

By the Committee on Children and Families; and Senator Cowin

300-1690D-00

1 A bill to be entitled
2 An act relating to child welfare; amending s.
3 20.19, F.S.; modifying the certification
4 program for family safety and preservation
5 employees and agents; amending s. 39.201, F.S.;
6 providing for the release of abuse hotlines
7 recordings to specified persons and entities;
8 providing circumstances in which an officer or
9 employee of the judicial branch is not required
10 to report child abuse, abandonment, or neglect;
11 revising procedures; amending s. 39.202, F.S.;
12 specifying persons to whom the names of persons
13 reporting child abuse, abandonment, or neglect
14 may be released; amending s. 39.205, F.S.;
15 exempting judges from prosecution for failure
16 to report; amending s. 39.301, F.S.; clarifying
17 provisions relating to initiation of protective
18 investigations and criminal investigations;
19 clarifying that the age of parents shall be
20 factored into risk assessments; providing
21 circumstances under which an injunction must be
22 sought; providing procedures; changing certain
23 time requirements; amending s. 39.303, F.S.;
24 revising provisions governing the composition,
25 qualifications, training, and duties of child
26 protection teams; prescribing circumstances
27 under which face-to-face medical evaluations
28 are necessary and procedures for determining
29 whether they are necessary; providing for
30 collaboration by agency quality assurance
31 programs; amending s. 39.304, F.S.; revising

1 provisions governing the use of photographs
2 taken by child protection teams; amending s.
3 39.3065, F.S.; directing that the sheriff of
4 Seminole County be awarded a grant; amending s.
5 39.401, F.S.; requiring documentation to the
6 court when a child is not placed with a
7 relative or other specified adult; amending s.
8 39.402, F.S.; providing for initial assessment
9 after a shelter hearing; amending s. 39.507,
10 F.S.; revising provisions governing the
11 authority of courts to provide for the child as
12 adjudicated; amending s. 383.011, F.S.;
13 providing for a campaign to help certain
14 pregnant teenagers; amending s. 383.402, F.S.;
15 deleting reference to the Kayla McKean Child
16 Protection Act; amending s. 383.402, F.S.;
17 revising duties of local child abuse death
18 review committees and of district child abuse
19 death review coordinators; amending s.
20 409.1671, F.S.; prescribing times when
21 summaries of investigations must be provided to
22 the community-based agency; amending s.
23 409.175, F.S.; requiring a plan for
24 streamlining foster parent training; requiring
25 that certain information be provided to
26 licensed foster homes; creating s. 409.1753,
27 F.S.; specifying duties of the Department of
28 Children and Family Services or its agents
29 regarding foster care; providing for dependency
30 court pilot programs; requiring a report;
31 prohibiting position-lapse adjustments for

1 certain positions; establishing a work group
2 within the Department of Children and Family
3 Services; providing duties; requiring reports;
4 providing an appropriation; repealing s. 1, ch.
5 99-168, Laws of Florida, which provides the
6 short title for the Kayla McKean Child
7 Protection Act; providing an effective date.
8

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

10

11 Section 1. Subsection (4) of section 20.19, Florida
12 Statutes, is amended to read:

13 20.19 Department of Children and Family
14 Services.--There is created a Department of Children and
15 Family Services.

16 (4) CERTIFICATION PROGRAMS FOR DEPARTMENT
17 EMPLOYEES.--The department is authorized to create
18 certification programs for family safety and preservation
19 employees and agents to ensure that only qualified employees
20 and agents provide child protection services. The department
21 shall develop specific certification criteria related to
22 investigations involving children who have developmental
23 disabilities, emotional disturbances, or chronic medical
24 conditions or who are residing in residential treatment
25 facilities.The department is authorized to develop rules that
26 include qualifications for certification, including training
27 and testing requirements, continuing education requirements
28 for ongoing certification, and decertification procedures to
29 be used to determine when an individual no longer meets the
30 qualifications for certification and to implement the
31 decertification of an employee or agent.

1 Section 2. Subsections (2), (7), (8), and (9) of
2 section 39.201, Florida Statutes, are amended to read:

3 39.201 Mandatory reports of child abuse, abandonment,
4 or neglect; mandatory reports of death; central abuse
5 hotline.--

6 (2)(a) Each report of known or suspected child abuse,
7 abandonment, or neglect pursuant to this section, except those
8 solely under s. 827.04(3), shall be made immediately to the
9 department's central abuse hotline on the single statewide
10 toll-free telephone number, and, if the report is of an
11 instance of known or suspected child abuse by a noncaretaker,
12 the call shall be immediately electronically transferred to
13 the appropriate county sheriff's office by the central abuse
14 hotline. If the report is of an instance of known or
15 suspected child abuse involving impregnation of a child under
16 16 years of age by a person 21 years of age or older solely
17 under s. 827.04(3), the report shall be made immediately to
18 the appropriate county sheriff's office or other appropriate
19 law enforcement agency. If the report is of an instance of
20 known or suspected child abuse solely under s. 827.04(3), the
21 reporting provisions of this subsection do not apply to health
22 care professionals or other persons who provide medical or
23 counseling services to pregnant children when such reporting
24 would interfere with the provision of medical services.

25 (b) The department must consider valid and accept for
26 investigation any report received by the central abuse hotline
27 from a judge, teacher or other professional school official,
28 or physician, as specified in paragraph (1)(a), paragraph
29 (1)(d), or paragraph (1)(g), who is acting in his or her
30 professional capacity, alleging harm as defined in s. 39.01.

31

1 (c) Reporters in occupation categories designated in
2 subsection (1) are required to provide their names to the
3 hotline staff. The names of reporters shall be entered into
4 the record of the report, but shall be held confidential as
5 provided in s. 39.202.

6 (d) Reports involving known or suspected institutional
7 child abuse or neglect shall be made and received in the same
8 manner as all other reports made pursuant to this section.

9 (e) Reports involving a known or suspected juvenile
10 sexual offender shall be made and received by the department.

11 1. The department shall determine the age of the
12 alleged juvenile sexual offender if known.

13 2. When the alleged juvenile sexual offender is 12
14 years of age or younger, the department shall proceed with an
15 investigation of the report pursuant to this part, immediately
16 electronically transfer the call to the appropriate law
17 enforcement agency office by the central abuse hotline, and
18 send a written report of the allegation to the appropriate
19 county sheriff's office within 48 hours after the initial
20 report is made to the central abuse hotline.

21 3. When the alleged juvenile sexual offender is 13
22 years of age or older, the department shall immediately
23 electronically transfer the call to the appropriate county
24 sheriff's office by the central abuse hotline, and send a
25 written report to the appropriate county sheriff's office
26 within 48 hours after the initial report to the central abuse
27 hotline.

