

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. 409.145, F.S.; authorizing the
16 Department of Children and Family Services to
17 provide additional assistance for certain
18 individuals leaving foster care; amending s.
19 409.1671, F.S.; deleting requirement that the
20 case-transfer process for contracts with
21 community-based agencies for provision of
22 foster care and related services identify
23 closure of protective investigations; requiring
24 a report at the conclusion of the
25 investigation; providing an effective date.

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

28
29 Section 1. Paragraph (g) of subsection (2) and
30 subsections (7), (8), and (9) of section 39.201, Florida
31 Statutes, are amended to read:

1 39.201 Mandatory reports of child abuse, abandonment,
2 or neglect; mandatory reports of death; central abuse
3 hotline.--

4 (2)

5 (g) The department shall voice-record all incoming or
6 outgoing calls that are received or placed by the central
7 abuse hotline which relate to suspected or known child abuse,
8 neglect, or abandonment. The recording shall become a part of
9 the record of the report, but, not withstanding s. 39.202,
10 shall be released in full only to law enforcement agencies and
11 state attorneys for the purpose of investigating and
12 prosecuting criminal charges pursuant to s. 39.205, or to
13 employees of the department for the purpose of investigating
14 and seeking administrative penalties pursuant to s. 39.206 ~~is~~
15 ~~subject to the same confidentiality as is provided to the~~
16 ~~identity of the caller under s. 39.202.~~ Nothing in this
17 paragraph shall prohibit the use of the recordings by hotline
18 staff for quality assurance and training.

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

26 (b) This section does not require an officer or
27 employee of the judicial branch to again provide notice of
28 reasonable cause to suspect child abuse, abandonment, or
29 neglect when that child is currently being investigated by the
30 department, there is an existing dependency case, or the
31 matter has previously been reported to the department,

1 provided there is reasonable cause to believe the information
2 is already known to the department. This paragraph applies
3 only when the information has been provided to the officer or
4 employee in the course of 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 where jurisdiction applies, in order to detect such things as
17 harassment and situations that warrant an investigation
18 because of the frequency or variety of the source of the
19 reports. The assistant secretary may refer a case for
20 investigation when it is determined, as a result of this
21 review, that an investigation may be warranted.

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

24 39.202 Confidentiality of reports and records in cases
25 of child abuse or neglect.--

26 (4) The name of any person reporting child abuse,
27 abandonment, or neglect may not be released to any person
28 other than employees of the department responsible for child
29 protective services, the central abuse hotline, law
30 enforcement, the child protection team, or the appropriate
31 state attorney, without the written consent of the person

1 reporting. This does not prohibit the subpoenaing of a person
2 reporting child abuse, abandonment, or neglect when deemed
3 necessary by the court, the state attorney, or the department,
4 provided the fact that such person made the report is not
5 disclosed. Any person who reports a case of child abuse or
6 neglect may, at the time he or she makes the report, request
7 that the department notify him or her that a child protective
8 investigation occurred as a result of the report. Any person
9 specifically listed in s. 39.201(1) who makes a report in his
10 or her official capacity may also request a written summary of
11 the outcome of the investigation. The department shall mail
12 such a notice to the reporter within 10 days after completing
13 the child protective investigation.

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

16 39.205 Penalties relating to reporting of child abuse,
17 abandonment, or neglect.--

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

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

31 39.301 Initiation of protective investigations.--

1 (2)(a) The department ~~Upon notification by the~~
2 ~~department's central abuse hotline under subsection (1), the~~
3 ~~designated child protective investigator shall immediately~~
4 forward allegations of criminal conduct to the municipal or
5 county ~~notify the appropriate~~ law enforcement agency of the
6 municipality or county in which the alleged conduct has ~~known~~
7 ~~or suspected child abuse, abandonment, or neglect is believed~~
8 ~~to have occurred.~~

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

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

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

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

18 4. A child is known or suspected to be the victim of
19 sexual battery, as defined in s. 827.071, or of sexual abuse,
20 as defined in s. 39.01.

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

24 (c) Upon receiving a written report of an allegation
25 of criminal conduct from the department ~~receipt of a report,~~
26 the law enforcement agency shall ~~must~~ review the information
27 in the written report to ~~and~~ determine whether a criminal
28 investigation of the case is warranted. ~~and, If the law~~
29 enforcement agency accepts the case for ~~so, shall conduct the~~
30 criminal investigation that shall be coordinated, ~~it shall~~
31 coordinate its investigative activities with the department,

1 whenever feasible possible, ~~with the child protective~~
2 ~~investigation of the department or its agent.~~ If the law
3 enforcement agency does not accept the case for criminal
4 investigation, the agency shall notify the department in
5 writing.

6 (d) The local law enforcement agreement required in s.
7 39.306 shall describe the specific local protocols for
8 implementing this section.

