

By the Committees on Law Enforcement & Crime Prevention,
Family Law & Children and Representatives Murman, Sublette,
Bullard, Dockery and Brown

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

1 certain cases of abuse, abandonment, or neglect
2 and standards for face-to-face medical
3 evaluations by a child protection team;
4 requiring collaboration between certain state
5 agencies relating to reports of child abuse,
6 abandonment, and neglect; amending s. 39.304,
7 F.S.; providing for disposition of
8 investigative photographs of physical abuse
9 injuries and sexual abuse trauma; amending s.
10 39.402, F.S.; clarifying that the court must be
11 informed of identified case plans at shelter
12 hearings; amending s. 383.402, F.S.; revising
13 duties of the state and local child abuse death
14 review committees and district coordinators;
15 amending s. 409.1671, F.S.; deleting
16 requirement that the case-transfer process for
17 contracts with community-based agencies for
18 provision of foster care and related services
19 identify closure of protective investigations;
20 requiring a report at the conclusion of the
21 investigation; providing an effective date.

22
23 Be It Enacted by the Legislature of the State of Florida:

24
25 Section 1. Paragraph (g) of subsection (2) and
26 subsections (7), (8), and (9) of section 39.201, Florida
27 Statutes, are amended to read:

28 39.201 Mandatory reports of child abuse, abandonment,
29 or neglect; mandatory reports of death; central abuse
30 hotline.--

31 (2)

1 (g) The department shall voice-record all incoming or
2 outgoing calls that are received or placed by the central
3 abuse hotline which relate to suspected or known child abuse,
4 neglect, or abandonment. The recording shall become a part of
5 the record of the report, ~~but,~~ notwithstanding s. 39.202,
6 shall be released in full only to law enforcement agencies and
7 state attorneys for the purpose of investigating and
8 prosecuting criminal charges pursuant to s. 39.205, or to
9 employees of the department for the purpose of investigating
10 and seeking administrative penalties pursuant to s. 39.206 ~~is~~
11 ~~subject to the same confidentiality as is provided to the~~
12 ~~identity of the caller under s. 39.202.~~ Nothing in this
13 paragraph shall prohibit the use of the recordings by hotline
14 staff for quality assurance and training.

15 (7)(a) This section does not require a professional
16 who is hired by or enters into a contract with the department
17 for the purpose of treating or counseling any person, as a
18 result of a report of child abuse, abandonment, or neglect, to
19 again report to the central abuse hotline the abuse,
20 abandonment, or neglect that was the subject of the referral
21 for treatment.

22 (b) This section does not require an officer or
23 employee of the judicial branch to again provide notice of
24 reasonable cause to suspect child abuse, abandonment, or
25 neglect when that child is currently being investigated by the
26 department, there is an existing dependency case, or the
27 matter has previously been reported to the department,
28 provided there is reasonable cause to believe the information
29 is already known to the department. This paragraph applies
30 only when the information has been provided to the officer or
31 employee in the course of official duties.

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

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

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

20 39.202 Confidentiality of reports and records in cases
21 of child abuse or neglect.--

22 (4) The name of any person reporting child abuse,
23 abandonment, or neglect may not be released to any person
24 other than employees of the department responsible for child
25 protective services, the central abuse hotline, law
26 enforcement, the child protection team, or the appropriate
27 state attorney, without the written consent of the person
28 reporting. This does not prohibit the subpoenaing of a person
29 reporting child abuse, abandonment, or neglect when deemed
30 necessary by the court, the state attorney, or the department,
31 provided the fact that such person made the report is not

1 disclosed. Any person who reports a case of child abuse or
2 neglect may, at the time he or she makes the report, request
3 that the department notify him or her that a child protective
4 investigation occurred as a result of the report. Any person
5 specifically listed in s. 39.201(1) who makes a report in his
6 or her official capacity may also request a written summary of
7 the outcome of the investigation. The department shall mail
8 such a notice to the reporter within 10 days after completing
9 the child protective investigation.