28 (f) Hotline counselors shall receive periodic training
29 in encouraging reporters to provide their names when reporting
30 abuse, abandonment, or neglect. Callers shall be advised of
31 the confidentiality provisions of s. 39.202. The department

1 shall secure and install electronic equipment that
2 automatically provides to the hotline the number from which
3 the call is placed. This number shall be entered into the
4 report of abuse, abandonment, or neglect and become a part of
5 the record of the report, but shall enjoy the same
6 confidentiality as provided to the identity of the caller
7 pursuant to s. 39.202.

8 (g) The department shall voice-record all incoming or
9 outgoing calls that are received or placed by the central
10 abuse hotline which relate to suspected or known child abuse,
11 neglect, or abandonment. The recording shall become a part of
12 the record of the report, but, notwithstanding s. 39.202,
13 shall be released in full to law enforcement agencies and
14 state attorneys for the purpose of investigating and
15 prosecuting criminal charges pursuant to s. 39.205 or to
16 employees of the department for the purpose of investigating
17 and seeking administrative penalties pursuant to s. 39.206 ~~is~~
18 ~~subject to the same confidentiality as is provided to the~~
19 ~~identity of the caller under s. 39.202.~~

20 (7) This section does not require a professional who
21 is hired by or enters into a contract with the department for
22 the purpose of treating or counseling any person, as a result
23 of a report of child abuse, abandonment, or neglect, to again
24 report to the central abuse hotline the abuse, abandonment, or
25 neglect that was the subject of the referral for treatment.
26 This section does not require an officer or employee of the
27 judicial branch to again provide notice of reasonable cause to
28 suspect child abuse, abandonment, or neglect when that child
29 is currently being investigated by the department, when there
30 is an existing dependency case, or when the matter has
31 previously been reported to the department, provided that

1 there is reasonable cause to believe that the information is
2 already known to the department. This subsection applies only
3 when the information has been provided to the officer or
4 employee in the course of his or her official duties.

5 (8) Nothing in this chapter or in the contracting with
6 community-based care providers for privatization of foster
7 care and related services as specified in s. 409.1671 shall be
8 construed to remove or reduce the duty and responsibility of
9 any person, including any employee of the community-based care
10 ~~privatization~~ provider, to report a suspected or actual case
11 of child abuse, abandonment, or neglect or the sexual abuse of
12 a child to the department's central abuse hotline.

13 (9) On an ongoing basis, the department's quality
14 assurance program shall review calls ~~reports~~ to the hotline
15 involving three or more unaccepted reports on a single child
16 in order to detect such things as harassment and situations
17 that warrant an investigation because of the frequency or
18 variety of the source of the reports. The assistant secretary
19 may refer a case for investigation when it is determined, as a
20 result of this review, that an investigation may be warranted.
21 The hotline shall document all calls for purposes of
22 administering this subsection when such calls relate
23 specifically to all definitions of harm under this chapter.

24 Section 3. Subsection (4) of section 39.202, Florida
25 Statutes, is amended to read:

26 39.202 Confidentiality of reports and records in cases
27 of child abuse or neglect.--

28 (4) The name of any person reporting child abuse,
29 abandonment, or neglect may not be released to any person
30 other than employees of the department responsible for child
31 protective services, the central abuse hotline, law

1 enforcement, the child protection team, or the appropriate
2 state attorney, without the written consent of the person
3 reporting. This does not prohibit the subpoenaing of a person
4 reporting child abuse, abandonment, or neglect when deemed
5 necessary by the court, the state attorney, or the department,
6 provided the fact that such person made the report is not
7 disclosed. Any person who reports a case of child abuse or
8 neglect may, at the time he or she makes the report, request
9 that the department notify him or her that a child protective
10 investigation occurred as a result of the report. Any person
11 specifically listed in s. 39.201(1) who makes a report in his
12 or her official capacity may also request a written summary of
13 the outcome of the investigation. The department shall mail
14 such a notice to the reporter within 10 days after completing
15 the child protective investigation.

16 Section 4. Subsection (1) of section 39.205, Florida
17 Statutes, is amended to read:

18 39.205 Penalties relating to reporting of child abuse,
19 abandonment, or neglect.--

20 (1) A person who is required to report known or
21 suspected child abuse, abandonment, or neglect and who
22 knowingly and willfully fails to do so, or who knowingly and
23 willfully prevents another person from doing so, is guilty of
24 a misdemeanor of the first degree, punishable as provided in
25 s. 775.082 or s. 775.083. A judge, subject to discipline
26 pursuant to s. 12 of Art. V of the State Constitution, shall
27 not be subject to criminal prosecution when the information
28 was received in the course of official duties.

29 Section 5. Subsection (2), paragraph (b) of subsection
30 (8), and subsections (12), (14), (17), and (18) of section
31 39.301, Florida Statutes, are amended to read:

1 39.301 Initiation of protective investigations.--
2 (2)(a) ~~Upon notification by the~~
3 ~~department's central abuse hotline under subsection (1), the~~
4 ~~designated child protective investigator shall immediately~~
5 ~~forward allegations of criminal conduct to the municipality or~~
6 ~~county notify the appropriate law enforcement agency of the~~
7 ~~county in which the alleged conduct has known or suspected~~
8 ~~child abuse, abandonment, or neglect is believed to have~~
9 ~~occurred.~~
10 (b) As used in this subsection, the term "criminal
11 conduct" means:
12 1. A child is known or suspected to be the victim of
13 child abuse, as defined in s. 827.03, or of neglect of a
14 child, as defined in s. 827.03.
15 2. A child is known or suspected to have died as a
16 result of abuse or neglect.
17 3. A child is known or suspected to be the victim of
18 aggravated child abuse, as defined in s. 827.03.
19 4. A child is known or suspected to be the victim of
20 sexual battery, as defined in s. 827.071, or of sexual abuse,
21 as defined in s. 39.01.
22 5. A child is known or suspected to be the victim of
23 institutional child abuse or neglect, as defined in s. 39.01,
24 and as provided for in s. 39.302(1).
25
26 Upon receiving a written report of an allegation of criminal
27 conduct from the department ~~receipt of a report~~, the law
28 enforcement agency shall ~~must~~ review the information in the
29 written report to ~~and~~ determine whether a criminal
30 investigation ~~of the case~~ is warranted, and, if the law
31 enforcement agency accepts the case for ~~so, shall conduct the~~

1 criminal investigation ~~that shall be coordinated~~, it shall
2 coordinate its investigative activities with the department
3 whenever ~~feasible possible~~, with the child protective
4 investigation of the department or its agent. If the law
5 enforcement agency does not accept the case for criminal
6 investigation, the agency shall notify the department in
7 writing.

