

By the Committee on Child & Family Security and Representatives Murman, Rich, Lynn, Flanagan, Hogan, Jordan, Bean, Benson, Negron, Russell, Hart, Green, Ross, Brown, Paul, Simmons, Kravitz, Garcia, Detert, Mahon, Berfield, Baxley, Kallinger, Meador and Attkisson

1 A bill to be entitled
2 An act relating to foster care; amending s.
3 20.19, F.S.; modifying the authority for lead
4 agencies to provide services; amending s.
5 39.521, F.S., relating to disposition hearings;
6 providing that certain children must be placed
7 in licensed residential care and must remain
8 there unless a court determines that it is not
9 in the child's best interest; requiring that
10 the Department of Children and Family Services
11 report to the Legislature each year on the
12 number of children placed in residential group
13 care and the number of children for whom
14 placement was unavailable; amending s.
15 409.1671, F.S.; redefining the term "related
16 services"; providing an additional requirement
17 for eligible lead community-based providers;
18 providing for a plan to be used as an
19 alternative to procuring foster care services
20 through an eligible lead community-based
21 provider; creating s. 409.1676, F.S.; providing
22 for comprehensive residential services to
23 children who have extraordinary needs; defining
24 terms; providing for the Department of Children
25 and Family Services to contract with specified
26 entities for such services; specifying duties
27 of the contracting entity; providing legal
28 authority of the contracting entity to
29 authorize specified activities for children
30 served; prescribing departmental duties;
31 creating s. 409.1677, F.S.; providing for model

1 comprehensive residential services programs in
2 specified counties; defining terms; providing
3 for the programs to be established through
4 contracts between the department and specified
5 entities; prescribing the content of each model
6 program; establishing responsibilities of the
7 contracting private entity; providing legal
8 authority of the contracting private entity to
9 authorize certain activities for children
10 served; prescribing departmental duties;
11 creating s. 409.1679, F.S.; prescribing
12 additional requirements for the programs
13 established under ss. 409.1676 and 409.1677,
14 F.S., including requirements relating to
15 reimbursement methodology and program
16 evaluation; requiring the department to provide
17 progress reports to the Legislature; amending
18 s. 409.175, F.S.; allowing a family foster home
19 license to be valid for an extended period in
20 specified circumstances; amending s. 784.081,
21 F.S., relating to upgrading the seriousness of
22 the offense if a person commits an assault or a
23 battery against specified officials or
24 employees; including on the list of such
25 officials and employees an employee of a lead
26 community-based provider or its direct service
27 contract providers; requiring the Department of
28 Children and Family Services to provide the
29 Legislature with a report on the status of the
30 child protection program; providing an
31 effective date.

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

2

3 Section 1. Paragraph (c) of subsection (7) of section
4 20.19, Florida Statutes, is amended to read:

5 20.19 Department of Children and Family
6 Services.--There is created a Department of Children and
7 Family Services.

8 (7) PROTOTYPE REGION.--

9 (c) The department is authorized to contract for
10 children's services with a lead agency in each county of the
11 prototype area, except that the lead agency contract may cover
12 more than one county when it is determined that such coverage
13 will provide more effective or efficient services. The duties
14 of the lead agency shall include, but not necessarily be
15 limited to:

16 1. Directing and coordinating the program and
17 children's services within the scope of its contract.

18 2. Providing or contracting for the provision of core
19 services, including intake and eligibility, assessment,
20 service planning, and case management. ~~However, a lead agency
21 may obtain approval from the department to provide core
22 services, including intake and eligibility, assessment,
23 service planning, and case management, upon a finding by the
24 department that such lead agency is the only appropriate
25 organization within the service district capable of providing
26 such service or services within the department's quality
27 assurance and performance standards.~~

28 3. Creating a service provider network capable of
29 delivering the services contained in client service plans,
30 which shall include identifying the necessary services, the
31 necessary volume of services, and possible utilization

1 patterns and negotiating rates and expectations with
2 providers.

3 4. Managing and monitoring of provider contracts and
4 subcontracts.

5 5. Developing and implementing an effective bill
6 payment mechanism to ensure all providers are paid in a timely
7 fashion.

8 6. Providing or arranging for administrative services
9 necessary to support service delivery.

10 7. Utilizing departmentally approved training and
11 meeting departmentally defined credentials and standards.

