

1 A bill to be entitled

2 An act relating to child welfare; amending s. 39.2015,
3 F.S.; allowing critical incident rapid response teams
4 to review deaths other than those with ; requiring
5 quarterly reports from the advisory committee;
6 amending s. 39.3068, F.S.; requiring case staffings
7 when medical neglect is substantiated; amending s.
8 383.402, F.S.; requiring an epidemiological child
9 abuse death assessment and prevention system;
10 providing intent for the operation and interaction
11 between the state and local death review committees;
12 limiting state committee members to three consecutive
13 terms; providing for per diem and reimbursement of
14 expenses; specifying duties of the state committee;
15 providing for the convening of county or multicounty
16 local review committees and support by the county
17 health department directors; specifying membership of
18 local review committees and other meeting attendees;
19 specifying duties; requiring an annual statistical
20 report; specifying requirements for the report;
21 changing references to "districts" and "district
22 administrators"; amending s. 409.988; requiring
23 community-based care lead agencies to provide trauma-
24 informed services; providing an effective date.

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26 Be It Enacted by the Legislature of the State of Florida:

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 28 Section 1. Subsections (2) and (11) of section 39.2015,
 29 Florida Statutes, are amended to read:

30 39.2015 Critical incident rapid response team.—

31 (2) An immediate onsite investigation conducted by a
 32 critical incident rapid response team is required for all child
 33 deaths reported to the department if the child or another child
 34 in his or her family was the subject of a verified report of
 35 suspected abuse or neglect during the previous 12 months. The
 36 secretary may direct an immediate investigation for other cases
 37 involving death or serious injury to a child, including but not
 38 limited to those occurring during an open investigation.

39 (11) The secretary shall appoint an advisory committee
 40 made up of experts in child protection and child welfare,
 41 including the Statewide Medical Director for Child Protection
 42 under the Department of Health, a representative from the
 43 institute established pursuant to s. 1004.615, an expert in
 44 organizational management, and an attorney with experience in
 45 child welfare, to conduct an independent review of investigative
 46 reports from the critical incident rapid response teams and to
 47 make recommendations to improve policies and practices related
 48 to child protection and child welfare services. The advisory
 49 committee shall meet and ~~By October 1 of each year, the advisory~~
 50 ~~committee shall~~ submit quarterly reports ~~a report~~ to the
 51 secretary which include ~~includes~~ findings and recommendations.
 52 The secretary shall submit the reports ~~report~~ to the Governor,

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53 the President of the Senate, and the Speaker of the House of
54 Representatives.

55 Section 2. Subsection (3) of section 39.3068, Florida
56 Statutes, is amended to read:

57 39.3068 Reports of medical neglect.—

58 (3) The child shall be evaluated by the child protection
59 team as soon as practicable. ~~If After receipt of the report from~~
60 the child protection team reports that medical neglect was
61 substantiated, the department shall convene a case staffing
62 which shall be attended, at a minimum, by the child protective
63 investigator; department legal staff; and representatives from
64 the child protection team that evaluated the child, Children's
65 Medical Services, the Agency for Health Care Administration, the
66 community-based care lead agency, and any providers of services
67 to the child. However, the Agency for Health Care Administration
68 is not required to attend the staffing if the child is not
69 Medicaid eligible. The staffing shall consider, at a minimum,
70 available services, given the family's eligibility for services;
71 services that are effective in addressing conditions leading to
72 medical neglect allegations; and services that would enable the
73 child to safely remain at home. Any services that are available
74 and effective shall be provided.

75 Section 3. Section 383.402, Florida Statutes, is amended
76 to read:

77 383.402 Child abuse death review; State Child Abuse Death
78 Review Committee; local child abuse death review committees.—

79 (1) INTENT. It is the intent of the Legislature to
 80 establish a statewide multidisciplinary, multiagency,
 81 epidemiological child abuse death assessment and prevention
 82 system that consists of state and local review committees. The
 83 ~~state and local review~~ committees shall review the facts and
 84 circumstances of all deaths of children from birth ~~to~~ through
 85 age 18 which occur in this state and are reported to the central
 86 abuse hotline of the Department of Children and Families. The
 87 state committee and the local review committees shall work
 88 cooperatively. The state committee shall primarily provide
 89 direction and leadership of the review system and analyze data
 90 and recommendations from local committees to identify issues,
 91 trends, and recommended action on a statewide basis. The local
 92 committees shall primarily conduct individual case reviews of
 93 deaths, generate information, and make recommendations and
 94 implementing improvements at the local level. The purpose of the
 95 review shall be to use a data-based, epidemiological approach
 96 to:

- 97 (a) Achieve a greater understanding of the causes and
 98 contributing factors of deaths resulting from child abuse.
- 99 (b) Whenever possible, develop a communitywide approach to
 100 address such causes ~~eases~~ and contributing factors.
- 101 (c) Identify any gaps, deficiencies, or problems in the
 102 delivery of services to children and their families by public
 103 and private agencies which may be related to deaths that are the
 104 result of child abuse.