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

12 39.205 Penalties relating to reporting of child abuse,
13 abandonment, or neglect.--

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

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

27 39.301 Initiation of protective investigations.--

28 (2)(a) ~~The department Upon notification by the~~
29 ~~department's central abuse hotline under subsection (1), the~~
30 ~~designated child protective investigator~~ shall immediately
31 forward allegations of criminal conduct to the municipal or

1 ~~county~~ notify the appropriate law enforcement agency of the
2 municipality or county in which the alleged conduct has ~~known~~
3 ~~or suspected child abuse, abandonment, or neglect is believed~~
4 ~~to have~~ occurred.

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

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

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

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

14 4. A child is known or suspected to be the victim of
15 sexual battery, as defined in s. 827.071, or of sexual abuse,
16 as defined in s. 39.01.

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

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

3 (d) The local law enforcement agreement required in s.
4 39.306 shall describe the specific local protocols for
5 implementing this section.

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

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

28 (12)

29 (c) The department, in consultation with the
30 judiciary, shall adopt by rule criteria that are factors
31 requiring that the department take the child into custody,

1 petition the court as provided in this chapter, or, if the
2 child is not taken into custody or a petition is not filed
3 with the court, conduct an administrative review. If after an
4 administrative review the department determines not to take
5 the child into custody or petition the court, the department
6 shall document the reason for its decision in writing and
7 include it in the investigative file. For all cases that were
8 accepted by the local law enforcement agency for criminal
9 investigation pursuant to subsection (2), the department must
10 include in the file written documentation that the
11 administrative review included input from law enforcement. In
12 addition, for all cases that must be referred to child
13 protection teams pursuant to s. 39.303(2) and (3), the file
14 must include written documentation that the administrative
15 review included the results of the team's evaluation ~~medical~~
16 ~~evaluation~~. Factors that must be included in the development
17 of the rule include noncompliance with the case plan developed
18 by the department, or its agent, and the family under this
19 chapter and prior abuse reports with findings that involve the
20 child or caregiver.

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

24 (17) When a law enforcement agency conducts a criminal
25 investigation into allegations of child abuse, neglect, or
26 abandonment, photographs documenting the abuse or neglect will
27 be taken when appropriate ~~is participating in an~~
28 ~~investigation, the agency shall take photographs of the~~
29 ~~child's living environment. Such photographs shall become part~~
30 ~~of the investigative file.~~

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1 (18) Within 15 days after the case is ~~completion of~~
2 ~~the investigation of cases~~ reported to him or her pursuant to
3 this chapter, the state attorney shall report his or her
4 findings to the department and shall include in such report a
5 determination of whether or not prosecution is justified and
6 appropriate in view of the circumstances of the specific case.

7 Section 5. Section 39.303, Florida Statutes, is
8 amended to read:

9 39.303 Child protection teams; services; eligible
10 cases.--The Department of Health shall develop, maintain, and
11 coordinate the services of one or more multidisciplinary child
12 protection teams in each of the service districts of the
13 Department of Children and Family Services. Such teams may be
14 composed of appropriate representatives of school districts
15 and appropriate health, mental health, social service, legal
16 service, and law enforcement agencies. The Legislature finds
17 that optimal coordination of child protection teams and sexual
18 abuse treatment programs requires collaboration between the
19 Department of Health and the Department of Children and Family
20 Services. The two departments shall maintain an interagency
21 agreement that establishes protocols for oversight and
22 operations of child protection teams and sexual abuse
23 treatment programs. The Secretary of Health and the Deputy
24 Secretary for ~~director of~~ Children's Medical Services, in
25 consultation with the Secretary of Children and Family
26 Services, shall maintain the responsibility for the screening,
27 employment, and, if necessary, the termination of child
28 protection team medical directors, at headquarters and in the
29 15 districts. Child protection team medical directors shall be
30 responsible for oversight of the teams in the districts.

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1 (1) The Department of Health shall utilize and convene
2 the teams to supplement the assessment and protective
3 supervision activities of the family safety and preservation
4 program of the Department of Children and Family Services.
5 Nothing in this section shall be construed to remove or reduce
6 the duty and responsibility of any person to report pursuant
7 to this chapter all suspected or actual cases of child abuse,
8 abandonment, or neglect or sexual abuse of a child. The role
9 of the teams shall be to support activities of the program and
10 to provide services deemed by the teams to be necessary and
11 appropriate to abused, abandoned, and neglected children upon
12 referral. The specialized diagnostic assessment, evaluation,
13 coordination, consultation, and other supportive services that
14 a child protection team shall be capable of providing include,
15 but are not limited to, the following:

16 (a) Medical diagnosis and evaluation services,
17 including provision or interpretation of X rays and laboratory
18 tests, and related services, as needed, and documentation of
19 findings relative thereto.

