federal Government plan that constitute the state 431 plan for the promotion of adoption, support of adoptive 432 families, and prevention of child abuse, abandonment, and 433 neglect are clearly identified as such and are provided to the 434 Speaker of the House of Representatives and the President of the Senate as required above. 435

436 Section 3. Present subsections (42) through (76) of section 437 39.01, Florida Statutes, are redesignated as subsections (43) 438 through (79), respectively, new subsections (33), (42), (67) and 439 (71) are added to that section, and subsections (10), (22), and 440 (33) are amended, to read:

441 39.01 Definitions.—When used in this chapter, unless the 442 context otherwise requires:

(10) "Caregiver" means the parent, legal custodian, permanent guardian, adult household member, or other person responsible for a child's welfare as defined in subsection (48) (47).

(18) "Comprehensive assessment" or "assessment" means the gathering of information for the evaluation of a child's and caregiver's physical, psychiatric, psychological or mental health, developmental delays or challenges, educational,

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451 vocational, and social condition and family environment as they 452 relate to the child's and caregiver's need for rehabilitative 453 and treatment services, including substance abuse treatment 454 services, mental health services, developmental services, 455 literacy services, medical services, family services, and other 456 specialized services, as appropriate.

(22) "Diligent efforts by a parent" means a course of conduct which results in <u>a meaningful change in the behavior of</u> <u>a parent which</u> <del>a reduction</del> <u>reduces</u> <del>in</del> risk to the child in the child's home <u>to the extent</u> that <del>would allow</del> the child <u>may</u> <del>to</del> be safely placed permanently back in the home as set forth in the case plan.

463 (27) "District administrator" means the chief operating 464 officer of each service district of the department as defined in 465 s. 20.19(5) and, where appropriate, includes any district 466 administrator whose service district falls within the boundaries 467 of a judicial circuit.

468 <u>(33) "Impending danger" means a situation in which family</u> 469 <u>behaviors, attitudes, motives, emotions or situations pose a</u> 470 <u>threat which may not be currently active but can be anticipated</u> 471 <u>to become active and to have severe effects on a child at any</u> 472 <u>time.</u>

473 <u>(34)(33)</u> "Institutional child abuse or neglect" means 474 situations of known or suspected child abuse or neglect in which 475 the person allegedly perpetrating the child abuse or neglect is Page 19 of 115

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476	an employee of a private school, public or private day care
477	center, residential home, institution, facility, or agency or
478	any other person at such institution responsible for the child's
479	care as defined in subsection <u>(48)</u> <del>(47)</del> .
480	(43) "Medical neglect" means the failure to provide or the
481	failure to allow needed care as recommended by a health care
482	practitioner for a physical injury, illness, medical condition,
483	or impairment, or the failure to seek timely and appropriate
484	medical care for a serious health problem that a reasonable
485	person would have recognized as requiring professional medical
486	attention. Medical neglect does not occur if the parent or legal
487	custodian of the child has made reasonable attempts to obtain
488	necessary health care services or the immediate health condition
489	giving rise to the allegation of neglect is a known and expected
490	complication of the child's diagnosis or treatment and:
491	(a) The recommended care offers limited net benefit to the
492	child and the morbidity or other side effects of the treatment
493	may be considered to be greater than the anticipated benefit; or
494	(b) The parent received conflicting medical recommendations
495	for treatment from multiple practitioners and did not follow all
496	recommendations.
497	(59) "Present danger" means a significant and clearly
498	observable family condition that is occurring at the current
499	moment and is already endangering or threatening to endanger the
500	child. Present danger threats are conspicuous and require an
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# 501 <u>immediate protective action be taken to ensure the child's</u> 502 safety.

503 (60) (59) "Preventive services" means social services and other supportive and rehabilitative services provided to the 504 505 parent or legal custodian of the child and to the child for the 506 purpose of averting the removal of the child from the home or 507 disruption of a family which will or could result in the 508 placement of a child in foster care. Social services and other 509 supportive and rehabilitative services shall promote the child's 510 developmental needs and need for physical, mental, and emotional 511 health and a safe, stable, living environment, shall promote 512 family autonomy, and shall strengthen family life, whenever 513 possible.

514 (66) (65) "Reunification services" means social services 515 and other supportive and rehabilitative services provided to the 516 parent of the child, to the child, and, where appropriate, to 517 the relative placement, nonrelative placement, or foster parents 518 of the child, for the purpose of enabling a child who has been 519 placed in out-of-home care to safely return to his or her parent 520 at the earliest possible time. The health and safety of the 521 child shall be the paramount goal of social services and other supportive and rehabilitative services. The services shall 522 523 promote the child's need for physical, developmental, mental, 524 and emotional health and a safe, stable, living environment, 525 shall promote family autonomy, and shall strengthen family life, Page 21 of 115

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526	whenever possible.		
527	-	means a plan created to contr	ol present
528		ng the least intrusive means a	
529	to protect a child when	a parent, caregiver, or legal	custodian
530	is unavailable, unwillir	ng, or unable to do so.	
531	(73) "Sibling" mea	ans:	
532	(a) A child who sh	hares a birth parent or legal	parent with
533	one or more other child	ren; or	
534	(b) A child who ha	as lived together in a family	with one or
535	more other children whom	m he or she identifies as sibl	ings.
536	5 Section 4. Section	39.2015, Florida Statutes, is	created to
537	read:		
538	39.2015 Critical i	incident rapid response team	-
539	) (1) The department	t shall conduct an immediate	
540	investigation of deaths	or other serious incidents in	volving
541	children using critical	incident rapid response teams	as
542	provided in subsection	(2). The purpose of such inves	tigation is
543	to identify root causes	and rapidly determine the nee	d to change
544	policies and practices a	related to child protection an	d child
545	welfare.		
546	(2) An immediate of	onsite investigation conducted	by a
547	critical incident rapid	response team is required for	all child
548	deaths reported to the o	department if the child or ano	ther child
549	<u>in his or her family was</u>	s the subject of a verified re	port of
550	suspected abuse or negle	ect in the previous 12 months.	The
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551	secretary may direct an immediate investigation for other cases
552	involving serious injury to a child.
553	(3) Each investigation shall be conducted by a team of at
554	least five professionals with expertise in child protection,
555	child welfare, and organizational management. The team may be
556	selected from employees of the department, community-based care
557	lead agencies, other provider organizations, faculty from the
558	institute consisting of public and private universities offering
559	degrees in social work established pursuant to s. 1004.615, or
560	any other persons with the required expertise. The majority of
561	the team must reside in judicial circuits outside the location
562	of the incident. The secretary shall appoint a team leader for
563	each group assigned to an investigation.
564	(4) An investigation shall be initiated as soon as
565	possible, but not later than 2 business days after the case is
566	reported to the department. A preliminary report on each case
567	shall be provided to the secretary no later than 30 days after
568	the investigation begins.
569	(5) Each member of the team is authorized to access all
570	information in the case file.
571	(6) All employees of the department or other state
572	agencies and all personnel from contracted provider
573	organizations are required to cooperate with the investigation
574	by participating in interviews and timely responding to any
575	requests for information.
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576	(7) The secretary shall develop cooperative agreements
577	with other entities and organizations as necessary to facilitate
578	the work of the team.
579	(8) The members of the team may be reimbursed by the
580	department for per diem, mileage, and other reasonable expenses
581	as provided in s. 112.061. The department may also reimburse the
582	team member's employer for the associated salary and benefits
583	during the time the team member is fulfilling the duties
584	required under this section.
585	(9) Upon completion of the investigation, a final report
586	shall be made available to community-based care lead agencies,
587	to other organizations involved in the child welfare system, and
588	to the public through the department's website.
589	(10) The secretary, in conjunction with the institute
590	established pursuant to s. 1004.615, shall develop guidelines
591	for investigations conducted by critical incident rapid response
592	teams and provide training to team members. Such guidelines must
593	direct the teams in the conduct of a root-cause analysis that
594	identifies, classifies, and attributes responsibility for both
595	direct and latent causes for the death or other incident,
596	including organizational factors, preconditions, and specific
597	acts or omissions resulting from either error or a violation of
598	procedures.
599	(11) The secretary shall appoint an advisory committee
600	made up of experts in child protection and child welfare to make
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601	an independent review of investigative reports from the critical	
602	incident rapid response teams and make recommendations to	
603	improve policies and practices related to child protection and	
604	child welfare services. By October 1 of each year, the advisory	
605	committee shall make an annual report to the secretary,	
606	including findings and recommendations. The secretary shall	
607	submit the report to the Governor, the President of the Senate,	
608	and the Speaker of the House of Representatives.	
609	Section 5. Section 39.2022, Florida Statutes, is created to	
610	read:	
611	39.2022 Public disclosure of child deaths reported to the	
612	child abuse hotline	
613	(1) It is the intent of the Legislature to provide prompt	
614	disclosure of the basic facts of all deaths of children from	
615	birth through 18 years of age which occur in this state and	
616	which are reported to the department's child abuse hotline.	
617	Disclosure shall be posted on the department's public website.	
618	This section does not limit the public access to records under	
619	any other provision of law.	
620	(2) If a child death is reported to the child abuse	
621	hotline, the department shall post on its website all of the	
622	following:	
623	(a) Age, race, and gender of the child.	
624	(b) Date of the child's death.	
625	(c) Allegations of the cause of death or the preliminary	
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626 cause of death, until verified, at which time the verified cause 627 of death will also be posted. 628 County and placement of the child at the time of the (d) 629 incident leading to the child's death, if applicable. 630 Name of the community-based care lead agency, case (e) 631 management agency, or out-of-home licensing agency involved with 632 the child, family, or licensed caregiver, if applicable. 633 Whether the child has been the subject of any prior (f) 634 verified reports to the department's child abuse hotline. Section 6. Paragraph (a) of subsection (9) of section 635 636 39.301, Florida Statutes, is amended to read: 637 39.301 Initiation of protective investigations.-638 (9) (a) For each report received from the central abuse 639 hotline and accepted for investigation, the department or the 640 sheriff providing child protective investigative services under 641 s. 39.3065, shall perform the following child protective 642 investigation activities to determine child safety: Conduct a review of all relevant, available information 643 1. 644 specific to the child and family and alleged maltreatment; 645 family child welfare history; local, state, and federal criminal 646 records checks; and requests for law enforcement assistance provided by the abuse hotline. Based on a review of available 647 648 information, including the allegations in the current report, a 649 determination shall be made as to whether immediate consultation 650 should occur with law enforcement, the child protection team, a Page 26 of 115

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domestic violence shelter or advocate, or a substance abuse or mental health professional. Such consultations should include discussion as to whether a joint response is necessary and feasible. A determination shall be made as to whether the person making the report should be contacted before the face-to-face interviews with the child and family members.

657 2. Conduct face-to-face interviews with the child; other
658 siblings, if any; and the parents, legal custodians, or
659 caregivers.

3. Assess the child's residence, including a determination of the composition of the family and household, including the name, address, date of birth, social security number, sex, and race of each child named in the report; any siblings or other children in the same household or in the care of the same adults; the parents, legal custodians, or caregivers; and any other adults in the same household.

667 Determine whether there is any indication that any 4. 668 child in the family or household has been abused, abandoned, or 669 neglected; the nature and extent of present or prior injuries, 670 abuse, or neglect, and any evidence thereof; and a determination 671 as to the person or persons apparently responsible for the abuse, abandonment, or neglect, including the name, address, 672 673 date of birth, social security number, sex, and race of each 674 such person.

675

5. Complete assessment of immediate child safety for each Page 27 of 115

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676 child based on available records, interviews, and observations 677 with all persons named in subparagraph 2. and appropriate 678 collateral contacts, which may include other professionals. The 679 department's child protection investigators are hereby 680 designated a criminal justice agency for the purpose of 681 accessing criminal justice information to be used for enforcing 682 this state's laws concerning the crimes of child abuse, abandonment, and neglect. This information shall be used solely 683 for purposes supporting the detection, apprehension, 684 prosecution, pretrial release, posttrial release, or 685 rehabilitation of criminal offenders or persons accused of the 686 687 crimes of child abuse, abandonment, or neglect and may not be 688 further disseminated or used for any other purpose. 689 6. Document the present and impending dangers to each

690 child based on the identification of inadequate protective 691 capacity through utilization of a standardized safety assessment 692 instrument. If present or impending danger is identified, the 693 child protective investigator must implement a safety plan that 694 is specific, sufficient, feasible, and sustainable in response 695 to the realities of the present or impending danger. A safety plan may be exclusively an in-home plan, an out of home plan, or 696 a combination of both. A safety plan may not rely on promissory 697 698 commitments by the parent, caregiver, or legal custodian who is 699 currently not able to protect the child or on services that will 700 not result in safety. A safety plan may not be implemented if

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for any reason the parents, guardian, or legal custodian lacks 701 702 the capacity or ability to comply, or if a plan is not able to 703 be developed that is specific, sufficient, feasible, and 704 sustainable. The plan must include, at a minimum, the specific 705 tasks or services, their frequency and duration, the persons 706 responsible for each, and how implementation will be monitored, 707 as well as parental responsibility for financial support of the child and for any services contained in the plan. The plan shall 708 provide that individuals from outside the home shall observe the 709 710 children for some period of time every day, which may be 711 fulfilled through methods including, but not limited to, daily 712 attendance at school or child care. A safety plan shall remain 713 in effect as long as a parent or the parents, guardian, or legal 714 custodian does not have the protective capacity necessary to 715 protect the child from identified danger threats. The plan must 716 be signed by all parties as an acknowledgement that they are in 717 agreement with the plan, though signing the plan does not 718 constitute an admission to any allegation of abuse, abandonment, 719 or neglect and does not constitute consent to a finding of 720 dependency or termination of parental rights. The child 721 protective investigator shall transfer the case to the community 722 based care lead agency for on-going safety management and on-723 going services prior to closure of the investigation. 724 (a) If present danger is identified, the child protective 725 investigator shall create and implement the plan before leaving Page 29 of 115

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726 the home or the location where there is present danger. 727 (b) Upon completion of the immediate safety assessment, the 728 department shall determine the additional activities necessary 729 to assess impending dangers, if any, and close the 730 investigation. If impending danger is identified, the child 731 protective investigator shall create and implement a safety plan 732 as soon as necessary to protect the safety of the child. He or 733 she may modify the plan if he or she identifies additional 734 impending danger. 735 If the department or its agent determines that a (14) (a) 736 child requires immediate or long-term protection through: 737 1. medical or other health care; or 738 2. homemaker care, day care, protective supervision, or 739 other services to stabilize the home environment, including 740 intensive family preservation services through the Intensive 741 Crisis Counseling Program, 742 743 such services shall first be offered for voluntary acceptance 744 unless: 745 1. There are high-risk factors that may impact the ability 746 of the parents or legal custodians to exercise judgment. Such 747 factors may include the parents' or legal custodians' young age 748 or history of substance abuse, mental illness, or domestic 749 violence; or 750 2. There is a high likelihood of lack of compliance with Page 30 of 115 PCB HFS 14-03a

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# 751 voluntary services, and such noncompliance would result in the 752 child being unsafe.