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

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

31 (12)

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

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

27 (17) When a law enforcement agency conducts a criminal
28 investigation into allegations of child abuse, neglect, or
29 abandonment, photographs documenting the abuse or neglect will
30 be taken when appropriate ~~is participating in an~~
31 ~~investigation, the agency shall take photographs of the~~

1 ~~child's living environment. Such photographs shall become part~~
2 ~~of the investigative file.~~

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

9 Section 5. Section 39.303, Florida Statutes, is
10 amended to read:

11 39.303 Child protection teams; services; eligible
12 cases.--The Department of Health shall develop, maintain, and
13 coordinate the services of one or more multidisciplinary child
14 protection teams in each of the service districts of the
15 Department of Children and Family Services. Such teams may be
16 composed of appropriate representatives of school districts
17 and appropriate health, mental health, social service, legal
18 service, and law enforcement agencies. The Legislature finds
19 that optimal coordination of child protection teams and sexual
20 abuse treatment programs requires collaboration between the
21 Department of Health and the Department of Children and Family
22 Services. The two departments shall maintain an interagency
23 agreement that establishes protocols for oversight and
24 operations of child protection teams and sexual abuse
25 treatment programs. The Secretary of Health and the Deputy
26 Secretary for ~~director of~~ Children's Medical Services, in
27 consultation with the Secretary of Children and Family
28 Services, shall maintain the responsibility for the screening,
29 employment, and, if necessary, the termination of child
30 protection team medical directors, at headquarters and in the
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1 15 districts. Child protection team medical directors shall be
2 responsible for oversight of the teams in the districts.

3 (1) The Department of Health shall utilize and convene
4 the teams to supplement the assessment and protective
5 supervision activities of the family safety and preservation
6 program of the Department of Children and Family Services.

7 Nothing in this section shall be construed to remove or reduce
8 the duty and responsibility of any person to report pursuant
9 to this chapter all suspected or actual cases of child abuse,
10 abandonment, or neglect or sexual abuse of a child. The role
11 of the teams shall be to support activities of the program and
12 to provide services deemed by the teams to be necessary and
13 appropriate to abused, abandoned, and neglected children upon
14 referral. The specialized diagnostic assessment, evaluation,
15 coordination, consultation, and other supportive services that
16 a child protection team shall be capable of providing include,
17 but are not limited to, the following:

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

22 (b) Telephone consultation services in emergencies and
23 in other situations.

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

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

3 (e) Expert medical, psychological, and related
4 professional testimony in court cases.

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

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

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

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

30 (j) Child protection team assessments that include, as
31 appropriate, medical evaluations, medical consultations,

1 family psychosocial interviews, specialized clinical
2 interviews, or forensic interviews.

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

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

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

17 (b) Bruises anywhere on a child 5 years of age or
18 under.

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

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

24 (e)~~(d)~~ Reported malnutrition of a child and failure of
25 a child to thrive.

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

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

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

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

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

19 (a) A physician licensed under chapter 458 or chapter
20 459 who holds board certification in pediatrics and is a
21 member of a child protection team;

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

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

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1 (d) A physician assistant licensed under chapter 458
2 or chapter 459, who may complete the review only when working
3 under the supervision of a physician licensed under chapter
4 458 or chapter 459 who holds board certification in pediatrics
5 and is a member of a child protection team; or

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

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

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

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

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

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

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

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

21 Section 6. 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 shall be made part of the child protection team
5 medical record.

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 7. Paragraph (f) of subsection (8) of section
24 39.402, Florida Statutes, is amended to read:

25 39.402 Placement in a shelter.--

26 (8)

27 (f) At the shelter hearing, the department shall
28 inform the court of:

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

1 2. Any adjudication of the parents or caregivers of
2 delinquency;

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

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

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

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

13 (3) The State Child Abuse Death Review Committee
14 shall:

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

19 (7) Each local child abuse death review committee
20 shall:

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

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

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

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. Paragraph (b) of subsection (3) of section
22 409.145, Florida Statutes, is amended to read:

23 409.145 Care of children.--

24 (3)

25 (b) The services of the foster care program shall
26 continue for those individuals 18 to 21 years of age only for
27 the period of time the individual is continuously enrolled in
28 high school, in a program leading to a high school equivalency
29 diploma as defined in s. 229.814, or in a full-time career
30 education program. Services shall be terminated upon
31 completion of or withdrawal or permanent expulsion from high

1 school, the program leading to a high school equivalency
2 diploma, or the full-time career education program. In
3 addition, the department may, based upon the availability of
4 funds, provide assistance to those individuals who leave
5 foster care when they attain 18 years of age and subsequently
6 request assistance prior to their 21st birthday. The following
7 are examples of assistance that may be provided: referrals for
8 employment, services for educational or vocational
9 development, and housing assistance.

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

12 409.1671 Foster care and related services;
13 privatization.--

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

26 (b) The contracts must also ensure that each
27 community-based agency shall furnish regular status reports of
28 its cases to the department as specified in the contract. A
29 provider may not discontinue services without prior written
30 notification to the department. After discontinuing services
31 to a child or a child and family, the community-based agency

1 must provide a written case summary, including its assessment
2 of the child and family, to the department.

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

9 Section 11. This act shall take effect upon becoming a
10 law.

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