



295704

LEGISLATIVE ACTION

Senate

.

House

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Floor: WD/2R

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04/25/2014 02:14 PM

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Senator Diaz de la Portilla moved the following:

Senate Amendment (with title amendment)

Delete everything after the enacting clause
and insert:

Section 1. Present subsections (3) through (5) of section
20.19, Florida Statutes, are renumbered as subsections (4)
through (6), respectively, subsection (2) of that section is
amended, and a new subsection (3) is added to that section, to
read:

20.19 Department of Children and Families.—There is created
a Department of Children and Families.



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12 (2) SECRETARY OF CHILDREN AND FAMILIES; DEPUTY SECRETARY.—

13 (a) The head of the department is the Secretary of Children
14 and Families. The secretary is appointed by the Governor,
15 subject to confirmation by the Senate. The secretary serves at
16 the pleasure of the Governor.

17 (b) The secretary shall appoint a deputy secretary who
18 shall act in the absence of the secretary. The deputy secretary
19 is directly responsible to the secretary, performs such duties
20 as are assigned by the secretary, and serves at the pleasure of
21 the secretary.

22 (3) ASSISTANT SECRETARIES.—

23 (a) Child welfare.—

24 1. The secretary shall appoint an Assistant Secretary for
25 Child Welfare to lead the department in carrying out its duties
26 and responsibilities for child protection and child welfare. The
27 assistant secretary shall serve at the pleasure of the
28 secretary.

29 2. The assistant secretary must have at least 7 years of
30 experience working in organizations that deliver child
31 protective or child welfare services.

32 (b) Substance abuse and mental health.—

33 ~~(e)~~1. The secretary shall appoint an Assistant Secretary
34 for Substance Abuse and Mental Health. The assistant secretary
35 shall serve at the pleasure of the secretary and must have
36 expertise in both areas of responsibility.

37 2. The secretary shall appoint a Director for Substance
38 Abuse and Mental Health who has the requisite expertise and
39 experience to head the state's Substance Abuse and Mental Health
40 Program Office.



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41 Section 2. Paragraphs (b), (c), (g), and (k) of subsection
42 (1) of section 39.001, Florida Statutes, are amended, paragraphs
43 (o) and (p) are added to that subsection, present paragraphs (f)
44 through (h) of subsection (3) are redesignated as paragraphs (g)
45 through (i), respectively, a new paragraph (f) is added to that
46 subsection, present subsections (4) through (11) are renumbered
47 as subsections (5) through (12), respectively, a new subsection
48 (4) is added to that section, and paragraph (c) of present
49 subsection (8) and paragraph (b) of present subsection (10) of
50 that section are amended, to read:

51 39.001 Purposes and intent; personnel standards and
52 screening.—

53 (1) PURPOSES OF CHAPTER.—The purposes of this chapter are:

54 (b) To recognize that most families desire to be competent
55 caregivers and providers for their children and that children
56 achieve their greatest potential when families are able to
57 support and nurture the growth and development of their
58 children. Therefore, the Legislature finds that policies and
59 procedures that provide for prevention and intervention through
60 the department's child protection system should be based on the
61 following principles:

62 1. The health and safety of the children served shall be of
63 paramount concern.

64 2. The prevention and intervention should engage families
65 in constructive, supportive, and nonadversarial relationships.

66 3. The prevention and intervention should intrude as little
67 as possible into the life of the family, be focused on clearly
68 defined objectives, and keep the safety of the child or children
69 as the paramount concern ~~take the most parsimonious path to~~



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70 ~~remedy a family's problems.~~

71 4. The prevention and intervention should be based upon
72 outcome evaluation results that demonstrate success in
73 protecting children and supporting families.

74 (c) To provide a child protection system that reflects a
75 partnership between the department, other agencies, the courts,
76 law enforcement agencies, service providers, and local
77 communities.

78 (g) To ensure that the parent or legal custodian from whose
79 custody the child has been taken assists the department to the
80 fullest extent possible in locating relatives suitable to serve
81 as caregivers for the child and provides all medical and
82 educational information, or consent for access thereto, needed
83 to help the child.

84 (k) To make every possible effort, if when two or more
85 children who are in the care or under the supervision of the
86 department are siblings, to place the siblings in the same home;
87 and in the event of permanent placement of the siblings, to
88 place them in the same adoptive home or, if the siblings are
89 separated while under the care or supervision of the department
90 or in a permanent placement, to keep them in contact with each
91 other.

92 (o) To preserve and strengthen families who are caring for
93 medically complex children.

94 (p) To provide protective investigations that are conducted
95 by trained persons in a complete and fair manner, that are
96 promptly concluded, and that consider the purposes of this
97 subsection and the general protections provided by law relating
98 to child welfare.



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99 (3) GENERAL PROTECTIONS FOR CHILDREN.—It is a purpose of
100 the Legislature that the children of this state be provided with
101 the following protections:

102 (f) Access to sufficient supports and services for
103 medically complex children to allow them to remain in the least
104 restrictive and most nurturing environment, which includes
105 services in an amount and scope comparable to those services the
106 child would receive in out-of-home care placement.

107 (4) SERVICES FOR MEDICALLY COMPLEX CHILDREN.—The department
108 shall maintain a program of family-centered services and
109 supports for medically complex children. The purpose of the
110 program is to prevent abuse and neglect of medically complex
111 children while enhancing the capacity of families to provide for
112 their children’s needs. Program services must include outreach,
113 early intervention, and the provision of other supports and
114 services to meet the child’s needs. The department shall
115 collaborate with all relevant state and local agencies to
116 provide needed services.

117 (9) ~~(8)~~ OFFICE OF ADOPTION AND CHILD PROTECTION.—

118 (c) The office is authorized and directed to:

119 1. Oversee the preparation and implementation of the state
120 plan established under subsection (10) ~~(9)~~ and revise and update
121 the state plan as necessary.

122 2. Provide for or make available continuing professional
123 education and training in the prevention of child abuse and
124 neglect.

125 3. Work to secure funding in the form of appropriations,
126 gifts, and grants from the state, the Federal Government, and
127 other public and private sources in order to ensure that



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128 sufficient funds are available for the promotion of adoption,
129 support of adoptive families, and child abuse prevention
130 efforts.

131 4. Make recommendations pertaining to agreements or
132 contracts for the establishment and development of:

133 a. Programs and services for the promotion of adoption,
134 support of adoptive families, and prevention of child abuse and
135 neglect.

136 b. Training programs for the prevention of child abuse and
137 neglect.

138 c. Multidisciplinary and discipline-specific training
139 programs for professionals with responsibilities affecting
140 children, young adults, and families.

141 d. Efforts to promote adoption.

142 e. Postadoptive services to support adoptive families.

143 5. Monitor, evaluate, and review the development and
144 quality of local and statewide services and programs for the
145 promotion of adoption, support of adoptive families, and
146 prevention of child abuse and neglect and shall publish and
147 distribute an annual report of its findings on or before January
148 1 of each year to the Governor, the Speaker of the House of
149 Representatives, the President of the Senate, the head of each
150 state agency affected by the report, and the appropriate
151 substantive committees of the Legislature. The report shall
152 include:

153 a. A summary of the activities of the office.

154 b. A summary of the adoption data collected and reported to
155 the federal Adoption and Foster Care Analysis and Reporting
156 System (AFCARS) and the federal Administration for Children and



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157 Families.

158 c. A summary of the child abuse prevention data collected
159 and reported to the National Child Abuse and Neglect Data System
160 (NCANDS) and the federal Administration for Children and
161 Families.

162 d. A summary detailing the timeliness of the adoption
163 process for children adopted from within the child welfare
164 system.

165 e. Recommendations, by state agency, for the further
166 development and improvement of services and programs for the
167 promotion of adoption, support of adoptive families, and
168 prevention of child abuse and neglect.

169 f. Budget requests, adoption promotion and support needs,
170 and child abuse prevention program needs by state agency.

171 6. Work with the direct-support organization established
172 under s. 39.0011 to receive financial assistance.

173 (11)~~(10)~~ FUNDING AND SUBSEQUENT PLANS.-

174 (b) The office and the other agencies and organizations
175 listed in paragraph (10) (a) ~~(9)~~ (a) shall readdress the state
176 plan and make necessary revisions every 5 years, at a minimum.
177 Such revisions shall be submitted to the Speaker of the House of
178 Representatives and the President of the Senate no later than
179 June 30 of each year divisible by 5. At least biennially, the
180 office shall review the state plan and make any necessary
181 revisions based on changing needs and program evaluation
182 results. An annual progress report shall be submitted to update
183 the state plan in the years between the 5-year intervals. In
184 order to avoid duplication of effort, these required plans may
185 be made a part of or merged with other plans required by either



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186 the state or Federal Government, so long as the portions of the
187 other state or Federal Government plan that constitute the state
188 plan for the promotion of adoption, support of adoptive
189 families, and prevention of child abuse, abandonment, and
190 neglect are clearly identified as such and are provided to the
191 Speaker of the House of Representatives and the President of the
192 Senate as required under this section ~~above~~.

193 Section 3. Present subsections (59) through (65) of section
194 39.01, Florida Statutes, are redesignated as subsections (60)
195 through (66), respectively, present subsections (67) through
196 (69) are redesignated as subsections (68) through (70),
197 respectively, present subsections (70) through (76) are
198 redesignated as subsections (72) through (78), respectively, new
199 subsections (31), (41), (59), (67), and (71) are added to that
200 section, and subsections (7), (14), (18), (22), (26), and (27)
201 and present subsections (28) through (41), (59), and (65) of
202 that section are amended, to read:

203 39.01 Definitions.—When used in this chapter, unless the
204 context otherwise requires:

205 (7) ~~“Alleged juvenile sexual offender” means:~~

206 ~~(a) A child 12 years of age or younger who is alleged to~~
207 ~~have committed a violation of chapter 794, chapter 796, chapter~~
208 ~~800, s. 827.071, or s. 847.0133; or~~

209 ~~(b) A child who is alleged to have committed any violation~~
210 ~~of law or delinquent act involving juvenile sexual abuse.~~

211 “Juvenile sexual abuse” means any sexual behavior which occurs
212 without consent, without equality, or as a result of coercion.

213 For purposes of this subsection ~~paragraph~~, the following
214 definitions apply:



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215 (a)1. "Coercion" means the exploitation of authority or the
216 use of bribes, threats of force, or intimidation to gain
217 cooperation or compliance.

218 (b)2. "Equality" means two participants operating with the
219 same level of power in a relationship, neither being controlled
220 nor coerced by the other.