20 (b) Telephone consultation services in emergencies and
21 in other situations.

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

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

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1 (e) Expert medical, psychological, and related
2 professional testimony in court cases.

3 (f) Case staffings to develop treatment plans for
4 children whose cases have been referred to the team. A child
5 protection team may provide consultation with respect to a
6 child who is alleged or is shown to be abused, abandoned, or
7 neglected, which consultation shall be provided at the request
8 of a representative of the family safety and preservation
9 program or at the request of any other professional involved
10 with a child or the child's parent or parents, legal custodian
11 or custodians, or other caregivers. In every such child
12 protection team case staffing, consultation, or staff activity
13 involving a child, a family safety and preservation program
14 representative shall attend and participate.

15 (g) Case service coordination and assistance,
16 including the location of services available from other public
17 and private agencies in the community.

18 (h) Such training services for program and other
19 employees of the Department of Children and Family Services,
20 employees of the Department of Health, and other medical
21 professionals as is deemed appropriate to enable them to
22 develop and maintain their professional skills and abilities
23 in handling child abuse, abandonment, and neglect cases.

24 (i) Educational and community awareness campaigns on
25 child abuse, abandonment, and neglect in an effort to enable
26 citizens more successfully to prevent, identify, and treat
27 child abuse, abandonment, and neglect in the community.

28 (j) Child protection team assessments that include, as
29 appropriate, medical evaluations, medical consultations,
30 family psychosocial interviews, specialized clinical
31 interviews, or forensic interviews.

1
2 All medical personnel participating on a child protection team
3 must successfully complete the required child protection team
4 training curriculum as set forth in protocols determined by
5 the Deputy Secretary for Children's Medical Services and the
6 Statewide Medical Director for Child Protection.

7 (2) The child abuse, abandonment, and neglect reports
8 that must be referred by the Department of Children and Family
9 Services to child protection teams of the Department of Health
10 for an assessment ~~medical evaluation~~ and other appropriate
11 available support services as set forth in subsection (1) must
12 include cases involving:

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

15 (b) Bruises anywhere on a child 5 years of age or
16 under.

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

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

22 ~~(e)(d)~~ Reported malnutrition of a child and failure of
23 a child to thrive.

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

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

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1 ~~(h)(g)~~ Symptoms of serious emotional problems in a
2 child when emotional or other abuse, abandonment, or neglect
3 is suspected.

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

5 (3) All abuse and neglect cases transmitted for
6 investigation to a district by the hotline must be
7 simultaneously transmitted to the Department of Health child
8 protection team for review. For the purpose of determining
9 whether face-to-face medical evaluation by a child protection
10 team is necessary, all cases transmitted to the child
11 protection team which meet the criteria in subsection (2) must
12 be timely reviewed by: ~~a board-certified pediatrician or~~
13 ~~registered nurse practitioner under the supervision of such~~
14 ~~pedsiatrician for the purpose of determining whether a~~
15 ~~face-to-face medical evaluation by a child protection team is~~
16 ~~necessary.~~

17 (a) A physician licensed under chapter 458 or chapter
18 459 who holds board certification in pediatrics and is a
19 member of a child protection team;

20 (b) A physician licensed under chapter 458 or chapter
21 459 who holds board certification in a specialty other than
22 pediatrics, who may complete the review only when working
23 under the direction of a physician licensed under chapter 458
24 or chapter 459 who holds board certification in pediatrics and
25 is a member of a child protection team;

26 (c) An advanced registered nurse practitioner licensed
27 under chapter 464 who has a speciality in pediatrics or family
28 medicine and is a member of a child protection team;

29 (d) A physician assistant licensed under chapter 458
30 or chapter 459, who may complete the review only when working
31 under the supervision of a physician licensed under chapter

1 458 or chapter 459 who holds board certification in pediatrics
2 and is a member of a child protection team; or

3 (e) A registered nurse licensed under chapter 464, who
4 may complete the review only when working under the direct
5 supervision of a physician licensed under chapter 458 or
6 chapter 459 who holds certification in pediatrics and is a
7 member of a child protection team.

