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 clarifying language for
7	community-based care providers of foster care
8	and related services; providing circumstances
9	in which an officer or employee of the judicial
10	branch is not required to report child abuse,
11	abandonment, or neglect; amending s. 39.202,
12	F.S.; 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.; clarifying language relating to
18	initiation of protective investigations and
19	criminal investigations; clarifying that the
20	age of parents shall be factored into risk
21	assessments; changing certain time
22	requirements; amending s. 39.303, F.S.;
23	specifying additional supportive services to be
24	provided by child protection teams; requiring
25	certain training for medical personnel
26	participating in a child protection team;
27	revising reports of abuse, abandonment, or
28	neglect that must be referred to the Department
29	of Health for supportive services; revising
30	requirements relating to review of certain
31	cases of abuse, abandonment, or neglect and
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1	standards for face-to-face medical evaluations
2	by a child protection team; requiring
3	collaboration between certain state agencies
4	relating to reports of child abuse,
5	abandonment, and neglect; amending s. 39.304,
6	F.S.; providing for disposition of
7	investigative photographs of physical abuse
8	injuries and sexual abuse trauma; amending s.
9	39.402, F.S.; clarifying that the court must be
10	informed of identified case plans at shelter
11	hearings; amending s. 383.402, F.S.; deleting a
12	reference to the Kayla McKean Child Protection
13	Act; revising duties of the local child abuse
14	death review committee and district
15	coordinators; amending s. 409.145, F.S.;
16	authorizing the Department of Children and
17	Family Services to provide additional
18	assistance for certain individuals leaving
19	foster care; amending s. 409.1671, F.S.;
20	prescribing times when summaries of
21	investigations must be provided to the
22	community-based agency; amending s. 409.175,
23	F.S.; requiring a plan for streamlining foster
24	parent training; creating s. 409.1753, F.S.;
25	specifying duties of the Department of Children
26	and Family Services or its agents regarding
27	foster care; repealing s. 1, ch. 99-168, Laws
28	of Florida, which provides a short title naming
29	the Act the Kayla McKean Child Protection Act;
30	providing an effective date.
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Be It Enacted by the Legislature of the State of Florida: 1 2 3 Section 1. Paragraph (g) of subsection (2) and 4 subsections (7), (8), and (9) of section 39.201, Florida 5 Statutes, are amended to read: 6 39.201 Mandatory reports of child abuse, abandonment, 7 or neglect; mandatory reports of death; central abuse 8 hotline.--9 (2) (g) The department shall voice-record all incoming or 10 outgoing calls that are received or placed by the central 11 abuse hotline which relate to suspected or known child abuse, 12 neglect, or abandonment. The recording shall become a part of 13 14 the record of the report, but, not withstanding s. 39.202, shall be released in full only to law enforcement agencies and 15 state attorneys for the purpose of investigating and 16 prosecuting criminal charges pursuant to s. 39.205, or to 17 employees of the department for the purpose of investigating 18 19 and seeking administrative penalties pursuant to s. 39.206 is 20 subject to the same confidentiality as is provided to the 21 identity of the caller under s. 39.202. Nothing in this 22 paragraph shall prohibit the use of the recordings by hotline 23 staff for quality assurance and training. (7)(a) This section does not require a professional 24 who is hired by or enters into a contract with the department 25 26 for the purpose of treating or counseling any person, as a result of a report of child abuse, abandonment, or neglect, to 27 again report to the central abuse hotline the abuse, 28 29 abandonment, or neglect that was the subject of the referral 30 for treatment. 31 3