221 (c)3. "Consent" means an agreement, including all of the
222 following:

223 1.a. Understanding what is proposed based on age, maturity,
224 developmental level, functioning, and experience.

225 2.b. Knowledge of societal standards for what is being
226 proposed.

227 3.c. Awareness of potential consequences and alternatives.

228 4.d. Assumption that agreement or disagreement will be
229 accepted equally.

230 5.e. Voluntary decision.

231 6.f. Mental competence.

232

233 Juvenile sexual ~~offender~~ behavior ranges from noncontact sexual
234 behavior such as making obscene phone calls, exhibitionism,
235 voyeurism, and the showing or taking of lewd photographs to
236 varying degrees of direct sexual contact, such as frottage,
237 fondling, digital penetration, rape, fellatio, sodomy, and
238 various other sexually aggressive acts.

239 (14) "Child who has exhibited inappropriate sexual
240 behavior" means a child ~~who is 12 years of age or younger and~~
241 who has been found by the department or the court to have
242 committed an inappropriate sexual act.

243 (18) "Comprehensive assessment" or "assessment" means the



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244 gathering of information for the evaluation of a child's and
245 caregiver's physical, psychiatric, psychological, or mental
246 health; developmental delays or challenges; and, educational,
247 vocational, and social condition and family environment as they
248 relate to the child's and caregiver's need for rehabilitative
249 and treatment services, including substance abuse treatment
250 services, mental health services, developmental services,
251 literacy services, medical services, family services, and other
252 specialized services, as appropriate.

253 (22) "Diligent efforts by a parent" means a course of
254 conduct which results in a meaningful change in the behavior of
255 a parent that reduces ~~reduction in~~ risk to the child in the
256 child's home to the extent that ~~would allow~~ the child may ~~to~~ be
257 safely placed permanently back in the home as set forth in the
258 case plan.

259 ~~(26) "District" means any one of the 15 service districts~~
260 ~~of the department established pursuant to s. 20.19.~~

261 ~~(27) "District administrator" means the chief operating~~
262 ~~officer of each service district of the department as defined in~~
263 ~~s. 20.19(5) and, where appropriate, includes any district~~
264 ~~administrator whose service district falls within the boundaries~~
265 ~~of a judicial circuit.~~

266 ~~(26)-(28)~~ "Expedited termination of parental rights" means
267 proceedings wherein a case plan with the goal of reunification
268 is not being offered.

269 ~~(27)-(29)~~ "False report" means a report of abuse, neglect,
270 or abandonment of a child to the central abuse hotline, which
271 report is maliciously made for the purpose of:

272 (a) Harassing, embarrassing, or harming another person;



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- 273 (b) Personal financial gain for the reporting person;
274 (c) Acquiring custody of a child; or
275 (d) Personal benefit for the reporting person in any other
276 private dispute involving a child.

277

278 The term "false report" does not include a report of abuse,
279 neglect, or abandonment of a child made in good faith to the
280 central abuse hotline.

281 ~~(28)~~~~(30)~~ "Family" means a collective body of persons,
282 consisting of a child and a parent, legal custodian, or adult
283 relative, in which:

- 284 (a) The persons reside in the same house or living unit; or
285 (b) The parent, legal custodian, or adult relative has a
286 legal responsibility by blood, marriage, or court order to
287 support or care for the child.

288 ~~(29)~~~~(31)~~ "Foster care" means care provided a child in a
289 foster family or boarding home, group home, agency boarding
290 home, child care institution, or any combination thereof.

291 ~~(30)~~~~(32)~~ "Harm" to a child's health or welfare can occur
292 when any person:

- 293 (a) Inflicts or allows to be inflicted upon the child
294 physical, mental, or emotional injury. In determining whether
295 harm has occurred, the following factors must be considered in
296 evaluating any physical, mental, or emotional injury to a child:
297 the age of the child; any prior history of injuries to the
298 child; the location of the injury on the body of the child; the
299 multiplicity of the injury; and the type of trauma inflicted.

300 Such injury includes, but is not limited to:

- 301 1. Willful acts that produce the following specific



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302 injuries:

- 303 a. Sprains, dislocations, or cartilage damage.
- 304 b. Bone or skull fractures.
- 305 c. Brain or spinal cord damage.
- 306 d. Intracranial hemorrhage or injury to other internal
307 organs.
- 308 e. Asphyxiation, suffocation, or drowning.
- 309 f. Injury resulting from the use of a deadly weapon.
- 310 g. Burns or scalding.
- 311 h. Cuts, lacerations, punctures, or bites.
- 312 i. Permanent or temporary disfigurement.
- 313 j. Permanent or temporary loss or impairment of a body part
314 or function.

315

316 As used in this subparagraph, the term "willful" refers to the
317 intent to perform an action, not to the intent to achieve a
318 result or to cause an injury.

319 2. Purposely giving a child poison, alcohol, drugs, or
320 other substances that substantially affect the child's behavior,
321 motor coordination, or judgment or that result in sickness or
322 internal injury. For the purposes of this subparagraph, the term
323 "drugs" means prescription drugs not prescribed for the child or
324 not administered as prescribed, and controlled substances as
325 outlined in Schedule I or Schedule II of s. 893.03.

326 3. Leaving a child without adult supervision or arrangement
327 appropriate for the child's age or mental or physical condition,
328 so that the child is unable to care for the child's own needs or
329 another's basic needs or is unable to exercise good judgment in
330 responding to any kind of physical or emotional crisis.



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331 4. Inappropriate or excessively harsh disciplinary action
332 that is likely to result in physical injury, mental injury as
333 defined in this section, or emotional injury. The significance
334 of any injury must be evaluated in light of the following
335 factors: the age of the child; any prior history of injuries to
336 the child; the location of the injury on the body of the child;
337 the multiplicity of the injury; and the type of trauma
338 inflicted. Corporal discipline may be considered excessive or
339 abusive when it results in any of the following or other similar
340 injuries:

- 341 a. Sprains, dislocations, or cartilage damage.
- 342 b. Bone or skull fractures.
- 343 c. Brain or spinal cord damage.
- 344 d. Intracranial hemorrhage or injury to other internal
345 organs.
- 346 e. Asphyxiation, suffocation, or drowning.
- 347 f. Injury resulting from the use of a deadly weapon.
- 348 g. Burns or scalding.
- 349 h. Cuts, lacerations, punctures, or bites.
- 350 i. Permanent or temporary disfigurement.
- 351 j. Permanent or temporary loss or impairment of a body part
352 or function.
- 353 k. Significant bruises or welts.

354 (b) Commits, or allows to be committed, sexual battery, as
355 defined in chapter 794, or lewd or lascivious acts, as defined
356 in chapter 800, against the child.

357 (c) Allows, encourages, or forces the sexual exploitation
358 of a child, which includes allowing, encouraging, or forcing a
359 child to:



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- 360 1. Solicit for or engage in prostitution; or
361 2. Engage in a sexual performance, as defined by chapter
362 827.

363 (d) Exploits a child, or allows a child to be exploited, as
364 provided in s. 450.151.

365 (e) Abandons the child. Within the context of the
366 definition of "harm," the term "abandoned the child" or
367 "abandonment of the child" means a situation in which the parent
368 or legal custodian of a child or, in the absence of a parent or
369 legal custodian, the caregiver, while being able, has made no
370 significant contribution to the child's care and maintenance or
371 has failed to establish or maintain a substantial and positive
372 relationship with the child, or both. For purposes of this
373 paragraph, "establish or maintain a substantial and positive
374 relationship" includes, but is not limited to, frequent and
375 regular contact with the child through frequent and regular
376 visitation or frequent and regular communication to or with the
377 child, and the exercise of parental rights and responsibilities.
378 Marginal efforts and incidental or token visits or
379 communications are not sufficient to establish or maintain a
380 substantial and positive relationship with a child. The term
381 "abandoned" does not include a surrendered newborn infant as
382 described in s. 383.50, a child in need of services as defined
383 in chapter 984, or a family in need of services as defined in
384 chapter 984. The incarceration, repeated incarceration, or
385 extended incarceration of a parent, legal custodian, or
386 caregiver responsible for a child's welfare may support a
387 finding of abandonment.

388 (f) Neglects the child. Within the context of the



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389 definition of "harm," the term "neglects the child" means that
390 the parent or other person responsible for the child's welfare
391 fails to supply the child with adequate food, clothing, shelter,
392 or health care, although financially able to do so or although
393 offered financial or other means to do so. However, a parent or
394 legal custodian who, by reason of the legitimate practice of
395 religious beliefs, does not provide specified medical treatment
396 for a child may not be considered abusive or neglectful for that
397 reason alone, but such an exception does not:

398 1. Eliminate the requirement that such a case be reported
399 to the department;

400 2. Prevent the department from investigating such a case;
401 or

402 3. Preclude a court from ordering, when the health of the
403 child requires it, the provision of medical services by a
404 physician, as defined in this section, or treatment by a duly
405 accredited practitioner who relies solely on spiritual means for
406 healing in accordance with the tenets and practices of a well-
407 recognized church or religious organization.

408 (g) Exposes a child to a controlled substance or alcohol.
409 Exposure to a controlled substance or alcohol is established by:

410 1. A test, administered at birth, which indicated that the
411 child's blood, urine, or meconium contained any amount of
412 alcohol or a controlled substance or metabolites of such
413 substances, the presence of which was not the result of medical
414 treatment administered to the mother or the newborn infant; or

415 2. Evidence of extensive, abusive, and chronic use of a
416 controlled substance or alcohol by a parent when the child is
417 demonstrably adversely affected by such usage.



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418
419 As used in this paragraph, the term "controlled substance" means
420 prescription drugs not prescribed for the parent or not
421 administered as prescribed and controlled substances as outlined
422 in Schedule I or Schedule II of s. 893.03.

423 (h) Uses mechanical devices, unreasonable restraints, or
424 extended periods of isolation to control a child.

425 (i) Engages in violent behavior that demonstrates a wanton
426 disregard for the presence of a child and could reasonably
427 result in serious injury to the child.

428 (j) Negligently fails to protect a child in his or her care
429 from inflicted physical, mental, or sexual injury caused by the
430 acts of another.

431 (k) Has allowed a child's sibling to die as a result of
432 abuse, abandonment, or neglect.

433 (l) Makes the child unavailable for the purpose of impeding
434 or avoiding a protective investigation unless the court
435 determines that the parent, legal custodian, or caregiver was
436 fleeing from a situation involving domestic violence.

