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Bill No. CS/CS/HB 855, 1st Eng.

Amendment No. ____ (for drafter's use only)

	<u>Senate</u>	CHAMBER ACTION	<u>House</u>
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Representative(s) Murman offered the following:

Amendment (with title amendment)

Remove from the bill: Everything after the enacting clause
and insert in lieu thereof:

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

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

(2)

(g) The department shall voice-record all incoming or outgoing calls that are received or placed by the central abuse hotline which relate to suspected or known child abuse, neglect, or abandonment. The recording shall become a part of the record of the report, but, not withstanding s. 39.202, shall be released in full only to law enforcement agencies and state attorneys for the purpose of investigating and prosecuting criminal charges pursuant to s. 39.205, or to

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1 employees of the department for the purpose of investigating
2 and seeking administrative penalties pursuant to s. 39.206 is
3 subject to the same confidentiality as is provided to the
4 identity of the caller under s. 39.202. Nothing in this
5 paragraph shall prohibit the use of the recordings by hotline
6 staff for quality assurance and training.

7 (7)(a) This section does not require a professional
8 who is hired by or enters into a contract with the department
9 for the purpose of treating or counseling any person, as a
10 result of a report of child abuse, abandonment, or neglect, to
11 again report to the central abuse hotline the abuse,
12 abandonment, or neglect that was the subject of the referral
13 for treatment.

14 (b) This section does not require an officer or
15 employee of the judicial branch to again provide notice of
16 reasonable cause to suspect child abuse, abandonment, or
17 neglect when that child is currently being investigated by the
18 department, there is an existing dependency case, or the
19 matter has previously been reported to the department,
20 provided there is reasonable cause to believe the information
21 is already known to the department. This paragraph applies
22 only when the information has been provided to the officer or
23 employee in the course of official duties.

24 (8) Nothing in this chapter or in the contracting with
25 community-based care providers for privatization of foster
26 care and related services as specified in s. 409.1671 shall be
27 construed to remove or reduce the duty and responsibility of
28 any person, including any employee of the community-based care
29 privatization provider, to report a suspected or actual case
30 of child abuse, abandonment, or neglect or the sexual abuse of
31 a child to the department's central abuse hotline.

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1 (9) On an ongoing basis, the department's quality
2 assurance program shall review calls ~~reports~~ to the hotline
3 involving three or more unaccepted reports on a single child,
4 where jurisdiction applies, in order to detect such things as
5 harassment and situations that warrant an investigation
6 because of the frequency or variety of the source of the
7 reports. The assistant secretary may refer a case for
8 investigation when it is determined, as a result of this
9 review, that an investigation may be warranted.

10 Section 2. Subsection (4) of section 39.202, Florida
11 Statutes, is amended to read:

12 39.202 Confidentiality of reports and records in cases
13 of child abuse or neglect.--

14 (4) The name of any person reporting child abuse,
15 abandonment, or neglect may not be released to any person
16 other than employees of the department responsible for child
17 protective services, the central abuse hotline, law
18 enforcement, the child protection team, or the appropriate
19 state attorney, without the written consent of the person
20 reporting. This does not prohibit the subpoenaing of a person
21 reporting child abuse, abandonment, or neglect when deemed
22 necessary by the court, the state attorney, or the department,
23 provided the fact that such person made the report is not
24 disclosed. Any person who reports a case of child abuse or
25 neglect may, at the time he or she makes the report, request
26 that the department notify him or her that a child protective
27 investigation occurred as a result of the report. Any person
28 specifically listed in s. 39.201(1) who makes a report in his
29 or her official capacity may also request a written summary of
30 the outcome of the investigation. The department shall mail
31 such a notice to the reporter within 10 days after completing

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1 the child protective investigation.

2 Section 3. Subsection (1) of section 39.205, Florida
3 Statutes, is amended to read:

4 39.205 Penalties relating to reporting of child abuse,
5 abandonment, or neglect.--

6 (1) A person who is required to report known or
7 suspected child abuse, abandonment, or neglect and who
8 knowingly and willfully fails to do so, or who knowingly and
9 willfully prevents another person from doing so, is guilty of
10 a misdemeanor of the first degree, punishable as provided in
11 s. 775.082 or s. 775.083. A judge subject to discipline
12 pursuant to s. 12, Art. V of the Florida Constitution shall
13 not be subject to criminal prosecution when the information
14 was received in the course of official duties.