12 8. Providing for performance measurement in accordance
13 with the department's quality assurance program and providing
14 for quality improvement and performance measurement.

15 9. Developing and maintaining effective interagency
16 collaboration to optimize service delivery.

17 10. Ensuring that all federal and state reporting
18 requirements are met.

19 11. Operating a consumer complaint and grievance
20 process.

21 12. Ensuring that services are coordinated and not
22 duplicated with other major payors, such as the local schools
23 and Medicaid.

24 13. Any other duties or responsibilities defined in s.
25 409.1671 related to community-based care.

26 Section 2. Subsections (5), (6), and (7) of section
27 39.521, Florida Statutes, are renumbered as subsections (6),
28 (7), and (8), respectively, and a new subsection (5) is added
29 to said section to read:

30 39.521 Disposition hearings; powers of disposition.--
31

1 (5)(a) Except as provided in s. 39.407, any child 12
2 years of age or older who has been in licensed family foster
3 care for 6 months or longer and who is then moved more than
4 once must be assessed for placement in licensed residential
5 group care. This assessment procedure shall be led by the
6 child's assigned caseworker and shall incorporate current and
7 historical information from any psychological testing or
8 evaluation that has occurred; from the guardian ad litem, if
9 one has been assigned; and from any current therapist,
10 teacher, or other professional who has knowledge of the child
11 and has worked with the child, and shall include information
12 concerning the impact of the child's placement in residential
13 group care on the child's siblings and the availability of
14 suitable residential group care.

15 1. If such placement is determined to be appropriate
16 as a result of this procedure, the department shall place the
17 child in residential group care and inform the court within 48
18 hours after the placement. The child must remain in
19 residential group care unless the court determines that
20 continued placement is not in the child's best interest.

21 2. If the child is placed in residential group care
22 and the department determines that continued placement is
23 inappropriate, the assigned caseworker must submit specific
24 justification to remove the child from residential group care,
25 in writing, to the court for review at the next scheduled
26 hearing.

27 (b) By December 1 of each year, the department shall
28 report to the Legislature on the placement of children in
29 licensed residential group care during the preceding fiscal
30 year, including the criteria used to determine the placement
31 of children, the number of children who were assessed for

1 placement, the number of children who were placed based upon
2 the assessment, and the number of children who were not
3 placed. The department shall maintain data specifying the
4 number of children who were referred to licensed residential
5 child care for whom placement was unavailable and the counties
6 in which such placement was unavailable. The department shall
7 include this data in its report to the Legislature due on
8 December 1 so that the Legislature may consider this
9 information in developing the General Appropriations Act.

10 Section 3. Subsection (1) of section 409.1671, Florida
11 Statutes, is amended to read:

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

14 (1)(a) It is the intent of the Legislature that the
15 Department of Children and Family Services shall privatize the
16 provision of foster care and related services statewide. It is
17 further the Legislature's intent to encourage communities and
18 other stakeholders in the well-being of children to
19 participate in assuring that children are safe and
20 well-nurtured. However, while recognizing that some local
21 governments are presently funding portions of certain foster
22 care and related services programs and may choose to expand
23 such funding in the future, the Legislature does not intend by
24 its privatization of foster care and related services that any
25 county, municipality, or special district be required to
26 assist in funding programs that previously have been funded by
27 the state. Nothing in this paragraph prohibits any county,
28 municipality, or special district from future voluntary
29 funding participation in foster care and related services. As
30 used in this section, the term "privatize" means to contract
31 with competent, community-based agencies. The department shall

1 submit a plan to accomplish privatization statewide, through a
2 competitive process, phased in over a 3-year period beginning
3 January 1, 2000. This plan must be developed with local
4 community participation, including, but not limited to, input
5 from community-based providers that are currently under
6 contract with the department to furnish community-based foster
7 care and related services, and must include a methodology for
8 determining and transferring all available funds, including
9 federal funds that the provider is eligible for and agrees to
10 earn and that portion of general revenue funds which is
11 currently associated with the services that are being
12 furnished under contract. The methodology must provide for the
13 transfer of funds appropriated and budgeted for all services
14 and programs that have been incorporated into the project,
15 including all management, capital (including current furniture
16 and equipment), and administrative funds to accomplish the
17 transfer of these programs. This methodology must address
18 expected workload and at least the 3 previous years'
19 experience in expenses and workload. With respect to any
20 district or portion of a district in which privatization
21 cannot be accomplished within the 3-year timeframe, the
22 department must clearly state in its plan the reasons the
23 timeframe cannot be met and the efforts that should be made to
24 remediate the obstacles, which may include alternatives to
25 total privatization, such as public-private partnerships. As
26 used in this section, the term "related services" includes, at
27 a minimum,~~means~~ family preservation, independent living,
28 emergency shelter, residential group care, foster care,
29 therapeutic foster care, intensive residential treatment,
30 foster care supervision, case management, postplacement
31 supervision, permanent foster care, and family reunification.