437 (31) "Impending danger" means a situation in which family
438 behaviors, attitudes, motives, emotions, or situations pose a
439 threat that may not be currently active but that can be
440 anticipated to become active and to have severe effects on a
441 child at any time.

442 (32)~~(33)~~ "Institutional child abuse or neglect" means
443 situations of known or suspected child abuse or neglect in which
444 the person allegedly perpetrating the child abuse or neglect is
445 an employee of a private school, public or private day care
446 center, residential home, institution, facility, or agency or



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447 any other person at such institution responsible for the child's
448 care as defined in subsection (47).

449 ~~(33)~~~~(34)~~ "Judge" means the circuit judge exercising
450 jurisdiction pursuant to this chapter.

451 ~~(34)~~~~(35)~~ "Legal custody" means a legal status created by a
452 court which vests in a custodian of the person or guardian,
453 whether an agency or an individual, the right to have physical
454 custody of the child and the right and duty to protect, nurture,
455 guide, and discipline the child and to provide him or her with
456 food, shelter, education, and ordinary medical, dental,
457 psychiatric, and psychological care.

458 ~~(35)~~~~(36)~~ "Licensed child-caring agency" means a person,
459 society, association, or agency licensed by the department to
460 care for, receive, and board children.

461 ~~(36)~~~~(37)~~ "Licensed child-placing agency" means a person,
462 society, association, or institution licensed by the department
463 to care for, receive, or board children and to place children in
464 a licensed child-caring institution or a foster or adoptive
465 home.

466 ~~(37)~~~~(38)~~ "Licensed health care professional" means a
467 physician licensed under chapter 458, an osteopathic physician
468 licensed under chapter 459, a nurse licensed under part I of
469 chapter 464, a physician assistant licensed under chapter 458 or
470 chapter 459, or a dentist licensed under chapter 466.

471 ~~(38)~~~~(39)~~ "Likely to injure oneself" means that, as
472 evidenced by violent or other actively self-destructive
473 behavior, it is more likely than not that within a 24-hour
474 period the child will attempt to commit suicide or inflict
475 serious bodily harm on himself or herself.



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476 ~~(39)-(40)~~ "Likely to injure others" means that it is more
477 likely than not that within a 24-hour period the child will
478 inflict serious and unjustified bodily harm on another person.

479 ~~(40)-(41)~~ "Mediation" means a process whereby a neutral
480 third person called a mediator acts to encourage and facilitate
481 the resolution of a dispute between two or more parties. It is
482 an informal and nonadversarial process with the objective of
483 helping the disputing parties reach a mutually acceptable and
484 voluntary agreement. The role of the mediator includes, but is
485 not limited to, assisting the parties in identifying issues,
486 fostering joint problem solving, and exploring settlement
487 alternatives.

488 ~~(41)~~ "Medical neglect" means the failure to provide or the
489 failure to allow needed care as recommended by a health care
490 practitioner for a physical injury, illness, medical condition,
491 or impairment, or the failure to seek timely and appropriate
492 medical care for a serious health problem that a reasonable
493 person would have recognized as requiring professional medical
494 attention. Medical neglect does not occur if the parent or legal
495 guardian of the child has made reasonable attempts to obtain
496 necessary health care services or the immediate health condition
497 giving rise to the allegation of neglect is a known and expected
498 complication of the child's diagnosis or treatment and:

499 ~~(a)~~ The recommended care offers limited net benefit to the
500 child and the morbidity or other side effects of the treatment
501 may be considered to be greater than the anticipated benefit; or

502 ~~(b)~~ The parent or legal guardian received conflicting
503 medical recommendations for treatment from multiple
504 practitioners and did not follow all recommendations.



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505 (59) "Present danger" means a significant and clearly
506 observable family condition that is occurring at the current
507 moment and is already endangering or threatening to endanger the
508 child. Present danger threats are conspicuous and require that
509 an immediate protective action be taken to ensure the child's
510 safety.

511 (60)~~(59)~~ "Preventive services" means social services and
512 other supportive and rehabilitative services provided to the
513 parent or legal custodian of the child and to the child for the
514 purpose of averting the removal of the child from the home or
515 disruption of a family which will or could result in the
516 placement of a child in foster care. Social services and other
517 supportive and rehabilitative services shall promote the child's
518 developmental needs and need for physical, mental, and emotional
519 health and a safe, stable, living environment;~~;~~ shall promote
520 family autonomy;~~;~~ and shall strengthen family life, whenever
521 possible.

522 (66)~~(65)~~ "Reunification services" means social services and
523 other supportive and rehabilitative services provided to the
524 parent of the child, to the child, and, where appropriate, to
525 the relative placement, nonrelative placement, or foster parents
526 of the child, for the purpose of enabling a child who has been
527 placed in out-of-home care to safely return to his or her parent
528 at the earliest possible time. The health and safety of the
529 child shall be the paramount goal of social services and other
530 supportive and rehabilitative services. The services shall
531 promote the child's need for physical, developmental, mental,
532 and emotional health and a safe, stable, living environment;~~;~~
533 shall promote family autonomy;~~;~~ and shall strengthen family



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534 life, whenever possible.

535 (67) "Safety plan" means a plan created to control present
536 or impending danger using the least intrusive means appropriate
537 to protect a child when a parent, caregiver, or legal custodian
538 is unavailable, unwilling, or unable to do so.

539 (71) "Sibling" means:

540 (a) A child who shares a birth parent or legal parent with
541 one or more other children; or

542 (b) A child who has lived together in a family with one or
543 more other children whom he or she identifies as siblings.

544 Section 4. Subsection (12) is added to section 39.013,
545 Florida Statutes, to read:

546 39.013 Procedures and jurisdiction; right to counsel.-

547 (12) The department shall be represented by counsel in each
548 dependency proceeding. Through its attorneys, the department
549 shall make recommendations to the court on issues before the
550 court and may support its recommendations through testimony and
551 other evidence by its own employees, employees of sheriff's
552 offices providing child protection services, employees of its
553 contractors, employees of its contractor's subcontractors, or
554 from any other relevant source.

555 Section 5. Paragraph (c) of subsection (2) of section
556 39.201, Florida Statutes, is amended to read:

557 39.201 Mandatory reports of child abuse, abandonment, or
558 neglect; mandatory reports of death; central abuse hotline.-

559 (2)

560 (c) An alleged incident of juvenile sexual abuse involving
561 a child who is in the custody of or protective supervision of
562 the department shall be reported to the department's central



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563 ~~abuse hotline Reports involving a known or suspected juvenile~~
564 ~~sexual offender or a child who has exhibited inappropriate~~
565 ~~sexual behavior shall be made and received by the department.~~

566 ~~1. The department shall determine the age of the alleged~~
567 ~~offender, if known.~~

568 ~~2. If the alleged offender is 12 years of age or younger,~~
569 The central abuse hotline shall immediately electronically
570 transfer the report or call to the county sheriff's office. The
571 department shall conduct an assessment and assist the family in
572 receiving appropriate services pursuant to s. 39.307, and send a
573 written report of the allegation to the appropriate county
574 sheriff's office within 48 hours after the initial report is
575 made to the central abuse hotline.

576 2. The department shall ensure that the facts and results
577 of any investigation of child sexual abuse involving a child in
578 the custody of or under the protective supervision of the
579 department are made known to the court at the next hearing or
580 included in the next report to the court concerning the child.

581 ~~3. If the alleged offender is 13 years of age or older, the~~
582 ~~central abuse hotline shall immediately electronically transfer~~
583 ~~the report or call to the appropriate county sheriff's office~~
584 ~~and send a written report to the appropriate county sheriff's~~
585 ~~office within 48 hours after the initial report to the central~~
586 ~~abuse hotline.~~

587 Section 6. Effective January 1, 2015, section 39.2015,
588 Florida Statutes, is created to read:

589 39.2015 Critical incident rapid response team.—

590 (1) As part of the department's quality assurance program,
591 the department shall initiate an immediate multiagency



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592 investigation of certain child deaths or other serious
593 incidents. The purpose of such investigation is to identify root
594 causes and rapidly determine the need to change policies and
595 practices related to child protection and child welfare.

596 (2) A prompt investigation shall be conducted by a critical
597 incident rapid response team for all child deaths reported to
598 the department if the child or another child in his or her
599 family was the subject of a verified report of suspected abuse
600 or neglect during the previous 12 months. The secretary may
601 direct a similar investigation for other cases involving serious
602 injury to a child.

603 (3) Each investigation shall be conducted by a multiagency
604 team of at least five professionals with expertise in child
605 protection, child welfare, and organizational management. The
606 team may consist of employees of the department, community-based
607 care lead agencies, Children's Medical Services, and community-
608 based care provider organizations, or any other person with the
609 required expertise. The majority of the team must reside in
610 judicial circuits outside the location of the incident. The
611 secretary shall appoint a team leader for each group assigned to
612 an investigation.

613 (4) An investigation shall be initiated as soon as
614 possible. A preliminary report on each case shall be provided to
615 the secretary no later than 30 days after the investigation
616 begins.

617 (5) Each member of the team is authorized to access all
618 information in the case file.

619 (6) All employees of the department or other state agencies
620 and all personnel from community-based care lead agencies and



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621 community-based care lead agency subcontractors must cooperate
622 with the investigation by participating in interviews and timely
623 responding to any requests for information. The members of the
624 team may only access the records and information of contracted
625 provider organizations which are available to the department by
626 law.

627 (7) The secretary shall develop cooperative agreements with
628 other entities and organizations as necessary to facilitate the
629 work of the team.

630 (8) Upon completion of the investigation, the department
631 shall make the team's final report, excluding any confidential
632 information, available on its website.

633 (9) The secretary shall develop guidelines for
634 investigations conducted by critical incident rapid response
635 teams and provide training to team members. Such guidelines must
636 direct the teams in the conduct of a root-cause analysis that
637 identifies, classifies, and attributes responsibility for both
638 direct and latent causes for the death or other incident,
639 including organizational factors, preconditions, and specific
640 acts or omissions resulting from either error or a violation of
641 procedures.

642 Section 7. Section 39.2022, Florida Statutes, is created to
643 read:

644 39.2022 Public disclosure of reported child deaths.-

645 (1) It is the intent of the Legislature to provide prompt
646 disclosure of the basic facts of all deaths of children from
647 birth through 18 years of age which occur in this state and
648 which are reported to the department's central abuse hotline.
649 Disclosure shall be posted on the department's public website.



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650 This section does not limit the public access to records under
651 any other provision of law.

652 (2) Notwithstanding s. 39.202, if a child death is reported
653 to the central abuse hotline, the department shall post on its
654 website all of the following:

655 (a) The date of the child's death.