105 (d) Make ~~and implement~~ recommendations for changes in law,
 106 rules, and policies at the state and local levels, as well as
 107 develop practice standards that support the safe and healthy
 108 development of children and reduce preventable child abuse
 109 deaths.

110 (e) Implement such recommendations to the extent possible.

111 (2) STATE CHILD ABUSE DEATH REVIEW COMMITTEE.

112 (a) Membership.

113 1. The State Child Abuse Death Review Committee is
 114 established within the Department of Health and shall consist of
 115 a representative of the Department of Health, appointed by the
 116 State Surgeon General, who shall serve as the state committee
 117 coordinator. The head of each of the following agencies or
 118 organizations shall also appoint a representative to the state
 119 committee:

120 a. 1. The Department of Legal Affairs.

121 b. 2. The Department of Children and Families.

122 c. 3. The Department of Law Enforcement.

123 d. 4. The Department of Education.

124 e. 5. The Florida Prosecuting Attorneys Association, Inc.

125 f. 6. The Florida Medical Examiners Commission, whose
 126 representative must be a forensic pathologist.

127 2. (b) In addition, the State Surgeon General shall
 128 appoint the following members to the state committee, based on
 129 recommendations from the Department of Health and the agencies
 130 listed in paragraph (a), and ensuring that the committee

131 represents the regional, gender, and ethnic diversity of the
 132 state to the greatest extent possible:

133 a. 1. The Department of Health Statewide Child Protection
 134 Team Medical Director ~~for Child Protection.~~

135 b. 2. A public health nurse.

136 c. 3. A mental health professional who treats children or
 137 adolescents.

138 d. 4. An employee of the Department of Children and
 139 Families who supervises family services counselors and who has
 140 at least 5 years of experience in child protective
 141 investigations.

142 e. 5. The medical director of a child protection team.

143 f. 6. A member of a child advocacy organization.

144 g. 7. A social worker who has experience in working with
 145 victims and perpetrators of child abuse.

146 h. 8. A person trained as a paraprofessional in patient
 147 resources who is employed in a child abuse prevention program.

148 i. 9. A law enforcement officer who has at least 5 years
 149 of experience in children's issues.

150 j. 10. A representative of the Florida Coalition Against
 151 Domestic Violence.

152 k. 11. A representative from a private provider of programs
 153 on preventing child abuse and neglect.

154 1. A substance abuse treatment professional.

155 2. The members of the state committee shall be appointed to
 156 staggered terms of office which may not exceed 2 years, as

157 determined by the State Surgeon General. Members may be
 158 appointed to no more than three consecutive terms. The state
 159 committee shall elect a chairperson from among its members to
 160 serve for a 2-year term, and the chairperson may appoint ad hoc
 161 committees as necessary to carry out the duties of the
 162 committee.

163 3. Members of the state committee shall serve without
 164 compensation but may receive reimbursement for per diem and
 165 travel expenses incurred in the performance of their duties as
 166 provided in s. 112.061 and to the extent that funds are
 167 available.

168 (b)-(3) Duties. The State Child Abuse Death Review
 169 Committee shall:

170 1.(a) Develop a system for collecting data from local
 171 committees on deaths that are reported to the central abuse
 172 hotline the result of child abuse. The system must include a
 173 protocol for the uniform collection of data statewide, which
 174 shall at a minimum use the Child Death Review Case Reporting
 175 System administered by the National Center for the Review and
 176 Prevention of Child Deaths ~~uses existing data collection systems~~
 177 ~~to the greatest extent possible.~~

178 2.(b) Provide training to cooperating agencies,
 179 individuals, and local child abuse death review committees on
 180 the use of the child abuse death data system.