(b) This section does not require an officer or 1 2 employee of the judicial branch to again provide notice of 3 reasonable cause to suspect child abuse, abandonment, or 4 neglect when that child is currently being investigated by the 5 department, there is an existing dependency case, or the 6 matter has previously been reported to the department, 7 provided there is reasonable cause to believe the information 8 is already known to the department. This paragraph applies 9 only when the information has been provided to the officer or employee in the course of official duties. 10 (8) Nothing in this chapter or in the contracting with 11 12 community-based care providers for privatization of foster care and related services as specified in s. 409.1671 shall be 13 14 construed to remove or reduce the duty and responsibility of 15 any person, including any employee of the community-based care privatization provider, to report a suspected or actual case 16 17 of child abuse, abandonment, or neglect or the sexual abuse of 18 a child to the department's central abuse hotline. 19 (9) On an ongoing basis, the department's quality 20 assurance program shall review calls reports to the hotline 21 involving three or more unaccepted reports on a single child, where jurisdiction applies, in order to detect such things as 22 harassment and situations that warrant an investigation 23 because of the frequency or variety of the source of the 24 reports. The assistant secretary may refer a case for 25 investigation when it is determined, as a result of this 26 27 review, that an investigation may be warranted. 28 Section 2. Subsection (4) of section 39.202, Florida 29 Statutes, is amended to read: 30 39.202 Confidentiality of reports and records in cases of child abuse or neglect .--31 4

1	(4) The name of any person reporting child abuse,
2	abandonment, or neglect may not be released to any person
3	other than employees of the department responsible for child
4	protective services, the central abuse hotline, law
5	enforcement, the child protection team, or the appropriate
6	state attorney, without the written consent of the person
7	reporting. This does not prohibit the subpoenaing of a person
8	reporting child abuse, abandonment, or neglect when deemed
9	necessary by the court, the state attorney, or the department,
10	provided the fact that such person made the report is not
11	disclosed. Any person who reports a case of child abuse or
12	neglect may, at the time he or she makes the report, request
13	that the department notify him or her that a child protective
14	investigation occurred as a result of the report. Any person
15	specifically listed in s. 39.201(1) who makes a report in his
16	or her official capacity may also request a written summary of
17	the outcome of the investigation. The department shall mail
18	such a notice to the reporter within 10 days after completing
19	the child protective investigation.
20	Section 3. Subsection (1) of section 39.205, Florida
21	Statutes, is amended to read:
22	39.205 Penalties relating to reporting of child abuse,
23	abandonment, or neglect
24	(1) A person who is required to report known or
25	suspected child abuse, abandonment, or neglect and who
26	knowingly and willfully fails to do so, or who knowingly and
27	willfully prevents another person from doing so, is guilty of
28	a misdemeanor of the first degree, punishable as provided in
29	s. 775.082 or s. 775.083. <u>A judge subject to discipline</u>
30	pursuant to s. 12, Art. V of the Florida Constitution shall
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not be subject to criminal prosecution when the information 1 2 was received in the course of official duties. 3 Section 4. Subsection (2), paragraph (b) of subsection 4 (8), paragraph (c) of subsection (12), and subsections (14), 5 (17), and (18) of section 39.301, Florida Statutes, are 6 amended to read: 7 39.301 Initiation of protective investigations.--8 (2)(a) The department Upon notification by the 9 department's central abuse hotline under subsection (1), the 10 designated child protective investigator shall immediately forward allegations of criminal conduct to the municipal or 11 12 county notify the appropriate law enforcement agency of the 13 municipality or county in which the alleged conduct has known 14 or suspected child abuse, abandonment, or neglect is believed 15 to have occurred. (b) As used in this subsection, the term "criminal 16 17 conduct" means: 18 1. A child is known or suspected to be the victim of 19 child abuse, as defined in s. 827.03, or of neglect of a 20 child, as defined in s. 827.03. 21 2. A child is known or suspected to have died as a result of abuse or neglect. 22 23 3. A child is known or suspected to be the victim of aggravated child abuse, as defined in s. 827.03. 24 4. A child is known or suspected to be the victim of 25 26 sexual battery, as defined in s. 827.071, or of sexual abuse, 27 as defined in s. 39.01. 28 5. A child is known or suspected to be the victim of institutional child abuse or neglect, as defined in s. 39.01, 29 30 and as provided for in s. 39.302(1). 31 6