656 (b) Any allegations of the cause of death or the
657 preliminary cause of death, and the verified cause of death, if
658 known.

659 (c) The county where the child resided.

660 (d) The name of the community-based care lead agency, case
661 management agency, or out-of-home licensing agency involved with
662 the child, family, or licensed caregiver, if applicable.

663 (e) Whether the child has been the subject of any prior
664 verified reports to the department's central abuse hotline.

665 Section 8. Subsections (9) and (14) of section 39.301,
666 Florida Statutes, are amended to read:

667 39.301 Initiation of protective investigations.-

668 (9) (a) For each report received from the central abuse
669 hotline and accepted for investigation, the department or the
670 sheriff providing child protective investigative services under
671 s. 39.3065, shall perform the following child protective
672 investigation activities to determine child safety:

673 1. Conduct a review of all relevant, available information
674 specific to the child and family and alleged maltreatment;
675 family child welfare history; local, state, and federal criminal
676 records checks; and requests for law enforcement assistance
677 provided by the abuse hotline. Based on a review of available
678 information, including the allegations in the current report, a



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679 determination shall be made as to whether immediate consultation
680 should occur with law enforcement, the child protection team, a
681 domestic violence shelter or advocate, or a substance abuse or
682 mental health professional. Such consultations should include
683 discussion as to whether a joint response is necessary and
684 feasible. A determination shall be made as to whether the person
685 making the report should be contacted before the face-to-face
686 interviews with the child and family members.

687 2. Conduct face-to-face interviews with the child; other
688 siblings, if any; and the parents, legal custodians, or
689 caregivers.

690 3. Assess the child's residence, including a determination
691 of the composition of the family and household, including the
692 name, address, date of birth, social security number, sex, and
693 race of each child named in the report; any siblings or other
694 children in the same household or in the care of the same
695 adults; the parents, legal custodians, or caregivers; and any
696 other adults in the same household.

697 4. Determine whether there is any indication that any child
698 in the family or household has been abused, abandoned, or
699 neglected; the nature and extent of present or prior injuries,
700 abuse, or neglect, and any evidence thereof; and a determination
701 as to the person or persons apparently responsible for the
702 abuse, abandonment, or neglect, including the name, address,
703 date of birth, social security number, sex, and race of each
704 such person.

705 5. Complete assessment of immediate child safety for each
706 child based on available records, interviews, and observations
707 with all persons named in subparagraph 2. and appropriate



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708 collateral contacts, which may include other professionals. The
709 department's child protection investigators are hereby
710 designated a criminal justice agency for the purpose of
711 accessing criminal justice information to be used for enforcing
712 this state's laws concerning the crimes of child abuse,
713 abandonment, and neglect. This information shall be used solely
714 for purposes supporting the detection, apprehension,
715 prosecution, pretrial release, posttrial release, or
716 rehabilitation of criminal offenders or persons accused of the
717 crimes of child abuse, abandonment, or neglect and may not be
718 further disseminated or used for any other purpose.

719 6. Document the present and impending dangers to each child
720 based on the identification of inadequate protective capacity
721 through utilization of a standardized safety assessment
722 instrument. If present or impending danger is identified, the
723 child protective investigator must implement a safety plan or
724 take the child into custody. If present danger is identified and
725 the child is not removed, the child protective investigator
726 shall create and implement a safety plan before leaving the home
727 or the location where there is present danger. If impending
728 danger is identified, the child protective investigator shall
729 create and implement a safety plan as soon as necessary to
730 protect the safety of the child. The child protective
731 investigator may modify the safety plan if he or she identifies
732 additional impending danger.

733 a. If the child protective investigator implements a safety
734 plan, the plan must be specific, sufficient, feasible, and
735 sustainable in response to the realities of the present or
736 impending danger. A safety plan may be an in-home plan or an



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737 out-of-home plan, or a combination of both. A safety plan may
738 not rely solely on promissory commitments by the parent,
739 caregiver, or legal custodian who is currently not able to
740 protect the child or on services that are not available or will
741 not result in the safety of the child. A safety plan may not be
742 implemented if for any reason the parents, guardian, or legal
743 custodian lacks the capacity or ability to comply with the plan.
744 If the department is not able to develop a plan that is
745 specific, sufficient, feasible, and sustainable, the department
746 shall file a shelter petition. A child protective investigator
747 shall implement separate safety plans for the perpetrator of
748 domestic violence and the parent who is a victim of domestic
749 violence as defined in s. 741.28. If the perpetrator of domestic
750 violence is not the parent, guardian, or legal custodian of the
751 child, the child protective investigator shall seek issuance of
752 an injunction authorized by s. 39.504 to implement a safety plan
753 for the perpetrator and impose any other conditions to protect
754 the child. The safety plan for the parent who is a victim of
755 domestic violence may not be shared with the perpetrator. If any
756 party to a safety plan fails to comply with the safety plan
757 resulting in the child being unsafe, the department shall file a
758 shelter petition.

759 b. The child protective investigator shall collaborate with
760 the community-based care lead agency in the development of the
761 safety plan as necessary to ensure that the safety plan is
762 specific, sufficient, feasible, and sustainable. The child
763 protective investigator shall identify services necessary for
764 the successful implementation of the safety plan. The child
765 protective investigator and the community-based care lead agency



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766 shall mobilize service resources to assist all parties in
767 complying with the safety plan. The community-based care lead
768 agency shall prioritize safety plan services to families who
769 have multiple risk factors, including, but not limited to, two
770 or more of the following:

771 (I) The parent or legal custodian is of young age;

772 (II) The parent or legal custodian, or an adult currently
773 living in or frequently visiting the home, has a history of
774 substance abuse, mental illness, or domestic violence;

775 (III) The parent or legal custodian, or an adult currently
776 living in or frequently visiting the home, has been previously
777 found to have physically or sexually abused a child;

778 (IV) The parent or legal custodian or an adult currently
779 living in or frequently visiting the home has been the subject
780 of multiple allegations by reputable reports of abuse or
781 neglect;

782 (V) The child is physically or developmentally disabled; or

783 (VI) The child is 3 years of age or younger.

784 c. The child protective investigator shall monitor the
785 implementation of the plan to ensure the child's safety until
786 the case is transferred to the lead agency at which time the
787 lead agency shall monitor the implementation.

788 ~~(b) Upon completion of the immediate safety assessment, the~~
789 ~~department shall determine the additional activities necessary~~
790 ~~to assess impending dangers, if any, and close the~~
791 ~~investigation.~~

792 (b) (e) For each report received from the central abuse
793 hotline, the department or the sheriff providing child
794 protective investigative services under s. 39.3065, shall



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795 determine the protective, treatment, and ameliorative services
796 necessary to safeguard and ensure the child's safety and well-
797 being and development, and cause the delivery of those services
798 through the early intervention of the department or its agent.

799 As applicable, child protective investigators must inform
800 parents and caregivers how and when to use the injunction
801 process under s. 741.30 to remove a perpetrator of domestic
802 violence from the home as an intervention to protect the child.

803 1. If the department or the sheriff providing child
804 protective investigative services determines that the interests
805 of the child and the public will be best served by providing the
806 child care or other treatment voluntarily accepted by the child
807 and the parents or legal custodians, the parent or legal
808 custodian and child may be referred for such care, case
809 management, or other community resources.

810 2. If the department or the sheriff providing child
811 protective investigative services determines that the child is
812 in need of protection and supervision, the department may file a
813 petition for dependency.

814 3. If a petition for dependency is not being filed by the
815 department, the person or agency originating the report shall be
816 advised of the right to file a petition pursuant to this part.

817 4. At the close of an investigation, the department or the
818 sheriff providing child protective services shall provide to the
819 person who is alleged to have caused the abuse, neglect, or
820 abandonment and the parent or legal custodian a summary of
821 findings from the investigation and provide information about
822 their right to access confidential reports in accordance with s.
823 39.202.



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824 (14) (a) If the department or its agent determines that a
825 child requires immediate or long-term protection through:
826 ~~1. medical or other health care~~ or
827 ~~2. homemaker care, day care, protective supervision, or~~
828 other services to stabilize the home environment, including
829 intensive family preservation services through the Intensive
830 Crisis Counseling Program, such services shall first be offered
831 for voluntary acceptance unless:

832 1. There are high-risk factors that may impact the ability
833 of the parents or legal custodians to exercise judgment. Such
834 factors may include the parents' or legal custodians' young age
835 or history of substance abuse, mental illness, or domestic
836 violence; or

837 2. There is a high likelihood of lack of compliance with
838 voluntary services, and such noncompliance would result in the
839 child being unsafe.

840 (b) The parents or legal custodians shall be informed of
841 the right to refuse services, as well as the responsibility of
842 the department to protect the child regardless of the acceptance
843 or refusal of services. If the services are refused, a
844 collateral contact shall include a relative, if the protective
845 investigator has knowledge of and the ability to contact a
846 relative. If the services are refused and the department deems
847 that the child's need for protection ~~se~~ requires services, the
848 department shall take the child into protective custody or
849 petition the court as provided in this chapter. At any time
850 after the commencement of a protective investigation, a relative
851 may submit in writing to the protective investigator or case
852 manager a request to receive notification of all proceedings and



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853 hearings in accordance with s. 39.502. The request shall include
854 the relative's name, address, and phone number and the
855 relative's relationship to the child. The protective
856 investigator or case manager shall forward such request to the
857 attorney for the department. The failure to provide notice to
858 either a relative who requests it pursuant to this subsection or
859 to a relative who is providing out-of-home care for a child may
860 not result in any previous action of the court at any stage or
861 proceeding in dependency or termination of parental rights under
862 any part of this chapter being set aside, reversed, modified, or
863 in any way changed absent a finding by the court that a change
864 is required in the child's best interests.

865 (c) The department, in consultation with the judiciary,
866 shall adopt by rule:

867 1. Criteria that are factors requiring that the department
868 take the child into custody, petition the court as provided in
869 this chapter, or, if the child is not taken into custody or a
870 petition is not filed with the court, conduct an administrative
871 review. Such factors must include, but are not limited to,
872 noncompliance with a safety plan or the case plan developed by
873 the department, and the family under this chapter, and prior
874 abuse reports with findings that involve the child, the child's
875 sibling, or the child's caregiver.