181 ~~(c) Prepare an annual statistical report on the incidence~~
 182 ~~and causes of death resulting from reported child abuse in the~~

183 ~~state during the prior calendar year. The state committee shall~~
 184 ~~submit a copy of the report by October 1 of each year to the~~
 185 ~~Governor, the President of the Senate, and the Speaker of the~~
 186 ~~House of Representatives. The report must include~~
 187 ~~recommendations for state and local action, including specific~~
 188 ~~policy, procedural, regulatory, or statutory changes, and any~~
 189 ~~other recommended preventive action.~~

190 3. (d) Provide training to local child abuse death review
 191 committee members on the dynamics and impact of domestic
 192 violence, substance abuse, or mental health disorders when there
 193 is a co-occurrence of child abuse. Training shall be provided by
 194 the Florida Coalition Against Domestic Violence, the Florida
 195 Alcohol and Drug Abuse Association, and the Florida Council for
 196 Community Mental Health in each entity's respective area of
 197 expertise.

198 4. (e) Develop statewide uniform guidelines, standards,
 199 and protocols, including a protocol for standardized data
 200 collection, and reporting, for local child abuse death review
 201 committees, and provide training and technical assistance to
 202 local committees.

203 5. (f) Develop statewide uniform guidelines for reviewing
 204 deaths that are the result of child abuse, including guidelines
 205 to be used by law enforcement agencies, prosecutors, medical
 206 examiners, health care practitioners, health care facilities,
 207 and social service agencies.

208 6. (g) Study the adequacy of laws, rules, training, and

209 services to determine what changes are needed to decrease the
 210 incidence of child abuse deaths and develop strategies and
 211 recruit partners to implement these changes.

212 7.~~(h)~~ Provide consultation on individual cases to local
 213 committees upon request.

214 8.~~(i)~~ Educate the public regarding the provisions of
 215 chapter 99-168, Laws of Florida, the incidence and causes of
 216 child abuse death, and ways by which such deaths may be
 217 prevented.

218 9.~~(j)~~ Promote continuing education for professionals who
 219 investigate, treat, and prevent child abuse or neglect.

220 10.~~(k)~~ Recommend, when appropriate, the review of the
 221 death certificate of a child who died as a result of abuse or
 222 neglect.

223 ~~(4) The members of the state committee shall be appointed~~
 224 ~~to staggered terms of office which may not exceed 2 years, as~~
 225 ~~determined by the State Surgeon General. Members are eligible~~
 226 ~~for 2 reappointments. The state committee shall elect a~~
 227 ~~chairperson from among its members to serve for a 2-year term,~~
 228 ~~and the chairperson may appoint ad hoc committees as necessary~~
 229 ~~to carry out the duties of the committee.~~

230 ~~(5) Members of the state committee shall serve without~~
 231 ~~compensation but are entitled to reimbursement for per diem and~~
 232 ~~travel expenses incurred in the performance of their duties as~~
 233 ~~provided in s. 112.061 and to the extent that funds are~~
 234 ~~available.~~

235 (3) LOCAL DEATH REVIEW COMMITTEES.

236 ~~(6)~~ At the direction of the State Surgeon General, a county

237 or multicounty death review committee shall be convened ~~the~~

238 ~~director of each county health department, or the directors of~~

239 ~~two or more county health departments by agreement, may convene~~

240 ~~and support a county or multicounty child abuse death review~~

241 ~~committee~~ in accordance with the protocols established by the

242 State Child Abuse Death Review Committee and supported by the

243 local county health department directors.

244 (a) Membership. Each local committee must include local

245 representatives from:

246 1. The a local state attorney's office, or his or her

247 designee.

248 2. The Medical Examiner's Office.

249 3. The local Department of Children and Families child

250 protective investigations unit.

251 4. The Department of Health child protection team.

252 5. The community-based care lead agency.

253 6. Law enforcement.

254 7. The school district.

255 8. A mental health treatment provider.

256 9. A domestic violence organization.

257 10. A substance abuse treatment provider.

258 11. and Any other members that are determined by guidelines

259 developed by the State Child Abuse Death Review Committee.

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261 To the extent possible, individuals from these organizations or
 262 entities who were involved with a child whose death was verified
 263 as caused by abuse or neglect, or with the family of such child,
 264 shall attend any meetings where the child's case is being
 265 reviewed. The members of a local committee shall be appointed
 266 to 2-year terms and may be reappointed. ~~The local committee~~
 267 ~~shall elect a chairperson from among its members.~~ Members shall
 268 serve without compensation but may receive ~~are entitled to~~
 269 reimbursement for per diem and travel expenses incurred in the
 270 performance of their duties as provided in s. 112.061 and to the
 271 extent that funds are available.