1 Unless otherwise provided for, beginning in fiscal year
2 1999-2000, either the state attorney or the Office of the
3 Attorney General shall provide child welfare legal services,
4 pursuant to chapter 39 and other relevant provisions, in
5 Sarasota, Pinellas, Pasco, Broward, and Manatee Counties.
6 Such legal services shall commence and be effective, as soon
7 as determined reasonably feasible by the respective state
8 attorney or the Office of the Attorney General, after the
9 privatization of associated programs and child protective
10 investigations has occurred. When a private nonprofit agency
11 has received case management responsibilities, transferred
12 from the state under this section, for a child who is
13 sheltered or found to be dependent and who is assigned to the
14 care of the privatization project, the agency may act as the
15 child's guardian for the purpose of registering the child in
16 school if a parent or guardian of the child is unavailable and
17 his or her whereabouts cannot reasonably be ascertained. The
18 private nonprofit agency may also seek emergency medical
19 attention for such a child, but only if a parent or guardian
20 of the child is unavailable, his or her whereabouts cannot
21 reasonably be ascertained, and a court order for such
22 emergency medical services cannot be obtained because of the
23 severity of the emergency or because it is after normal
24 working hours. However, the provider may not consent to
25 sterilization, abortion, or termination of life support. If a
26 child's parents' rights have been terminated, the nonprofit
27 agency shall act as guardian of the child in all
28 circumstances.

29 (b) As used in this section, the term "eligible lead
30 community-based provider" means a single agency with which the
31 department shall contract for the provision of child

1 protective services in a community that is no smaller than a
2 county. The secretary of the department may authorize more
3 than one eligible lead community-based provider within a
4 single county when to do so will result in more effective
5 delivery of foster care and related services. To compete for a
6 privatization project, such agency must have:

7 1. The ability to coordinate, integrate, and manage
8 all child protective services in the designated community in
9 cooperation with child protective investigations.

10 2. The ability to ensure continuity of care from entry
11 to exit for all children referred from the protective
12 investigation and court systems.

13 3. The ability to provide directly, or contract for
14 through a local network of providers, all necessary child
15 protective services.

16 4. The willingness to accept accountability for
17 meeting the outcomes and performance standards related to
18 child protective services established by the Legislature and
19 the Federal Government.

20 5. The capability and the willingness to serve all
21 children referred to it from the protective investigation and
22 court systems, regardless of the level of funding allocated to
23 the community by the state, provided all related funding is
24 transferred.

25 6. The willingness to ensure that each individual who
26 provides child protective services completes the training
27 required of child protective service workers by the Department
28 of Children and Family Services.

29 7. The ability to maintain eligibility to receive all
30 federal child welfare funds, including Title IV-E and IV-A
31

1 funds, currently being used by the Department of Children and
2 Family Services.

3 (c) If attempts to competitively procure services
4 through an eligible lead community-based provider as defined
5 in paragraph (b) do not produce a capable and willing agency,
6 the department shall develop a plan in collaboration with the
7 local community alliance. The plan must detail how the
8 community will continue to implement privatization through
9 competitively procuring either the specific components of
10 foster care and related services or comprehensive services for
11 defined eligible populations of children and families from
12 qualified licensed agencies as part of its efforts to develop
13 the local capacity for a community-based system of coordinated
14 care. The plan must ensure local control over the management
15 and administration of the service provision in accordance with
16 the intent of this section and may include recognized best
17 business practices, including some form of public or private
18 partnerships. In the absence of a community alliance, the plan
19 must be submitted to the Governor, the President of the
20 Senate, and the Speaker of the House of Representatives for
21 their comments.