1	(c) Upon receiving a written report of an allegation
2	of criminal conduct from the department receipt of a report,
3	the law enforcement agency shall must review the information
4	in the written report to and determine whether a criminal
+ 5	investigation of the case is warranted.and, If the law
6	enforcement agency accepts the case for so, shall conduct the
7	criminal investigation that shall be coordinated, it shall
8	coordinate its investigative activities with the department,
9	whenever <u>feasible</u> possible, with the child protective
10	investigation of the department or its agent. If the law
11	enforcement agency does not accept the case for criminal
12	investigation, the agency shall notify the department in
13	writing.
14	(d) The local law enforcement agreement required in s.
15	39.306 shall describe the specific local protocols for
16	implementing this section.
17	(8) The person responsible for the investigation shall
18	make a preliminary determination as to whether the report is
19	complete, consulting with the attorney for the department when
20	necessary. In any case in which the person responsible for
21	the investigation finds that the report is incomplete, he or
22	she shall return it without delay to the person or agency
23	originating the report or having knowledge of the facts, or to
24	the appropriate law enforcement agency having investigative
25	jurisdiction, and request additional information in order to
26	complete the report; however, the confidentiality of any
27	report filed in accordance with this chapter shall not be
28	violated.
29	(b) If it is determined that the child is in need of
30	the protection and supervision of the court, the department
31	shall file a petition for dependency. A petition for
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dependency shall be filed in all cases classified by the department as high-risk. Factors that the department may consider in determining whether a case is high-risk include, but are not limited to, the young age of the cases, including, but not limited to, cases involving parents or legal custodians of a young age, the use of illegal drugs, or domestic violence.

(12)

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9 (c) The department, in consultation with the judiciary, shall adopt by rule criteria that are factors 10 requiring that the department take the child into custody, 11 12 petition the court as provided in this chapter, or, if the child is not taken into custody or a petition is not filed 13 14 with the court, conduct an administrative review. If after an administrative review the department determines not to take 15 the child into custody or petition the court, the department 16 shall document the reason for its decision in writing and 17 include it in the investigative file. For all cases that were 18 19 accepted by the local law enforcement agency for criminal 20 investigation pursuant to subsection (2), the department must 21 include in the file written documentation that the administrative review included input from law enforcement. In 22 addition, for all cases that must be referred to child 23 protection teams pursuant to s. 39.303(2) and (3), the file 24 25 must include written documentation that the administrative review included the results of the team's evaluation medical 26 evaluation. Factors that must be included in the development 27 of the rule include noncompliance with the case plan developed 28 29 by the department, or its agent, and the family under this 30 chapter and prior abuse reports with findings that involve the child or caregiver. 31

(14) No later than 60 $\frac{30}{30}$ days after receiving the 1 2 initial report, the local office of the department shall 3 complete its investigation. (17) When a law enforcement agency conducts a criminal 4 5 investigation into allegations of child abuse, neglect, or 6 abandonment, photographs documenting the abuse or neglect will 7 be taken when appropriate is participating in an 8 investigation, the agency shall take photographs of the 9 child's living environment. Such photographs shall become part of the investigative file. 10 (18) Within 15 days after the case is completion of 11 12 the investigation of cases reported to him or her pursuant to this chapter, the state attorney shall report his or her 13 14 findings to the department and shall include in such report a determination of whether or not prosecution is justified and 15 appropriate in view of the circumstances of the specific case. 16 17 Section 5. Section 39.303, Florida Statutes, is 18 amended to read: 19 39.303 Child protection teams; services; eligible 20 cases.--The Department of Health shall develop, maintain, and 21 coordinate the services of one or more multidisciplinary child protection teams in each of the service districts of the 22 Department of Children and Family Services. Such teams may be 23 composed of appropriate representatives of school districts 24 and appropriate health, mental health, social service, legal 25 26 service, and law enforcement agencies. The Legislature finds that optimal coordination of child protection teams and sexual 27 abuse treatment programs requires collaboration between the 28 29 Department of Health and the Department of Children and Family Services. The two departments shall maintain an interagency 30 agreement that establishes protocols for oversight and 31

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operations of child protection teams and sexual abuse 1 2 treatment programs. The Secretary of Health and the Deputy 3 Secretary for director of Children's Medical Services, in 4 consultation with the Secretary of Children and Family 5 Services, shall maintain the responsibility for the screening, 6 employment, and, if necessary, the termination of child 7 protection team medical directors, at headquarters and in the 8 15 districts. Child protection team medical directors shall be 9 responsible for oversight of the teams in the districts.