272 (b)-(7) Duties. Each local child abuse death review
 273 committee shall:

274 1.(a) Assist the state committee in collecting data on
 275 deaths that are the result of child abuse, in accordance with
 276 the protocol established by the state committee. The local
 277 committee shall complete the individual case report in the Child
 278 Death Review Case Reporting System to the fullest extent
 279 possible.

280 2.(b) Submit written reports as required by ~~at the~~
 281 ~~direction of~~ the state committee. The reports must include:

282 a. Nonidentifying information on individual cases.

283 b. A listing of any system issues identified through the
 284 review process and recommendations for system improvements and
 285 needed resources, training, and information dissemination where
 286 gaps or deficiencies may exist.

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~~and~~

c. ~~Any~~ the steps taken by the local committee and private and public agencies to implement necessary changes and improve the coordination of services and reviews.

3.~~(e)~~ Submit all records requested by the state committee at the conclusion of its review of a death resulting from child abuse.

4.~~(d)~~ Abide by the standards and protocols developed by the state committee.

5.~~(e)~~ On a case-by-case basis, request that the state committee review the data of a particular case.

(4) ANNUAL STATISTICAL REPORT. The state committee shall prepare and submit an annual statistical report by October 1 of each year to the Governor, the President of the Senate, and the Speaker of the House of Representatives. The report must be comprehensive and include data, trends, analysis, findings, and recommendations for state and local action regarding deaths from child abuse. Data must be presented on an individual calendar year basis and in the context of a multi-year trend. At a minimum, the report must include:

(a) Descriptive statistics, including demographic information regarding victims and caregivers and about the causes and nature of deaths.

b. A detailed statistical analysis of the incidence and causes of deaths.

c. Specific issues identified within current policy,

313 procedure, regulation, or statute and recommendations to address
 314 them from both the state and local committees.

315 e. Other recommendations to prevent deaths from child
 316 abuse based on an analysis of the data presented in the report.

317 (5)-(8) ACCESS TO AND USE OF RECORDS. Notwithstanding any
 318 other law, the chairperson of the State Child Abuse Death Review
 319 Committee, or the chairperson of a local committee, shall be
 320 provided with access to any information or records that pertain
 321 to a child whose death is being reviewed by the committee and
 322 that are necessary for the committee to carry out its duties,
 323 including information or records that pertain to the child's
 324 family, as follows:

325 (a) Patient records in the possession of a public or
 326 private provider of medical, dental, or mental health care,
 327 including, but not limited to, a facility licensed under chapter
 328 393, chapter 394, or chapter 395, or a health care practitioner
 329 as defined in s. 456.001. Providers may charge a fee for copies
 330 not to exceed 50 cents per page for paper records and \$1 per
 331 fiche for microfiche records.

332 (b) Information or records of any state agency or
 333 political subdivision which might assist a committee in
 334 reviewing a child's death, including, but not limited to,
 335 information or records of the Department of Children and
 336 Families, the Department of Health, the Department of Education,
 337 or the Department of Juvenile Justice.

338 (c)-(9) The State Child Abuse Death Review Committee or a

339 local committee shall have access to all information of a law
 340 enforcement agency which is not the subject of an active
 341 investigation and which pertains to the review of the death of a
 342 child. A committee may not disclose any information that is not
 343 subject to public disclosure by the law enforcement agency, and
 344 active criminal intelligence information or criminal
 345 investigative information, as defined in s. 119.011(3), may not
 346 be made available for review or access under this section.

347 (d)~~(10)~~ The state committee and any local committee may
 348 share any relevant information that pertains to the review of
 349 the death of a child.

350 (e)~~(11)~~ A member of the state committee or a local
 351 committee may not contact, interview, or obtain information by
 352 request or subpoena directly from a member of a deceased child's
 353 family as part of a committee's review of a child abuse death,
 354 except that if a committee member is also a public officer or
 355 state employee, that member may contact, interview, or obtain
 356 information from a member of the deceased child's family, if
 357 necessary, as part of the committee's review. A member of the
 358 deceased child's family may voluntarily provide records or
 359 information to the state committee or a local committee.

360 (f)~~(12)~~ The chairperson of the State Child Abuse Death
 361 Review Committee may require the production of records by
 362 requesting a subpoena, through the Department of Legal Affairs,
 363 in any county of the state. Such subpoena is effective
 364 throughout the state and may be served by any sheriff. Failure

365 to obey the subpoena is punishable as provided by law.