15 Section 4. Subsection (2), paragraph (b) of subsection
16 (8), paragraph (c) of subsection (12), and subsections (14),
17 (17), and (18) of section 39.301, Florida Statutes, are
18 amended to read:

19 39.301 Initiation of protective investigations.--

20 (2)(a) The department ~~Upon notification by the~~
21 ~~department's central abuse hotline under subsection (1), the~~
22 ~~designated child protective investigator shall immediately~~
23 forward allegations of criminal conduct to the municipal or
24 county ~~notify the appropriate~~ law enforcement agency of the
25 municipality or county in which the alleged conduct has known
26 ~~or suspected child abuse, abandonment, or neglect is believed~~
27 ~~to have occurred.~~

28 (b) As used in this subsection, the term "criminal
29 conduct" means:

30 1. A child is known or suspected to be the victim of
31 child abuse, as defined in s. 827.03, or of neglect of a

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1 child, as defined in s. 827.03.

2 2. A child is known or suspected to have died as a
3 result of abuse or neglect.

4 3. A child is known or suspected to be the victim of
5 aggravated child abuse, as defined in s. 827.03.

6 4. A child is known or suspected to be the victim of
7 sexual battery, as defined in s. 827.071, or of sexual abuse,
8 as defined in s. 39.01.

9 5. A child is known or suspected to be the victim of
10 institutional child abuse or neglect, as defined in s. 39.01,
11 and as provided for in s. 39.302(1).

12 (c) Upon receiving a written report of an allegation
13 of criminal conduct from the department ~~receipt of a report,~~
14 the law enforcement agency shall ~~must~~ review the information
15 in the written report to ~~and~~ determine whether a criminal
16 investigation of the case is warranted. ~~and, If the law~~
17 enforcement agency accepts the case for ~~so, shall conduct the~~
18 criminal investigation that ~~shall be coordinated,~~ it shall
19 coordinate its investigative activities with the department,
20 whenever ~~feasible possible,~~ with the child protective
21 investigation of the department or its agent. ~~If the law~~
22 enforcement agency does not accept the case for criminal
23 investigation, the agency shall notify the department in
24 writing.

25 (d) The local law enforcement agreement required in s.
26 39.306 shall describe the specific local protocols for
27 implementing this section.

28 (8) The person responsible for the investigation shall
29 make a preliminary determination as to whether the report is
30 complete, consulting with the attorney for the department when
31 necessary. In any case in which the person responsible for

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1 the investigation finds that the report is incomplete, he or
2 she shall return it without delay to the person or agency
3 originating the report or having knowledge of the facts, or to
4 the appropriate law enforcement agency having investigative
5 jurisdiction, and request additional information in order to
6 complete the report; however, the confidentiality of any
7 report filed in accordance with this chapter shall not be
8 violated.

9 (b) If it is determined that the child is in need of
10 the protection and supervision of the court, the department
11 shall file a petition for dependency. A petition for
12 dependency shall be filed in all cases classified by the
13 department as high-risk. Factors that the department may
14 consider in determining whether a case is high-risk include,
15 but are not limited to, the young age of the ~~cases, including,~~
16 ~~but not limited to, cases involving~~ parents or legal
17 ~~custodians of a young age,~~ the use of illegal drugs, or
18 domestic violence.