876 2. Requirements that if after an administrative review the
877 department determines not to take the child into custody or
878 petition the court, the department shall document the reason for
879 its decision in writing and include it in the investigative
880 file. For all cases that were accepted by the local law
881 enforcement agency for criminal investigation pursuant to



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882 subsection (2), the department must include in the file written
883 documentation that the administrative review included input from
884 law enforcement. In addition, for all cases that must be
885 referred to child protection teams pursuant to s. 39.303(2) and
886 (3), the file must include written documentation that the
887 administrative review included the results of the team's
888 evaluation. ~~Factors that must be included in the development of~~
889 ~~the rule include noncompliance with the case plan developed by~~
890 ~~the department, or its agent, and the family under this chapter~~
891 ~~and prior abuse reports with findings that involve the child or~~
892 ~~caregiver.~~

893 Section 9. Section 39.303, Florida Statutes, is amended to
894 read:

895 39.303 Child protection teams; services; eligible cases.-
896 The Children's Medical Services Program in the Department of
897 Health shall develop, maintain, and coordinate the services of
898 one or more multidisciplinary child protection teams in each of
899 the service districts of the Department of Children and Families
900 ~~Family Services~~. Such teams may be composed of appropriate
901 representatives of school districts and appropriate health,
902 mental health, social service, legal service, and law
903 enforcement agencies. ~~The Legislature finds that optimal~~
904 ~~coordination of child protection teams and sexual abuse~~
905 ~~treatment programs requires collaboration between~~ The Department
906 of Health and the Department of Children and Families ~~Family~~
907 ~~Services~~. ~~The two departments~~ shall maintain an interagency
908 agreement that establishes protocols for oversight and
909 operations of child protection teams and sexual abuse treatment
910 programs. The State Surgeon General and the Deputy Secretary for



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911 Children's Medical Services, in consultation with the Secretary
912 of Children and Families ~~Family Services~~, shall maintain the
913 responsibility for the screening, employment, and, if necessary,
914 the termination of child protection team medical directors, at
915 headquarters and in the 15 districts. Child protection team
916 medical directors shall be responsible for oversight of the
917 teams in the districts.

918 (1) The Department of Health shall use ~~utilize~~ and convene
919 the teams to supplement the assessment and protective
920 supervision activities of the family safety and preservation
921 program of the Department of Children and Families ~~Family~~
922 ~~Services~~. ~~Nothing in~~ This section does not ~~shall be construed to~~
923 remove or reduce the duty and responsibility of any person to
924 report pursuant to this chapter all suspected or actual cases of
925 child abuse, abandonment, or neglect or sexual abuse of a child.
926 The role of the teams shall be to support activities of the
927 program and to provide services deemed by the teams to be
928 necessary and appropriate to abused, abandoned, and neglected
929 children upon referral. The specialized diagnostic assessment,
930 evaluation, coordination, consultation, and other supportive
931 services that a child protection team shall be capable of
932 providing include, but are not limited to, the following:

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

937 (b) Telephone consultation services in emergencies and in
938 other situations.

939 (c) Medical evaluation related to abuse, abandonment, or



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940 neglect, as defined by policy or rule of the Department of
941 Health.

942 (d) Such psychological and psychiatric diagnosis and
943 evaluation services for the child or the child's parent or
944 parents, legal custodian or custodians, or other caregivers, or
945 any other individual involved in a child abuse, abandonment, or
946 neglect case, as the team may determine to be needed.

947 (e) Expert medical, psychological, and related professional
948 testimony in court cases.

949 (f) Case staffings to develop treatment plans for children
950 whose cases have been referred to the team. A child protection
951 team may provide consultation with respect to a child who is
952 alleged or is shown to be abused, abandoned, or neglected, which
953 consultation shall be provided at the request of a
954 representative of the family safety and preservation program or
955 at the request of any other professional involved with a child
956 or the child's parent or parents, legal custodian or custodians,
957 or other caregivers. In every such child protection team case
958 staffing, consultation, or staff activity involving a child, a
959 family safety and preservation program representative shall
960 attend and participate.

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

964 (h) Such training services for program and other employees
965 of the Department of Children and Families ~~Family Services~~,
966 employees of the Department of Health, and other medical
967 professionals as is deemed appropriate to enable them to develop
968 and maintain their professional skills and abilities in handling



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969 child abuse, abandonment, and neglect cases.

970 (i) Educational and community awareness campaigns on child
971 abuse, abandonment, and neglect in an effort to enable citizens
972 more successfully to prevent, identify, and treat child abuse,
973 abandonment, and neglect in the community.

974 (j) Child protection team assessments that include, as
975 appropriate, medical evaluations, medical consultations, family
976 psychosocial interviews, specialized clinical interviews, or
977 forensic interviews.

978

979 All medical personnel participating on a child protection team
980 must successfully complete the required child protection team
981 training curriculum as set forth in protocols determined by the
982 Deputy Secretary for Children's Medical Services and the
983 Statewide Medical Director for Child Protection. A child
984 protection team that is evaluating a report of medical neglect
985 and assessing the health care needs of a medically complex child
986 shall consult with a physician who has experience in treating
987 children with the same condition.

988 (2) The child abuse, abandonment, and neglect reports that
989 must be referred by the department to child protection teams of
990 the Department of Health for an assessment and other appropriate
991 available support services as set forth in subsection (1) must
992 include cases involving:

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

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

996 (c) Any report alleging sexual abuse of a child.

997 (d) Any sexually transmitted disease in a prepubescent



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998 child.

999 (e) Reported malnutrition of a child and failure of a child
1000 to thrive.

1001 (f) Reported medical neglect of a child.

1002 (g) Any family in which one or more children have been
1003 pronounced dead on arrival at a hospital or other health care
1004 facility, or have been injured and later died, as a result of
1005 suspected abuse, abandonment, or neglect, when any sibling or
1006 other child remains in the home.

1007 (h) Symptoms of serious emotional problems in a child when
1008 emotional or other abuse, abandonment, or neglect is suspected.

1009 (3) All abuse and neglect cases transmitted for
1010 investigation to a district by the hotline must be
1011 simultaneously transmitted to the Department of Health child
1012 protection team for review. For the purpose of determining
1013 whether face-to-face medical evaluation by a child protection
1014 team is necessary, all cases transmitted to the child protection
1015 team which meet the criteria in subsection (2) must be timely
1016 reviewed by:

1017 (a) A physician licensed under chapter 458 or chapter 459
1018 who holds board certification in pediatrics and is a member of a
1019 child protection team;

1020 (b) A physician licensed under chapter 458 or chapter 459
1021 who holds board certification in a specialty other than
1022 pediatrics, who may complete the review only when working under
1023 the direction of a physician licensed under chapter 458 or
1024 chapter 459 who holds board certification in pediatrics and is a
1025 member of a child protection team;

1026 (c) An advanced registered nurse practitioner licensed



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1027 under chapter 464 who has a specialty ~~speciality~~ in pediatrics
1028 or family medicine and is a member of a child protection team;

1029 (d) A physician assistant licensed under chapter 458 or
1030 chapter 459, who may complete the review only when working under
1031 the supervision of a physician licensed under chapter 458 or
1032 chapter 459 who holds board certification in pediatrics and is a
1033 member of a child protection team; or

1034 (e) A registered nurse licensed under chapter 464, who may
1035 complete the review only when working under the direct
1036 supervision of a physician licensed under chapter 458 or chapter
1037 459 who holds certification in pediatrics and is a member of a
1038 child protection team.

1039 (4) A face-to-face medical evaluation by a child protection
1040 team is not necessary when:

1041 (a) The child was examined for the alleged abuse or neglect
1042 by a physician who is not a member of the child protection team,
1043 and a consultation between the child protection team board-
1044 certified pediatrician, advanced registered nurse practitioner,
1045 physician assistant working under the supervision of a child
1046 protection team board-certified pediatrician, or registered
1047 nurse working under the direct supervision of a child protection
1048 team board-certified pediatrician, and the examining physician
1049 concludes that a further medical evaluation is unnecessary;

1050 (b) The child protective investigator, with supervisory
1051 approval, has determined, after conducting a child safety
1052 assessment, that there are no indications of injuries as
1053 described in paragraphs (2) (a)-(h) as reported; or

1054 (c) The child protection team board-certified pediatrician,
1055 as authorized in subsection (3), determines that a medical



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1056 evaluation is not required.

1057
1058 Notwithstanding paragraphs (a), (b), and (c), a child protection
1059 team pediatrician, as authorized in subsection (3), may
1060 determine that a face-to-face medical evaluation is necessary.

1061 (5) In all instances in which a child protection team is
1062 providing certain services to abused, abandoned, or neglected
1063 children, other offices and units of the Department of Health,
1064 and offices and units of the Department of Children and Families
1065 ~~Family Services~~, shall avoid duplicating the provision of those
1066 services.

1067 (6) The Department of Health child protection team quality
1068 assurance program and the Family Safety Program Office of the
1069 Department of Children and Families ~~Family Services' Family~~
1070 ~~Safety Program Office quality assurance program~~ shall
1071 collaborate to ensure referrals and responses to child abuse,
1072 abandonment, and neglect reports are appropriate. Each quality
1073 assurance program shall include a review of records in which
1074 there are no findings of abuse, abandonment, or neglect, and the
1075 findings of these reviews shall be included in each department's
1076 quality assurance reports.

1077 Section 10. Section 39.3068, Florida Statutes, is created
1078 to read:

1079 39.3068 Reports of medical neglect.-

1080 (1) Upon receiving a report alleging medical neglect, the
1081 department or sheriff's office shall assign the case to a child
1082 protective investigator who has specialized training in
1083 addressing medical neglect or working with medically complex
1084 children if such investigator is available. If a child



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1085 protective investigator with specialized training is not
1086 available, the child protective investigator shall consult with
1087 department staff with such expertise.

1088 (2) The child protective investigator who has interacted
1089 with the child and the child's family shall promptly contact and
1090 provide information to the child protection team. The child
1091 protection team shall assist the child protective investigator
1092 in identifying immediate responses to address the medical needs
1093 of the child with the priority of maintaining the child in the
1094 home if the parents will be able to meet the needs of the child
1095 with additional services. The child protective investigator and
1096 the child protection team must use a family-centered approach to
1097 assess the capacity of the family to meet those needs. A family-
1098 centered approach is intended to increase independence on the
1099 part of the family, accessibility to programs and services
1100 within the community, and collaboration between families and
1101 their service providers. The ethnic, cultural, economic, racial,
1102 social, and religious diversity of families must be respected
1103 and considered in the development and provision of services.