8 (c) The local law enforcement agreement required in s.
9 39.306 must describe the specific local protocols for
10 implementing this section.

11 (8) The person responsible for the investigation shall
12 make a preliminary determination as to whether the report is
13 complete, consulting with the attorney for the department when
14 necessary. In any case in which the person responsible for
15 the investigation finds that the report is incomplete, he or
16 she shall return it without delay to the person or agency
17 originating the report or having knowledge of the facts, or to
18 the appropriate law enforcement agency having investigative
19 jurisdiction, and request additional information in order to
20 complete the report; however, the confidentiality of any
21 report filed in accordance with this chapter shall not be
22 violated.

23 (b) If it is determined that the child is in need of
24 the protection and supervision of the court, the department
25 shall file a petition for dependency. A petition for
26 dependency shall be filed in all cases classified by the
27 department as high-risk. Factors that the department may
28 consider in determining whether a case is high-risk include,
29 but are not limited to, the young age of the cases, including,
30 ~~but not limited to, cases involving parents or legal~~

31

1 | custodians ~~of a young age~~, the use of illegal drugs, or
2 | domestic violence.

3 | (12)~~(a)~~ If the child protective investigator
4 | determines that the child can be maintained safely in the
5 | child's own home only after injunctive relief has been granted
6 | pursuant to s. 39.504, the investigator must file a request
7 | for injunction and shall determine whether a parent or legal
8 | custodian is available, willing, and capable of removing the
9 | child from the home temporarily while the injunctive relief is
10 | sought.

11 | (a) If a parent or legal custodian is available,
12 | willing, and capable of removing the child from the home
13 | temporarily while injunctive relief is sought and the parent
14 | or legal custodian provides the child protective investigator
15 | with a safety plan, the child shall be left in the custody of
16 | the parent or legal custodian as long as the safety plan is
17 | followed. In cases in which domestic violence is occurring in
18 | the household, the protective investigator shall request
19 | assistance from the local certified domestic violence center
20 | in developing the safety plan.

21 | (b) If a parent or legal custodian is not available,
22 | willing, and capable of removing the child from the home
23 | temporarily while injunctive relief is sought, if the parent
24 | or legal custodian is unable or unwilling to provide the child
25 | protective investigator with a safety plan, if the child
26 | protective investigator is unwilling to approve the safety
27 | plan provided by the parent or legal custodian, or if the
28 | parent or legal custodian fails to follow the approved safety
29 | plan, the child shall be taken into protective custody while
30 | injunctive relief is sought pursuant to s. 39.504.

31 |

1 (c) If the department or its agent determines that a
2 child requires immediate or long-term protection through:

- 3 1. Medical or other health care; or
4 2. Homemaker care, day care, protective supervision,
5 or other services to stabilize the home environment, including
6 intensive family preservation services through the Family
7 Builders Program or the Intensive Crisis Counseling Program,
8 or both,

9
10 such services shall first be offered for voluntary acceptance
11 unless there are high-risk factors that may impact the ability
12 of the parents or legal custodians to exercise judgment. Such
13 factors may include the parents' or legal custodians' young
14 age or history of substance abuse or domestic violence.

15 (d)~~(b)~~ The parents or legal custodians shall be
16 informed of the right to refuse services, as well as the
17 responsibility of the department to protect the child
18 regardless of the acceptance or refusal of services. If the
19 services are refused and the department deems that the child's
20 need for protection so requires, the department shall take the
21 child into protective custody or petition the court as
22 provided in this chapter.

23 (e)~~(c)~~ The department, in consultation with the
24 judiciary, shall adopt by rule criteria that are factors
25 requiring that the department take the child into custody,
26 petition the court as provided in this chapter, or, if the
27 child is not taken into custody or a petition is not filed
28 with the court, conduct an administrative review. If after an
29 administrative review the department determines not to take
30 the child into custody or petition the court, the department
31 shall document the reason for its decision in writing and

1 include it in the investigative file. For all cases that were
2 accepted by the local law enforcement agency for criminal
3 investigation pursuant to subsection (2), the department must
4 include in the file written documentation that the
5 administrative review included input from law enforcement. In
6 addition, for all cases that must be referred to child
7 protection teams pursuant to s. 39.303(2) and (3), the file
8 must include written documentation that the administrative
9 review included the results of the team's evaluation ~~medical~~
10 ~~evaluation~~. Factors that must be included in the development
11 of the rule include noncompliance with the case plan developed
12 by the department, or its agent, and the family under this
13 chapter and prior abuse reports with findings that involve the
14 child or caregiver.

15 (14) No later than 60 ~~30~~ days after receiving the
16 initial report, the local office of the department shall
17 complete its investigation.

18 (17) When a law enforcement agency conducts a criminal
19 investigation into allegations of child abuse, neglect, or
20 abandonment, photographs documenting the abuse or neglect will
21 be taken when appropriate. ~~is participating in an~~
22 ~~investigation, the agency shall take photographs of the~~
23 ~~child's living environment. Such photographs shall become part~~
24 ~~of the investigative file.~~

25 (18) Within 15 days after the case is ~~completion of~~
26 ~~the investigation of cases~~ reported to him or her pursuant to
27 this chapter, the state attorney shall report his or her
28 findings to the department and shall include in such report a
29 determination of whether or not prosecution is justified and
30 appropriate in view of the circumstances of the specific case.

31

1 Section 6. Section 39.303, Florida Statutes, is
2 amended to read:

3 39.303 Child protection teams; services; eligible
4 cases.--The Department of Health shall develop, maintain, and
5 coordinate the services of one or more multidisciplinary child
6 protection teams in each of the service districts of the
7 Department of Children and Family Services. Such teams may be
8 composed of appropriate representatives of school districts
9 and appropriate health, mental health, social service, legal
10 service, and law enforcement agencies. The Legislature finds
11 that optimal coordination of child protection teams and sexual
12 abuse treatment programs requires collaboration between the
13 Department of Health and the Department of Children and Family
14 Services. The two departments shall maintain an interagency
15 agreement that establishes protocols for oversight and
16 operations of child protection teams and sexual abuse
17 treatment programs. The Secretary of Health and the Deputy
18 Secretary for ~~director of~~ Children's Medical Services, in
19 consultation with the Secretary of Children and Family
20 Services, shall maintain the responsibility for the screening,
21 employment, and, if necessary, the termination of child
22 protection team medical directors, at headquarters and in the
23 15 districts. Child protection team medical directors shall be
24 responsible for oversight of the teams in the districts.