753 The parents or legal custodians shall be informed of (b) 754 the right to refuse services, as well as the responsibility of 755 the department to protect the child regardless of the acceptance 756 or refusal of services. If the services are refused, a 757 collateral contact shall include a relative, if the protective 758 investigator has knowledge of and the ability to contact a 759 relative. If the services are refused and the department deems 760 that the child's need for protection <del>so</del> requires services, the 761 department shall take the child into protective custody or 762 petition the court as provided in this chapter. At any time 763 after the commencement of a protective investigation, a relative 764 may submit in writing to the protective investigator or case 765 manager a request to receive notification of all proceedings and 766 hearings in accordance with s. 39.502. The request shall include 767 the relative's name, address, and phone number and the 768 relative's relationship to the child. The protective 769 investigator or case manager shall forward such request to the 770 attorney for the department. The failure to provide notice to 771 either a relative who requests it pursuant to this subsection or 772 to a relative who is providing out-of-home care for a child may 773 not result in any previous action of the court at any stage or 774 proceeding in dependency or termination of parental rights under 775 any part of this chapter being set aside, reversed, modified, or

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776 in any way changed absent a finding by the court that a change 777 is required in the child's best interests.

(c) The department, in consultation with the judiciary,shall adopt by rule:

780 1. Criteria that are factors requiring that the department 781 take the child into custody, petition the court as provided in 782 this chapter, or, if the child is not taken into custody or a 783 petition is not filed with the court, conduct an administrative 784 review. Such factors must include, but are not limited to, noncompliance with a safety plan or the case plan developed by 785 786 the department, or its agent, and the family under this chapter, 787 and prior abuse reports with findings that involve the child, a 788 sibling, or caregiver.

789 2. Requirements that if after an administrative review the 790 department determines not to take the child into custody or 791 petition the court, the department shall document the reason for 792 its decision in writing and include it in the investigative 793 file. For all cases that were accepted by the local law 794 enforcement agency for criminal investigation pursuant to 795 subsection (2), the department must include in the file written 796 documentation that the administrative review included input from 797 law enforcement. In addition, for all cases that must be 798 referred to child protection teams pursuant to s. 39.303(2) and 799 (3), the file must include written documentation that the 800 administrative review included the results of the team's

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evaluation. Factors that must be included in the development of

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802 the rule include noncompliance with the case plan developed by 803 the department, or its agent, and the family under this chapter 804 and prior abuse reports with findings that involve the child or 805 caregiver. 806 Section 7. Section 39.303, Florida Statutes, is amended to 807 read: 808 39.303 Child protection teams; services; eligible cases.-809 The Children's Medical Services Program in the Department of Health shall develop, maintain, and coordinate the services of 810 811 one or more multidisciplinary child protection teams in each of 812 the service districts of the Department of Children and Family 813 Services. Such teams may be composed of appropriate 814 representatives of school districts and appropriate health, 815 mental health, social service, legal service, and law 816 enforcement agencies. The Legislature finds that optimal 817 coordination of child protection teams and sexual abuse 818 treatment programs requires collaboration between The Department 819 of Health and the Department of Children and Families Family 820 Services. The two departments shall maintain an interagency agreement that establishes protocols for oversight and 821 822 operations of child protection teams and sexual abuse treatment 823 programs. The State Surgeon General and the Deputy Secretary for 824 Children's Medical Services, in consultation with the Secretary 825 of Children and Family Services, shall maintain the

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responsibility for the screening, employment, and, if necessary, the termination of child protection team medical directors, at headquarters and in the 15 districts. Child protection team medical directors shall be responsible for oversight of the teams in the districts.

831 The Department of Health shall use utilize and convene (1)832 the teams to supplement the assessment and protective 833 supervision activities of the family safety and preservation 834 program of the Department of Children and Families Family Services. Nothing in This section does not shall be construed to 835 836 remove or reduce the duty and responsibility of any person to 837 report pursuant to this chapter all suspected or actual cases of 838 child abuse, abandonment, or neglect or sexual abuse of a child. 839 The role of the teams shall be to support activities of the 840 program and to provide services deemed by the teams to be 841 necessary and appropriate to abused, abandoned, and neglected 842 children upon referral. The specialized diagnostic assessment, 843 evaluation, coordination, consultation, and other supportive 844 services that a child protection team shall be capable of 845 providing include, but are not limited to, the following:

(a) Medical diagnosis and evaluation services, including
provision or interpretation of X rays and laboratory tests, and
related services, as needed, and documentation of <u>related</u>
findings <del>relative thereto</del>.

850

(b) Telephone consultation services in emergencies and in Page 34 of 115

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851 other situations.

(c) Medical evaluation related to abuse, abandonment, or
neglect, as defined by policy or rule of the Department of
Health.

(d) Such psychological and psychiatric diagnosis and evaluation services for the child or the child's parent or parents, legal custodian or custodians, or other caregivers, or any other individual involved in a child abuse, abandonment, or neglect case, as the team may determine to be needed.

860 (e) Expert medical, psychological, and related861 professional testimony in court cases.

862 Case staffings to develop treatment plans for children (f) 863 whose cases have been referred to the team. A child protection 864 team may provide consultation with respect to a child who is 865 alleged or is shown to be abused, abandoned, or neglected, which 866 consultation shall be provided at the request of a 867 representative of the family safety and preservation program or 868 at the request of any other professional involved with a child 869 or the child's parent or parents, legal custodian or custodians, or other caregivers. In every such child protection team case 870 staffing, consultation, or staff activity involving a child, a 871 872 family safety and preservation program representative shall 873 attend and participate.

(g) Case service coordination and assistance, including
the location of services available from other public and private

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876 agencies in the community.

877 Such training services for program and other employees (h) 878 of the Department of Children and Families Family Services, 879 employees of the Department of Health, and other medical 880 professionals as is deemed appropriate to enable them to develop 881 and maintain their professional skills and abilities in handling 882 child abuse, abandonment, and neglect cases.

883 (i) Educational and community awareness campaigns on child abuse, abandonment, and neglect in an effort to enable citizens 884 more successfully to prevent, identify, and treat child abuse, 885 886 abandonment, and neglect in the community.

887 Child protection team assessments that include, as (i) 888 appropriate, medical evaluations, medical consultations, family 889 psychosocial interviews, specialized clinical interviews, or 890 forensic interviews.

892 All medical personnel participating on a child protection team 893 must successfully complete the required child protection team 894 training curriculum as set forth in protocols determined by the 895 Deputy Secretary for Children's Medical Services and the 896 Statewide Medical Director for Child Protection. A child 897 protection team that is evaluating a report of medical neglect 898 and assessing the health care needs of a medically complex child 899 shall involve a physician who has experience in treating 900 children with the same condition. Such physician may include

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901	but not be limited to a child protection team participant	, the
902	child's treating physician, a physician within the Childr	en's
903	Medical Services network, or a specialist.	
904	(2) The child abuse, abandonment, and neglect repor	ts that
905	must be referred by the department to child protection te	ams of
906	the Department of Health for an assessment and other appr	opriate
907	available support services as set forth in subsection (1)	must
908	include cases involving:	
909	(a) Injuries to the head, bruises to the neck or he	ad,
910	burns, or fractures in a child of any age.	
911	(b) Bruises anywhere on a child 5 years of age or u	nder.
912	(c) Any report alleging sexual abuse of a child.	
913	(d) Any sexually transmitted disease in a prepubesc	ent
914	child.	
915	(e) Reported malnutrition of a child and failure of	a
916	child to thrive.	
917	(f) Reported medical neglect of a child.	
918	(g) Any family in which one or more children have b	een
919	pronounced dead on arrival at a hospital or other health	care
920	facility, or have been injured and later died, as a resul	t of
921	suspected abuse, abandonment, or neglect, when any siblin	g or
922	other child remains in the home.	
923	(h) Symptoms of serious emotional problems in a chi	ld when
924	emotional or other abuse, abandonment, or neglect is susp	ected.
925	(3) All abuse and neglect cases transmitted for	
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926 investigation to a district by the hotline must be 927 simultaneously transmitted to the Department of Health child 928 protection team for review. For the purpose of determining 929 whether face-to-face medical evaluation by a child protection 930 team is necessary, all cases transmitted to the child protection 931 team which meet the criteria in subsection (2) must be timely 932 reviewed by:

933 (a) A physician licensed under chapter 458 or chapter 459
934 who holds board certification in pediatrics and is a member of a
935 child protection team;

(b) A physician licensed under chapter 458 or chapter 459 who holds board certification in a specialty other than pediatrics, who may complete the review only when working under the direction of a physician licensed under chapter 458 or chapter 459 who holds board certification in pediatrics and is a member of a child protection team;

942 (c) An advanced registered nurse practitioner licensed
943 under chapter 464 who has a <u>speciality</u> speciality in pediatrics
944 or family medicine and is a member of a child protection team;

945 (d) A physician assistant licensed under chapter 458 or 946 chapter 459, who may complete the review only when working under 947 the supervision of a physician licensed under chapter 458 or 948 chapter 459 who holds board certification in pediatrics and is a 949 member of a child protection team; or

950 (e) A registered nurse licensed under chapter 464, who may Page 38 of 115

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951 complete the review only when working under the direct 952 supervision of a physician licensed under chapter 458 or chapter 953 459 who holds certification in pediatrics and is a member of a 954 child protection team.

955 (4) A face-to-face medical evaluation by a child 956 protection team is not necessary when:

957 (a) The child was examined for the alleged abuse or 958 neglect by a physician who is not a member of the child 959 protection team, and a consultation between the child protection 960 team board-certified pediatrician, advanced registered nurse 961 practitioner, physician assistant working under the supervision 962 of a child protection team board-certified pediatrician, or 963 registered nurse working under the direct supervision of a child 964 protection team board-certified pediatrician, and the examining 965 physician concludes that a further medical evaluation is 966 unnecessary;

967 (b) The child protective investigator, with supervisory
968 approval, has determined, after conducting a child safety
969 assessment, that there are no indications of injuries as
970 described in paragraphs (2) (a) - (h) as reported; or

971 (c) The child protection team board-certified 972 pediatrician, as authorized in subsection (3), determines that a 973 medical evaluation is not required.

974

975 Notwithstanding paragraphs (a), (b), and (c), a child protection Page 39 of 115

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976 team pediatrician, as authorized in subsection (3), may 977 determine that a face-to-face medical evaluation is necessary.

978 (5) In all instances in which a child protection team is 979 providing certain services to abused, abandoned, or neglected 980 children, other offices and units of the Department of Health, 981 and offices and units of the Department of Children and <u>Families</u> 982 <del>Family Services</del>, shall avoid duplicating the provision of those 983 services.

984 The Department of Health child protection team quality (6) assurance program and the Department of Children and Families 985 986 Family Services' Family Safety Program Office quality assurance 987 program shall collaborate to ensure referrals and responses to 988 child abuse, abandonment, and neglect reports are appropriate. 989 Each quality assurance program shall include a review of records 990 in which there are no findings of abuse, abandonment, or 991 neglect, and the findings of these reviews shall be included in 992 each department's quality assurance reports.

993 Section 8. Section 39.3068, Florida Statutes, is created to 994 read:

995

39.3068 Reports of Medical Neglect.-

996 (1) Upon receiving a report alleging medical neglect, the 997 department or sheriff's office shall assign the case to a child 998 protective investigator who has specialized training in

999 addressing medical neglect or working with medically complex

1000 <u>children.</u>

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1001	(2) The child protective investigator who has interacted
1002	with the child and the child's family shall promptly contact and
1003	provide information to the child protection team. The child
1004	protection team shall assist the child protective investigator
1005	in identifying immediate responses to address the medical needs
1006	of the child with the priority of maintaining the child in the
1007	home if the parents will be able to meet the needs of the child
1008	with additional services. The child protective investigator and
1009	the child protection team must use a family-centered approach to
1010	assess the capacity of the family to meet those needs. A
1011	family-centered approach is intended to increase independence on
1012	the part of the family, accessibility to programs and services
1013	within the community, and collaboration between families and
1014	their service providers. The ethnic, cultural, economic, racial,
1015	social, and religious diversity of families must be respected
1016	and considered in the development and provision of services.
1017	(3) The child shall be evaluated by the child protection
1018	team as soon as practicable. After receipt of the report from
1019	the child protection team, the department shall have a case
1020	staffing which shall be attended, at a minimum, by the child
1021	protective investigator, department legal staff, and
1022	representatives from the child protection team which evaluated
1023	the child, Children's Medical Services, the Agency for Health
1024	Care Administration, the community-based care lead agency, and
1025	any providers of services to the child. However, the Agency for
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1026	Health Care Administration is not required to attend the
1027	staffing if the child is not Medicaid eligible. The staffing
1028	shall, at a minimum, consider which services are available given
1029	the family's eligibility for services, and effective in
1030	addressing issues leading to medical neglect allegations that
1031	would enable the child to safely remain at home. If such
1032	services are available and effective, they shall be provided.
1033	Section 9. Paragraph (h) of subsection (8) and subsection
1034	(9) of section 39.402, Florida Statutes, are amended to read:
1035	39.402 Placement in a shelter
1036	(8)
1037	(h) The order for placement of a child in shelter care
1038	must identify the parties present at the hearing and must
1039	contain written findings:
1040	1. That placement in shelter care is necessary based on
1041	the criteria in subsections (1) and (2).
1042	2. That placement in shelter care is in the best interest
1043	of the child.
1044	3. That continuation of the child in the home is contrary
1045	to the welfare of the child because the home situation presents
1046	a substantial and immediate danger to the child's physical,
1047	mental, or emotional health or safety which cannot be mitigated
1048	by the provision of preventive services.
1049	4. That based upon the allegations of the petition for
1050	placement in shelter care, there is probable cause to believe
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1051 that the child is dependent or that the court needs additional 1052 time, which may not exceed 72 hours, in which to obtain and 1053 review documents pertaining to the family in order to 1054 appropriately determine the risk to the child.