19 (12)

20 (c) The department, in consultation with the
21 judiciary, shall adopt by rule criteria that are factors
22 requiring that the department take the child into custody,
23 petition the court as provided in this chapter, or, if the
24 child is not taken into custody or a petition is not filed
25 with the court, conduct an administrative review. If after an
26 administrative review the department determines not to take
27 the child into custody or petition the court, the department
28 shall document the reason for its decision in writing and
29 include it in the investigative file. For all cases that were
30 accepted by the local law enforcement agency for criminal
31 investigation pursuant to subsection (2), the department must

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

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

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

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

28 Section 5. Section 39.303, Florida Statutes, is
29 amended to read:

30 39.303 Child protection teams; services; eligible
31 cases.--The Department of Health shall develop, maintain, and

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

21 (1) The Department of Health shall utilize and convene
22 the teams to supplement the assessment and protective
23 supervision activities of the family safety and preservation
24 program of the Department of Children and Family Services.
25 Nothing in this section shall be construed to remove or reduce
26 the duty and responsibility of any person to report pursuant
27 to this chapter all suspected or actual cases of child abuse,
28 abandonment, or neglect or sexual abuse of a child. The role
29 of the teams shall be to support activities of the program and
30 to provide services deemed by the teams to be necessary and
31 appropriate to abused, abandoned, and neglected children upon

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1 referral. The specialized diagnostic assessment, evaluation,
2 coordination, consultation, and other supportive services that
3 a child protection team shall be capable of providing include,
4 but are not limited to, the following:

5 (a) Medical diagnosis and evaluation services,
6 including provision or interpretation of X rays and laboratory
7 tests, and related services, as needed, and documentation of
8 findings relative thereto.

9 (b) Telephone consultation services in emergencies and
10 in other situations.

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

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

20 (e) Expert medical, psychological, and related
21 professional testimony in court cases.

22 (f) Case staffings to develop treatment plans for
23 children whose cases have been referred to the team. A child
24 protection team may provide consultation with respect to a
25 child who is alleged or is shown to be abused, abandoned, or
26 neglected, which consultation shall be provided at the request
27 of a representative of the family safety and preservation
28 program or at the request of any other professional involved
29 with a child or the child's parent or parents, legal custodian
30 or custodians, or other caregivers. In every such child
31 protection team case staffing, consultation, or staff activity

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1 involving a child, a family safety and preservation program
2 representative shall attend and participate.

3 (g) Case service coordination and assistance,
4 including the location of services available from other public
5 and private agencies in the community.

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

12 (i) Educational and community awareness campaigns on
13 child abuse, abandonment, and neglect in an effort to enable
14 citizens more successfully to prevent, identify, and treat
15 child abuse, abandonment, and neglect in the community.

16 (j) Child protection team assessments that include, as
17 appropriate, medical evaluations, medical consultations,
18 family psychosocial interviews, specialized clinical
19 interviews, or forensic interviews.

20
21 All medical personnel participating on a child protection team
22 must successfully complete the required child protection team
23 training curriculum as set forth in protocols determined by
24 the Deputy Secretary for Children's Medical Services and the
25 Statewide Medical Director for Child Protection.

26 (2) The child abuse, abandonment, and neglect reports
27 that must be referred by the Department of Children and Family
28 Services to child protection teams of the Department of Health
29 for an assessment ~~medical evaluation~~ and other appropriate
30 available support services as set forth in subsection (1) must
31 include cases involving:

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

3 (b) Bruises anywhere on a child 5 years of age or
4 under.

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

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

10 ~~(e)(d)~~ Reported malnutrition of a child and failure of
11 a child to thrive.

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

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

19 ~~(h)(g)~~ Symptoms of serious emotional problems in a
20 child when emotional or other abuse, abandonment, or neglect
21 is suspected.

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

23 (3) All abuse and neglect cases transmitted for
24 investigation to a district by the hotline must be
25 simultaneously transmitted to the Department of Health child
26 protection team for review. For the purpose of determining
27 whether face-to-face medical evaluation by a child protection
28 team is necessary,all cases transmitted to the child
29 protection team which meet the criteria in subsection (2) must
30 be timely reviewed by: ~~a board-certified pediatrician or~~
31 ~~registered nurse practitioner under the supervision of such~~

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1 ~~pediatrician for the purpose of determining whether a~~
2 ~~face-to-face medical evaluation by a child protection team is~~
3 ~~necessary.~~

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 licensed under chapter 458 or chapter
8 459 who holds board certification in a specialty other than
9 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 speciality in pediatrics or family
15 medicine and is a member of a 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 certification in pediatrics and is a
25 member of a child protection team.