25 (1) The Department of Health shall utilize and convene
26 the teams to supplement the assessment and protective
27 supervision activities of the family safety and preservation
28 program of the Department of Children and Family Services.
29 Nothing in this section shall be construed to remove or reduce
30 the duty and responsibility of any person to report pursuant
31 to this chapter all suspected or actual cases of child abuse,

1 abandonment, or neglect or sexual abuse of a child. The role
2 of the teams shall be to support activities of the program and
3 to provide services deemed by the teams to be necessary and
4 appropriate to abused, abandoned, and neglected children upon
5 referral. The specialized diagnostic assessment, evaluation,
6 coordination, consultation, and other supportive services that
7 a child protection team shall be capable of providing include,
8 but are not limited to, the following:

9 (a) Medical diagnosis and evaluation services,
10 including provision or interpretation of X rays and laboratory
11 tests, and related services, as needed, and documentation of
12 findings relative thereto.

13 (b) Telephone consultation services in emergencies and
14 in other situations.

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

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

24 (e) Expert medical, psychological, and related
25 professional testimony in court cases.

26 (f) Case staffings to develop treatment plans for
27 children whose cases have been referred to the team. A child
28 protection team may provide consultation with respect to a
29 child who is alleged or is shown to be abused, abandoned, or
30 neglected, which consultation shall be provided at the request
31 of a representative of the family safety and preservation

1 program or at the request of any other professional involved
2 with a child or the child's parent or parents, legal custodian
3 or custodians, or other caregivers. In every such child
4 protection team case staffing, consultation, or staff activity
5 involving a child, a family safety and preservation program
6 representative shall attend and participate.

7 (g) Case service coordination and assistance,
8 including the location of services available from other public
9 and private agencies in the community.

10 (h) Such training services for program and other
11 employees of the Department of Children and Family Services,
12 employees of the Department of Health, and other medical
13 professionals as is deemed appropriate to enable them to
14 develop and maintain their professional skills and abilities
15 in handling child abuse, abandonment, and neglect cases.

16 (i) Educational and community awareness campaigns on
17 child abuse, abandonment, and neglect in an effort to enable
18 citizens more successfully to prevent, identify, and treat
19 child abuse, abandonment, and neglect in the community.

20 (j) Child protection team assessments that include, as
21 appropriate, a medical evaluation, medical consultation,
22 family psychosocial interview, specialized clinical interview,
23 or forensic interview.

24
25 All medical personnel participating on a child protection team
26 must successfully complete the required child protection team
27 training curriculum as set forth in protocols determined by
28 the Deputy Secretary for Children's Medical Services and the
29 Statewide Medical Director for Child Protection Teams.

30 (2) The child abuse, abandonment, and neglect reports
31 that must be referred by the Department of Children and Family

1 Services to child protection teams of the Department of Health
2 for an assessment ~~medical evaluation~~ and other appropriate
3 available support services as set forth in subsection (1) must
4 include cases involving:

5 (a) Injuries to the head,bruises to the neck or head,
6 burns, or fractures in a child of any age.

7 (b) Bruises anywhere on a child 5 years of age or
8 under.

9 (c)~~(b)~~ Sexual abuse of a child in which vaginal or
10 anal penetration is alleged or in which other unlawful sexual
11 conduct has been determined to have occurred.

12 (d)~~(c)~~ ~~Venereal disease,~~ or Any other sexually
13 transmitted disease, in a prepubescent child.

14 (e)~~(d)~~ Reported malnutrition of a child and failure of
15 a child to thrive.

16 (f)~~(e)~~ Reported medical or,physical, ~~or emotional~~
17 neglect of a child.

18 (g)~~(f)~~ Any family in which one or more children have
19 been pronounced dead on arrival at a hospital or other health
20 care facility, or have been injured and later died, as a
21 result of suspected abuse, abandonment, or neglect, when any
22 sibling or other child remains in the home.

23 (h)~~(g)~~ Symptoms of serious emotional problems in a
24 child when emotional or other abuse, abandonment, or neglect
25 is suspected.

26 ~~(h) Injuries to a child's head.~~

27 (3) All abuse and neglect cases transmitted for
28 investigation to a district by the hotline must be
29 simultaneously transmitted to the Department of Health child
30 protection team for review. For the purpose of determining
31 whether face-to-face medical evaluation of a child by a child

1 protection team is necessary,all cases transmitted to the
2 child protection team which meet the criteria in subsection
3 (2) must be timely reviewed by:
4 (a) A physician licensed under chapter 458 or chapter
5 459 who holds board certification in pediatrics and is a
6 member of a child protection team;
7 (b) A physician who is licensed under chapter 458 or
8 chapter 459 who holds board certification in a specialty other
9 than pediatrics who may complete the review only when working
10 under the direction of a physician licensed under chapter 458
11 or chapter 459 who holds board certification in pediatrics and
12 is a member of a child protection team;
13 (c) An advanced registered nurse practitioner licensed
14 under chapter 464 who has a specialty in pediatrics and is a
15 member of the child protection team;
16 (d) A physician assistant licensed under chapter 458
17 or chapter 459, who may complete the review only when working
18 under the supervision of a physician licensed under chapter
19 458 or chapter 459 who holds board certification in pediatrics
20 and is a member of a child protection team; or
21 (e) A registered nurse licensed under chapter 464, who
22 may complete the review only when working under the direct
23 supervision of a physician licensed under chapter 458 or
24 chapter 459 who holds board certification in pediatrics and is
25 a member of a child protection team.~~a board-certified~~
26 ~~pediatrician or registered nurse practitioner under the~~
27 ~~supervision of such pediatrician for the purpose of~~
28 ~~determining whether a face-to-face medical evaluation by a~~
29 ~~child protection team is necessary.~~
30
31

1 (4) ~~A~~ Such face-to-face medical evaluation by a child
2 protection team is not necessary when:~~only if it is~~
3 ~~determined that~~

4 (a) The child was examined by a
5 ~~non-child-protection-team~~ physician for the alleged abuse or
6 neglect, and a consultation between the examining physician
7 and the child protection team board-certified pediatrician,
8 advanced registered ~~or~~ nurse practitioner, physician assistant
9 working under the supervision of a child protection team
10 board-certified pediatrician, or a registered nurse working
11 under the direct supervision of a child protection team
12 board-certified pediatrician ~~and the examining physician~~
13 concludes that a further medical evaluation is unnecessary;
14 ~~or-~~

15 (b)1. The child protective investigator, with
16 supervisory approval has concluded after conducting a child
17 safety assessment, that there are no findings of any of the
18 injuries described in paragraphs (2)(a)-(h) and that there is
19 no history in the child's household of substance abuse,
20 domestic violence, prior reports containing indications or
21 verified findings, prior reports that included a child
22 protection team referral that the family did not keep, or
23 previous law enforcement involvement; and

24 2. The child protection team board-certified
25 pEDIatrician determines, after reviewing the child safety
26 assessment form, that a medical evaluation is not required.