366 (g) ~~(13)~~ This section does not authorize the members of the
 367 state committee or any local committee to have access to any
 368 grand jury proceedings.

369 (h) ~~(14)~~ A person who has attended a meeting of the state
 370 committee or a local committee or who has otherwise participated
 371 in activities authorized by this section may not be permitted or
 372 required to testify in any civil, criminal, or administrative
 373 proceeding as to any records or information produced or
 374 presented to a committee during meetings or other activities
 375 authorized by this section. However, this subsection does not
 376 prevent any person who testifies before the committee or who is
 377 a member of the committee from testifying as to matters
 378 otherwise within his or her knowledge. An organization,
 379 institution, committee member, or other person who furnishes
 380 information, data, reports, or records to the state committee or
 381 a local committee is not liable for damages to any person and is
 382 not subject to any other civil, criminal, or administrative
 383 recourse. This subsection does not apply to any person who
 384 admits to committing a crime.

385 (6) ~~(15)~~ DEPARTMENT OF HEALTH RESPONSIBILITIES.

386 (a) The Department of Health shall administer the funds
 387 appropriated to operate the review committees and may apply for
 388 grants and accept donations.

389 (b) ~~(16)~~ To the extent that funds are available, the
 390 Department of Health may hire staff or consultants to assist a

391 review committee in performing its duties. Funds may also be
 392 used to reimburse reasonable expenses of the staff and
 393 consultants for the state committee and the local committees.

394 (c) ~~(17)~~ For the purpose of carrying out the
 395 responsibilities assigned to the State Child Abuse Death Review
 396 Committee and the local review committees, the State Surgeon
 397 General may substitute an existing entity whose function and
 398 organization include the function and organization of the
 399 committees established by this section.

400 (7) ~~(18)~~ DEPARTMENT OF CHILDREN AND FAMILIES'
 401 RESPONSIBILITIES.

402 (a) Each regional managing director ~~district administrator~~
 403 of the Department of Children and Families must appoint a child
 404 abuse death review coordinator for the region ~~district~~. The
 405 coordinator must have knowledge and expertise in the area of
 406 child abuse and neglect. The coordinator's general
 407 responsibilities include:

408 1. ~~(a)~~ Coordinating with the local child abuse death review
 409 committee.

410 2. ~~(b)~~ Ensuring the appropriate implementation of the child
 411 abuse death review process and all regional ~~district~~ activities
 412 related to the review of child abuse deaths.

413 3. ~~(c)~~ Working with the committee to ensure that the
 414 reviews are thorough and that all issues are appropriately
 415 addressed.

416 4. ~~(d)~~ Maintaining a system of logging child abuse deaths

417 covered by this procedure and tracking cases during the child
418 abuse death review process.

419 5.~~(e)~~ Conducting or arranging for a Florida Safe Families
420 Network Abuse Hotline Information System (FAHIS) record check on
421 all child abuse deaths covered by this procedure to determine
422 whether there were any prior reports concerning the child or
423 concerning any siblings, other children, or adults in the home.

424 6.~~(f)~~ Coordinating child abuse death review activities, as
425 needed, with individuals in the community and the Department of
426 Health.

427 7.~~(g)~~ Notifying the regional managing director ~~district~~
428 ~~administrator~~, the Secretary of the Department of Children and
429 Families, the Deputy Secretary for Health and Deputy State
430 Health Officer for Children's Medical Services, and the
431 Department of Health Child Abuse Death Review Coordinator of all
432 ~~child abuse~~ deaths meeting criteria for review as specified in
433 this section within 1 working day after case closure ~~verifying~~
434 ~~the child's death was due to abuse, neglect, or abandonment.~~

435 8.~~(h)~~ Ensuring that all critical issues identified by the
436 local child abuse death review committee are brought to the
437 attention of the regional managing director ~~district~~
438 ~~administrator~~ and the Secretary of the Department of Children
439 and Families.

440 9.~~(i)~~ Providing technical assistance to the local child
441 abuse death review committee during the review of any child
442 abuse death.

443 Section 4. Subsection (3) of section 409.988, Florida
444 Statutes, is amended to read:

445 409.988 Lead agency duties; general provisions.—

446 (3) SERVICES.—A lead agency must serve dependent children
447 through services that are trauma-informed and supported by
448 research or are best child welfare practices. The agency may
449 also provide innovative services, including, but not limited to,
450 family-centered, cognitive-behavioral, trauma-informed
451 interventions designed to mitigate out-of-home placements.

452 Section 5. This act shall take effect July 1, 2015.