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

29 (a) The child was examined ~~by a physician~~ for the
30 alleged abuse or neglect ~~by a physician who is not a member of~~
31 the child protection team, and a consultation between the

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1 child protection team board-certified pediatrician, advanced
 2 registered or nurse practitioner, physician assistant working
 3 under the supervision of a child protection team

4 board-certified pediatrician, or registered nurse working
 5 under the direct supervision of a child protection team
 6 board-certified pediatrician, and the examining physician
 7 concludes that a further medical evaluation is unnecessary;

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

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

15
 16 Notwithstanding paragraphs (a), (b), and (c), a child
 17 protection team pediatrician, as authorized in subsection (3),
 18 may determine that a face-to-face medical evaluation is
 19 necessary.

20 (5)(4) In all instances in which a child protection
 21 team is providing certain services to abused, abandoned, or
 22 neglected children, other offices and units of the Department
 23 of Health, and offices and units of the Department of Children
 24 and Family Services, shall avoid duplicating the provision of
 25 those services.

26 (6) The Department of Health child protection team
 27 quality assurance program and the Department of Children and
 28 Family Services' Family Safety Program Office quality
 29 assurance program shall collaborate to ensure referrals and
 30 responses to child abuse, abandonment, and neglect reports are
 31 appropriate. Each quality assurance program shall include a

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1 review of records in which there are no findings of abuse,
2 abandonment, or neglect and the findings of these reviews
3 shall be included in each department's quality assurance
4 reports.

5 Section 6. Subsection (1) of section 39.304, Florida
6 Statutes, is amended to read:

7 39.304 Photographs, medical examinations, X rays, and
8 medical treatment of abused, abandoned, or neglected child.--

9 (1)(a) Any person required to investigate cases of
10 suspected child abuse, abandonment, or neglect may take or
11 cause to be taken photographs of the areas of trauma visible
12 on a child who is the subject of a report. Any child
13 protection team that examines a child who is the subject of a
14 report must take, or cause to be taken, photographs of any
15 areas of trauma visible on the child. ~~Such~~ Photographs of
16 physical abuse injuries, or duplicates thereof, shall be
17 provided to the department for inclusion in the investigative
18 file and shall become part of that file. Photographs of sexual
19 abuse trauma shall be made part of the child protection team
20 medical record.

21 (b) If the areas of trauma visible on a child indicate
22 a need for a medical examination, or if the child verbally
23 complains or otherwise exhibits distress as a result of injury
24 through suspected child abuse, abandonment, or neglect, or is
25 alleged to have been sexually abused, the person required to
26 investigate may cause the child to be referred for diagnosis
27 to a licensed physician or an emergency department in a
28 hospital without the consent of the child's parents or legal
29 custodian. Such examination may be performed by any licensed
30 physician or an advanced registered nurse practitioner
31 licensed pursuant to chapter 464. Any licensed physician, or

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1 advanced registered nurse practitioner licensed pursuant to
2 chapter 464, who has reasonable cause to suspect that an
3 injury was the result of child abuse, abandonment, or neglect
4 may authorize a radiological examination to be performed on
5 the child without the consent of the child's parent or legal
6 custodian.

7 Section 7. Paragraph (f) of subsection (8) of section
8 39.402, Florida Statutes, is amended to read:

9 39.402 Placement in a shelter.--

10 (8)

11 (f) At the shelter hearing, the department shall
12 inform the court of:

13 1. Any identified current or previous case plans
14 negotiated in any district with the parents or caregivers
15 under this chapter and problems associated with compliance;

16 2. Any adjudication of the parents or caregivers of
17 delinquency;

18 3. Any past or current injunction for protection from
19 domestic violence; and

20 4. All of the child's places of residence during the
21 prior 12 months.

22 Section 8. Paragraph (i) of subsection (3), subsection
23 (7), and paragraph (g) of subsection (18) of section 383.402,
24 Florida Statutes, are amended to read:

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

28 (3) The State Child Abuse Death Review Committee
29 shall:

30 (i) Educate the public regarding the provisions of
31 chapter 99-168, Laws of Florida ~~Kayla McKean Child Protection~~

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1 ~~Act~~, the incidence and causes of child abuse death, and ways
2 by which such deaths may be prevented.