1104 (3) The child shall be evaluated by the child protection
1105 team as soon as practicable. After receipt of the report from
1106 the child protection team, the department shall convene a case
1107 staffing which shall be attended, at a minimum, by the child
1108 protective investigator; department legal staff; and
1109 representatives from the child protection team that evaluated
1110 the child, Children's Medical Services, the Agency for Health
1111 Care Administration, the community-based care lead agency, and
1112 any providers of services to the child. However, the Agency for
1113 Health Care Administration is not required to attend the



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1114 staffing if the child is not Medicaid eligible. The staffing
1115 shall consider, at a minimum, available services, given the
1116 family's eligibility for services; services that are effective
1117 in addressing conditions leading to medical neglect allegations;
1118 and services that would enable the child to safely remain at
1119 home. Any services that are available and effective shall be
1120 provided.

1121 Section 11. Section 39.307, Florida Statutes, is amended to
1122 read:

1123 39.307 Reports of child-on-child sexual abuse.—

1124 (1) Upon receiving a report alleging juvenile sexual abuse
1125 or inappropriate sexual behavior as defined in s. 39.01(7)
1126 involving any child younger than 12 years of age and any child
1127 17 years of age or younger who is in the custody of or under the
1128 protective supervision of the department, the department shall
1129 assist the family, child, and caregiver in receiving appropriate
1130 services to address the allegations of the report.

1131 (a) The department shall ensure that information describing
1132 the child's history of child sexual abuse is included in the
1133 child's electronic record. This record must also include
1134 information describing the services the child has received as a
1135 result of his or her involvement with child sexual abuse.

1136 (b) Placement decisions for a child who has been involved
1137 with child sexual abuse must include consideration of the needs
1138 of the child and any other children in the placement.

1139 (c) The department shall monitor the occurrence of child
1140 sexual abuse and the provision of services to children involved
1141 in child sexual abuse, juvenile sexual abuse, or who have
1142 displayed inappropriate sexual behavior.



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1143 (2) The department, contracted sheriff's office providing
1144 protective investigation services, or contracted case management
1145 personnel responsible for providing services, at a minimum,
1146 shall adhere to the following procedures:

1147 (a) The purpose of the response to a report alleging
1148 juvenile sexual abuse behavior or inappropriate sexual behavior
1149 shall be explained to the caregiver.

1150 1. The purpose of the response shall be explained in a
1151 manner consistent with legislative purpose and intent provided
1152 in this chapter.

1153 2. The name and office telephone number of the person
1154 responding shall be provided to the caregiver of the alleged
1155 abuser ~~juvenile sexual offender~~ or child who has exhibited
1156 inappropriate sexual behavior and the victim's caregiver.

1157 3. The possible consequences of the department's response,
1158 including outcomes and services, shall be explained to the
1159 caregiver of the alleged abuser ~~juvenile sexual offender~~ or
1160 child who has exhibited inappropriate sexual behavior and the
1161 victim's caregiver.

1162 (b) The caregiver of the alleged abuser ~~juvenile sexual~~
1163 ~~offender~~ or child who has exhibited inappropriate sexual
1164 behavior and the victim's caregiver shall be involved to the
1165 fullest extent possible in determining the nature of the sexual
1166 behavior concerns and the nature of any problem or risk to other
1167 children.

1168 (c) The assessment of risk and the perceived treatment
1169 needs of the alleged abuser ~~juvenile sexual offender~~ or child
1170 who has exhibited inappropriate sexual behavior, the victim, and
1171 respective caregivers shall be conducted by the district staff,



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1172 the child protection team of the Department of Health, and other
1173 providers under contract with the department to provide services
1174 to the caregiver of the alleged offender, the victim, and the
1175 victim's caregiver.

1176 (d) The assessment shall be conducted in a manner that is
1177 sensitive to the social, economic, and cultural environment of
1178 the family.

1179 (e) If necessary, the child protection team of the
1180 Department of Health shall conduct a physical examination of the
1181 victim, which is sufficient to meet forensic requirements.

1182 (f) Based on the information obtained from the alleged
1183 abuser ~~juvenile sexual offender~~ or child who has exhibited
1184 inappropriate sexual behavior, his or her caregiver, the victim,
1185 and the victim's caregiver, an assessment of service and
1186 treatment needs must be completed and, if needed, a case plan
1187 developed within 30 days.

1188 (g) The department shall classify the outcome of the report
1189 as follows:

1190 1. Report closed. Services were not offered because the
1191 department determined that there was no basis for intervention.

1192 2. Services accepted by alleged abuser ~~juvenile sexual~~
1193 ~~offender~~. Services were offered to the alleged abuser ~~juvenile~~
1194 ~~sexual offender~~ or child who has exhibited inappropriate sexual
1195 behavior and accepted by the caregiver.

1196 3. Report closed. Services were offered to the alleged
1197 abuser ~~juvenile sexual offender~~ or child who has exhibited
1198 inappropriate sexual behavior, but were rejected by the
1199 caregiver.

1200 4. Notification to law enforcement. The risk to the



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1201 victim's safety and well-being cannot be reduced by the
1202 provision of services or the caregiver rejected services, and
1203 notification of the alleged delinquent act or violation of law
1204 to the appropriate law enforcement agency was initiated.

1205 5. Services accepted by victim. Services were offered to
1206 the victim and accepted by the caregiver.

1207 6. Report closed. Services were offered to the victim but
1208 were rejected by the caregiver.

1209 (3) If services have been accepted by the alleged abuser
1210 ~~juvenile sexual offender~~ or child who has exhibited
1211 inappropriate sexual behavior, the victim, and respective
1212 caregivers, the department shall designate a case manager and
1213 develop a specific case plan.

1214 (a) Upon receipt of the plan, the caregiver shall indicate
1215 its acceptance of the plan in writing.

1216 (b) The case manager shall periodically review the progress
1217 toward achieving the objectives of the plan in order to:

1218 1. Make adjustments to the plan or take additional action
1219 as provided in this part; or

1220 2. Terminate the case if indicated by successful or
1221 substantial achievement of the objectives of the plan.

1222 (4) Services provided to the alleged abuser ~~juvenile sexual~~
1223 ~~offender~~ or child who has exhibited inappropriate sexual
1224 behavior, the victim, and respective caregivers or family must
1225 be voluntary and of necessary duration.

1226 (5) If the family or caregiver of the alleged abuser
1227 ~~juvenile sexual offender~~ or child who has exhibited
1228 inappropriate sexual behavior fails to adequately participate or
1229 allow for the adequate participation of the child in the



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1230 services or treatment delineated in the case plan, the case
1231 manager may recommend that the department:

1232 (a) Close the case;

1233 (b) Refer the case to mediation or arbitration, if
1234 available; or

1235 (c) Notify the appropriate law enforcement agency of
1236 failure to comply.

1237 (6) At any time, as a result of additional information,
1238 findings of facts, or changing conditions, the department may
1239 pursue a child protective investigation as provided in this
1240 chapter.

1241 (7) The department may adopt ~~is authorized to develop~~ rules
1242 ~~and other policy directives necessary to~~ administer ~~implement~~
1243 ~~the provisions of~~ this section.

1244 Section 12. Paragraph (h) of subsection (8) and subsection
1245 (9) of section 39.402, Florida Statutes, are amended to read:

1246 39.402 Placement in a shelter.-

1247 (8)

1248 (h) The order for placement of a child in shelter care must
1249 identify the parties present at the hearing and must contain
1250 written findings:

1251 1. That placement in shelter care is necessary based on the
1252 criteria in subsections (1) and (2).

1253 2. That placement in shelter care is in the best interest
1254 of the child.

1255 3. That continuation of the child in the home is contrary
1256 to the welfare of the child because the home situation presents
1257 a substantial and immediate danger to the child's physical,
1258 mental, or emotional health or safety which cannot be mitigated



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1259 by the provision of preventive services.

1260 4. That based upon the allegations of the petition for
1261 placement in shelter care, there is probable cause to believe
1262 that the child is dependent or that the court needs additional
1263 time, which may not exceed 72 hours, in which to obtain and
1264 review documents pertaining to the family in order to
1265 appropriately determine the risk to the child.

1266 5. That the department has made reasonable efforts to
1267 prevent or eliminate the need for removal of the child from the
1268 home. A finding of reasonable effort by the department to
1269 prevent or eliminate the need for removal may be made and the
1270 department is deemed to have made reasonable efforts to prevent
1271 or eliminate the need for removal if:

1272 a. The first contact of the department with the family
1273 occurs during an emergency;

1274 b. The appraisal of the home situation by the department
1275 indicates that the home situation presents a substantial and
1276 immediate danger to the child's physical, mental, or emotional
1277 health or safety which cannot be mitigated by the provision of
1278 preventive services;

1279 c. The child cannot safely remain at home, either because
1280 there are no preventive services that can ensure the health and
1281 safety of the child or because, even with appropriate and
1282 available services being provided, the health and safety of the
1283 child cannot be ensured; or

1284 d. The parent or legal custodian is alleged to have
1285 committed any of the acts listed as grounds for expedited
1286 termination of parental rights in s. 39.806(1)(f)-(i).

1287 6. That the department has made reasonable efforts to keep



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1288 siblings together if they are removed and placed in out-of-home
1289 care unless such placement is not in the best interest of each
1290 child. Reasonable efforts shall prioritize placement with a
1291 substitute family, but may include short-term placement in a
1292 group home with the ability to accommodate sibling groups if
1293 such a placement is available and in the best interest of each
1294 child. The department shall report to the court its efforts to
1295 place siblings together unless the court finds that such
1296 placement is not in the best interest of a child or his or her
1297 sibling.

1298 ~~7.6.~~ That the court notified the parents, relatives that
1299 are providing out-of-home care for the child, or legal
1300 custodians of the time, date, and location of the next
1301 dependency hearing and of the importance of the active
1302 participation of the parents, relatives that are providing out-
1303 of-home care for the child, or legal custodians in all
1304 proceedings and hearings.

1305 ~~8.7.~~ That the court notified the parents or legal
1306 custodians of their right to counsel to represent them at the
1307 shelter hearing and at each subsequent hearing or proceeding,
1308 and the right of the parents to appointed counsel, pursuant to
1309 the procedures set forth in s. 39.013.

1310 ~~9.8.~~ That the court notified relatives who are providing
1311 out-of-home care for a child as a result of the shelter petition
1312 being granted that they have the right to attend all subsequent
1313 hearings, to submit reports to the court, and to speak to the
1314 court regarding the child, if they so desire.