27
28 For any child for whom one of the injuries described in
29 paragraphs (2)(a)-(h) has been alleged, the child safety
30 assessment and supervisory approval must be completed within
31 72 hours after receipt of the report and a copy must then be

1 provided to the child protection team within 24 hours.

2 Notwithstanding paragraphs (a) and (b), a child protection
3 team pediatrician or advanced registered nurse practitioner as
4 authorized in subsection (3) may determine that a face-to-face
5 medical evaluation is necessary.

6 (5)(4) In all instances in which a child protection
7 team is providing certain services to abused, abandoned, or
8 neglected children, other offices and units of the Department
9 of Health, and offices and units of the Department of Children
10 and Family Services, shall avoid duplicating the provision of
11 those services.

12 (6) The child protection team quality assurance
13 program of the Department of Health and the quality assurance
14 program of the Family Safety Program Office of the Department
15 of Children and Family Services shall collaborate to ensure
16 that referrals and responses to child abuse and neglect
17 reports are appropriate. Each quality assurance program shall
18 include a review of records in which there are no findings of
19 abuse or neglect, and the findings of these reviews shall be
20 included in each department's quality assurance reports.

21 Section 7. Subsection (1) of section 39.304, Florida
22 Statutes, is amended to read:

23 39.304 Photographs, medical examinations, X rays, and
24 medical treatment of abused, abandoned, or neglected child.--

25 (1)(a) Any person required to investigate cases of
26 suspected child abuse, abandonment, or neglect may take or
27 cause to be taken photographs of the areas of trauma visible
28 on a child who is the subject of a report. Any child
29 protection team that examines a child who is the subject of a
30 report must take, or cause to be taken, photographs of any
31 areas of trauma visible on the child. ~~Such~~ Photographs of

1 physical abuse injuries, or duplicates thereof, shall be
2 provided to the department for inclusion in the investigative
3 file and shall become part of that file. Photographs of sexual
4 abuse trauma which are taken must be made part of the child
5 protection team medical record only.

6 (b) If the areas of trauma visible on a child indicate
7 a need for a medical examination, or if the child verbally
8 complains or otherwise exhibits distress as a result of injury
9 through suspected child abuse, abandonment, or neglect, or is
10 alleged to have been sexually abused, the person required to
11 investigate may cause the child to be referred for diagnosis
12 to a licensed physician or an emergency department in a
13 hospital without the consent of the child's parents or legal
14 custodian. Such examination may be performed by any licensed
15 physician or an advanced registered nurse practitioner
16 licensed pursuant to chapter 464. Any licensed physician, or
17 advanced registered nurse practitioner licensed pursuant to
18 chapter 464, who has reasonable cause to suspect that an
19 injury was the result of child abuse, abandonment, or neglect
20 may authorize a radiological examination to be performed on
21 the child without the consent of the child's parent or legal
22 custodian.

23 Section 8. Section 39.3065, Florida Statutes, is
24 amended to read:

25 39.3065 Sheriffs of ~~Pasco, Manatee, and Pinellas~~
26 ~~Counties~~ to provide child protective investigative services;
27 procedures; funding.--

28 (1) As described in this section, the Department of
29 Children and Family Services shall, by the end of fiscal year
30 1999-2000, transfer all responsibility for child protective
31 investigations for Pinellas County, Manatee County, and Pasco

1 County to the sheriff of that county in which the child abuse,
2 neglect, or abandonment is alleged to have occurred. Each
3 sheriff is responsible for the provision of all child
4 protective investigations in his or her county. Each
5 individual who provides these services must complete the
6 training provided to and required of protective investigators
7 employed by the Department of Children and Family Services.
8 (2) During fiscal year 1998-1999, the Department of
9 Children and Family Services and each sheriff's office shall
10 enter into a contract for the provision of these services.
11 Funding for the services will be appropriated to the
12 Department of Children and Family Services, and the department
13 shall transfer to the respective sheriffs for the duration of
14 fiscal year 1998-1999, funding for the investigative
15 responsibilities assumed by the sheriffs, including federal
16 funds that the provider is eligible for and agrees to earn and
17 that portion of general revenue funds which is currently
18 associated with the services that are being furnished under
19 contract, and including, but not limited to, funding for all
20 investigative, supervisory, and clerical positions; training;
21 all associated equipment; furnishings; and other fixed capital
22 items. The contract must specify whether the department will
23 continue to perform part or none of the child protective
24 investigations during the initial year. The sheriffs may
25 either conduct the investigations themselves or may, in turn,
26 subcontract with law enforcement officials or with properly
27 trained employees of private agencies to conduct
28 investigations related to neglect cases only. If such a
29 subcontract is awarded, the sheriff must take full
30 responsibility for any safety decision made by the
31 subcontractor and must immediately respond with law

1 enforcement staff to any situation that requires removal of a
2 child due to a condition that poses an immediate threat to the
3 child's life. The contract must specify whether the services
4 are to be performed by departmental employees or by persons
5 determined by the sheriff. During this initial year, the
6 department is responsible for quality assurance, and the
7 department retains the responsibility for the performance of
8 all child protective investigations. The department must
9 identify any barriers to transferring the entire
10 responsibility for child protective services to the sheriffs'
11 offices and must pursue avenues for removing any such barriers
12 by means including, but not limited to, applying for federal
13 waivers. By January 15, 1999, the department shall submit to
14 the President of the Senate, the Speaker of the House of
15 Representatives, and the chairs of the Senate and House
16 committees that oversee departmental activities a report that
17 describes any remaining barriers, including any that pertain
18 to funding and related administrative issues. Unless the
19 Legislature, on the basis of that report or other pertinent
20 information, acts to block a transfer of the entire
21 responsibility for child protective investigations to the
22 sheriffs' offices, the sheriffs of Pasco County, Manatee
23 County, and Pinellas County, beginning in fiscal year
24 1999-2000, shall assume the entire responsibility for such
25 services, as provided in subsection (3).

26 (3)(a) Beginning in fiscal year 1999-2000, the
27 sheriffs of Pasco County, Manatee County, and Pinellas County
28 have the responsibility to provide all child protective
29 investigations in their respective counties. Beginning in
30 fiscal year 2000-2001, the Department of Children and Family
31 Services shall enter into a grant agreement with the sheriff

1 of Seminole County to perform child protective investigations
2 in Seminole County.