1055 That the department has made reasonable efforts to 5. 1056 prevent or eliminate the need for removal of the child from the 1057 home. A finding of reasonable effort by the department to 1058 prevent or eliminate the need for removal may be made and the department is deemed to have made reasonable efforts to prevent 1059 or eliminate the need for removal if: 1060

1061 a. The first contact of the department with the family 1062 occurs during an emergency;

1063 The appraisal of the home situation by the department b. 1064 indicates that the home situation presents a substantial and 1065 immediate danger to the child's physical, mental, or emotional 1066 health or safety which cannot be mitigated by the provision of 1067 preventive services;

1068 с. The child cannot safely remain at home, either because 1069 there are no preventive services that can ensure the health and 1070 safety of the child or because, even with appropriate and 1071 available services being provided, the health and safety of the 1072 child cannot be ensured; or

1073 The parent or legal custodian is alleged to have d. 1074 committed any of the acts listed as grounds for expedited 1075 termination of parental rights in s. 39.806(1)(f)-(i).

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1076 That the department has made reasonable efforts to keep 6. 1077 siblings together if they are removed and placed in out-of-home 1078 care unless such a placement is not in the best interest of each 1079 child. The department shall report to the court its efforts to 1080 place siblings together unless the court finds that such 1081 placement is not in the best interest of a child or his or her 1082 sibling. 1083 7.6. That the court notified the parents, relatives that are providing out-of-home care for the child, or legal 1084 custodians of the time, date, and location of the next 1085

1086 dependency hearing and of the importance of the active 1087 participation of the parents, relatives that are providing out-1088 of-home care for the child, or legal custodians in all 1089 proceedings and hearings.

1090 <u>8.7.</u> That the court notified the parents or legal 1091 custodians of their right to counsel to represent them at the 1092 shelter hearing and at each subsequent hearing or proceeding, 1093 and the right of the parents to appointed counsel, pursuant to 1094 the procedures set forth in s. 39.013.

1095 <u>9.8.</u> That the court notified relatives who are providing 1096 out-of-home care for a child as a result of the shelter petition 1097 being granted that they have the right to attend all subsequent 1098 hearings, to submit reports to the court, and to speak to the 1099 court regarding the child, if they so desire.

1100 (9) (a) At any shelter hearing, the department shall Page 44 of 115

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1101 provide to the court a recommendation for scheduled contact 1102 between the child and parents, if appropriate. The court shall 1103 determine visitation rights absent a clear and convincing 1104 showing that visitation is not in the best interest of the 1105 child. Any order for visitation or other contact must conform to 1106 the provisions of s. 39.0139. If visitation is ordered but will 1107 not commence within 72 hours of the shelter hearing, the 1108 department shall provide justification to the court. 1109 (b) If siblings who are removed from the home cannot be 1110 placed together, the department shall provide to the court a 1111 recommendation for frequent visitation or other ongoing 1112 interaction between the siblings unless this interaction would 1113 be contrary to a sibling's safety or well-being. If visitation 1114 among siblings is ordered but will not commence within 72 hours of the shelter hearing, the department shall provide 1115 1116 justification to the court for the delay. 1117 Section 10. Paragraph (d) of subsection (3) of section 1118 39.501, Florida Statutes, is amended to read: 1119 39.501 Petition for dependency.-1120 (3) 1121 (d) The petitioner must state in the petition, if known, 1122 whether: 1123 1. A parent or legal custodian named in the petition has 1124 previously unsuccessfully participated in voluntary services 1125 offered by the department; Page 45 of 115

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PCB HFS 14-03a ORIGINAL YEAR A parent or legal custodian named in the petition has 1126 2. 1127 participated in mediation and whether a mediation agreement exists; 1128 1129 A parent or legal custodian has rejected the voluntary 3. 1130 services offered by the department; 1131 4. A parent or legal custodian named in the petition has 1132 not fully complied with a safety plan; or 5. 4. The department has determined that voluntary services 1133 1134 are not appropriate for the parent or legal custodian and the reasons for such determination. 1135 1136 1137 If the petitioner is the department, it shall provide all safety 1138 assessments and safety plans involving the parent or legal 1139 custodian to the court. 1140 Section 11. Sections (3) and (4) of section 39.604, Florida Statutes, are amended to read: 1141 1142 39.604 Rilya Wilson Act; short title; legislative intent; 1143 requirements; attendance and reporting responsibilities.-1144 SHORT TITLE.-This section may be cited as the "Rilya (1)Wilson Act." 1145 LEGISLATIVE INTENT.-The Legislature recognizes that 1146 (2) 1147 children who are in the care of the state due to abuse, neglect, 1148 or abandonment are at increased risk of poor school performance 1149 and other behavioral and social problems. It is the intent of 1150 the Legislature that children who are currently in the care of Page 46 of 115 PCB HFS 14-03a

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1151 the state be provided with an age-appropriate education program 1152 to help ameliorate the negative consequences of abuse, neglect, 1153 or abandonment.

1156 REQUIREMENTS.-A child who is age birth 3 years to school (3) 1157 entry, under court ordered protective supervision or in the 1158 custody of the Family Safety Program Office of the Department of 1159 Children and Families Family Services or a community-based lead 1160 agency, and enrolled in a licensed early education or child care 1161 program must attend be enrolled to participate in the program 5 1162 days a week. Notwithstanding the requirements of s. 39.202, the 1163 Department of Children and Families Family Services must notify 1164 operators of the licensed early education or child care program, 1165 subject to the reporting requirements of this act, of the enrollment of any child age 3 years birth to school entry, under 1166 1167 court ordered protective supervision or in the custody of the 1168 Family Safety Program Office of the Department of Children and 1169 Families Family Services or a community-based lead agency. When a child is enrolled in an early education or child care program 1170 regulated by the department, the child's attendance in the 1171 1172 program must be a required action in the safety plan or the case 1173 plan developed for the a child pursuant to this chapter who is 1174 enrolled in a licensed early education or child care program 1175 must contain the participation in this program as a required Page 47 of 115

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1176 action. An exemption to participating in the licensed early 1177 education or child care program 5 days a week may be granted by 1178 the court.

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(4) ATTENDANCE AND REPORTING REQUIREMENTS.-

(a) A child enrolled in a licensed early education or child care program who meets the requirements of subsection (3) may not be withdrawn from the program without the prior written approval of the Family Safety Program Office of the Department of Children and Family Services or the community-based lead agency.

1186 If a child covered by this section is absent from (b)1. 1187 the program on a day when he or she is supposed to be present, 1188 the person with whom the child resides must report the absence 1189 to the program by the end of the business day. If the person 1190 with whom the child resides, whether the parent or caregiver, 1191 fails to timely report the absence, the absence is considered to 1192 be unexcused. The program shall report any unexcused absence or seven consecutive excused absences of a child who is enrolled in 1193 1194 the program and covered by this act to the local designated staff of the Family Safety Program Office of the Department of 1195 1196 Children and Family Services or the community-based lead agency 1197 by the end of the business day following the unexcused absence 1198 or seventh consecutive excused absence.

1199 2. The department or community-based lead agency shall 1200 conduct a site visit to the residence of the child upon

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1201 receiving a report of two consecutive unexcused absences or 1202 seven consecutive excused absences.

3. If the site visit results in a determination that the child is missing, the department or community-based lead agency shall report the child as missing to a law enforcement agency and proceed with the necessary actions to locate the child pursuant to procedures for locating missing children.

1208 If the site visit results in a determination that the 4. 1209 child is not missing, the parent or caregiver shall be notified that failure to ensure that the child attends the licensed early 1210 1211 education or child care program is a violation of the safety 1212 plan or case plan. If more than two site visits are conducted 1213 pursuant to this subsection, staff shall initiate action to 1214 notify the court of the parent or caregiver's noncompliance with 1215 the case plan.

1216 Section 12. Paragraph (c) of subsection (2) and 1217 paragraph (a) of subsection (3) of section 39.701, Florida 1218 Statutes, is amended to read:

1219

39.701 Judicial review.-

1220 (2) REVIEW HEARINGS FOR CHILDREN YOUNGER THAN 18 YEARS OF 1221 AGE.-

(c) Review determinations.—The court and any citizen review panel shall take into consideration the information contained in the social services study and investigation and all medical, psychological, and educational records that support the

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1226 terms of the case plan; testimony by the social services agency, 1227 the parent, the foster parent or legal custodian, the quardian 1228 ad litem or surrogate parent for educational decisionmaking if 1229 one has been appointed for the child, and any other person 1230 deemed appropriate; and any relevant and material evidence 1231 submitted to the court, including written and oral reports to 1232 the extent of their probative value. These reports and evidence 1233 may be received by the court in its effort to determine the 1234 action to be taken with regard to the child and may be relied upon to the extent of their probative value, even though not 1235 1236 competent in an adjudicatory hearing. In its deliberations, the 1237 court and any citizen review panel shall seek to determine:

1238 1. If the parent was advised of the right to receive 1239 assistance from any person or social service agency in the 1240 preparation of the case plan.

1241 2. If the parent has been advised of the right to have 1242 counsel present at the judicial review or citizen review 1243 hearings. If not so advised, the court or citizen review panel 1244 shall advise the parent of such right.

1245 3. If a guardian ad litem needs to be appointed for the 1246 child in a case in which a guardian ad litem has not previously 1247 been appointed or if there is a need to continue a guardian ad 1248 litem in a case in which a guardian ad litem has been appointed.

1249 4. Who holds the rights to make educational decisions for 1250 the child. If appropriate, the court may refer the child to the

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1251 district school superintendent for appointment of a surrogate 1252 parent or may itself appoint a surrogate parent under the 1253 Individuals with Disabilities Education Act and s. 39.0016.

1254 5. The compliance or lack of compliance of all parties 1255 with applicable items of the case plan, including the parents' 1256 compliance with child support orders.

6. The compliance or lack of compliance with a visitation contract between the parent and the social service agency for contact with the child, including the frequency, duration, and results of the parent-child visitation and the reason for any noncompliance.

1262 <u>7. The frequency, kind, and duration of sibling contacts</u> 1263 <u>among siblings who have been separated during placement, as well</u> 1264 <u>as any efforts undertaken to reunite separated siblings if doing</u> 1265 <u>so is in the best interest of the child.</u>

1266 <u>8.7</u>. The compliance or lack of compliance of the parent in 1267 meeting specified financial obligations pertaining to the care 1268 of the child, including the reason for failure to comply, if 1269 <u>applicable such is the case</u>.

<u>9.8.</u> Whether the child is receiving safe and proper care according to s. 39.6012, including, but not limited to, the appropriateness of the child's current placement, including whether the child is in a setting that is as family-like and as close to the parent's home as possible, consistent with the child's best interests and special needs, and including

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1276 maintaining stability in the child's educational placement, as 1277 documented by assurances from the community-based care provider 1278 that:

1279 a. The placement of the child takes into account the 1280 appropriateness of the current educational setting and the 1281 proximity to the school in which the child is enrolled at the 1282 time of placement.

b. The community-based care agency has coordinated with appropriate local educational agencies to ensure that the child remains in the school in which the child is enrolled at the time of placement.

1287 9. A projected date likely for the child's return home or1288 other permanent placement.

1289 <u>11.10.</u> When appropriate, the basis for the unwillingness 1290 or inability of the parent to become a party to a case plan. The 1291 court and the citizen review panel shall determine if the 1292 efforts of the social service agency to secure party 1293 participation in a case plan were sufficient.

1294 <u>12.11.</u> For a child who has reached 13 years of age but is 1295 not yet 18 years of age, the adequacy of the child's preparation 1296 for adulthood and independent living.

129713.12.If amendments to the case plan are required.1298Amendments to the case plan must be made under s. 39.6013.

- (3) REVIEW HEARINGS FOR CHILDREN 17 YEARS OF AGE.-
- 1300 (a) In addition to the review and report required under

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1301 paragraphs (1) (a) and (2) (a), respectively, the court shall hold 1302 a judicial review hearing within 90 days after a child's 17th 1303 birthday. The court shall also issue an order, separate from the 1304 order on judicial review, that the disability of nonage of the 1305 child has been removed pursuant to ss. 743.044, 743.045, and 1306 743.046, and for any of these disabilities that the court finds 1307 is in the child's best interest to remove. The court s. 743.045 1308 and shall continue to hold timely judicial review hearings. If 1309 necessary, the court may review the status of the child more frequently during the year before the child's 18th birthday. At 1310 each review hearing held under this subsection, in addition to 1311 1312 any information or report provided to the court by the foster 1313 parent, legal custodian, or guardian ad litem, the child shall 1314 be given the opportunity to address the court with any 1315 information relevant to the child's best interest, particularly in relation to independent living transition services. The 1316 1317 department shall include in the social study report for judicial review written verification that the child has: 1318

A current Medicaid card and all necessary information
 concerning the Medicaid program sufficient to prepare the child
 to apply for coverage upon reaching the age of 18, if such
 application is appropriate.

1323 2. A certified copy of the child's birth certificate and,
1324 if the child does not have a valid driver license, a Florida
1325 identification card issued under s. 322.051.

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3. A social security card and information relating to social security insurance benefits if the child is eligible for those benefits. If the child has received such benefits and they are being held in trust for the child, a full accounting of these funds must be provided and the child must be informed as to how to access those funds.

1332 4. All relevant information related to the Road-to-Independence Program, including, but not limited to, eligibility 1333 requirements, information on participation, and assistance in 1334 gaining admission to the program. If the child is eligible for 1335 1336 the Road-to-Independence Program, he or she must be advised that 1337 he or she may continue to reside with the licensed family home 1338 or group care provider with whom the child was residing at the 1339 time the child attained his or her 18th birthday, in another 1340 licensed family home, or with a group care provider arranged by 1341 the department.

1342 5. An open bank account or the identification necessary to
1343 open a bank account and to acquire essential banking and
1344 budgeting skills.

1345 6. Information on public assistance and how to apply for1346 public assistance.

1347 7. A clear understanding of where he or she will be living 1348 on his or her 18th birthday, how living expenses will be paid, 1349 and the educational program or school in which he or she will be 1350 enrolled.