1315 (9) (a) At any shelter hearing, the department shall provide
1316 to the court a recommendation for scheduled contact between the



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1317 child and parents, if appropriate. The court shall determine
1318 visitation rights absent a clear and convincing showing that
1319 visitation is not in the best interest of the child. Any order
1320 for visitation or other contact must conform to ~~the provisions~~
1321 ~~of~~ s. 39.0139. If visitation is ordered but will not commence
1322 within 72 hours of the shelter hearing, the department shall
1323 provide justification to the court.

1324 (b) If siblings who are removed from the home cannot be
1325 placed together, the department shall provide to the court a
1326 recommendation for frequent visitation or other ongoing
1327 interaction between the siblings unless this interaction would
1328 be contrary to a sibling's safety or well-being. If visitation
1329 among siblings is ordered but will not commence within 72 hours
1330 after the shelter hearing, the department shall provide
1331 justification to the court for the delay.

1332 Section 13. Paragraph (d) of subsection (3) of section
1333 39.501, Florida Statutes, is amended to read:

1334 39.501 Petition for dependency.-

1335 (3)

1336 (d) The petitioner must state in the petition, if known,
1337 whether:

1338 1. A parent or legal custodian named in the petition has
1339 previously unsuccessfully participated in voluntary services
1340 offered by the department;

1341 2. A parent or legal custodian named in the petition has
1342 participated in mediation and whether a mediation agreement
1343 exists;

1344 3. A parent or legal custodian has rejected the voluntary
1345 services offered by the department;



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1346 4. A parent or legal custodian named in the petition has
1347 not fully complied with a safety plan; or

1348 ~~5.4.~~ The department has determined that voluntary services
1349 are not appropriate for the parent or legal custodian and the
1350 reasons for such determination.

1351
1352 If the department is the petitioner, it shall provide all safety
1353 plans as defined in s. 39.01 involving the parent or legal
1354 custodian to the court.

1355 Section 14. Paragraph (a) of subsection (4) of section
1356 39.504, Florida Statutes, is amended to read:

1357 39.504 Injunction pending disposition of petition;
1358 penalty.—

1359 (4) If an injunction is issued under this section, the
1360 primary purpose of the injunction must be to protect and promote
1361 the best interests of the child, taking the preservation of the
1362 child's immediate family into consideration.

1363 (a) The injunction applies to the alleged or actual
1364 offender in a case of child abuse or acts of domestic violence.
1365 The conditions of the injunction shall be determined by the
1366 court, which may include ordering the alleged or actual offender
1367 to:

1368 1. Refrain from further abuse or acts of domestic violence.

1369 2. Participate in a specialized treatment program.

1370 3. Limit contact or communication with the child victim,
1371 other children in the home, or any other child.

1372 4. Refrain from contacting the child at home, school, work,
1373 or wherever the child may be found.

1374 5. Have limited or supervised visitation with the child.



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1375 6. Vacate the home in which the child resides.

1376 7. Comply with the terms of a safety plan implemented in
1377 the injunction pursuant to s. 39.301.

1378 Section 15. Section 39.5085, Florida Statutes, is amended
1379 to read:

1380 39.5085 Relative Caregiver Program.—

1381 (1) It is the intent of the Legislature in enacting this
1382 section to:

1383 (a) Provide for the establishment of procedures and
1384 protocols that serve to advance the continued safety of children
1385 by acknowledging the valued resource uniquely available through
1386 grandparents, ~~and~~ relatives of children, and specified
1387 nonrelatives of children pursuant to subparagraph (2)(a)3.

1388 (b) Recognize family relationships in which a grandparent
1389 or other relative is the head of a household that includes a
1390 child otherwise at risk of foster care placement.

1391 (c) Enhance family preservation and stability by
1392 recognizing that most children in such placements with
1393 grandparents and other relatives do not need intensive
1394 supervision of the placement by the courts or by the department.

1395 (d) Recognize that permanency in the best interests of the
1396 child can be achieved through a variety of permanency options,
1397 including permanent guardianship under s. 39.6221 if the
1398 guardian is a relative, by permanent placement with a fit and
1399 willing relative under s. 39.6231, by a relative, guardianship
1400 under chapter 744, or adoption, by providing additional
1401 placement options and incentives that will achieve permanency
1402 and stability for many children who are otherwise at risk of
1403 foster care placement because of abuse, abandonment, or neglect,



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1404 but who may successfully be able to be placed by the dependency
1405 court in the care of such relatives.

1406 (e) Reserve the limited casework and supervisory resources
1407 of the courts and the department for those cases in which
1408 children do not have the option for safe, stable care within the
1409 family.

1410 (f) Recognize that a child may have a close relationship
1411 with a person who is not a blood relative or a relative by
1412 marriage and that such person should be eligible for financial
1413 assistance under this section if he or she is able and willing
1414 to care for the child and provide a safe, stable home
1415 environment.

1416 (2) (a) The Department of Children and ~~Families~~ Family
1417 ~~Services~~ shall establish and operate the Relative Caregiver
1418 Program pursuant to eligibility guidelines established in this
1419 section as further implemented by rule of the department. The
1420 Relative Caregiver Program shall, within the limits of available
1421 funding, provide financial assistance to:

1422 1. Relatives who are within the fifth degree by blood or
1423 marriage to the parent or stepparent of a child and who are
1424 caring full-time for that dependent child in the role of
1425 substitute parent as a result of a court's determination of
1426 child abuse, neglect, or abandonment and subsequent placement
1427 with the relative under this chapter.

1428 2. Relatives who are within the fifth degree by blood or
1429 marriage to the parent or stepparent of a child and who are
1430 caring full-time for that dependent child, and a dependent half-
1431 brother or half-sister of that dependent child, in the role of
1432 substitute parent as a result of a court's determination of



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1433 child abuse, neglect, or abandonment and subsequent placement
1434 with the relative under this chapter.

1435 3. Nonrelatives who are willing to assume custody and care
1436 of a dependent child in the role of substitute parent as a
1437 result of a court's determination of child abuse, neglect, or
1438 abandonment and subsequent placement with the nonrelative
1439 caregiver under this chapter. The court must find that a
1440 proposed placement under this subparagraph is in the best
1441 interest of the child.

1442
1443 The placement may be court-ordered temporary legal custody to
1444 the relative or nonrelative under protective supervision of the
1445 department pursuant to s. 39.521(1)(b)3., or court-ordered
1446 placement in the home of a relative or nonrelative as a
1447 permanency option under s. 39.6221 or s. 39.6231 or under former
1448 s. 39.622 if the placement was made before July 1, 2006. The
1449 Relative Caregiver Program shall offer financial assistance to
1450 caregivers ~~who are relatives and~~ who would be unable to serve in
1451 that capacity without the ~~relative~~ caregiver payment because of
1452 financial burden, thus exposing the child to the trauma of
1453 placement in a shelter or in foster care.

1454 (b) Caregivers ~~who are relatives and~~ who receive assistance
1455 under this section must be capable, as determined by a home
1456 study, of providing a physically safe environment and a stable,
1457 supportive home for the children under their care, and must
1458 assure that the children's well-being is met, including, but not
1459 limited to, the provision of immunizations, education, and
1460 mental health services as needed.

1461 (c) Relatives or nonrelatives who qualify for and



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1462 participate in the Relative Caregiver Program are not required
1463 to meet foster care licensing requirements under s. 409.175.

1464 (d) Relatives or nonrelatives who are caring for children
1465 placed with them by the court pursuant to this chapter shall
1466 receive a special monthly ~~relative~~ caregiver benefit established
1467 by rule of the department. The amount of the special benefit
1468 payment shall be based on the child's age within a payment
1469 schedule established by rule of the department and subject to
1470 availability of funding. The statewide average monthly rate for
1471 children judicially placed with relatives or nonrelatives who
1472 are not licensed as foster homes may not exceed 82 percent of
1473 the statewide average foster care rate, and ~~nor may~~ the cost of
1474 providing the assistance described in this section to any
1475 ~~relative~~ caregiver may not exceed the cost of providing out-of-
1476 home care in emergency shelter or foster care.

1477 (e) Children receiving cash benefits under this section are
1478 not eligible to simultaneously receive WAGES cash benefits under
1479 chapter 414.

1480 (f) Within available funding, the Relative Caregiver
1481 Program shall provide ~~relative~~ caregivers with family support
1482 and preservation services, flexible funds in accordance with s.
1483 409.165, school readiness, and other available services in order
1484 to support the child's safety, growth, and healthy development.
1485 Children living with ~~relative~~ caregivers who are receiving
1486 assistance under this section shall be eligible for Medicaid
1487 coverage.

1488 (g) The department may use appropriate available state,
1489 federal, and private funds to operate the Relative Caregiver
1490 Program. The department may develop liaison functions to be



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1491 available to relatives or nonrelatives who care for children
1492 pursuant to this chapter to ensure placement stability in
1493 extended family settings.

1494 Section 16. Subsections (3) and (4) of section 39.604,
1495 Florida Statutes, are amended to read:

1496 39.604 Rilya Wilson Act; short title; legislative intent;
1497 requirements; attendance and reporting responsibilities.-

1498 (3) REQUIREMENTS.-A child from birth to the age of ~~who is~~
1499 ~~age 3 years to~~ school entry, under court-ordered ~~court ordered~~
1500 protective supervision or in the custody of the Family Safety
1501 Program Office of the Department of Children and Families ~~Family~~
1502 ~~Services~~ or a community-based lead agency, and enrolled in a
1503 licensed early education or child care program must attend ~~be~~
1504 ~~enrolled to participate in~~ the program 5 days a week.

1505 Notwithstanding ~~the requirements of~~ s. 39.202, the Department of
1506 Children and Families ~~Family Services~~ must notify operators of
1507 the licensed early education or child care program, subject to
1508 the reporting requirements of this act, of the enrollment of any
1509 child from birth to the age of ~~age 3 years to~~ school entry,
1510 under court-ordered ~~court ordered~~ protective supervision or in
1511 the custody of the Family Safety Program Office of the
1512 Department of Children and Families ~~Family Services~~ or a
1513 community-based lead agency. When a child is enrolled in an
1514 early education or child care program regulated by the
1515 department, the child's attendance in the program must be a
1516 required action in the safety plan or the case plan developed
1517 for ~~the~~ a child pursuant to this chapter ~~who is enrolled in a~~
1518 ~~licensed early education or child care program must contain the~~
1519 ~~participation in this program as a required action.~~ An exemption



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1520 to participating in the licensed early education or child care
1521 program 5 days a week may be granted by the court.