22 (d)(c)1. The Legislature finds that the state has
23 traditionally provided foster care services to children who
24 have been the responsibility of the state. As such, foster
25 children have not had the right to recover for injuries beyond
26 the limitations specified in s. 768.28. The Legislature has
27 determined that foster care and related services need to be
28 privatized pursuant to this section and that the provision of
29 such services is of paramount importance to the state. The
30 purpose for such privatization is to increase the level of
31 safety, security, and stability of children who are or become

1 the responsibility of the state. One of the components
2 necessary to secure a safe and stable environment for such
3 children is that private providers maintain liability
4 insurance. As such, insurance needs to be available and remain
5 available to nongovernmental foster care and related services
6 providers without the resources of such providers being
7 significantly reduced by the cost of maintaining such
8 insurance.

9 2. The Legislature further finds that, by requiring
10 the following minimum levels of insurance, children in
11 privatized foster care and related services will gain
12 increased protection and rights of recovery in the event of
13 injury than provided for in s. 768.28.

14 ~~(e)(d)~~ Other than an entity to which s. 768.28
15 applies, any eligible lead community-based provider, as
16 defined in paragraph (b), or its employees or officers, except
17 as otherwise provided in paragraph ~~(f)~~~~(e)~~, must, as a part of
18 its contract, obtain a minimum of \$1 million per claim/\$3
19 million per incident in general liability insurance coverage.
20 In any tort action brought against such an eligible lead
21 community-based provider, net economic damages shall be
22 limited to \$1 million per claim, including, but not limited
23 to, past and future medical expenses, wage loss, and loss of
24 earning capacity, offset by any collateral source payment paid
25 or payable. In any tort action brought against such an
26 eligible lead community-based provider, noneconomic damages
27 shall be limited to \$200,000 per claim. A claims bill may be
28 brought on behalf of a claimant pursuant to s. 768.28 for any
29 amount exceeding the limits specified in this paragraph. Any
30 offset of collateral source payments made as of the date of
31 the settlement or judgment shall be in accordance with s.

1 768.76. The lead community-based provider shall not be liable
2 in tort for the acts or omissions of its subcontractors or the
3 officers, agents, or employees of its subcontractors.

4 (f)~~(e)~~ The liability of an eligible lead
5 community-based provider described in this section shall be
6 exclusive and in place of all other liability of such
7 provider. The same immunities from liability enjoyed by such
8 providers shall extend as well to each employee of the
9 provider when such employee is acting in furtherance of the
10 provider's business. Such immunities shall not be applicable
11 to a provider or an employee who acts in a culpably negligent
12 manner or with willful and wanton disregard or unprovoked
13 physical aggression when such acts result in injury or death
14 or such acts proximately cause such injury or death; nor shall
15 such immunities be applicable to employees of the same
16 provider when each is operating in the furtherance of the
17 provider's business, but they are assigned primarily to
18 unrelated works within private or public employment. The same
19 immunity provisions enjoyed by a provider shall also apply to
20 any sole proprietor, partner, corporate officer or director,
21 supervisor, or other person who in the course and scope of his
22 or her duties acts in a managerial or policymaking capacity
23 and the conduct that caused the alleged injury arose within
24 the course and scope of those managerial or policymaking
25 duties. Culpable negligence is defined as reckless
26 indifference or grossly careless disregard of human life.

27 (g)~~(f)~~ Any subcontractor of an eligible lead
28 community-based provider, as defined in paragraph (b), which
29 is a direct provider of foster care and related services to
30 children and families, and its employees or officers, except
31 as otherwise provided in paragraph (f)~~(e)~~, must, as a part of

1 its contract, obtain a minimum of \$1 million per claim \$3
2 million per incident in general liability insurance coverage.
3 In any tort action brought against such subcontractor, net
4 economic damages shall be limited to \$1 million per claim,
5 including, but not limited to, past and future medical
6 expenses, wage loss, and loss of earning capacity, offset by
7 any collateral source payment paid or payable. In any tort
8 action brought against such subcontractor, noneconomic damages
9 shall be limited to \$200,000 per claim. A claims bill may be
10 brought on behalf of a claimant pursuant to s. 768.28 for any
11 amount exceeding the limits specified in this paragraph. Any
12 offset of collateral source payments made as of the date of
13 the settlement or judgment shall be in accordance with s.
14 768.76.