3 (b) The sheriffs of Pasco County, Manatee County, and
4 Pinellas County shall operate, at a minimum, in accordance
5 with the performance standards established by the Legislature
6 for protective investigations conducted by the Department of
7 Children and Family Services.

8 (c) Funds for providing child protective
9 investigations in Pasco County, Manatee County, and Pinellas
10 County must be identified in the annual appropriation made to
11 the Department of Children and Family Services, which shall
12 award grants for the full amount identified to the respective
13 sheriffs' offices. Funds for the child protective
14 investigations may not be integrated into the sheriffs'
15 regular budgets. Budgetary data and other data relating to the
16 performance of child protective investigations must be
17 maintained separately from all other records of the sheriffs'
18 offices.

19 (d) Program performance evaluation shall be based on
20 criteria mutually agreed upon by the respective sheriffs and a
21 committee of seven persons appointed by the Governor and
22 selected from those persons serving on the Department of
23 Children and Family Services District 5 Health and Human
24 Services Board and District 6 Health and Human Services Board.
25 Two of the Governor's appointees must be residents of Pasco
26 County, two of the Governor's appointees must be residents of
27 Manatee County, and two of the Governor's appointees must be
28 residents of Pinellas County. Such appointees shall serve at
29 the pleasure of the Governor. The individuals appointed must
30 have demonstrated experience in outcome evaluation, social
31 service areas of protective investigation, or child welfare

1 supervision. The committee shall submit an annual report
2 regarding quality performance, outcome-measure attainment, and
3 cost efficiency to the President of the Senate, the Speaker of
4 the House of Representatives, and to the Governor no later
5 than January 31 of each year the sheriffs are receiving
6 general appropriations to provide child protective
7 investigations.

8 (4) For the 1999-2000 fiscal year only, the Sheriff of
9 Broward County shall perform the same child protective
10 investigative services according to the same standards as are
11 performed by the sheriffs of Pinellas County, Manatee County,
12 and Pasco County under this section. This subsection expires
13 July 1, 2000.

14 Section 9. Subsection (3) of section 39.401, Florida
15 Statutes, is amended to read:

16 39.401 Taking a child alleged to be dependent into
17 custody; law enforcement officers and authorized agents of the
18 department.--

19 (3) If the child is taken into custody by, or is
20 delivered to, an authorized agent of the department, the
21 authorized agent shall review the facts supporting the removal
22 with an attorney representing the department. The purpose of
23 this review shall be to determine whether probable cause
24 exists for the filing of a shelter petition. If the facts are
25 not sufficient to support the filing of a shelter petition,
26 the child shall immediately be returned to the custody of the
27 parent or legal custodian. If the facts are sufficient to
28 support the filing of the shelter petition and the child has
29 not been returned to the custody of the parent or legal
30 custodian, the department shall file the petition and schedule
31 a hearing, and the attorney representing the department shall

1 request that a shelter hearing be held as quickly as possible,
2 not to exceed 24 hours after the removal of the child. While
3 awaiting the shelter hearing, the authorized agent of the
4 department may place the child in licensed shelter care or may
5 release the child to a parent or legal custodian or
6 responsible adult relative who shall be given priority
7 consideration over a licensed placement, or a responsible
8 adult approved by the department when this is in the best
9 interests of the child. If the child is not placed with a
10 parent or legal custodian or responsible adult relative, the
11 reasons must be specified in writing and provided to the
12 court. Any placement of a child which is not in a licensed
13 shelter must be preceded by a local and state criminal records
14 check, as well as a search of the department's automated abuse
15 information system, on all members of the household, to assess
16 the child's safety within the home. In addition, the
17 department may authorize placement of a housekeeper/homemaker
18 in the home of a child alleged to be dependent until the
19 parent or legal custodian assumes care of the child.

20 Section 10. Subsection (16) is added to section
21 39.402, Florida Statutes, to read:

22 39.402 Placement in a shelter.--

23 (16) If a child is placed in a shelter pursuant to a
24 court order following a shelter hearing, the department shall
25 provide or cause to be provided an assessment of the child's
26 strengths and needs, and shall use the results of the
27 assessment to develop an initial case plan for the child, to
28 determine the child's ongoing placement, and to arrange for
29 services for the child and for support for the child's
30 caregiver. The initial case plan must be discussed with and
31 provided to the child's foster parent or other caregiver. In

1 each district, the department shall assess the feasibility of
2 deploying its child protective investigators in a manner that
3 focuses a portion of that workforce on the initial response to
4 a report, including the initial determination of risk through
5 the shelter hearing, if one is held, and that focuses another
6 portion of that workforce on the ongoing work of the
7 investigation which occurs after the shelter hearing.

8 Section 11. Subsection (6) of section 39.507, Florida
9 Statutes, is amended to read:

10 39.507 Adjudicatory hearings; orders of
11 adjudication.--

12 (6) If the court finds that the child named in a
13 petition is dependent, but chooses not to withhold
14 adjudication or is prohibited from withholding adjudication,
15 it shall incorporate that finding in an order of adjudication
16 entered in the case, briefly stating the facts upon which the
17 finding is made, and the court shall thereafter have full
18 authority under this chapter to provide for the child as
19 adjudicated until the child reaches 18 years of age, unless
20 the court, in its discretion, relinquishes jurisdiction upon
21 its own order whether or not the child is under the
22 supervision of the Department of Children and Family Services.

23 Section 12. Paragraph (e) of subsection (1) of section
24 383.011, Florida Statutes, is amended to read:

25 383.011 Administration of maternal and child health
26 programs.--

27 (1) The Department of Health is designated as the
28 state agency for:

29 (e) The department shall establish in each county
30 health department a Healthy Start Care Coordination Program in
31 which a care coordinator is responsible for receiving

1 screening reports and risk assessment reports from the Office
2 of Vital Statistics; conducting assessments as part of a
3 multidisciplinary team, where appropriate; providing technical
4 assistance to the district prenatal and infant care
5 coalitions; directing family outreach efforts; and
6 coordinating the provision of services within and outside the
7 department using the plan developed by the coalition. The care
8 coordination process must include, at a minimum, family
9 outreach workers and health paraprofessionals who will assist
10 in providing the following enhanced services to pregnant
11 women, infants, and their families that are determined to be
12 at potential risk by the department's screening instrument:
13 case finding or outreach; assessment of health, social,
14 environmental, and behavioral risk factors; case management
15 utilizing the family support plan; home visiting to support
16 the delivery of and participation in prenatal and infant
17 primary care services; childbirth and parenting education,
18 including encouragement of breastfeeding; counseling; and
19 social services, as appropriate. Family outreach workers may
20 include social work professionals or nurses with public health
21 education and counseling experience. Paraprofessionals may
22 include resource mothers and fathers, trained health aides,
23 and parent educators. The care coordination program shall be
24 developed in a coordinated, nonduplicative manner with the
25 Developmental Evaluation and Intervention Program of
26 Children's Medical Services, using the local assessment
27 findings and plans of the prenatal and infant care coalitions
28 and the programs and services established in chapter 411, Pub.
29 L. No. 99-457, and this chapter.