(1) The Department of Health shall utilize and convene 10 the teams to supplement the assessment and protective 11 12 supervision activities of the family safety and preservation program of the Department of Children and Family Services. 13 14 Nothing in this section shall be construed to remove or reduce 15 the duty and responsibility of any person to report pursuant to this chapter all suspected or actual cases of child abuse, 16 17 abandonment, or neglect or sexual abuse of a child. The role of the teams shall be to support activities of the program and 18 19 to provide services deemed by the teams to be necessary and appropriate to abused, abandoned, and neglected children upon 20 referral. The specialized diagnostic assessment, evaluation, 21 coordination, consultation, and other supportive services that 22 23 a child protection team shall be capable of providing include, but are not limited to, the following: 24

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

(b) Telephone consultation services in emergencies andin other situations.

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

4 (d) Such psychological and psychiatric diagnosis and
5 evaluation services for the child or the child's parent or
6 parents, legal custodian or custodians, or other caregivers,
7 or any other individual involved in a child abuse,
8 abandonment, or neglect case, as the team may determine to be
9 needed.

10 (e) Expert medical, psychological, and related 11 professional testimony in court cases.

12 (f) Case staffings to develop treatment plans for children whose cases have been referred to the team. A child 13 14 protection team may provide consultation with respect to a 15 child who is alleged or is shown to be abused, abandoned, or neglected, which consultation shall be provided at the request 16 17 of a representative of the family safety and preservation 18 program or at the request of any other professional involved 19 with a child or the child's parent or parents, legal custodian or custodians, or other caregivers. In every such child 20 protection team case staffing, consultation, or staff activity 21 involving a child, a family safety and preservation program 22 23 representative shall attend and participate.

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

(h) Such training services for program and other employees of the Department of Children and Family Services, employees of the Department of Health, and other medical professionals as is deemed appropriate to enable them to

develop and maintain their professional skills and abilities 1 in handling child abuse, abandonment, and neglect cases. 2 3 (i) Educational and community awareness campaigns on 4 child abuse, abandonment, and neglect in an effort to enable 5 citizens more successfully to prevent, identify, and treat 6 child abuse, abandonment, and neglect in the community. 7 (j) Child protection team assessments that include, as 8 appropriate, medical evaluations, medical consultations, 9 family psychosocial interviews, specialized clinical interviews, or forensic interviews. 10 11 12 All medical personnel participating on a child protection team must successfully complete the required child protection team 13 14 training curriculum as set forth in protocols determined by the Deputy Secretary for Children's Medical Services and the 15 Statewide Medical Director for Child Protection. 16 17 (2) The child abuse, abandonment, and neglect reports that must be referred by the Department of Children and Family 18 19 Services to child protection teams of the Department of Health 20 for an assessment medical evaluation and other appropriate available support services as set forth in subsection (1) must 21 include cases involving: 22 (a) Injuries to the head, bruises to the neck or head, 23 burns, or fractures in a child of any age. 24 Bruises anywhere on a child 5 years of age or 25 (b) 26 under. (c)(b) Sexual abuse of a child in which vaginal or 27 anal penetration is alleged or in which other unlawful sexual 28 29 conduct has been determined to have occurred. (d)(c) Venereal disease, or Any other sexually 30 transmitted disease, in a prepubescent child. 31 12 CODING: Words stricken are deletions; words underlined are additions.