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1351 8. Information related to the ability of the child to remain in care until he or she reaches 21 years of age under s. 1352 1353 39.013. 1354 A letter providing the dates that the child is under 9. 1355 the jurisdiction of the court. 1356 10. A letter stating that the child is in compliance with 1357 financial aid documentation requirements. 1358 The child's educational records. 11. 1359 12. The child's entire health and mental health records. 1360 13. The process for accessing his or her case file. 1361 A statement encouraging the child to attend all 14. 1362 judicial review hearings occurring after the child's 17th 1363 birthday. 1364 Section 13. Subsection (2) of section 39.802, Florida 1365 Statutes, is amended to read: 1366 39.802 Petition for termination of parental rights; 1367 filing; elements.-1368 (2)The form of the petition is governed by the Florida 1369 Rules of Juvenile Procedure. The petition must be in writing and signed by the petitioner or, if the department is the 1370 1371 petitioner, by an employee of the department, under oath stating 1372 the petitioner's good faith in filing the petition. 1373 Section 14. Subsection (1) and paragraph (c) of subsection 1374 (3) of section 383.402, Florida Statutes, are amended to read: 1375 383.402 Child abuse death review; State Child Abuse Death Page 55 of 115

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1376 Review Committee; local child abuse death review committees.-1377 It is the intent of the Legislature to establish a (1)1378 statewide multidisciplinary, multiagency child abuse death assessment and prevention system that consists of state and 1379 1380 local review committees. The state and local review committees 1381 shall review the facts and circumstances of all deaths of 1382 children from birth through age 18 which occur in this state and 1383 are reported to the child abuse hotline of the Department of 1384 Children and Families as the result of verified child abuse or 1385 neglect. The purpose of the review shall be to:

(a) Achieve a greater understanding of the causes andcontributing factors of deaths resulting from child abuse.

1388 (b) Whenever possible, develop a communitywide approach to1389 address such cases and contributing factors.

(c) Identify any gaps, deficiencies, or problems in the delivery of services to children and their families by public and private agencies which may be related to deaths that are the result of child abuse.

(d) Make and implement recommendations for changes in law,
rules, and policies, as well as develop practice standards that
support the safe and healthy development of children and reduce
preventable child abuse deaths.

1398(3) The State Child Abuse Death Review Committee shall:1399(c) Prepare an annual statistical report on the incidence1400and causes of death resulting from reported child abuse in the

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1401 state during the prior calendar year. The state committee shall 1402 submit a copy of the report by <u>October 1</u> <del>December 31</del> of each 1403 year to the Governor, the President of the Senate, and the 1404 Speaker of the House of Representatives. The report must include 1405 recommendations for state and local action, including specific 1406 policy, procedural, regulatory, or statutory changes, and any 1407 other recommended preventive action.

1408 Section 15. Subsection (5) of section 402.40, Florida 1409 Statutes, is amended to read:

1410

402.40 Child welfare training and certification.-

1411

(5) CORE COMPETENCIES AND SPECIALIZATIONS.-

(a) The Department of Children and <u>Families</u> Family
Services shall approve the core competencies and related
preservice curricula that ensures that each person delivering
child welfare services obtains the knowledge, skills, and
abilities to competently carry out his or her work
responsibilities.

1418 (b) The identification of these core competencies and 1419 development of preservice curricula shall be a collaborative 1420 effort that includes professionals who have expertise in child 1421 welfare services, department-approved third-party credentialing 1422 entities, and providers that will be affected by the curriculum, 1423 including, but not limited to, representatives from the 1424 community-based care lead agencies, sheriffs' offices conducting 1425 child protection investigations, and child welfare legal

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1426 services providers.

(c) Community-based care agencies, sheriffs' offices, and the department may contract for the delivery of preservice and any additional training for persons delivering child welfare services if the curriculum satisfies the department-approved core competencies.

1432 (d) The department may also approve certifications 1433 involving specializations in serving specific populations or in 1434 skills relevant to child protection to be awarded by a third-1435 party credentialing entity approved pursuant to 2. 402.40(3).

1436 <u>(e) ((d)</u> Department-approved credentialing entities shall, 1437 for a period of at least 12 months after implementation of the 1438 third-party child welfare certification programs, grant 1439 reciprocity and award a child welfare certification to 1440 individuals who hold current department-issued child welfare 1441 certification in good standing, at no cost to the department or 1442 the certificateholder.

1443 Section 16. Section 402.402, Florida Statutes, is created 1444 to read:

1445402.402Child protective investigators; child protection1446investigation supervisors; case managers; case manager1447supervisors; department attorneys handling child welfare cases.-1448(1) As used in this section, the term:1449(a) "Human services related field" means social work,

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1450 psychology, sociology, counseling, special education, human

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1451	development, child development, family development, marriage and
1452	family therapy, and nursing.
1453	(b) "Relevant coursework" means coursework that imparts
1454	knowledge and leads to the development of skills with direct
1455	application to the child protection and child welfare field from
1456	a college or university social work program accredited by the
1457	Council on Social Work Education.
1458	(c) "Child protection and child welfare personnel" includes
1459	child protective investigators and child protective investigator
1460	supervisors employed by the department or a sheriff's office and
1461	case managers and case manager supervisors employed by a
1462	community-based care lead agency or a subcontractor of a
1463	community-based care lead agency.
1464	(2) CHILD PROTECTION AND CHILD WELFARE PERSONNEL
1465	REQUIREMENTS
1466	(a) Child protection and child welfare personnel hired on
1467	or after July 1, 2014, must have one of the following:
1468	1. A bachelor's or a master's degree in social work from a
1469	college or university social work program accredited by the
1470	Council on Social Work Education. The individual shall have had
1471	at least 12 credit hours of relevant coursework.
1472	2. A bachelor's degree or a master's degree in a human-
1473	services related field and at least 12 credit hours of relevant
1474	coursework.
1475	3. A bachelor's degree or a master's degree in a human-
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1476	services related field. Within three years of hire, such
1477	individuals shall complete 12 credit hours of relevant
1478	coursework. The sequence of courses may be designed to provide
1479	in-depth knowledge in serving a specific subpopulation or
1480	developing a specific set of skills relevant to child
1481	protection. The department shall consult with the institute
1482	authorized in s. 1004.615 to identify courses available through
1483	the consortium of public and private universities in the state
1484	offering degrees in social work that fulfills this requirement.
1485	(b) All child protective investigators and child
1486	protective investigation supervisors employed by the department
1487	or a sheriff's office shall complete specialized training either
1488	focused in serving a specific population, including but not
1489	limited to medically fragile children, sexually exploited
1490	children, children under the age of three, or families with
1491	issues of domestic violence, mental illness, or substance abuse,
1492	or in performing certain aspects of child protection practice,
1493	such as investigation techniques and analysis of family
1494	dynamics. The specialized training may be used to fulfill
1495	continuing education requirements pursuant to s. 402.40(2)(e).
1496	Individuals hired before July 1, 2014, shall complete the
1497	specialized training by June 30, 2016, and those hired on or
1498	after July 1, 2014, shall complete the specialized training
1499	within two years of hire. An individual may receive specialized
1500	training in multiple areas.

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1501	(2) ATTORNEYS EMPLOYED BY THE DEPARTMENT HANDLING CHILD
1502	WELFARE CASES
1503	(a) Attorneys employed by the department handling child
1504	welfare cases hired on or after July 1, 2014, shall:
1505	1. Receive, at a minimum, the same core pre-service
1506	training provided to child protective investigators.
1507	2. Within 60 days of hiring, shadow an experienced child
1508	protective investigator and an experienced case manager for at
1509	least 8 hours each.
1510	Section 17. Section 402.403, Florida Statutes, is created
1511	to read:
1512	402.403 Child Protective Investigator and Supervisor
1513	Tuition Exemption Program
1514	(1) There is established within the department the Child
1515	Protective Investigator and Supervisor Tuition Exemption Program
1516	for the purpose of recruiting and retaining high-performing
1517	individuals who are employed as child protective investigators
1518	or child protective investigation supervisors with the
1519	department or a sheriff's office and who do not have a
1520	bachelor's degree or master's degree in social work. The
1521	department or sheriff's office may approve the exemption from
1522	tuition and fees for a state university for an employee who:
1523	(a) Has been employed as a child protective investigator
1524	or child protective investigation supervisor by the department
1525	or sheriff's office for at least two years and who is determined
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1526	by the department or sheriff's office to have a high level of
1527	performance; and
1528	(b) Is accepted in an upper-division undergraduate or
1529	graduate level college or university social work program
1530	accredited by the Council on Social Work Education which leads
1531	to either a bachelor's degree or a master's degree in social
1532	work, or is completing 12 credit hours of relevant coursework as
1533	required under s. 402.403(2)(a)3.
1534	Section 18. Section 402.404, Florida Statutes, is created
1535	to read:
1536	402.404 Child Protective Investigator and Supervisor
1537	Student Loan Forgiveness Program.—
1538	(1) There is established within the department the Florida
1539	Child Protective Investigator and Supervisor Student Loan
1540	Forgiveness Program. The purpose of the program is to increase
1541	employment and retention of high-performing individuals who have
1542	either a bachelor's degree or a master's degree in social work
1543	as child protective investigators or child protective
1544	investigation supervisors with the department or sheriff's
1545	office by making payments toward loans received by students from
1546	federal or state programs or commercial lending institutions for
1547	the support of prior postsecondary study in accredited social
1548	work programs.
1549	(2) In order to be eligible for the program, a candidate
1550	must be employed as a child protective investigator or child
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1551	protective investigation supervisor by the department or a
1552	sheriff's office for at least two years, must be determined by
1553	the department or sheriff's office to have a high level of
1554	performance, and must have graduated from an accredited social
1555	work program with either a bachelor's degree or a master's
1556	degree in social work.
1557	(3) Only loans to pay the costs of tuition, books, fees,
1558	and living expenses shall be covered.
1559	(4) The department may make loan payments of up to \$3,000
1560	each year for up to 4 years on behalf of selected graduates of
1561	an accredited social work program from the funds appropriated
1562	for this purpose. All payments are contingent upon continued
1563	proof of employment as a child protective investigator or a
1564	child protective investigation supervisor with the department or
1565	sheriff's office and made directly to the holder of the loan.
1566	(5) A student who receives a tuition exemption pursuant to
1567	s. 402.403 is not eligible to participate in the Child
1568	Protective Investigator Student Loan Forgiveness Program.
1569	(6) A community based-care lead agency may provide loan
1570	forgiveness for case managers and case manager supervisors that
1571	it employs or who are employed by its subcontractors.
1572	Section 19. Section 409.165, Florida Statutes, is amended
1573	to read:
1574	409.165 Alternate care for children
1575	(1) Within funds appropriated, the department shall
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1576 establish and supervise a program of emergency shelters, runaway 1577 shelters, foster homes, group homes, agency-operated group 1578 treatment homes, nonpsychiatric residential group care 1579 facilities, psychiatric residential treatment facilities, and 1580 other appropriate facilities to provide shelter and care for 1581 dependent children who must be placed away from their families. 1582 The department, in accordance with outcome established goals 1583 established in s. 409.986, shall contract for the provision of 1584 such shelter and care by counties, municipalities, nonprofit 1585 corporations, and other entities capable of providing needed 1586 services if:

1587 (a) The services so provided <u>comply with all department</u>
 1588 <u>standards, policies, and procedures</u> <del>are available</del>;

(b) The services <u>can be</u> so provided <u>at a reasonable cost</u> are more cost-effective than those provided by the department; and

(c) Unless otherwise provided by law, such providers ofshelter and care are licensed by the department.

1594

1595 It is the legislative intent that the

1596 (2) Funds appropriated for the alternate care of children 1597 as described in this section may be used to meet the needs of 1598 children in their own homes or those of relatives if the 1599 children can be safely served in <u>such settings</u> their own homes, 1600 or the homes of relatives, and the expenditure of funds in such Page 64 of 115

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1601 manner is equal to or less than the cost of out-of-home 1602 placement calculated by the department to be an eventual cost 1603 savings over placement of children. 1604 (3) (2) The department shall may cooperate with all child 1605 service institutions or agencies within the state which meet the 1606 department's standards in order to maintain a comprehensive, 1607 coordinated, and inclusive system for promoting and protecting 1608 the well-being of children, consistent with the goals 1609 established in s. 409.986 rules for proper care and supervision 1610 prescribed by the department for the well-being of children. 1611 (a) The department shall work with the Department of 1612 Health in the development, utilization, and monitoring of 1613 medical foster homes for medically complex children. 1614 (b) The department shall work with the Agency for Health 1615 Care Administration and the Agency for Persons with Disabilities 1616 to provide such home and community-based services as may be 1617 necessary to maintain medically complex children in the least 1618 restrictive and most nurturing environment. (4) (3) With the written consent of parents, custodians, or 1619 guardians, or in accordance with those provisions in chapter 39 1620 that relate to dependent children, the department, under rules 1621 1622 properly adopted, may place a child: 1623 (a) With a relative; 1624 (b) With an adult nonrelative approved by the court for 1625 long-term custody; Page 65 of 115

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1626 With a person who is considering the adoption of a (C) 1627 child in the manner provided for by law; 1628 (d) When limited, except as provided in paragraph (b), to 1629 temporary emergency situations, with a responsible adult 1630 approved by the court; 1631 With a person or family approved by the department to (e) 1632 serve as a medical foster home;

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1633 (f) (e) With a person or agency licensed by the department 1634 in accordance with s. 409.175; or

1635 (g) (f) In a subsidized independent living situation, 1636 subject to the provisions of s. 409.1451(4)(c),

1638 under such conditions as are determined to be for the best 1639 interests or the welfare of the child. Any child placed in an 1640 institution or in a family home by the department or its agency 1641 may be removed by the department or its agency, and such other 1642 disposition may be made as is for the best interest of the 1643 child, including transfer of the child to another institution, 1644 another home, or the home of the child. Expenditure of funds 1645 appropriated for out-of-home care can be used to meet the needs of a child in the child's own home or the home of a relative if 1646 1647 the child can be safely served in the child's own home or that 1648 of a relative if placement can be avoided by the expenditure of 1649 such funds, and if the expenditure of such funds in this manner 1650 is equal to or less than the cost of out-of-home placement

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1651 calculated by the department to be a potential cost savings. 1652 Section 20. Paragraph (c) of subsection (2) of section

1653 409.967, Florida Statutes, is amended to read:

409.967 Managed care plan accountability.-

1655 (2) The agency shall establish such contract requirements 1656 as are necessary for the operation of the statewide managed care 1657 program. In addition to any other provisions the agency may deem 1658 necessary, the contract must require:

1659 (c) Access.-

1654

1660 The agency shall establish specific standards for the 1. number, type, and regional distribution of providers in managed 1661 1662 care plan networks to ensure access to care for both adults and 1663 children. Each plan must maintain a regionwide network of 1664 providers in sufficient numbers to meet the access standards for 1665 specific medical services for all recipients enrolled in the 1666 plan. The exclusive use of mail-order pharmacies may not be 1667 sufficient to meet network access standards. Consistent with the 1668 standards established by the agency, provider networks may 1669 include providers located outside the region. A plan may 1670 contract with a new hospital facility before the date the 1671 hospital becomes operational if the hospital has commenced 1672 construction, will be licensed and operational by January 1, 1673 2013, and a final order has issued in any civil or 1674 administrative challenge. Each plan shall establish and maintain 1675 an accurate and complete electronic database of contracted

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1676 providers, including information about licensure or 1677 registration, locations and hours of operation, specialty 1678 credentials and other certifications, specific performance 1679 indicators, and such other information as the agency deems 1680 necessary. The database must be available online to both the 1681 agency and the public and have the capability to compare the 1682 availability of providers to network adequacy standards and to 1683 accept and display feedback from each provider's patients. Each plan shall submit quarterly reports to the agency identifying 1684 1685 the number of enrollees assigned to each primary care provider.