30 1. Families determined to be at potential risk based
31 on the thresholds established in the department's screening

1 instrument must be notified by the department of the
2 determination and recommendations for followup services. All
3 Medicaid-eligible families shall receive Early Periodic
4 Screening, Diagnosis and Treatment (EPSDT) Services of the
5 Florida Medicaid Program to help ensure continuity of care.
6 All other families identified at potential risk shall be
7 directed to seek additional health care followup visits as
8 provided under s. 627.6579. A family identified as a family at
9 potential risk is eligible for enhanced services under the
10 care coordination process within the resources allocated, if
11 it is not already receiving services from the Developmental
12 Evaluation and Intervention Program. The department shall
13 adopt rules regulating the assignment of family outreach
14 workers and paraprofessionals based on the thresholds
15 established in the department's risk assessment tool.

16 2. As part of the care coordination process, the
17 department must ensure that subsequent screenings are
18 conducted for those families identified as families at
19 potential risk. Procedures for subsequent screenings of all
20 infants and toddlers must be consistent with the established
21 periodicity schedule and the level of risk. Screening programs
22 must be conducted in accessible locations, such as child care
23 centers, local schools, teenage pregnancy programs, community
24 centers, and county health departments. Care coordination must
25 also include initiatives to provide immunizations in
26 accessible locations. Such initiatives must seek ways to
27 ensure that children not currently being served by
28 immunization efforts are reached.

29 3. The provision of services under this section must
30 be consistent with the provisions and plans established under
31 chapter 411, Pub. L. No. 99-457, and this chapter.

1 4. Contingent upon provision of a specific
2 appropriation, the department shall make funding available to
3 Healthy Start Coalitions for the development and
4 implementation of a Pregnant-And-In-Need (PAIN) public
5 awareness campaign targeting pregnant teens who are not
6 seeking prenatal care and may be at high risk of abandoning
7 their babies. The purpose of this campaign is to get prenatal
8 care and care coordination services to pregnant teens to
9 promote healthy newborns and to prevent the abandoning of
10 babies. The department will make funds available to the
11 Healthy Start Coalitions through a grant process. The
12 department will establish a statewide 1-800-PAIN hotline that
13 uses the current hotline for Healthy Start Coalition services.
14 The public awareness campaign funded through these grant funds
15 must include information on the PAIN hotline that pregnant
16 teens can use to receive counseling and access prenatal care
17 while remaining anonymous. The provision of funding for this
18 campaign must include an evaluation component on the impact of
19 each of the campaigns.

20 Section 13. Paragraph (i) of subsection (3), paragraph
21 (a) of subsection (7), and subsection (18) of section 383.402,
22 Florida Statutes, are amended to read:

23 383.402 Child abuse death review; State Child Abuse
24 Death Review Committee; local child abuse death review
25 committees.--

26 (3) The State Child Abuse Death Review Committee
27 shall:

28 (i) Educate the public regarding the provisions of
29 chapter 99-168, Laws of Florida ~~Kayla McKean Child Protection~~
30 ~~Act~~, the incidence and causes of child abuse death, and ways
31 by which such deaths may be prevented.

- 1 (7) Each local child abuse death review committee
2 shall:
- 3 (a) Review all deaths resulting from child abuse ~~which~~
4 ~~are reported to the Office of Vital Statistics.~~
- 5 (18) Each district administrator of the Department of
6 Children and Family Services must appoint a child abuse death
7 review coordinator for the district. The coordinator must have
8 knowledge and expertise in the area of child abuse and
9 neglect. The coordinator's general responsibilities include:
- 10 (a) Coordinating with the local child abuse death
11 review committee.
- 12 (b) Ensuring the appropriate implementation of the
13 child abuse death review process and all district activities
14 related to the review of child abuse deaths.
- 15 (c) Working with the committee to ensure that the
16 reviews are thorough and that all issues are appropriately
17 addressed.
- 18 (d) Maintaining a system of logging child abuse deaths
19 covered by this procedure and tracking cases during the child
20 abuse death review process.
- 21 (e) Conducting or arranging for a Florida Abuse
22 Hotline Information System (FAHIS) record check on all child
23 abuse deaths covered by this procedure to determine whether
24 there were any prior reports concerning the child or
25 concerning any siblings, other children, or adults in the
26 home.
- 27 (f) Coordinating child abuse death review activities,
28 as needed, with individuals in the community and the
29 Department of Health.
- 30 (g) Notifying the district administrator, the
31 Secretary of Children and Family Services, ~~and~~ the Deputy

1 Secretary ~~for~~ of Children's Medical Services, and the
2 Department of Health Child Abuse Death Review Coordinator
3 ~~Assistant Health Officer~~ of all child abuse deaths meeting
4 criteria for review as specified in this section within 1
5 working day after verifying the child's death was due to
6 abuse, neglect, or abandonment ~~learning of the child's death.~~

7 (h) Ensuring that all critical issues identified by
8 the local child abuse death review committee are brought to
9 the attention of the district administrator and the Secretary
10 of Children and Family Services.

11 (i) Providing technical assistance to the local child
12 abuse death review committee during the review of any child
13 abuse death.

14 Section 14. Subsection (3) of section 409.1671,
15 Florida Statutes, is amended to read:

16 409.1671 Foster care and related services;
17 privatization.--

18 (3)(a) In order to help ensure a seamless child
19 protection system, the department shall ensure that contracts
20 entered into with community-based agencies pursuant to this
21 section include provisions for a case-transfer process to
22 determine the date that the community-based agency will
23 initiate the appropriate services for a child and family. This
24 case-transfer process must clearly identify the closure of the
25 protective investigation and the initiation of service
26 provision. At the point of case transfer, and at the
27 conclusion of an investigation, the department must provide a
28 complete summary of the findings of the investigation to the
29 community-based agency.

30 (b) The contracts must also ensure that each
31 community-based agency shall furnish regular status reports of

1 its cases to the department as specified in the contract. A
2 provider may not discontinue services without prior written
3 notification to the department. After discontinuing services
4 to a child or a child and family, the community-based agency
5 must provide a written case summary, including its assessment
6 of the child and family, to the department.