3 (7) Each local child abuse death review committee
4 shall:

5 ~~(a) Review all deaths resulting from child abuse which~~
6 ~~are reported to the Office of Vital Statistics.~~

7 (a)~~(b)~~ Assist the state committee in collecting data
8 on deaths that are the result of child abuse, in accordance
9 with the protocol established by the state committee.

10 (b)~~(c)~~ Submit written reports at the direction of the
11 state committee. The reports must include nonidentifying
12 information on individual cases and the steps taken by the
13 local committee and private and public agencies to implement
14 necessary changes and improve the coordination of services and
15 reviews.

16 (c)~~(d)~~ Submit all records requested by the state
17 committee at the conclusion of its review of a death resulting
18 from child abuse.

19 (d)~~(e)~~ Abide by the standards and protocols developed
20 by the state committee.

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

23 (18) Each district administrator of the Department of
24 Children and Family Services must appoint a child abuse death
25 review coordinator for the district. The coordinator must have
26 knowledge and expertise in the area of child abuse and
27 neglect. The coordinator's general responsibilities include:

28 (g) Notifying the district administrator, the
29 Secretary of Children and Family Services, ~~and~~ the Deputy
30 Secretary for ~~of~~ Children's Medical Services, and the
31 Department of Health Child Abuse Death Review Coordinator

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1 ~~Assistant Health Officer~~ of all child abuse deaths meeting
2 criteria for review as specified in this section within 1
3 working day after verifying the child's death was due to
4 abuse, neglect, or abandonment ~~learning of the child's death.~~

5 Section 9. Paragraph (b) of subsection (3) of section
6 409.145, Florida Statutes, is amended to read:

7 409.145 Care of children.--

8 (3)

9 (b) The services of the foster care program shall
10 continue for those individuals 18 to 21 years of age only for
11 the period of time the individual is continuously enrolled in
12 high school, in a program leading to a high school equivalency
13 diploma as defined in s. 229.814, or in a full-time career
14 education program. Services shall be terminated upon
15 completion of or withdrawal or permanent expulsion from high
16 school, the program leading to a high school equivalency
17 diploma, or the full-time career education program. In
18 addition, the department may, based upon the availability of
19 funds, provide assistance to those individuals who leave
20 foster care when they attain 18 years of age and subsequently
21 request assistance prior to their 21st birthday. The following
22 are examples of assistance that may be provided: referrals for
23 employment, services for educational or vocational
24 development, and housing assistance.

25 Section 10. Subsection (3) of section 409.1671,
26 Florida Statutes, is amended to read:

27 409.1671 Foster care and related services;
28 privatization.--

29 (3)(a) In order to help ensure a seamless child
30 protection system, the department shall ensure that contracts
31 entered into with community-based agencies pursuant to this

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1 section include provisions for a case-transfer process to
2 determine the date that the community-based agency will
3 initiate the appropriate services for a child and family. This
4 case-transfer process must clearly identify the closure of the
5 protective investigation and the initiation of service
6 provision. At the point of case transfer, and at the
7 conclusion of an investigation, the department must provide a
8 complete summary of the findings of the investigation to the
9 community-based agency.

10 (b) The contracts must also ensure that each
11 community-based agency shall furnish regular status reports of
12 its cases to the department as specified in the contract. A
13 provider may not discontinue services without prior written
14 notification to the department. After discontinuing services
15 to a child or a child and family, the community-based agency
16 must provide a written case summary, including its assessment
17 of the child and family, to the department.

18 (c) The annual contract between the department and
19 community-based agencies must include provisions that specify
20 the procedures to be used by the parties to resolve
21 differences in interpreting the contract or to resolve
22 disputes as to the adequacy of the parties' compliance with
23 their respective obligations under the contract.