1686 2. Each managed care plan must publish any prescribed drug 1687 formulary or preferred drug list on the plan's website in a 1688 manner that is accessible to and searchable by enrollees and 1689 providers. The plan must update the list within 24 hours after 1690 making a change. Each plan must ensure that the prior 1691 authorization process for prescribed drugs is readily accessible 1692 to health care providers, including posting appropriate contact 1693 information on its website and providing timely responses to 1694 providers. For Medicaid recipients diagnosed with hemophilia who 1695 have been prescribed anti-hemophilic-factor replacement products, the agency shall provide for those products and 1696 1697 hemophilia overlay services through the agency's hemophilia 1698 disease management program.

1699 3. Managed care plans, and their fiscal agents or 1700 intermediaries, must accept prior authorization requests for any Page 68 of 115

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1701	service electronically.
1702	4. Managed care plans serving children in the care and
1703	custody of the Department of Children and Families must maintain
1704	complete medical, dental, and behavioral health information and
1705	provide such information to the department for inclusion in the
1706	state's child welfare data system. Using such documentation, the
1707	agency and the department shall determine the plan's compliance
1708	with standards for access to medical, dental, and behavioral
1709	health services, the use of psychotropic medications, and
1710	followup on all medically necessary services recommended as a
1711	result of early and periodic screening diagnosis and treatment.
1712	Section 21. The Division of Law Revision and Information is
1713	directed to create part V of chapter 409, Florida Statutes,
1714	consisting of ss. 409.986-409.998, Florida Statutes, to be
1715	titled "Community-Based Child Welfare."
1716	Section 22. Section 409.986, Florida Statutes, is created
1717	to read:
1718	409.986 Legislative findings, intent, and definitions
1719	(1) LEGISLATIVE FINDINGS AND INTENT
1720	(a) It is the intent of the Legislature that the
1721	Department of Children and Families provide child protection and
1722	child welfare services to children through contracting with
1723	community-based care lead agencies. It is further the
1724	Legislature's intent that communities and other stakeholders in
1725	the well-being of children participate in assuring safety,
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1750	<u>children.</u> Page 70 of 115
1749	(e) Family relationships and connections are preserved for
1748	arrangements.
1747	(d) Children have permanency and stability in their living
1746	removal from the home.
1745	(c) Services are provided to protect children and prevent
1744	possible and appropriate.
1743	(b) Children are safely maintained in their homes if
1742	and neglect.
1741	(a) Children are first and foremost protected from abuse
1740	alliance:
1739	community-based subcontractors, and the community-based care
1738	conjunction with the community-based care lead agency,
1737	goal of the department to achieve the following outcomes in
1736	(2) CHILD PROTECTION AND CHILD WELFARE OUTCOMESIt is the
1735	appropriate care is provided.
1734	relieve the state of its responsibility to ensure that
1733	state and outsourcing the provision of such care does not
1732	the appropriate care of children is the responsibility of the
1731	entities is essential. The Legislature finds that, ultimately,
1730	programmatic, administrative, and fiscal operation of those
1729	protection and child welfare system, adequate oversight of the
1728	assume responsibility for the care of children in the child
1727	(b) The Legislature finds that, when private entities
1726	permanence, and well-being for all children in the state.

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1751	(f) Families have enhanced capacity to provide for their
1752	children's needs.
1753	(g) Children receive appropriate services to meet their
1754	educational needs.
1755	(h) Children receive adequate services to meet their
1756	physical and mental health needs.
1757	(i) Children develop capacity for independent living and
1758	competence as an adult.
1759	(3) DEFINITIONSAs used in this part, except as otherwise
1760	specially provided, the term:
1761	(a) "Child" or "children" means has the same meaning as
1762	the term "child" as defined in s. 39.01.
1763	(b) "Dependent child" means a child who has been
1764	determined by the court to be in need of care due to allegations
1765	of abuse, neglect, or abandonment.
1766	(c) "Care" means services of any kind which are designed
1767	to facilitate a child remaining safely in his or her own home,
1768	returning safely to his or her own home if he or she is removed,
1769	or obtaining an alternative permanent home if he or she cannot
1770	remain home or be returned home.
1771	(d) "Community-based care lead agency" or "lead agency"
1772	means a single entity with which the department has a contract
1773	for the provision of care for children in the child protection
1774	and child welfare system in a community that is no smaller than
1775	a county and no larger than two contiguous judicial circuits.
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1776	The secretary of the department may authorize more than one
1777	eligible lead agency within a single county if doing so will
1778	result in more effective delivery of services to children.
1779	(e) "Community-based care alliance" or "alliance" means
1780	the group of stakeholders, community leaders, client
1781	representatives, and funders of human services established
1782	pursuant to s. 20.09(5) to provide a focal point for community
1783	participation and oversight of community-based services.
1784	(f) "Related services" includes, but is not limited to,
1785	family preservation, independent living, emergency shelter,
1786	residential group care, foster care, therapeutic foster care,
1787	intensive residential treatment, foster care supervision, case
1788	management, coordination of mental health services,
1789	postplacement supervision, permanent foster care, and family
1790	reunification.
1791	Section 23. Section 409.987, Florida Statutes, is created
1792	to read:
1793	409.987 Lead agency procurement
1794	(1) Community-based care lead agencies shall be procured
1795	by the department through a competitive process as required by
1796	chapter 287.
1797	(2) The department shall produce a schedule for the
1798	procurement of community-based care lead agencies and provide
1799	the schedule to the community-based care alliances established
1800	pursuant to s. 409.998 and post it on the department's website.
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1801	(3) Notwithstanding s. 287.057, the department shall use
1802	5-year contracts with lead agencies.
1803	(4) In order to serve as a lead agency, an entity must:
1804	(a) Be organized as a Florida corporation or a
1805	governmental entity.
1806	(b) Be governed by a board of directors. The membership
1807	of the board of directors must be described in the bylaws or
1808	articles of incorporation of each lead agency, which must
1809	provide that at least 75 percent of the membership of the board
1810	of directors must be composed of persons residing in this state,
1811	and at least 51 percent of the state residents on the board of
1812	directors must reside within the service area of the lead
1813	agency. However, for procurements of lead agency contracts
1814	initiated on or after July 1, 2014:
1815	1. At least 75 percent of the membership of the board of
1816	directors must be persons residing in this state, and at least
1817	51 percent of the membership of the board of directors must be
1818	persons residing within the service area of the lead agency.
1819	2. The board of directors' powers must include hiring the
1820	lead agency's executive director, approving the lead agency's
1821	budget, and setting the lead agency's operational policy and
1822	procedures.
1823	3. The membership of the board of directors must be
1824	described in the bylaws or articles of incorporation of each
1825	lead agency and require representation from throughout the
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1826	service area of the lead agency and, at a minimum, from local
1827	government, law enforcement, a school district, a children's
1828	services council if one operates in the service area, and the
1829	United Way or other local funding organization.
1830	(c) Demonstrate financial responsibility through an
1831	organized plan for regular fiscal audits and the posting of a
1832	performance bond.
1833	(5) The department's procurement team procuring any lead
1834	agencies' contracts must include individuals from the community
1835	alliance in the area to be served under the contract. All
1836	meetings at which vendors make presentations to or negotiate
1837	with the procurement team shall be held in the area to be served
1838	by the contract.
1839	Section 24. Section 409.988, Florida Statutes, is created
1840	to read:
1841	409.988 Lead agency duties; general provisions
1842	(1) DUTIES.—A lead agency:
1843	(a) Shall serve all children referred as a result of a
1844	report of abuse, neglect, or abandonment to the department's
1845	child abuse hotline regardless of the level of funding allocated
1846	to the lead agency by the state if all related funding is
1847	transferred.
1848	(b) Shall provide accurate and timely information
1849	necessary for oversight by the department pursuant to the child
1850	welfare results-oriented accountability system required by s.
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1851	<u>409.997.</u>	
1852	(c) Shall follow the financial guidelines developed by the	
1853	department and provide for a regular independent auditing of its	
1854	financial activities. Such financial information shall be	
1855	provided to the community-based care alliance established under	
1856	<u>s. 409.998.</u>	
1857	(d) Shall prepare all judicial reviews, case plans, and	
1858	other reports necessary for court hearings for dependent	
1859	children, except those related to the investigation of a	
1860	referral from the department's child abuse hotline, and shall	
1861	provide testimony as required for dependency court proceedings.	
1862	This duty does not include the preparation of legal pleadings or	
1863	other legal documents, which remain the responsibility of the	
1864	department.	
1865	(e) Shall ensure that all individuals providing care for	
1866	dependent children receive appropriate training and meet the	
1867	minimum employment standards established by the department.	
1868	(f) Shall maintain eligibility to receive all available	
1869	federal child welfare funds.	
1870	(g) Shall maintain written agreements with Healthy	
1871	Families Florida lead entities in its service area pursuant to	
1872	s. 409.153 to promote cooperative planning for the provision of	
1873	prevention and intervention services.	
1874	(h) Shall comply with federal and state statutory	
1875	requirements and agency rules in the provision of contractual	
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1876	services.
1877	(i) May subcontract for the provision of services required
1878	by the contract with the lead agency and the department;
1879	however, the subcontracts must specify how the provider will
1880	contribute to the lead agency meeting the performance standards
1881	established pursuant to the child welfare results-oriented
1882	accountability system required by s. 409.997.
1883	(2) LICENSURE.—
1884	(a) A lead agency must be licensed as a child-caring or
1885	child-placing agency by the department under this chapter.
1886	(b) Each foster home, therapeutic foster home, emergency
1887	shelter, or other placement facility operated by the lead agency
1888	must be licensed by the department under chapter 402 or this
1889	chapter.
1890	(c) Substitute care providers who are licensed under s.
1891	409.175 and who have contracted with a lead agency are also
1892	authorized to provide registered or licensed family day care
1893	under s. 402.313 if such care is consistent with federal law and
1894	if the home has met the requirements of s. 402.313.
1895	(d) In order to eliminate or reduce the number of
1896	duplicate inspections by various program offices, the department
1897	shall coordinate inspections required for licensure of agencies
1898	under this subsection.
1899	(e) The department may adopt rules to administer this
1900	subsection.
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1901	(3) SERVICESA lead agency must serve dependent children
1902	through services that are supported by research or are best
1903	child welfare practices. The agency may also provide innovative
1904	services including but not limited to family-centered,
1905	cognitive-behavioral, trauma informed interventions designed to
1906	mitigate out-of-home placements.
1907	(4) LEAD AGENCY ACTING AS GUARDIAN
1908	(a) If a lead agency or other provider has accepted case
1909	management responsibilities for a child who is sheltered or
1910	found to be dependent and who is assigned to the care of the
1911	lead agency or other provider, the agency or provider may act as
1912	the child's guardian for the purpose of registering the child in
1913	school if a parent or guardian of the child is unavailable and
1914	his or her whereabouts cannot reasonably be ascertained.
1915	(b) The lead agency or other provider may also seek
1916	emergency medical attention for the child, but only if a parent
1917	or guardian of the child is unavailable, the parent's
1918	whereabouts cannot reasonably be ascertained, and a court order
1919	for such emergency medical services cannot be obtained because
1920	of the severity of the emergency or because it is after normal
1921	working hours.
1922	(c) A lead agency or other provider may not consent to
1923	sterilization, abortion, or termination of life support.
1924	(d) If a child's parents' rights have been terminated, the
1925	lead agency shall act as guardian of the child in all
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1926	circumstances.	
1927	Section 25. Section 409.990, Florida Stat	utes, is created
1928	to read:	
1929	409.990 Funding for lead agenciesA con	tract established
1930	between the department and a lead agency must	be funded by a
1931	grant of general revenue, other applicable sta	te funds, or
1932	applicable federal funding sources.	
1933	(1) The method of payment for a fixed-pr	ice contract with
1934	a lead agency must provide for a 2-month advan	ce payment at the
1935	beginning of each fiscal year and equal monthl	y payments
1936	thereafter.	
1937	(2) Notwithstanding s. 215.425, all docu	mented federal
1938	funds earned for the current fiscal year by th	e department and
1939	lead agencies which exceed the amount appropri	ated by the
1940	10 Legislature shall be distributed to all entiti	es that
1941	contributed to the excess earnings based on a	schedule and
1942	2 methodology developed by the department and ap	proved by the
1943	Executive Office of the Governor.	
1944	(a) Distribution shall be pro rata based	l on total earnings
1945	and shall be made only to those entities that	contributed to
1946	6 <u>excess earnings.</u>	
1947	(b) Excess earnings of lead agencies sha	ll be used only in
1948	the service district in which they were earned	l <u>.</u>
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1949 (c) Additional state funds appropriated by the Legislature for lead agencies or made available pursuant to the budgetary 1950