(e) (d) Reported malnutrition of a child and failure of 1 2 a child to thrive. 3 (f)(e) Reported medical, physical, or emotional 4 neglect of a child. 5 (g)(f) Any family in which one or more children have 6 been pronounced dead on arrival at a hospital or other health 7 care facility, or have been injured and later died, as a result of suspected abuse, abandonment, or neglect, when any 8 9 sibling or other child remains in the home. (h)(g) Symptoms of serious emotional problems in a 10 child when emotional or other abuse, abandonment, or neglect 11 12 is suspected. (h) Injuries to a child's head. 13 14 (3) All abuse and neglect cases transmitted for investigation to a district by the hotline must be 15 16 simultaneously transmitted to the Department of Health child 17 protection team for review. For the purpose of determining whether face-to-face medical evaluation by a child protection 18 19 team is necessary, all cases transmitted to the child protection team which meet the criteria in subsection (2) must 20 be timely reviewed by: a board-certified pediatrician or 21 22 registered nurse practitioner under the supervision of such 23 pediatrician for the purpose of determining whether a 24 face-to-face medical evaluation by a child protection team is 25 necessary. 26 (a) A physician licensed under chapter 458 or chapter 27 459 who holds board certification in pediatrics and is a 28 member of a child protection team; 29 (b) A physician licensed under chapter 458 or chapter 30 459 who holds board certification in a specialty other than pediatrics, who may complete the review only when working 31 13

under the direction of a physician licensed under chapter 458 1 2 or chapter 459 who holds board certification in pediatrics and 3 is a member of a child protection team; 4 (c) An advanced registered nurse practitioner licensed 5 under chapter 464 who has a speciality in pediatrics or family 6 medicine and is a member of a child protection team; 7 (d) A physician assistant licensed under chapter 458 8 or chapter 459, who may complete the review only when working 9 under the supervision of a physician licensed under chapter 458 or chapter 459 who holds board certification in pediatrics 10 and is a member of a child protection team; or 11 12 (e) A registered nurse licensed under chapter 464, who may complete the review only when working under the direct 13 14 supervision of a physician licensed under chapter 458 or 15 chapter 459 who holds certification in pediatrics and is a member of a child protection team. 16 17 (4) A Such face-to-face medical evaluation by a child 18 protection team is not necessary when: only if it is 19 determined that 20 (a) The child was examined by a physician for the 21 alleged abuse or neglect by a physician who is not a member of 22 the child protection team, and a consultation between the 23 child protection team board-certified pediatrician, advanced registered or nurse practitioner, physician assistant working 24 under the supervision of a child protection team 25 26 board-certified pediatrician, or registered nurse working under the direct supervision of a child protection team 27 28 board-certified pediatrician, and the examining physician 29 concludes that a further medical evaluation is unnecessary; (b) The child protective investigator, with 30 supervisory approval, has determined, after conducting a child 31 14

safety assessment, that there are no indications of injuries 1 2 as described in paragraphs (2)(a)-(h) as reported; or 3 (c) The child protection team board-certified 4 pediatrician, as authorized in subsection (3), determines that 5 a medical evaluation is not required. 6 7 Notwithstanding paragraphs (a), (b), and (c), a child protection team pediatrician, as authorized in subsection (3), 8 9 may determine that a face-to-face medical evaluation is 10 necessary. (5) (4) In all instances in which a child protection 11 12 team is providing certain services to abused, abandoned, or neglected children, other offices and units of the Department 13 14 of Health, and offices and units of the Department of Children and Family Services, shall avoid duplicating the provision of 15 16 those services. 17 (6) The Department of Health child protection team quality assurance program and the Department of Children and 18 19 Family Services' Family Safety Program Office quality 20 assurance program shall collaborate to ensure referrals and responses to child abuse, abandonment, and neglect reports are 21 appropriate. Each quality assurance program shall include a 22 23 review of records in which there are no findings of abuse, abandonment, or neglect and the findings of these reviews 24 25 shall be included in each department's quality assurance 26 reports. Section 6. Subsection (1) of section 39.304, Florida 27 Statutes, is amended to read: 28 29 39.304 Photographs, medical examinations, X rays, and 30 medical treatment of abused, abandoned, or neglected child .--31 15 CODING: Words stricken are deletions; words underlined are additions.