24 Section 11. Present paragraph (c) of subsection (13)
25 of section 409.175, Florida Statutes, is redesignated as
26 paragraph (d) and a new paragraph (c) is added to that section
27 to read:

28 409.175 Licensure of family foster homes, residential
29 child-caring agencies, and child-placing agencies.--

30 (13)

31 (c) In consultation with foster parents, each district

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Amendment No. ____ (for drafter's use only)

1 or lead agency shall develop a plan for making the completion
 2 of the required training as convenient as possible for
 3 potential foster parents and emergency-shelter parents. The
 4 plan should include, without limitation, such strategies as
 5 providing training in nontraditional locations and at
 6 nontraditional times. The plan must be revised at least
 7 annually and must be included in the information provided to
 8 each person applying to become a foster parent or
 9 emergency-shelter parent.

10 Section 12. Section 409.1753, Florida Statutes, is
 11 created to read:

12 409.1753 Foster care; duties.--The department shall
 13 ensure that, within each district, each foster home is given a
 14 telephone number for the foster parent to call during normal
 15 working hours whenever immediate assistance is needed and the
 16 child's caseworker is unavailable. This number must be staffed
 17 and answered by individuals possessing the knowledge and
 18 authority necessary to assist foster parents.

19 Section 13. Section 1 of chapter 99-168, Laws of
 20 Florida, is repealed.

21 Section 14. This act shall take effect upon becoming a
 22 law.

23
 24

25 ===== T I T L E A M E N D M E N T =====

26 And the title is amended as follows:
 27 remove from the title of the bill: the entire title
 28
 29 and insert in lieu thereof:

30 A bill to be entitled
 31 An act relating to child welfare; amending s.

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Bill No. CS/CS/HB 855, 1st Eng.

Amendment No. ____ (for drafter's use only)

1 39.201, F.S.; revising confidentiality of
2 recorded central abuse hotline calls relating
3 to child abuse, neglect, or abandonment;
4 providing clarifying language for
5 community-based care providers of foster care
6 and related services; providing circumstances
7 in which an officer or employee of the judicial
8 branch is not required to report child abuse,
9 abandonment, or neglect; amending s. 39.202,
10 F.S.; providing for the inclusion of the child
11 protection team in the list of those to whom an
12 alleged abuse reporter's name may be released;
13 amending s. 39.205, F.S.; exempting judges from
14 prosecution for failure to report; amending s.
15 39.301, F.S.; clarifying language relating to
16 initiation of protective investigations and
17 criminal investigations; clarifying that the
18 age of parents shall be factored into risk
19 assessments; changing certain time
20 requirements; amending s. 39.303, F.S.;
21 specifying additional supportive services to be
22 provided by child protection teams; requiring
23 certain training for medical personnel
24 participating in a child protection team;
25 revising reports of abuse, abandonment, or
26 neglect that must be referred to the Department
27 of Health for supportive services; revising
28 requirements relating to review of certain
29 cases of abuse, abandonment, or neglect and
30 standards for face-to-face medical evaluations
31 by a child protection team; requiring

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Amendment No. ____ (for drafter's use only)

1 collaboration between certain state agencies
2 relating to reports of child abuse,
3 abandonment, and neglect; amending s. 39.304,
4 F.S.; providing for disposition of
5 investigative photographs of physical abuse
6 injuries and sexual abuse trauma; amending s.
7 39.402, F.S.; clarifying that the court must be
8 informed of identified case plans at shelter
9 hearings; amending s. 383.402, F.S.; deleting a
10 reference to the Kayla McKean Child Protection
11 Act; revising duties of the local child abuse
12 death review committee and district
13 coordinators; amending s. 409.145, F.S.;
14 authorizing the Department of Children and
15 Family Services to provide additional
16 assistance for certain individuals leaving
17 foster care; amending s. 409.1671, F.S.;
18 prescribing times when summaries of
19 investigations must be provided to the
20 community-based agency; amending s. 409.175,
21 F.S.; requiring a plan for streamlining foster
22 parent training; creating s. 409.1753, F.S.;
23 specifying duties of the Department of Children
24 and Family Services or its agents regarding
25 foster care; repealing s. 1, ch. 99-168, Laws
26 of Florida, which provides a short title naming
27 the Act the Kayla McKean Child Protection Act;
28 providing an effective date.

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