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1951	amendment process described in s. 216.177 shall be transferred
1952	to the lead agencies.
1953	(d) The department shall amend a lead agency's contract to
1954	permit expenditure of the funds.
1955	(3) Notwithstanding other provisions in this section, the
1956	amount of the annual contract for a lead agency may be increased
1957	by excess federal funds earned in accordance with s.
1958	216.181(11).
1959	(4) Each contract with a lead agency shall provide for the
1960	payment by the department to the lead agency of a reasonable
1961	administrative cost in addition to funding for the provision of
1962	services.
1963	(5) A lead agency may carry forward documented unexpended
1964	state funds from one fiscal year to the next; however, the
1965	cumulative amount carried forward may not exceed 8 percent of
1966	the total contract. Any unexpended state funds in excess of that
1967	percentage must be returned to the department.
1968	(a) The funds carried forward may not be used in any way
1969	that would create increased recurring future obligations, and
1970	such funds may not be used for any type of program or service
1971	that is not currently authorized by the existing contract with
1972	the department.
1973	(b) Expenditures of funds carried forward must be
1974	separately reported to the department.
1975	(c) Any unexpended funds that remain at the end of the
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1976	contract period shall be returned to the department.
1977	(d) Funds carried forward may be retained through any
1978	contract renewals and any new procurements as long as the same
1979	lead agency is retained by the department.
1980	(6) It is the intent of the Legislature to improve
1981	services and local participation in community-based care
1982	initiatives by fostering community support and providing
1983	enhanced prevention and in-home services, thereby reducing the
1984	risk otherwise faced by lead agencies. There is established a
1985	community partnership matching grant program to be operated by
1986	the department for the purpose of encouraging local
1987	participation in community-based care for child welfare. A
1988	community-based care alliance direct-support organization, a
1989	children's services council, or another local entity that makes
1990	a financial commitment to a community-based care lead agency may
1991	be eligible for a matching grant. The total amount of the local
1992	contribution may be matched on a one-to-one basis up to a
1993	maximum annual amount of \$500,000 per lead agency. Awarded
1994	matching grant funds may be used for any prevention or in-home
1995	services that can be reasonably expected to reduce the number of
1996	children entering the child welfare system. Funding available
1997	for the matching grant program is subject to legislative
1998	appropriation of nonrecurring funds provided for this purpose.
1999	(7)(a) The department, in consultation with the Florida
2000	Coalition for Children, Inc., shall develop and implement a
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2001 community-based care risk pool initiative to mitigate the 2002 financial risk to eligible lead agencies. This initiative must 2003 include: 2004 1. A risk pool application and protocol developed by the 2005 department which outlines submission criteria, including, but 2006 not limited to, financial and program management, descriptive 2007 data requirements, and timeframes for submission of 2008 applications. Requests for funding from risk pool applicants 2009 shall be based on relevant and verifiable service trends and 2010 changes that have occurred during the current fiscal year. The 2011 application shall confirm that expenditure of approved risk pool 2012 funds by the lead agency shall be completed within the current 2013 fiscal year. 2014 2. A risk pool peer review committee, appointed by the 2015 secretary and consisting of department staff and representatives 2016 from at least three nonapplicant lead agencies, which reviews 2017 and assesses all risk pool applications. Upon completion of each 2018 application review, the peer review committee shall report its 2019 findings and recommendations to the secretary providing, at a 2020 minimum, the following information: 2021 a. Justification for the specific funding amount required 2022 by the risk pool applicant based on current year service trend 2023 data, including validation that the applicant's financial need 2024 was caused by circumstances beyond the control of the lead 2025 agency management;

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2026	b. Verification that the proposed use of risk pool funds
2027	meets at least one of the criteria in paragraph (c); and
2028	c. Evidence of technical assistance provided in an effort
2029	to avoid the need to access the risk pool and recommendations
2030	for technical assistance to the lead agency to ensure that risk
2031	pool funds are expended effectively and that the agency's need
2032	for future risk pool funding is diminished.
2033	(b) Upon approval by the secretary of a risk pool
2034	application, the department may request funds from the risk pool
2035	in accordance with s. 216.181(6)(a).
2036	(c) The purposes for which the community-based care risk
2037	pool shall be used include:
2038	1. Significant changes in the number or composition of
2039	clients eligible to receive services.
2040	2. Significant changes in the services that are eligible
2041	for reimbursement.
2042	3. Continuity of care in the event of failure,
2043	discontinuance of service, or financial misconduct by a lead
2044	agency.
2045	4. Significant changes in the mix of available funds.
2046	(d) The department may also request in its annual
2047	legislative budget request, and the Governor may recommend, that
2048	the funding necessary to carry out paragraph (c) be appropriated
2049	to the department. In addition, the department may request the
2050	allocation of funds from the community-based care risk pool in
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2051	accordance with s. 216.181(6)(a). Funds from the pool may be	
2052	used to match available federal dollars.	
2053	1. Such funds shall constitute partial security for	
2054	contract performance by lead agencies and shall be used to	
2055	offset the need for a performance bond.	
2056	2. The department may separately require a bond to	
2057	mitigate the financial consequences of potential acts of	
2058	malfeasance or misfeasance or criminal violations by the	
2059	provider.	
2060	Section 26. Section 409.16713, Florida Statutes, is	
2061	transferred, renumbered as section 409.991, Florida Statutes,	
2062	and paragraph (a) of subsection (1) of that section is amended,	
2063	to read:	
2064	409.991 409.16713 Allocation of funds for community-based	
2065	care lead agencies	
2066	(1) As used in this section, the term:	
2067	(a) "Core services funding" means all funds allocated to	
2068	community-based care lead agencies operating under contract with	
2069	the department pursuant to <u>s. 409.987</u> <del>s. 409.1671</del> , with the	
2070	following exceptions:	
2071	1. Funds appropriated for independent living;	
2072	2. Funds appropriated for maintenance adoption subsidies;	
2073	3. Funds allocated by the department for protective	
2074	investigations training;	
2075	4. Nonrecurring funds;	
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2076	5. Designated mental health wrap-around services funds;	
2077	and	
2078	6. Funds for special projects for a designated community-	
2079	based care lead agency.	
2080	Section 27. Section 409.992, Florida Statutes, is created	
2081	to read:	
2082	409.992 Lead agency expenditures	
2083	(1) The procurement of commodities or contractual services	
2084	by lead agencies shall be governed by the financial guidelines	
2085	developed by the department which comply with applicable state	
2086	and federal law and follow good business practices. Pursuant to	
2087	s. 11.45, the Auditor General may provide technical advice in	
2088	the development of the financial guidelines.	
2089	(2) Notwithstanding any other provision of law, a	
2090	community-based care lead agency may make expenditures for staff	
2091	cellular telephone allowances, contracts requiring deferred	
2092	payments and maintenance agreements, security deposits for	
2093	office leases, related agency professional membership dues other	
2094	than personal professional membership dues, promotional	
2095	materials, and grant writing services. Expenditures for food and	
2096	refreshments, other than those provided to clients in the care	
2097	of the agency or to foster parents, adoptive parents, and	
2098	caseworkers during training sessions, are not allowable.	
2099	(3) A lead community-based care agency and its	
2100	subcontractors are exempt from state travel policies as provided	
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2101	in s. 112.061(3)(a) for their travel expenses incurred in order	
2102	to comply with the requirements of this section.	
2103	Section 28. Section 409.993, Florida Statutes, is created	
2104	to read:	
2105	409.993 Lead agencies and subcontractor liability	
2106	(1) FINDINGS.—	
2107	(a) The Legislature finds that the state has traditionally	
2108	provided foster care services to children who have been the	
2109	responsibility of the state. As such, foster children have not	
2110	had the right to recover for injuries beyond the limitations	
2111	specified in s. 768.28. The Legislature has determined that	
2112	foster care and related services need to be outsourced pursuant	
2113	to this section and that the provision of such services is of	
2114	paramount importance to the state. The purpose for such	
2115	outsourcing is to increase the level of safety, security, and	
2116	stability of children who are or become the responsibility of	
2117	the state. One of the components necessary to secure a safe and	
2118	stable environment for such children is that private providers	
2119	maintain liability insurance. As such, insurance needs to be	
2120	available and remain available to nongovernmental foster care	
2121	and related services providers without the resources of such	
2122	providers being significantly reduced by the cost of maintaining	
2123	such insurance.	
2124	(b) The Legislature further finds that, by requiring the	
2125	following minimum levels of insurance, children in outsourced	
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2126 foster care and related services will gain increased protection 2127 and rights of recovery in the event of injury than provided for 2128 in s. 768.28. 2129 LEAD AGENCY LIABILITY.-(2) 2130 Other than an entity to which s. 768.28 applies, an (a) 2131 eligible community-based care lead agency, or its employees or 2132 officers, except as otherwise provided in paragraph (b), must, as a part of its contract, obtain a minimum of \$1 million per 2133 2134 claim/\$3 million per incident in general liability insurance 2135 coverage. The eligible community-based care lead agency must 2136 also require that staff who transport client children and 2137 families in their personal automobiles in order to carry out 2138 their job responsibilities obtain minimum bodily injury 2139 liability insurance in the amount of \$100,000 per claim, \$300,000 per incident, on their personal automobiles. In lieu of 2140 2141 personal motor vehicle insurance, the lead agency's casualty, 2142 liability, or motor vehicle insurance carrier may provide 2143 nonowned automobile liability coverage. Such insurance provides 2144 liability insurance for automobiles that the provider uses in 2145 connection with the agency's business but does not own, lease, 2146 rent, or borrow. Such coverage includes automobiles owned by the 2147 employees of the lead agency or a member of the employee's 2148 household but only while the automobiles are used in connection with the agency's business. The nonowned automobile coverage for 2149 2150 the lead agency applies as excess coverage over any other Page 86 of 115

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2151	collectible insurance. The personal automobile policy for the
2152	employee of the lead agency must be primary insurance, and the
2153	nonowned automobile coverage of the agency acts as excess
2154	insurance to the primary insurance. The lead agency shall
2155	provide a minimum limit of \$1 million in nonowned automobile
2156	coverage. In a tort action brought against such an eligible
2157	community-based care lead agency or employee, net economic
2158	damages shall be limited to \$1 million per liability claim and
2159	\$100,000 per automobile claim, including, but not limited to,
2160	past and future medical expenses, wage loss, and loss of earning
2161	capacity, offset by any collateral source payment paid or
2162	payable. In any tort action brought against such an eligible
2163	community-based care lead agency, noneconomic damages shall be
2164	limited to \$200,000 per claim. A claims bill may be brought on
2165	behalf of a claimant pursuant to s. 768.28 for any amount
2166	exceeding the limits specified in this paragraph. Any offset of
2167	collateral source payments made as of the date of the settlement
2168	or judgment shall be in accordance with s. 768.76. The
2169	community-based care lead agency is not liable in tort for the
2170	acts or omissions of its subcontractors or the officers, agents,
2171	or employees of its subcontractors.
2172	(b) The liability of an eligible community-based care lead
2173	agency described in this section shall be exclusive and in place
2174	of all other liability of such lead agency. The same immunities
2175	from liability enjoyed by such lead agencies shall extend as
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2176	well to each employee of the lead agency when such employee is	
2177	acting in furtherance of the agency's business, including the	
2178	transportation of clients served, as described in this	
2179	subsection, in privately owned vehicles. Such immunities are not	
2180	applicable to a lead agency or an employee who acts in a	
2181	culpably negligent manner or with willful and wanton disregard	
2182	or unprovoked physical aggression if such acts result in injury	
2183	or death or such acts proximately cause such injury or death.	
2184	Such immunities are not applicable to employees of the same lead	
2185	agency when each is operating in the furtherance of the agency's	
2186	business, but they are assigned primarily to unrelated work	
2187	within private or public employment. The same immunity	
2188	provisions enjoyed by a lead agency also apply to any sole	
2189	proprietor, partner, corporate officer or director, supervisor,	
2190	or other person who in the course and scope of his or her duties	
2191	acts in a managerial or policymaking capacity and the conduct	
2192	that caused the alleged injury arose within the course and scope	
2193	of those managerial or policymaking duties. As used in this	
2194	subsection and subsection (3), the term "culpable negligence"	
2195	means reckless indifference or grossly careless disregard of	
2196	human life.	
2197	(3) SUBCONTRACTOR LIABILITY	
2198	(a) A subcontractor of an eligible community-based care	
2199	lead agency which is a direct provider of foster care and	
2200	related services to children and families, and its employees or	
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2201 officers, except as otherwise provided in paragraph (b), must, as a part of its contract, obtain a minimum of \$1 million per 2202 2203 claim/\$3 million per incident in general liability insurance 2204 coverage. The subcontractor of an eligible community-based care 2205 lead agency must also require that staff who transport client 2206 children and families in their personal automobiles in order to 2207 carry out their job responsibilities obtain minimum bodily 2208 injury liability insurance in the amount of \$100,000 per claim, 2209 \$300,000 per incident, on their personal automobiles. In lieu of 2210 personal motor vehicle insurance, the subcontractor's casualty, 2211 liability, or motor vehicle insurance carrier may provide 2212 nonowned automobile liability coverage. Such insurance provides 2213 liability insurance for automobiles that the subcontractor uses 2214 in connection with the subcontractor's business but does not 2215 own, lease, rent, or borrow. Such coverage includes automobiles 2216 owned by the employees of the subcontractor or a member of the 2217 employee's household but only while the automobiles are used in 2218 connection with the subcontractor's business. The nonowned 2219 automobile coverage for the subcontractor applies as excess 2220 coverage over any other collectible insurance. The personal 2221 automobile policy for the employee of the subcontractor shall be 2222 primary insurance, and the nonowned automobile coverage of the 2223 subcontractor acts as excess insurance to the primary insurance. 2224 The subcontractor shall provide a minimum limit of \$1 million in 2225 nonowned automobile coverage. In a tort action brought against

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2226	such subcontractor or employee, net economic damages shall be
2227	limited to \$1 million per liability claim and \$100,000 per
2228	automobile claim, including, but not limited to, past and future
2229	medical expenses, wage loss, and loss of earning capacity,
2230	offset by any collateral source payment paid or payable. In a
2231	tort action brought against such subcontractor, noneconomic
2232	damages shall be limited to \$200,000 per claim. A claims bill
2233	may be brought on behalf of a claimant pursuant to s. 768.28 for
2234	any amount exceeding the limits specified in this paragraph. Any
2235	offset of collateral source payments made as of the date of the
2236	settlement or judgment shall be in accordance with s. 768.76.
2237	(b) The liability of a subcontractor of an eligible
2238	community-based care lead agency that is a direct provider of
2239	foster care and related services as described in this section
2240	shall be exclusive and in place of all other liability of such
2241	provider. The same immunities from liability enjoyed by such
2242	subcontractor provider shall extend as well to each employee of
2243	the subcontractor when such employee is acting in furtherance of
2244	the subcontractor's business, including the transportation of
2245	clients served, as described in this subsection, in privately
2246	owned vehicles. Such immunities are not applicable to a
2247	subcontractor or an employee who acts in a culpably negligent
2248	manner or with willful and wanton disregard or unprovoked
2249	physical aggression when such acts result in injury or death or
2250	such acts proximately cause such injury or death. Such
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2251 immunities are not applicable to employees of the same 2252 subcontractor when each is operating in the furtherance of the 2253 subcontractor's business, but they are assigned primarily to 2254 unrelated works within private or public employment. The same 2255 immunity provisions enjoyed by a subcontractor also apply to any 2256 sole proprietor, partner, corporate officer or director, 2257 supervisor, or other person who in the course and scope of his 2258 or her duties acts in a managerial or policymaking capacity and 2259 the conduct that caused the alleged injury arose within the 2260 course and scope of those managerial or policymaking duties. 2261 Section 29. Section 409.1675, Florida Statutes, is 2262 transferred and renumbered as section 409.994, Florida Statutes, 2263 and amended to read: 2264 409.994 409.1675 Lead Community-based care lead agencies 2265 providers; receivership.-2266 The Department of Children and Families Family (1)2267 Services may petition a court of competent jurisdiction for the 2268 appointment of a receiver for a <del>lead</del> community-based care lead 2269 agency provider established pursuant to s. 409.987 if s. 2270 409.1671 when any of the following conditions exist: 2271 (a) The lead agency community-based provider is operating 2272 without a license as a child-placing agency. 2273 The lead agency community-based provider has given (b) 2274 less than 120 days' notice of its intent to cease operations, 2275 and arrangements have not been made for another lead agency Page 91 of 115 PCB HFS 14-03a

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2276 community-based provider or for the department to continue the 2277 uninterrupted provision of services.