15 (h)~~(g)~~ The liability of a subcontractor of an eligible
16 lead community-based provider that is a direct provider of
17 foster care and related services as described in this section
18 shall be exclusive and in place of all other liability of such
19 provider. The same immunities from liability enjoyed by such
20 subcontractor provider shall extend as well to each employee
21 of the subcontractor when such employee is acting in
22 furtherance of the subcontractor's business. Such immunities
23 shall not be applicable to a subcontractor or an employee who
24 acts in a culpably negligent manner or with willful and wanton
25 disregard or unprovoked physical aggression when such acts
26 result in injury or death or such acts proximately cause such
27 injury or death; nor shall such immunities be applicable to
28 employees of the same subcontractor when each is operating in
29 the furtherance of the subcontractor's business, but they are
30 assigned primarily to unrelated works within private or public
31 employment. The same immunity provisions enjoyed by a

1 subcontractor shall also apply to any sole proprietor,
2 partner, corporate officer or director, supervisor, or other
3 person who in the course and scope of his or her duties acts
4 in a managerial or policymaking capacity and the conduct that
5 caused the alleged injury arose within the course and scope of
6 those managerial or policymaking duties. Culpable negligence
7 is defined as reckless indifference or grossly careless
8 disregard of human life.

9 (i)~~(h)~~ The Legislature is cognizant of the increasing
10 costs of goods and services each year and recognizes that
11 fixing a set amount of compensation actually has the effect of
12 a reduction in compensation each year. Accordingly, the
13 conditional limitations on damages in this section shall be
14 increased at the rate of 5 percent each year, prorated from
15 the effective date of this paragraph to the date at which
16 damages subject to such limitations are awarded by final
17 judgment or settlement.

18 Section 4. Section 409.1676, Florida Statutes, is
19 created to read:

20 409.1676 Comprehensive residential services to
21 children who have extraordinary needs.--

22 (1) It is the intent of the Legislature to provide
23 comprehensive residential services, including residential
24 care, case management, and other services, to children in the
25 child protection system who have extraordinary needs, such as
26 children who have serious behavioral problems or have been
27 determined to be without the option of reunification with the
28 family. These services are to be provided in a residential
29 group care setting by a not-for-profit corporation or a local
30 government entity, under a contract with the Department of
31 Children and Family Services, or by a lead agency as described

1 in s. 409.1671. These contracts shall be designed to provide
2 an identified number of children with access to a full array
3 of services for a fixed price.

4 (2) As used in this section, the term:

5 (a) "Residential group care" means a living
6 environment for children 12 years of age and older who have
7 been adjudicated dependent and are expected to be in foster
8 care for at least 6 months with 24-hour awake staff or live-in
9 group home parents or staff. All facilities must be
10 appropriately licensed in this state.

11 (b) "Serious behavioral problems" means behaviors of
12 children who have been assessed by a licensed master's-level
13 human services professional to need, at a minimum, intensive
14 services but who do not meet the criteria of s. 394.492(6) or
15 s. 394.492(7). A child with an emotional disturbance as
16 defined in s. 394.492(5) may be served in residential group
17 care unless a determination is made by a mental health
18 professional that such a setting is inappropriate.

19 (3) The department, in accordance with a specific
20 appropriation for this program, shall contract with a
21 not-for-profit corporation, a local government entity, or the
22 lead agency that has been established in accordance with s.
23 409.1671 for the provision of residential group care services
24 described in this section in, at a minimum, districts 4, 11,
25 12, and the prototype region as defined in s. 20.19, of the
26 Department of Children and Family Services and with a
27 not-for-profit entity serving children from multiple
28 districts. A lead agency that is currently providing
29 residential care may provide this service directly with the
30 approval of the local community alliance. The department or a
31 lead agency may contract for more than one site in a county if

1 that is determined to be the most effective way to achieve the
2 goals set forth in this section.

3 (4) The lead agency, the contracted not-for-profit
4 corporation, or the local government entity is responsible for
5 a comprehensive assessment, residential care, transportation,
6 behavioral health services, recreational activities, clothing,
7 supplies, and miscellaneous expenses associated with caring
8 for these children, necessary arrangement for or provision of
9 educational services, and ensuring necessary and appropriate
10 health and dental care.

11 (5) The department may transfer all casework
12 responsibilities for children served under this program to the
13 entity that provides this service, including case management,
14 development and implementation of a case plan in accordance
15 with current standards for child protection services, and,
16 except as provided in s. 409.1671(1)(a), all related court
17 work. When the department establishes this program in a
18 community that has a lead agency as described in s. 409.1671,
19 the casework responsibilities must be transferred to the lead
20 agency.