7 (c) The annual contract between the department and
8 community-based agencies must include provisions that specify
9 the procedures to be used by the parties to resolve
10 differences in interpreting the contract or to resolve
11 disputes as to the adequacy of the parties' compliance with
12 their respective obligations under the contract.

13 Section 15. Present paragraph (c) of subsection (13)
14 of section 409.175, Florida Statutes, is redesignated as
15 paragraph (e) and new paragraphs (c) and (d) are added to that
16 section to read:

17 409.175 Licensure of family foster homes, residential
18 child-caring agencies, and child-placing agencies.--

19 (13)

20 (c) In consultation with foster parents, each district
21 or lead agency shall develop a plan for making the completion
22 of the required training as convenient as possible for
23 potential foster parents and emergency-shelter parents. The
24 plan should include, without limitation, such strategies as
25 providing training in nontraditional locations and at
26 nontraditional times. The plan must be revised at least
27 annually and must be included in the information provided to
28 each person applying to become a foster parent or
29 emergency-shelter parent.

30 (d) Upon a foster home becoming licensed, the
31 department or its agent must provide the foster parent with

1 information regarding the anticipated date of placement of a
2 foster child; and, if a child is not placed in that home
3 within 60 days, the department must provide monthly status
4 reports and explanations to the foster parent regarding
5 placement of children in the home.

6 Section 16. Section 409.1753, Florida Statutes, is
7 created to read:

8 409.1753 Foster care; duties.--

9 (1) The department shall ensure that, within each
10 district, each foster home is given a telephone number for the
11 foster parent to call whenever immediate assistance is needed
12 and the child's caseworker is unavailable. This number must be
13 staffed and answered by individuals possessing the knowledge
14 and authority necessary to assist foster parents.

15 (2) To the extent practicable, the department or its
16 agent shall assign new foster care cases, in ways that
17 minimize the number of caseworkers who must interact with a
18 given foster home. Each district or designated agent of the
19 department shall annually develop a written plan that
20 describes actions that will be taken to minimize the number of
21 caseworkers with whom each foster parent must interact and
22 must provide a copy of the plan to all licensed foster homes.

23 (3) Unless a child's safety is at risk, as documented
24 in the child's case file, the department or its agent shall
25 provide at least 2 weeks' notice to the child and his or her
26 foster parent prior to the child being moved to another
27 placement in order to provide sufficient time for all parties,
28 including the child and the foster parent, to plan for the
29 move.

30 Section 17. Any funds appropriated for the
31 establishment of model dependency court pilot programs for

1 Fiscal Year 2000-2001 in the 5th, 10th, and 17th judicial
2 circuits shall be used for the purpose of hiring general
3 masters to hear cases referred by the presiding judge. The
4 Office of the State Courts Administrator shall evaluate the
5 utilization of general masters in the furtherance of
6 permanency for children. The results of this evaluation shall
7 be reported to the President of the Senate and the Speaker of
8 the House of Representatives by December 1, 2001.

9 Section 18. Full-time equivalent positions of the
10 Department of Children and Family Services and of agencies
11 under either a contract or a grant arrangement with the
12 department which are directly involved in the investigation of
13 child abuse and neglect or in the performance of activities
14 directly related to the protection of children who have been
15 or are at risk of abuse or neglect are not subject to
16 position-lapse adjustments included in annual agency operating
17 budgets. Such positions must be promptly filled and delays in
18 hiring must be kept to a minimum.

19 Section 19. (1) A work group is established in the
20 Department of Children and Family Services for the purpose of
21 evaluating child abuse and neglect reports involving children
22 who were referred to child protection teams but for whom the
23 appointments were not kept. The department shall include on
24 the work group members of the child protection team staff of
25 the Children's Medical Services of the Department of Health,
26 child protective investigators, child welfare legal services
27 attorneys, and representatives of appropriate law enforcement
28 agencies, and other persons, as appropriate. The work group is
29 directed to evaluate reports that are made from July 1, 2000
30 through December 31, 2000, which meet the criteria. The
31 evaluation should distinguish among the types of maltreatment

1 reported in analyzing the reasons appointments were not kept;
2 follow-up activities by child protection teams; follow-up
3 activities by the child protection investigators; actions by
4 child welfare legal attorneys; case histories, including
5 previous reports of abuse or neglect, previous dependency
6 actions, any known subsequent reports of abuse or neglect; and
7 any other factors the work group considers pertinent.

8 (2) The work group shall report its findings to the
9 Department of Children and Family Services and the Department
10 of Health with recommendations for process improvements and
11 policy changes to reduce the incidence of unkept appointments.
12 The Department of Children and Family Services shall report
13 the findings of the work group, with recommendations for any
14 statutory changes, to the Legislature by November 1, 2001.

15 (3) The sum of \$25,000 is appropriated from the
16 General Revenue Fund to the Department of Children and Family
17 Services to support the data gathering and analysis of the
18 work group.

19 Section 20. Section 1 of chapter 99-168, Laws of
20 Florida, is repealed.

21 Section 21. This act shall take effect July 1, 2000.
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1 STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN
2 COMMITTEE SUBSTITUTE FOR
3 Senate Bill 730

- 4
- 5 - Requires the Department of Children and Family Services
6 to determine if a known or suspected case of child
7 abuse, abandonment, or neglect may involve criminal
8 conduct and needs to be forwarded for a criminal
9 investigation to the municipality or county law
10 enforcement agency. This is substituted for providing
11 clear parameters to law enforcement for determining when
12 they become responsible for conducting a criminal
13 investigation and their responsibilities for these
14 cases.
- 15 - Removes the updates and revisions to a number of the
16 stipulations relative to the sheriff offices' provision
17 of child protective investigation with the exception of
18 requiring that the Department of Children and Family
19 Services enter into agreement with Seminole County to
20 perform child protective investigations.
- 21 - Modifies the mandatory reporting of child abuse to not
22 require officers and employees of the judicial branch to
23 provide notice of suspected child abuse when the child
24 is currently being investigated by the department, there
25 is an existing dependency case, or the matter has been
26 previously reported to the department.
- 27 - Stipulates that judges are not subject to criminal
28 prosecution for failing to report child abuse when the
29 information was received in the course of official
30 duties.
- 31 - Expands the time frame in which the department has to
complete its investigation from 30 days to 60 days.
- 32 - Removes the title "Kayla McKean Child Protection Act"
from ch. 99-168.
- 33 - Removes the requirement that physician assistants on the
child protection team must have "direct supervision" of
a CPT pediatrician and instead only requires
"supervision."