(1)(a) Any person required to investigate cases of 1 2 suspected child abuse, abandonment, or neglect may take or 3 cause to be taken photographs of the areas of trauma visible 4 on a child who is the subject of a report. Any child 5 protection team that examines a child who is the subject of a 6 report must take, or cause to be taken, photographs of any 7 areas of trauma visible on the child. Such Photographs of 8 physical abuse injuries, or duplicates thereof, shall be 9 provided to the department for inclusion in the investigative 10 file and shall become part of that file. Photographs of sexual abuse trauma shall be made part of the child protection team 11 12 medical record. If the areas of trauma visible on a child indicate 13 (b) 14 a need for a medical examination, or if the child verbally 15 complains or otherwise exhibits distress as a result of injury through suspected child abuse, abandonment, or neglect, or is 16 17 alleged to have been sexually abused, the person required to 18 investigate may cause the child to be referred for diagnosis 19 to a licensed physician or an emergency department in a hospital without the consent of the child's parents or legal 20 21 custodian. Such examination may be performed by any licensed physician or an advanced registered nurse practitioner 22 23 licensed pursuant to chapter 464. Any licensed physician, or advanced registered nurse practitioner licensed pursuant to 24 chapter 464, who has reasonable cause to suspect that an 25 26 injury was the result of child abuse, abandonment, or neglect may authorize a radiological examination to be performed on 27 the child without the consent of the child's parent or legal 28 29 custodian. Section 7. Paragraph (f) of subsection (8) of section 30 31 39.402, Florida Statutes, is amended to read: 16

1 39.402 Placement in a shelter.--2 (8) 3 (f) At the shelter hearing, the department shall 4 inform the court of: 5 Any identified current or previous case plans 1. 6 negotiated in any district with the parents or caregivers 7 under this chapter and problems associated with compliance; 8 2. Any adjudication of the parents or caregivers of 9 delinquency; 10 3. Any past or current injunction for protection from 11 domestic violence; and 12 4. All of the child's places of residence during the 13 prior 12 months. 14 Section 8. Paragraph (i) of subsection (3), subsection 15 (7), and paragraph (g) of subsection (18) of section 383.402, 16 Florida Statutes, are amended to read: 383.402 Child abuse death review; State Child Abuse 17 Death Review Committee; local child abuse death review 18 19 committees.--20 (3) The State Child Abuse Death Review Committee 21 shall: 22 (i) Educate the public regarding the provisions of 23 chapter 99-168, Laws of Florida Kayla McKean Child Protection Act, the incidence and causes of child abuse death, and ways 24 by which such deaths may be prevented. 25 26 (7) Each local child abuse death review committee 27 shall: 28 (a) Review all deaths resulting from child abuse which 29 are reported to the Office of Vital Statistics. 30 31 17 CODING: Words stricken are deletions; words underlined are additions.

1 (a) (b) Assist the state committee in collecting data 2 on deaths that are the result of child abuse, in accordance 3 with the protocol established by the state committee. 4 (b) (c) Submit written reports at the direction of the 5 state committee. The reports must include nonidentifying 6 information on individual cases and the steps taken by the 7 local committee and private and public agencies to implement 8 necessary changes and improve the coordination of services and 9 reviews. 10 (c)(d) Submit all records requested by the state committee at the conclusion of its review of a death resulting 11 12 from child abuse. 13 (d)(e) Abide by the standards and protocols developed 14 by the state committee. (e)(f) On a case-by-case basis, request that the state 15 16 committee review the data of a particular case. 17 (18) Each district administrator of the Department of 18 Children and Family Services must appoint a child abuse death 19 review coordinator for the district. The coordinator must have 20 knowledge and expertise in the area of child abuse and neglect. The coordinator's general responsibilities include: 21 (g) Notifying the district administrator, the 22 23 Secretary of Children and Family Services, and the Deputy Secretary for of Children's Medical Services, and the 24 25 Department of Health Child Abuse Death Review Coordinator 26 Assistant Health Officer of all child abuse deaths meeting criteria for review as specified in this section within 1 27 working day after verifying the child's death was due to 28 29 abuse, neglect, or abandonment learning of the child's death. Section 9. Paragraph (b) of subsection (3) of section 30 409.145, Florida Statutes, is amended to read: 31 18