21 (6) This section does not prohibit any provider of
22 these services from appropriately billing Medicaid for
23 services rendered, from contracting with a local school
24 district for educational services, or from earning federal or
25 local funding for services provided, as long as two or more
26 funding sources do not pay for the same specific service that
27 has been provided to a child.

28 (7) The lead agency, not-for-profit corporation, or
29 local government entity has the legal authority for children
30 served under this program, as provided in chapter 39 or this
31 chapter, as appropriate, to enroll the child in school, sign

1 for a driver's license for the child, cosign loans and
2 insurance for the child, sign for medical treatment, and
3 authorize other such activities.

4 (8) The department shall provide technical assistance,
5 as requested, and contract management services.

6 Section 5. Section 409.1677, Florida Statutes, is
7 created to read:

8 409.1677 Model comprehensive residential services
9 programs.--

10 (1) As used in this section, the term:

11 (a) "Residential group care" means a living
12 environment for children 12 years of age and older who have
13 been adjudicated dependent and are expected to be in foster
14 care for a minimum of 6 months with 24-hour awake staff or
15 live-in group home parents or staff. All facilities must be
16 appropriately licensed in this state.

17 (b) "Serious behavioral problems" means behaviors of
18 children who have been assessed by a licensed master's-level
19 human services professional to need, at a minimum, intensive
20 services but who do not meet the criteria of s. 394.492(6) or
21 s. 394.492(7). A child with an emotional disturbance as
22 defined in s. 394.492(5) may be served in residential group
23 care unless a determination is made by a mental health
24 professional that such a setting is inappropriate.

25 (2) The department shall establish three model
26 comprehensive residential services programs, one each in
27 Miami-Dade, Hillsborough, and Manatee Counties, through
28 contracts with designated lead agencies established in
29 accordance with s. 409.1671 or with private entities capable
30 of providing residential group care and home-based care and
31 experienced in the delivery of a range of services to foster

1 children if no lead agency exists. These model programs are to
2 serve that portion of eligible children within each county
3 which is specified in the contract, based on funds
4 appropriated, and to include a full array of services for a
5 fixed price. The private entity or lead agency is responsible
6 for all programmatic functions necessary to carry out the
7 intent of this section.

8 (3) Each model program must include, at a minimum:
9 (a) A focus on serving the full range of children in
10 foster care, including those who have specialized needs, such
11 as children who are unlikely to be reunited with their
12 families or placed in adoptive homes, sibling groups, children
13 who have serious behavioral problems, and children who are
14 victims of sexual abuse.

15 (b) For each child who is in care, the provision of or
16 arrangements for a comprehensive assessment; residential care;
17 transportation; behavioral health services; recreational
18 activities; clothing, supplies, and miscellaneous expenses
19 associated with caring for these children; educational
20 services; necessary and appropriate health and dental care;
21 legal services; and aftercare services.

22 (c) A commitment and ability to find and use
23 innovative approaches to address the problems in the
24 traditional foster care system, such as high caregiver
25 turnover, disrupted and multiple placements, runaway behavior,
26 and abusive or nontherapeutic care.

27 (d) The provision of a full range of residential
28 services tailored to the individual needs of each child in
29 care, including group homes for initial assessment and for
30 stabilization; professional and traditional foster homes;
31 residential group care provided in a setting that is homelike

1 and provides care in residences housing no more than 12
2 children and staffed with full-time, appropriately trained
3 house parents; and independent living apartments. The programs
4 are designed for children who must enter the foster care
5 system, but the use of placement with relatives as part of a
6 child's care is encouraged.

7 (e) The provision of the full range of administrative
8 services necessary to operate the program.

9 (f) Specific eligibility criteria established in the
10 contract, including a "no-reject-no-eject" commitment with the
11 described eligible children, unless the court determines that
12 the placement is not in a child's best interest.

13 (g) An ability, through its trained, multidisciplinary
14 staff, to facilitate the achievement of the permanency goals
15 of the children who are in care.

16 (h) The design and utilization of a volunteer mentor
17 program that would make use of the skills of retired
18 individuals in helping to meet the needs of both the children
19 in care and their caregivers.

20 (i) The willingness and ability to assume financial
21 risk for the care of children referred to the program under
22 the contract.

23 (j) The willingness and ability to serve as a research
24 and teaching laboratory for departmental and community-based
25 care programs throughout the state in an effort to improve the
26 quality of foster care.