(c) The department determines that conditions exist in the lead <u>agency</u> <del>community-based provider</del> which present an imminent danger to the health, safety, or welfare of the dependent children under that <u>agency's</u> <del>provider's</del> care or supervision.
Whenever possible, the department shall make a reasonable effort to facilitate the continued operation of the program.

2284 The lead agency community-based provider cannot meet (d) its current financial obligations to its employees, contractors, 2285 2286 or foster parents. Issuance of bad checks or the existence of 2287 delinquent obligations for payment of salaries, utilities, or 2288 invoices for essential services or commodities shall constitute 2289 prima facie evidence that the lead agency community-based 2290 provider lacks the financial ability to meet its financial 2291 obligations.

(2) (a) The petition for receivership shall take precedence
over other court business unless the court determines that some
other pending proceeding, having statutory precedence, has
priority.

(b) A hearing shall be conducted within 5 days after the filing of the petition, at which time interested parties shall have the opportunity to present evidence as to whether a receiver should be appointed. The department shall give reasonable notice of the hearing on the petition to the lead

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2301 <u>agency</u> community-based provider.

2302 The court shall grant the petition upon finding that (C) 2303 one or more of the conditions in subsection (1) exists and the 2304 continued existence of the condition or conditions jeopardizes 2305 the health, safety, or welfare of dependent children. A receiver 2306 may be appointed ex parte when the court determines that one or 2307 more of the conditions in subsection (1) exists. After such 2308 finding, the court may appoint any person, including an employee 2309 of the department who is qualified by education, training, or 2310 experience to carry out the duties of the receiver pursuant to 2311 this section, except that the court may shall not appoint any 2312 member of the governing board or any officer of the lead agency 2313 community-based provider. The receiver may be selected from a 2314 list of persons qualified to act as receivers which is developed 2315 by the department and presented to the court with each petition 2316 of receivership.

2317 A receiver may be appointed for up to 90 days, and the (d) 2318 department may petition the court for additional 30-day 2319 extensions. Sixty days after appointment of a receiver and every 30 days thereafter until the receivership is terminated, the 2320 2321 department shall submit to the court an assessment of the lead 2322 agency's community based provider's ability to ensure the 2323 health, safety, and welfare of the dependent children under its 2324 supervision.

2325

(3) The receiver shall take such steps as are reasonably Page 93 of 115

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2326 necessary to ensure the continued health, safety, and welfare of 2327 the dependent children under the supervision of the lead <u>agency</u> 2328 <del>community-based provider</del> and shall exercise those powers and 2329 perform those duties set out by the court, including, but not 2330 limited to:

(a) Taking such action as is reasonably necessary to
protect or conserve the assets or property of the lead <u>agency</u>
<del>community-based provider</del>. The receiver may use the assets and
property and any proceeds from any transfer thereof only in the
performance of the powers and duties <u>provided</u> set forth in this
section and by order of the court.

(b) Using the assets of the lead <u>agency</u> community-based provider in the provision of care and services to dependent children.

(c) Entering into contracts and hiring agents and employees to carry out the powers and duties of the receiver under this section.

(d) Having full power to direct, manage, hire, and discharge employees of the lead <u>agency</u> <del>community based</del> <del>provider</del>. The receiver shall hire and pay new employees at the rate of compensation, including benefits, approved by the court.

(e) Honoring all leases, mortgages, and contractual
obligations of the lead <u>agency</u> <del>community-based provider</del>, but
only to the extent of payments that become due during the period
of the receivership.

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(4) (a) The receiver shall deposit funds received in a separate account and shall use this account for all disbursements.

(b) A payment to the receiver of any sum owing to the lead
 agency community-based provider shall discharge any obligation
 to the provider to the extent of the payment.

2357 (5)A receiver may petition the court for temporary relief 2358 from obligations entered into by the lead agency community-based 2359 provider if the rent, price, or rate of interest required to be 2360 paid under the agreement was substantially in excess of a 2361 reasonable rent, price, or rate of interest at the time the 2362 contract was entered into, or if any material provision of the 2363 agreement was unreasonable when compared to contracts negotiated 2364 under similar conditions. Any relief in this form provided by 2365 the court shall be limited to the life of the receivership, 2366 unless otherwise determined by the court.

(6) The court shall set the compensation of the receiver, which shall be considered a necessary expense of a receivership and may grant to the receiver such other authority necessary to ensure the health, safety, and welfare of the children served.

(7) A receiver may be held liable in a personal capacity only for the receiver's own gross negligence, intentional acts, or breaches of fiduciary duty. This section <u>may shall</u> not be interpreted to be a waiver of sovereign immunity should the department be appointed receiver.

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(8) If the receiver is not the department, the court may
require a receiver to post a bond to ensure the faithful
performance of these duties.

(9) The court may terminate a receivership when:
(a) The court determines that the receivership is no
longer necessary because the conditions that gave rise to the
receivership no longer exist; or

(b) The department has entered into a contract with a new lead <u>agency</u> community-based provider pursuant to <u>s. 409.987</u> <del>s.</del> 409.1671, and that contractor is ready and able to assume the duties of the previous <u>lead agency</u> provider.

(10) Within 30 days after the termination, unless this time period is extended by the court, the receiver shall give the court a complete accounting of all property of which the receiver has taken possession, of all funds collected and disbursed, and of the expenses of the receivership.

2392 Nothing in This section does not shall be construed (11)2393 to relieve any employee of the lead agency community-based 2394 provider placed in receivership of any civil or criminal 2395 liability incurred, or any duty imposed by law, by reason of 2396 acts or omissions of the employee before prior to the 2397 appointment of a receiver, and; nor shall anything contained in 2398 this section does not be construed to suspend during the 2399 receivership any obligation of the employee for payment of taxes 2400 or other operating or maintenance expenses of the lead agency

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2401 community-based provider or for the payment of mortgages or liens. The lead agency community-based provider shall retain the 2402 2403 right to sell or mortgage any facility under receivership, 2404 subject to the prior approval of the court that ordered the 2405 receivership. 2406 Section 30. Section 409.996, Florida Statutes, is created 2407 to read: 2408 409.996 Duties of the Department of Children and 2409 Families.-The department shall contract for the delivery, administration, or management of care for children in the child 2410 2411 protection and child welfare system. In doing so, the department 2412 retains responsibility for the quality of contracted services 2413 and programs and shall ensure that services are delivered in 2414 accordance with applicable federal and state statutes and 2415 regulations. 2416 (1)The department shall enter into contracts with lead 2417 agencies to perform the duties of a lead agency pursuant to s. 2418 409.988. At a minimum, the contracts must: 2419 Provide for the services needed to accomplish the (a) 2420 duties established in s. 409.988 and provide information to the 2421 department which is necessary to meet the requirements for a 2422 quality assurance program pursuant to subsection (18) and the 2423 child welfare results-oriented accountability system pursuant to s. 409.997. 2424 2425 (b) Provide for graduated penalties for failure to comply Page 97 of 115

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2426	with contract terms. Such penalties may include financial
2427	penalties, enhanced monitoring and reporting, corrective action
2428	plans, and early termination of contracts or other appropriate
2429	action to ensure contract compliance.
2430	(c) Ensure that the lead agency shall furnish current and
2431	accurate information on its activities in all cases in client
2432	case records in the state's statewide automated child welfare
2433	information system.
2434	(d) Specify the procedures to be used by the parties to
2435	resolve differences in interpreting the contract or to resolve
2436	disputes as to the adequacy of the parties' compliance with
2437	their respective obligations under the contract.
2438	(2) The department must adopt written policies and
2439	procedures for monitoring the contract for delivery of services
2440	by lead agencies which must be posted on the department's
2441	website. These policies and procedures must, at a minimum,
2442	address the evaluation of fiscal accountability and program
2443	operations, including provider achievement of performance
2444	standards, provider monitoring of subcontractors, and timely
2445	follow up of corrective actions for significant monitoring
2446	findings related to providers and subcontractors. These policies
2447	and procedures must also include provisions for reducing the
2448	duplication of the department's program monitoring activities
2449	both internally and with other agencies, to the extent possible.
2450	The department's written procedures must ensure that the written
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2451	findings, conclusions, and recommendations from monitoring the
2452	contract for services of lead agencies are communicated to the
2453	director of the provider agency and the community-based care
2454	alliance as expeditiously as possible.
2455	(3) The department shall receive federal and state funds
2456	as appropriated for the operation of the child welfare system
2457	and shall transmit these funds to the lead agencies as agreed.
2458	The department retains responsibility for the appropriate
2459	spending of these funds. The department shall monitor lead
2460	agencies to assess compliance with the financial guidelines
2461	established pursuant to s. 409.992 and other applicable state
2462	and federal laws.
2463	(4) The department shall provide technical assistance and
2464	consultation to lead agencies in the provision of care to
2465	children in the child protection and child welfare system.
2466	(5) The department retains the responsibility for the
2467	review, approval or denial, and issuances of all foster home
2468	licenses.
2469	(6) The department shall process all applications
2470	submitted by lead agencies for the Interstate Compact for
2471	Placement of Children and the Interstate Compact for Adoption
2472	and Medical Assistance.
2473	(7) The department shall assist lead agencies with access
2474	to and coordination with other service programs within the
2475	department.
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2476	(8) The department shall determine Medicaid eligibility
2477	for all referred children and will coordinate services with the
2478	Agency for Health Care Administration.
2479	(9) The department shall develop, in cooperation with the
2480	lead agencies, a standardized competency-based curriculum for
2481	certification training for child protection staff.
2482	(10) The department shall maintain the statewide adoptions
2483	website and provide information and training to the lead
2484	agencies relating to the website.
2485	(11) The department shall provide training and assistance
2486	to lead agencies regarding the responsibility of lead agencies
2487	relating to children receiving supplemental security income,
2488	social security, railroad retirement, or veterans' benefits.
2489	(12) With the assistance of a lead agency, the department
2490	shall develop and implement statewide and local interagency
2491	agreements needed to coordinate services for children and
2492	parents involved in the child welfare system who are also
2493	involved with the Agency for Persons with Disabilities, the
2494	Department of Juvenile Justice, the Department of Education, the
2495	Department of Health, and other governmental organizations that
2496	share responsibilities for children or parents in the child
2497	welfare system.
2498	(13) With the assistance of a lead agency, the department
2499	shall develop and implement a working agreement between the lead
2500	agency and the substance abuse and mental health managing entity
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2501 to integrate services and supports for children and parents 2502 serviced in the child welfare system. 2503 (14) The department shall work with the Agency for Health 2504 Care Administration to provide each child Medicaid early and 2505 periodic screening, diagnosis, and treatment, including 72-hour 2506 screening, periodic child health checkups, and prescribed follow 2507 up for ordered services, including but not limited to medical, 2508 dental, and vision care. 2509 The department shall assist lead agencies in (15) 2510 developing an array of services in compliance with the Title IV-2511 E Waiver and shall monitor the provision of those services. 2512 The department shall provide a mechanism to allow (16)2513 lead agencies to request a waiver of department policies and 2514 procedures that create inefficiencies or inhibit the performance 2515 of the lead agency duties. 2516 (17)The department shall directly or through contract 2517 provide attorneys to prepare and present cases in dependency 2518 court and shall ensure that the court is provided with adequate 2519 information for informed decisionmaking in dependency cases, including a fact sheet for each case which lists the names and 2520 2521 contact information for any child protective investigator, child 2522 protective investigation supervisor, case manager, case manager 2523 supervisor, and the regional department official responsible for 2524 the lead agency contract. For the Sixth Judicial Circuit, the 2525 department shall contract with the state attorney for the Page 101 of 115