1 409.145 Care of children.--2 (3) (b) The services of the foster care program shall 3 4 continue for those individuals 18 to 21 years of age only for 5 the period of time the individual is continuously enrolled in 6 high school, in a program leading to a high school equivalency 7 diploma as defined in s. 229.814, or in a full-time career 8 education program. Services shall be terminated upon 9 completion of or withdrawal or permanent expulsion from high school, the program leading to a high school equivalency 10 diploma, or the full-time career education program. In 11 12 addition, the department may, based upon the availability of funds, provide assistance to those individuals who leave 13 14 foster care when they attain 18 years of age and subsequently 15 request assistance prior to their 21st birthday. The following 16 are examples of assistance that may be provided: referrals for 17 employment, services for educational or vocational 18 development, and housing assistance. 19 Section 10. Subsection (3) of section 409.1671, 20 Florida Statutes, is amended to read: 21 409.1671 Foster care and related services; 22 privatization.--23 (3)(a) In order to help ensure a seamless child protection system, the department shall ensure that contracts 24 25 entered into with community-based agencies pursuant to this 26 section include provisions for a case-transfer process to 27 determine the date that the community-based agency will initiate the appropriate services for a child and family. This 28 29 case-transfer process must clearly identify the closure of the protective investigation and the initiation of service 30 provision. At the point of case transfer, and at the 31 19

conclusion of an investigation, the department must provide a 1 2 complete summary of the findings of the investigation to the 3 community-based agency. (b) The contracts must also ensure that each 4 5 community-based agency shall furnish regular status reports of 6 its cases to the department as specified in the contract. A 7 provider may not discontinue services without prior written 8 notification to the department. After discontinuing services 9 to a child or a child and family, the community-based agency must provide a written case summary, including its assessment 10 of the child and family, to the department. 11 12 (c) The annual contract between the department and 13 community-based agencies must include provisions that specify 14 the procedures to be used by the parties to resolve 15 differences in interpreting the contract or to resolve 16 disputes as to the adequacy of the parties' compliance with 17 their respective obligations under the contract. Section 11. Present paragraph (c) of subsection (13) 18 19 of section 409.175, Florida Statutes, is redesignated as 20 paragraph (d) and a new paragraph (c) is added to that section 21 to read: 22 409.175 Licensure of family foster homes, residential 23 child-caring agencies, and child-placing agencies.--24 (13)25 (c) In consultation with foster parents, each district 26 or lead agency shall develop a plan for making the completion 27 of the required training as convenient as possible for potential foster parents and emergency-shelter parents. The 28 29 plan should include, without limitation, such strategies as providing training in nontraditional locations and at 30 nontraditional times. The plan must be revised at least 31 20 CODING: Words stricken are deletions; words underlined are additions.

annually and must be included in the information provided to each person applying to become a foster parent or emergency-shelter parent. Section 12. Section 409.1753, Florida Statutes, is created to read: 409.1753 Foster care; duties.--The department shall ensure that, within each district, each foster home is given a telephone number for the foster parent to call during normal working hours whenever immediate assistance is needed and the child's caseworker is unavailable. This number must be staffed and answered by individuals possessing the knowledge and authority necessary to assist foster parents. Section 13. Section 1 of chapter 99-168, Laws of Florida, is repealed. Section 14. This act shall take effect upon becoming a law. CODING: Words stricken are deletions; words underlined are additions.