27 (4) This section does not prohibit any provider of
28 these services from appropriately billing Medicaid for
29 services rendered, from contracting with a local school
30 district for educational services, or from earning federal or
31 local funding for services provided, as long as two or more

1 funding sources do not pay for the same specific service that
2 has been provided to a child.

3 (5) The lead agency, not-for-profit corporation, or
4 local government entity has the legal authority for children
5 served under this program, as provided in chapter 39 or this
6 chapter, as appropriate, to enroll the child in school, sign
7 for a driver's license for the child, cosign loans and
8 insurance for the child, sign for medical treatment, and
9 authorize other such activities.

10 (6) The department shall provide technical assistance,
11 as requested, and contract management services.

12 Section 6. Section 409.1679, Florida Statutes, is
13 created to read:

14 409.1679 Additional requirements, effective date,
15 reimbursement methodology, and evaluation.--

16 (1) The programs established under ss. 409.1676 and
17 409.1677 are to be operational within 6 months after those
18 sections take effect, and, beginning 1 month after this
19 section takes effect and continuing until full operation of
20 those programs is realized, the department shall provide to
21 the Legislature monthly written status reports on the progress
22 toward implementing those programs.

23 (2) The programs established under ss. 409.1676 and
24 409.1677 must be included as part of the annual evaluation
25 currently required under s. 409.1671. With respect to these
26 specific programs and models, the annual evaluation must be
27 conducted by an independent third party and must include, by
28 specific site, the level of attainment of the targeted
29 outcomes listed in subsection (3). The evaluation of the model
30 programs must include, at a minimum, an assessment of their
31 cost-effectiveness, their ability to successfully implement

1 the assigned program elements, and their attainment of
2 performance standards that include legislatively established
3 standards for similar programs and other standards determined
4 jointly by the department and the providers and stated in a
5 contract.

6 (3) Each program established under ss. 409.1676 and
7 409.1677 must meet the following expectations, which must be
8 included in its contracts with the department or lead agency:

9 (a) No more than 10 percent of the children served may
10 move from one living environment to another, unless a child is
11 returned to family members or is moved, in accordance with the
12 treatment plan, to a less restrictive setting. Each child must
13 have a comprehensive transitional plan that identifies the
14 child's living arrangement upon leaving the program and
15 specific steps and services that are being provided to prepare
16 for that arrangement. Specific expectations as to the time
17 period necessary for the achievement of these permanency goals
18 must be included in the contract.

19 (b) Each child must receive a full academic year of
20 appropriate educational instruction. No more than 10 percent
21 of the children may be in more than one academic setting in an
22 academic year, unless a child is being moved, in accordance
23 with an educational plan, to a less restrictive setting. Each
24 child must demonstrate academic progress and must be
25 performing at grade level or at a level commensurate with a
26 valid academic assessment.

27 (c) Siblings must be kept together in the same living
28 environment 100 percent of the time, unless that is determined
29 by the provider not to be in the children's best interest.
30 When siblings are separated in placement, the decision must be
31 reviewed and approved by the court within 30 days.

1 (d) The program must experience a caregiver turnover
2 rate and an incidence of child runaway episodes which are at
3 least 50 percent below the rates experienced in the rest of
4 the state.

5 (e) In addition to providing a comprehensive
6 assessment, the program must provide, 100 percent of the time,
7 any or all of the following services that are indicated
8 through the assessment: residential care; transportation;
9 behavioral health services; recreational activities; clothing,
10 supplies, and miscellaneous expenses associated with caring
11 for these children; necessary arrangements for or provision of
12 educational services; and necessary and appropriate health and
13 dental care.

14 (f) The children who are served in this program must
15 be satisfied with the services and living environment.

16 (g) The caregivers must be satisfied with the program.

17 (4) Notwithstanding the provisions of s. 409.141, the
18 Department of Children and Family Services shall fairly and
19 reasonably reimburse the programs established under ss.
20 409.1676 and 409.1677 based on a prospective per diem rate,
21 which must be specified annually in the General Appropriations
22 Act. Funding for these programs shall be made available from
23 resources appropriated and identified in the General
24 Appropriations Act.