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2526	provision	of	these	services.
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2527	(18) The department, in consultation with lead agencies,
2528	shall establish a quality assurance program for contracted
2529	services to dependent children. The quality assurance program
2530	shall be based on standards established by federal and state law
2531	and national accrediting organizations.
2532	(a) The department must evaluate each lead agency under
2533	contract at least annually. These evaluations shall cover the
2534	programmatic, operational, and fiscal operations of the lead
2535	agency and be consistent with the child welfare results-oriented
2536	accountability system pursuant to s. 409.997. The department
2537	must consult with the chief judge on the performance of the lead
2538	agency.
2539	(b) The department shall, to the extent possible, use
2540	independent financial audits provided by the lead agency to
2541	eliminate or reduce the ongoing contract and administrative
2542	reviews conducted by the department. If the department
2543	determines that such independent financial audits are
2544	inadequate, other audits, as necessary, may be conducted by the
2545	department. This paragraph does not abrogate the requirements of
2546	<u>s. 215.97.</u>
2547	(c) The department may suggest additional items to be
2548	included in such independent financial audits to meet the
2549	department's needs.
2550	(d) The department may outsource programmatic,
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2551	administrative, or fiscal monitoring oversight of lead agencies.
2552	(e) A lead agency must assure that all subcontractors are
2553	subject to the same quality assurance activities as the lead
2554	agency.
2555	Section 31. Section 409.997, Florida Statutes, is created
2556	to read:
2557	409.997 Child welfare results-oriented accountability
2558	system
2559	(1) The department and its contract providers, including
2560	lead agencies, community-based care providers, and other
2561	community partners participating in the state's child protection
2562	and child welfare system, share the responsibility for achieving
2563	the outcome goals specified in s. 409.986(2).
2564	(2) In order to assess the achievement of the goals
2565	specified in s. 409.986(2), the department shall maintain a
2566	comprehensive, results-oriented accountability system that
2567	monitors the use of resources, the quality and amount of
2568	services provided, and child and family outcomes through data
2569	analysis, research review, evaluation, and quality improvement.
2570	The system shall provide information about individual entities'
2571	performance as well as the performance of groups of entities
2572	working together as an integrated system of care on a local,
2573	regional, and statewide basis. In maintaining the
2574	accountability system, the department shall:
2575	(a) Identify valid and reliable outcome measures for each
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2576	of the goals specified in this subsection. The outcome data set
2577	must consist of a limited number of understandable measures
2578	using available data to quantify outcomes as children move
2579	through the system of care. Such measures may aggregate multiple
2580	variables that affect the overall achievement of the outcome
2581	goal. Valid and reliable measures must be based on adequate
2582	sample sizes, be gathered over suitable time periods, reflect
2583	authentic rather than spurious results, and may not be
2584	susceptible to manipulation.
2585	(b) Implement a monitoring system to track the identified
2586	outcome measures on a statewide, regional, and provider-specific
2587	basis. The monitoring system must identify trends and chart
2588	progress toward achievement of the goals specified in this
2589	section. The requirements of the monitoring system may be
2590	incorporated into the quality assurance system required under s.
2591	409.996(18).
2592	(c) Develop and maintain an analytical system that builds
2593	on the outcomes monitoring system to assess the statistical
2594	validity of observed associations between child welfare
2595	interventions and the measured outcomes. The analysis must use
2596	quantitative methods to adjust for variations in demographic or
2597	other conditions. The analysis must include longitudinal studies
2598	to evaluate longer term outcomes such as continued safety,
2599	family permanence, and transition to self-sufficiency. The
2600	analysis may also include qualitative research methods to
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2601	provide insight into statistical patterns.
2602	(d) Develop and maintain a program of research review to
2603	identify interventions that are supported by evidence as
2604	causally linked to improved outcomes.
2605	(e) Support an ongoing process of evaluation to determine
2606	the efficacy and effectiveness of various interventions.
2607	Efficacy evaluation is intended to determine the validity of a
2608	causal relationship between an intervention and an outcome.
2609	Effectiveness evaluation is intended to determine the extent to
2610	which the results can be generalized.
2611	(f) Develop and maintain an inclusive, interactive, and
2612	evidence-supported program of quality improvement which promotes
2613	individual skill building as well as organizational learning.
2614	(g) Develop and implement a method for making the results
2615	of the accountability system transparent for all parties
2616	involved in the child welfare system as well as policymakers and
2617	the public. The presentation shall provide a comprehensible,
2618	visual report card for the state and each community-based care
2619	region, indicating the current status relative to each goal and
2620	trends in that status over time. The presentation shall
2621	identify and report outcome measures which assess the
2622	performance of the department, community-based care lead agency,
2623	and its subcontractors working together as an integrated system
2624	of care.
2625	(3) The department shall establish a technical advisory
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2626	panel consisting of representatives from the Florida Institute	
2627	for Child Welfare established pursuant to s. 1004.615, lead	
2628	agencies, community-based care providers, other contract	
2629	providers, community-based care alliances, and family	
2630	representatives. The President of the Senate and the Speaker of	
2631	the House of Representatives shall each appoint a member to	
2632	serve as a legislative liaison to the panel. The technical	
2633	advisory panel shall advise the department on meeting the	
2634	requirements of this section.	
2635	(4) The accountability system may not rank or compare	
2636	performance among community-based care regions unless adequate	
2637	and specific adjustments are adopted which account for the	
2638	diversity in regions' demographics, resources, and other	
2639	relevant characteristics.	
2640	(5) The results of the accountability system must provide	
2641	the basis for performance incentives if funds for such payments	
2642	are made available through the General Appropriations Act.	
2643	(6) At least quarterly, the department shall make the	
2644	results of the accountability system available to the public	
2645	through publication on its website. The website must allow for	
2646	custom searches of the performance data.	
2647	(7) The department shall report by October 1 of each year	
2648	the statewide and individual community-based care lead agency	
2649	results for child protection and child welfare systems. The	
2650	department shall use the accountability system and consult with	
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PCB HFS 14-03a ORIGINAL YEAR 2651 the community-based care alliance and the chief judge or judges 2652 in the community-based care service area to prepare the report 2653 to the Governor, the President of the Senate, and the Speaker of 2654 the House of Representatives. 2655 Section 32. Section 409.998, Florida Statutes, is created 2656 to read: 2657 409.998 Community-based care oversight by community 2658 alliances.-2659 To provide independent, community-focused oversight of (1) 2660 child protection and child welfare services and the local system 2661 of community-based care, community alliances created in s. 2662 20.19(5), shall, with the assistance of the department, perform 2663 the following duties: 2664 Conduct a needs assessment and establishment of (a) 2665 community priorities for child protection and child welfare 2666 services. 2667 (b) Review the performance of the department, sheriff's 2668 office if the office provides child protective services, and 2669 lead agency individually and as an integrated system of care, 2670 and advise the department, sheriff's office if applicable, and 2671 lead agency regarding concerns and suggested areas of 2672 improvement. 2673 (c) Recommend a competitive procurement for the lead 2674 agency if programmatic or financial performance is poor. The 2675 community alliance shall make recommendations on the development Page 107 of 115 PCB HFS 14-03a

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2676	of the procurement document for such competitive procurement and						
2677	may suggest specific requirements relating to local needs and						
2678	services.						
2679	(d) Recommend a contract extension for the lead agency if						
2680	programmatic or financial performance is superior.						
2681	(e) In partnership with the Florida Institute for Child						
2682	Welfare established under s. 1004.615, develop recommendations						
2683	to the department and the community-based care lead agency to						
2684	improve child protection and child welfare policies and						
2685	practices.						
2686	(f) Promote greater community involvement in community-						
2687	based care through participation in community-based care lead						
2688	agency services and activities, solicitation of local financial						
2689	and in-kind resources, recruitment and retention of community						
2690	volunteers, and public awareness efforts.						
2691	Section 33. Section 827.10, Florida Statutes, is created to						
2692	read:						
2693	827.10 Unlawful abandonment of a child						
2694	(1) As used in this section, the term:						
2695	(a) "Abandons" or "abandonment" means to leave a child in						
2696	a place or with a person other than a relative with the intent						
2697	not to return to the child and with the intent not to provide						
2698	for the care of the child.						
2699	(b) "Care" means support and services necessary to						
2700	maintain the child's physical and mental health, including, but						
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2701	not limited to	, food, nut	rition, clothing,	shelter, supervisio	on,
2702	medicine, and	medical ser	vices that a prud	ent person would	
2703	consider esser	tial for th	e well-being of t	he child.	
2704	(c) "Car	egiver" has	the same meaning	as provided in s.	
2705	39.01(10).				
2706	(d) "Chi	.ld" means a	child for whose	care the caregiver i	_S
2707	legally respon	sible.			
2708	(e) "Rel	ative" has	the same meaning	as provided in s.	
2709	39.01(64).				
2710	(2) A ca	regiver who	abandons a child	under circumstances	3
2711	in which the c	aregiver kn	ew or should have	known that the	
2712	abandonment ex	poses the c	hild to unreasona	ble risk of harm	
2713	commits a felo	ny of the t	hird degree, puni	shable as provided i	<u>_n</u>
2714	<u>s. 775.082, s</u> .	775.083, o	r s. 775.084.		
2715	(3) This	section do	es not apply to a	person who surrende	ers
2716	<u>a newborn infa</u>	nt in compl	iance with s. 383	.50.	
2717	(4) This	section do	es not preclude p	rosecution for a	
2718	<u>criminal act u</u>	nder any ot	her law, includin	g, but not limited t	:0,
2719	prosecution of	child abus	e or neglect of a	child under s.	
2720	827.03.				
2721	Section 3	4. Section	1004.615, Florida	Statutes, is create	ed
2722	to read:				
2723	1004.615	Florida Ins	titute for Child	Welfare	
2724	(1) Ther	e is establ	ished the Florida	Institute for Child	1
2725	Safety within	the Florida	State University	College of Social	
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2726	Work. The purpose of the institute is to advance the well-being			
2727	of children and families by improving the performance of child			
2728	protection and child welfare services through research, policy			
2729	analysis, evaluation, and leadership development. The institute			
2730	shall consist of a consortium of public and private universities			
2731	offering degrees in social work and shall be housed within the			
2732	College of Social Work of the Florida State University.			
2733	(2) Using such resources as authorized in the General			
2734	Appropriations Act, the Department of Children and Families			
2735	shall contract with the institute for performance of the duties			
2736	described in subsection (4).			
2737	(3) The institute shall work with the department, sheriffs			
2738	providing child protective investigative services, community-			
2739	based care lead agencies, community-based care provider			
2740	organizations, the court system, the Department of Juvenile			
2741	Justice, domestic violence advocates, and other partners who			
2742	contribute to and participate in providing child protection and			
2743	child welfare services.			
2744	(4) The duties and responsibilities of the institute			
2745	include the following:			
2746	(a) Maintain a program of research that contributes to			
2747	scientific knowledge and informs both policy and practice			
2748	related to child safety, permanency, and child and family well-			
2749	being.			
2750	(b) Advise the department and other organizations			
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participating in the child protection and child welfare system 2751 2752 regarding scientific evidence on policy and practice related to 2753 child safety, permanency, and child and family well-being. 2754 (c) Advising about the management practices and 2755 administrative processes used by the department and other 2756 organizations participating in the child protection and child 2757 welfare system and recommend improvements that reduce 2758 burdensome, ineffective requirements for frontline staff and 2759 their supervisors while enhancing their ability to effectively 2760 investigate, analyze, problem-solve, and supervise. 2761 (d) Assess the performance of child protection and child 2762 welfare services based on specific outcome measures. 2763 Evaluate the scope and effectiveness of preservice and (e) 2764 inservice training for child protection and child welfare 2765 workers and advise and assist the department in efforts to 2766 improve these trainings. 2767 Assess the readiness of social work graduates to (f) 2768 assume job responsibilities in the child protection and child 2769 welfare system and identify gaps in education that can be 2770 addressed through the modification of curricula or the 2771 establishment of industry certifications. 2772 Develop and maintain a program of professional support (q) 2773 including training courses and consulting services that assist 2774 both individuals and organizations in implementing adaptive and 2775 resilient responses to workplace stress. Page 111 of 115

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2776	(h) Participate in the department's critical incident
2777	response team, assist in the preparation of reports about such
2778	incidents, and support the committee review of reports and
2779	development of recommendations.
2780	(i) Identify effective policies and promising practices,
2781	including but not limited to innovations in coordination between
2782	entities participating in the child protection and child welfare
2783	system, data analytics, working with the local community, and
2784	management of human service organizations and communicate these
2785	findings to the department and other organizations participating
2786	in the child protection and child welfare system.
2787	(5) The President of the Florida State University shall
2788	appoint a director to the institute. The director must be a
2789	child welfare professional with a doctoral degree in social work
2790	and hold a faculty appointment in the Florida State University
2791	College of Social Work. The institute shall be administered by
2792	the director, and the director's office shall be located at the
2793	Florida State University. The director is responsible for
2794	overall management of the institute and for developing and
2795	executing the work of the institute consistent with the
2796	responsibilities in subsection (4). The director shall engage
2797	individuals in other state universities with accredited colleges
2798	of social work to participate in the institute. Individuals from
2799	other university programs relevant to the institute's work,
2800	including but not limited to economics, management, law,
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2801	medicine, and education, may also be invited by the director to
2802	contribute to the institute. The universities involved in the
2803	institute shall provide facilities, staff, and other resources
2804	to the institute to establish statewide access to institute
2805	programs and services.
2806	(6) By October 1 of each year, the institute shall provide
2807	a written report to the Governor, the President of the Senate,
2808	and the Speaker of the House of Representatives which outlines
2809	its activities in the preceding year, reports significant
2810	research findings as well as results of other programs, and
2811	provides specific recommendations for improving child protection
2812	and child welfare services.
2813	(7)(a) The institute, or the Florida State University
2814	College of Social Work until the institute is operational, shall
2815	convene a task force to make recommendations for improving the
2816	state's child welfare system. The task force shall include but
2817	not be limited to representatives of the department, the
2818	Department of Juvenile Justice, community-based care lead
2819	agencies, the Florida Coalition for Children, child welfare
2820	services providers, including case management providers, the
2821	court system, the federally recognized statewide association for
2822	Florida's certified domestic violence centers, and advocates.
2823	The task force shall include individuals working directly with
2824	children and families, administrators, and experts. Individual
2825	members of the task force shall be responsible for their own
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2826	travel expenses.	The task force may meet in perso	on,
2827	telephonically,	through web-based technology, or	any combination
2828	thereof.		
2829	(b) The tas	k force shall establish individua	al workgroups on
2830	the following to	pics which may include additional	l members with
2831	directly relevan	t experience and expertise to mal	ke specific
2832	recommendations:		
2833	1. Reducing	paperwork and increasing the ret	tention of case
2834	managers, and		
2835	2. Care of	medically complex children within	n the child
2836	welfare system.		
2837	(c) The ins	titute or university shall submit	t interim
2838	reports from the	task force and workgroups by Fel	oruary 1, 2015,
2839	and final report	s by November 1, 2015, to the Gov	vernor, the
2840	President of the	Senate, and the Speaker of the H	House of
2841	Representatives.		
2842	Section 35.	Paragraph (h) is added to subsec	ction (1) of
2843	section 1009.25,	Florida Statutes, to read:	
2844	1009.25 Fe	e exemptions	
2845	(1) The fo	llowing students are exempt from	the payment of
2846	tuition and fees	, including lab fees, at a school	l district that
2847	provides workfor	ce education programs, Florida Co	ollege System
2848	institution, or	state university:	
2849	(h) Pursua	nt to s. 402.403, a child protect	tive
2850	investigator or	a child protective investigation	supervisor
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2851	employed	by the	Department	of	Children	and	Families	or	а
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- 2852 sheriff's office who is enrolled in an accredited bachelor's
- 2853 degree or master's degree in social work program or completing
- 2854 coursework required pursuant to s. 402.402(2)(a)2., provided
- 2855 that the student attains at least a grade of "B" in all courses
- 2856 for which tuition and fees are exempted.
  - Section 36. This act shall take effect July 1, 2014.

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