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

11 (a) The child was examined ~~by a physician~~ for the
12 alleged abuse or neglect by a physician who is not a member of
13 the child protection team, and a consultation between the
14 child protection team board-certified pediatrician, advanced
15 registered ~~or~~ nurse practitioner, physician assistant working
16 under the supervision of a child protection team
17 board-certified pediatrician, or registered nurse working
18 under the direct supervision of a child protection team
19 board-certified pediatrician, and the examining physician
20 concludes that a further medical evaluation is unnecessary;

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

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

28
29 Notwithstanding paragraphs (a), (b), and (c), a child
30 protection team pediatrician, as authorized in subsection (3),
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1 may determine that a face-to-face medical evaluation is
2 necessary.

3 (5)~~(4)~~ In all instances in which a child protection
4 team is providing certain services to abused, abandoned, or
5 neglected children, other offices and units of the Department
6 of Health, and offices and units of the Department of Children
7 and Family Services, shall avoid duplicating the provision of
8 those services.

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

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

21 39.304 Photographs, medical examinations, X rays, and
22 medical treatment of abused, abandoned, or neglected child.--

23 (1)(a) Any person required to investigate cases of
24 suspected child abuse, abandonment, or neglect may take or
25 cause to be taken photographs of the areas of trauma visible
26 on a child who is the subject of a report. Any child
27 protection team that examines a child who is the subject of a
28 report must take, or cause to be taken, photographs of any
29 areas of trauma visible on the child. ~~Such~~ Photographs of
30 physical abuse injuries, or duplicates thereof, shall be
31 provided to the department for inclusion in the investigative

1 file and shall become part of that file. Photographs of sexual
2 abuse trauma shall be made part of the child protection team
3 medical record.

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

21 Section 7. Paragraph (f) of subsection (8) of section
22 39.402, Florida Statutes, is amended to read:

23 39.402 Placement in a shelter.--

24 (8)

25 (f) At the shelter hearing, the department shall
26 inform the court of:

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

30 2. Any adjudication of the parents or caregivers of
31 delinquency;

1 3. Any past or current injunction for protection from
2 domestic violence; and

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

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

8 383.402 Child abuse death review; State Child Abuse
9 Death Review Committee; local child abuse death review
10 committees.--

11 (3) The State Child Abuse Death Review Committee
12 shall:

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

17 (7) Each local child abuse death review committee
18 shall:

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

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

24 (b)~~(c)~~ Submit written reports at the direction of the
25 state committee. The reports must include nonidentifying
26 information on individual cases and the steps taken by the
27 local committee and private and public agencies to implement
28 necessary changes and improve the coordination of services and
29 reviews.

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

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

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

8 (18) Each district administrator of the Department of
9 Children and Family Services must appoint a child abuse death
10 review coordinator for the district. The coordinator must have
11 knowledge and expertise in the area of child abuse and
12 neglect. The coordinator's general responsibilities include:

13 (g) Notifying the district administrator, the
14 Secretary of Children and Family Services, ~~and~~ the Deputy
15 Secretary for ~~of~~ Children's Medical Services, and the
16 Department of Health Child Abuse Death Review Coordinator
17 ~~Assistant Health Officer~~ of all child abuse deaths meeting
18 criteria for review as specified in this section within 1
19 working day after verifying the child's death was due to
20 abuse, neglect, or abandonment ~~learning of the child's death.~~

21 Section 9. Subsection (3) of section 409.1671, Florida
22 Statutes, is amended to read:

23 409.1671 Foster care and related services;
24 privatization.--

25 (3)(a) In order to help ensure a seamless child
26 protection system, the department shall ensure that contracts
27 entered into with community-based agencies pursuant to this
28 section include provisions for a case-transfer process to
29 determine the date that the community-based agency will
30 initiate the appropriate services for a child and family. ~~This~~
31 ~~case-transfer process must clearly identify the closure of the~~

1 ~~protective investigation and the initiation of service~~
2 ~~provision.~~At the point of case transfer, as well as at the
3 conclusion of an investigation,the department must provide a
4 complete summary of the findings of the investigation to the
5 community-based agency.

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

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

20 Section 10. This act shall take effect upon becoming a
21 law.
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