25 Section 7. Paragraphs (h) and (i) of subsection (5) of
26 section 409.175, Florida Statutes, are amended, paragraph (j)
27 is redesignated as paragraph (k), and a new paragraph (j) is
28 added to said subsection, to read:

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

31 (5)

1 (h) Upon determination that the applicant meets the
2 state minimum licensing requirements, the department shall
3 issue a license without charge to a specific person or agency
4 at a specific location. A license may be issued if all the
5 screening materials have been timely submitted; however, a
6 license may not be issued or renewed if any person at the home
7 or agency has failed the required screening. The license is
8 nontransferable. A copy of the license shall be displayed in a
9 conspicuous place. Except as provided in paragraph (j), the
10 license is valid for 1 year from the date of issuance, unless
11 the license is suspended or revoked by the department or is
12 voluntarily surrendered by the licensee. The license is the
13 property of the department.

14 (i) A license issued for the operation of a family
15 foster home or agency, unless sooner suspended, revoked, or
16 voluntarily returned, will expire automatically 1 year from
17 the date of issuance, except as provided in paragraph (j).
18 Ninety days prior to the expiration date, an application for
19 renewal shall be submitted to the department by a licensee who
20 wishes to have the license renewed. A license shall be
21 renewed upon the filing of an application on forms furnished
22 by the department if the applicant has first met the
23 requirements established under this section and the rules
24 promulgated hereunder.

25 (j) The department may issue a license that is valid
26 for longer than 1 year but no longer than 3 years to a family
27 foster home that:

28 1. Has maintained a license with the department as a
29 family foster home for at least the 3 previous consecutive
30 years.

31 2. Remains in good standing with the department.

1 3. Has not been the subject of a report of child abuse
2 or neglect with any findings of maltreatment.

3
4 A family foster home that has been issued a license valid for
5 longer than 1 year must be monitored and visited as frequently
6 as one that has been issued a 1-year license. The department
7 reserves the right to reduce a licensure period to 1 year at
8 any time.

9 Section 8. Section 784.081, Florida Statutes, is
10 amended to read:

11 784.081 Assault or battery on specified officials or
12 employees; reclassification of offenses.--Whenever a person is
13 charged with committing an assault or aggravated assault or a
14 battery or aggravated battery upon any elected official or
15 employee of: a school district; a private school; the Florida
16 School for the Deaf and the Blind; a university developmental
17 research school; a state university or any other entity of the
18 state system of public education, as defined in s. 228.041; ~~or~~
19 an employee or protective investigator of the Department of
20 Children and Family Services; or an employee of a lead
21 community-based provider or its direct service contract
22 providers, when the person committing the offense knows or has
23 reason to know the identity or position or employment of the
24 victim, the offense for which the person is charged shall be
25 reclassified as follows:

26 (1) In the case of aggravated battery, from a felony
27 of the second degree to a felony of the first degree.

28 (2) In the case of aggravated assault, from a felony
29 of the third degree to a felony of the second degree.

30 (3) In the case of battery, from a misdemeanor of the
31 first degree to a felony of the third degree.

1 (4) In the case of assault, from a misdemeanor of the
2 second degree to a misdemeanor of the first degree.

3 Section 9. Status report on the child protection
4 program.--

5 (1) The Department of Children and Family Services
6 shall provide the Legislature with a report on the status of
7 the child protection program. The report shall be submitted to
8 the Governor, the Speaker of the House of Representatives, the
9 President of the Senate, the minority leaders of each house of
10 the Legislature, and the appropriate substantive committees of
11 each house of the Legislature, no later than February 1, 2002.

12 (2) The status report shall contain, at a minimum:

13 (a) The most current statistical information from the
14 abuse hotline.

15 (b) The most current data on the number of abuse and
16 neglect cases that are not closed within 60 days, by district.

17 (c) Reasons cases are not closed, by district.

18 (d) The turnover rate of the child protective
19 investigator staff, by district.

20 (e) Strategies to retain child protective investigator
21 staff.

22 (f) Factors that are creating caseload increases in
23 district 7 and other districts, including strategies to
24 address these factors.

25 (g) The most current statistical information
26 concerning the number of foster homes recruited, the number of
27 additional foster homes needed, and the description of the
28 department's effort to recruit foster homes.

29 (h) The department's progress in implementing the
30 HomeSafeNet information system.

31

1 (i) The progress made in implementing the
2 recommendations of the Office of Program Policy Analysis and
3 Government Accountability in the March 2001 justification
4 review of the child protection program.
5 Section 10. This act shall take effect July 1, 2001.
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