1522 (4) ATTENDANCE AND REPORTING REQUIREMENTS.—

1523 (a) A child enrolled in a licensed early education or child
1524 care program who meets the requirements of subsection (3) may
1525 not be withdrawn from the program without the prior written
1526 approval of the Family Safety Program Office of the Department
1527 of Children and Families ~~Family Services~~ or the community-based
1528 lead agency.

1529 (b)1. If a child covered by this section is absent from the
1530 program on a day when he or she is supposed to be present, the
1531 person with whom the child resides must report the absence to
1532 the program by the end of the business day. If the person with
1533 whom the child resides, whether the parent or caregiver, fails
1534 to timely report the absence, the absence is considered to be
1535 unexcused. The program shall report any unexcused absence or
1536 seven consecutive excused absences of a child who is enrolled in
1537 the program and covered by this act to the local designated
1538 staff of the Family Safety Program Office of the Department of
1539 Children and Families ~~Family Services~~ or the community-based
1540 lead agency by the end of the business day following the
1541 unexcused absence or seventh consecutive excused absence.

1542 2. The department or community-based lead agency shall
1543 conduct a site visit to the residence of the child upon
1544 receiving a report of two consecutive unexcused absences or
1545 seven consecutive excused absences.

1546 3. If the site visit results in a determination that the
1547 child is missing, the department or community-based lead agency
1548 shall report the child as missing to a law enforcement agency



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1549 and proceed with the necessary actions to locate the child
1550 pursuant to procedures for locating missing children.

1551 4. If the site visit results in a determination that the
1552 child is not missing, the parent or caregiver shall be notified
1553 that failure to ensure that the child attends the licensed early
1554 education or child care program is a violation of the safety
1555 plan or the case plan. If more than two site visits are
1556 conducted pursuant to this subsection, staff shall initiate
1557 action to notify the court of the parent or caregiver's
1558 noncompliance with the case plan.

1559 Section 17. Paragraph (c) of subsection (2) and paragraph
1560 (a) of subsection (3) of section 39.701, Florida Statutes, are
1561 amended to read:

1562 39.701 Judicial review.—

1563 (2) REVIEW HEARINGS FOR CHILDREN YOUNGER THAN 18 YEARS OF
1564 AGE.—

1565 (c) *Review determinations.*—The court and any citizen review
1566 panel shall take into consideration the information contained in
1567 the social services study and investigation and all medical,
1568 psychological, and educational records that support the terms of
1569 the case plan; testimony by the social services agency, the
1570 parent, the foster parent or legal custodian, the guardian ad
1571 litem or surrogate parent for educational decisionmaking if one
1572 has been appointed for the child, and any other person deemed
1573 appropriate; and any relevant and material evidence submitted to
1574 the court, including written and oral reports to the extent of
1575 their probative value. These reports and evidence may be
1576 received by the court in its effort to determine the action to
1577 be taken with regard to the child and may be relied upon to the



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1578 extent of their probative value, even though not competent in an
1579 adjudicatory hearing. In its deliberations, the court and any
1580 citizen review panel shall seek to determine:

1581 1. If the parent was advised of the right to receive
1582 assistance from any person or social service agency in the
1583 preparation of the case plan.

1584 2. If the parent has been advised of the right to have
1585 counsel present at the judicial review or citizen review
1586 hearings. If not so advised, the court or citizen review panel
1587 shall advise the parent of such right.

1588 3. If a guardian ad litem needs to be appointed for the
1589 child in a case in which a guardian ad litem has not previously
1590 been appointed or if there is a need to continue a guardian ad
1591 litem in a case in which a guardian ad litem has been appointed.

1592 4. Who holds the rights to make educational decisions for
1593 the child. If appropriate, the court may refer the child to the
1594 district school superintendent for appointment of a surrogate
1595 parent or may itself appoint a surrogate parent under the
1596 Individuals with Disabilities Education Act and s. 39.0016.

1597 5. The compliance or lack of compliance of all parties with
1598 applicable items of the case plan, including the parents'
1599 compliance with child support orders.

1600 6. The compliance or lack of compliance with a visitation
1601 contract between the parent and the social service agency for
1602 contact with the child, including the frequency, duration, and
1603 results of the parent-child visitation and the reason for any
1604 noncompliance.

1605 7. The frequency, kind, and duration of contacts among
1606 siblings who have been separated during placement, as well as



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1607 any efforts undertaken to reunite separated siblings if doing so
1608 is in the best interest of the child.

1609 ~~8.7.~~ The compliance or lack of compliance of the parent in
1610 meeting specified financial obligations pertaining to the care
1611 of the child, including the reason for failure to comply, if
1612 applicable such is the case.

1613 ~~9.8.~~ Whether the child is receiving safe and proper care
1614 according to s. 39.6012, including, but not limited to, the
1615 appropriateness of the child's current placement, including
1616 whether the child is in a setting that is as family-like and as
1617 close to the parent's home as possible, consistent with the
1618 child's best interests and special needs, and including
1619 maintaining stability in the child's educational placement, as
1620 documented by assurances from the community-based care provider
1621 that:

1622 a. The placement of the child takes into account the
1623 appropriateness of the current educational setting and the
1624 proximity to the school in which the child is enrolled at the
1625 time of placement.

1626 b. The community-based care agency has coordinated with
1627 appropriate local educational agencies to ensure that the child
1628 remains in the school in which the child is enrolled at the time
1629 of placement.

1630 ~~10.9.~~ A projected date likely for the child's return home
1631 or other permanent placement.

1632 ~~11.10.~~ When appropriate, the basis for the unwillingness or
1633 inability of the parent to become a party to a case plan. The
1634 court and the citizen review panel shall determine if the
1635 efforts of the social service agency to secure party



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1636 participation in a case plan were sufficient.

1637 ~~12.11.~~ For a child who has reached 13 years of age but is
1638 not yet 18 years of age, the adequacy of the child's preparation
1639 for adulthood and independent living.

1640 ~~13.12.~~ If amendments to the case plan are required.

1641 Amendments to the case plan must be made under s. 39.6013.

1642 (3) REVIEW HEARINGS FOR CHILDREN 17 YEARS OF AGE.—

1643 (a) In addition to the review and report required under
1644 paragraphs (1)(a) and (2)(a), respectively, the court shall hold
1645 a judicial review hearing within 90 days after a child's 17th
1646 birthday. The court shall also issue an order, separate from the
1647 order on judicial review, that the disability of nonage of the
1648 child has been removed pursuant to ss. 743.044, 743.045, and
1649 743.046, and for any of these disabilities that the court finds
1650 is in the child's best interest to remove. The court ~~s. 743.045~~
1651 ~~and~~ shall continue to hold timely judicial review hearings. If
1652 necessary, the court may review the status of the child more
1653 frequently during the year before the child's 18th birthday. At
1654 each review hearing held under this subsection, in addition to
1655 any information or report provided to the court by the foster
1656 parent, legal custodian, or guardian ad litem, the child shall
1657 be given the opportunity to address the court with any
1658 information relevant to the child's best interest, particularly
1659 in relation to independent living transition services. The
1660 department shall include in the social study report for judicial
1661 review written verification that the child has:

1662 1. A current Medicaid card and all necessary information
1663 concerning the Medicaid program sufficient to prepare the child
1664 to apply for coverage upon reaching the age of 18, if such



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1665 application is appropriate.

1666 2. A certified copy of the child's birth certificate and,
1667 if the child does not have a valid driver license, a Florida
1668 identification card issued under s. 322.051.

1669 3. A social security card and information relating to
1670 social security insurance benefits if the child is eligible for
1671 those benefits. If the child has received such benefits and they
1672 are being held in trust for the child, a full accounting of
1673 these funds must be provided and the child must be informed as
1674 to how to access those funds.

1675 4. All relevant information related to the Road-to-
1676 Independence Program, including, but not limited to, eligibility
1677 requirements, information on participation, and assistance in
1678 gaining admission to the program. If the child is eligible for
1679 the Road-to-Independence Program, he or she must be advised that
1680 he or she may continue to reside with the licensed family home
1681 or group care provider with whom the child was residing at the
1682 time the child attained his or her 18th birthday, in another
1683 licensed family home, or with a group care provider arranged by
1684 the department.

1685 5. An open bank account or the identification necessary to
1686 open a bank account and to acquire essential banking and
1687 budgeting skills.

1688 6. Information on public assistance and how to apply for
1689 public assistance.

1690 7. A clear understanding of where he or she will be living
1691 on his or her 18th birthday, how living expenses will be paid,
1692 and the educational program or school in which he or she will be
1693 enrolled.



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1694 8. Information related to the ability of the child to
1695 remain in care until he or she reaches 21 years of age under s.
1696 39.013.

1697 9. A letter providing the dates that the child is under the
1698 jurisdiction of the court.

1699 10. A letter stating that the child is in compliance with
1700 financial aid documentation requirements.

1701 11. The child's educational records.

1702 12. The child's entire health and mental health records.

1703 13. The process for accessing his or her case file.

1704 14. A statement encouraging the child to attend all
1705 judicial review hearings occurring after the child's 17th
1706 birthday.

1707 Section 18. Subsection (2) of section 39.802, Florida
1708 Statutes, is amended to read:

1709 39.802 Petition for termination of parental rights; filing;
1710 elements.-

1711 (2) The form of the petition is governed by the Florida
1712 Rules of Juvenile Procedure. The petition must be in writing and
1713 signed by the petitioner ~~or, if the department is the~~
1714 ~~petitioner, by an employee of the department,~~ under oath stating
1715 the petitioner's good faith in filing the petition.

1716 Section 19. Paragraphs (e), (f), and (h) of subsection (1)
1717 of section 39.806, Florida Statutes, are amended, and paragraph
1718 (n) is added to that subsection, to read:

1719 39.806 Grounds for termination of parental rights.-

1720 (1) Grounds for the termination of parental rights may be
1721 established under any of the following circumstances:

1722 (e) When a child has been adjudicated dependent, a case



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1723 plan has been filed with the court, and:

1724 1. The child continues to be abused, neglected, or
1725 abandoned by the parent or parents. The failure of the parent or
1726 parents to substantially comply with the case plan for a period
1727 of 12 months after an adjudication of the child as a dependent
1728 child or the child's placement into shelter care, whichever
1729 occurs first, constitutes evidence of continuing abuse, neglect,
1730 or abandonment unless the failure to substantially comply with
1731 the case plan was due to the parent's lack of financial
1732 resources or to the failure of the department to make reasonable
1733 efforts to reunify the parent and child. The 12-month period
1734 begins to run only after the child's placement into shelter care
1735 or the entry of a disposition order placing the custody of the
1736 child with the department or a person other than the parent and
1737 the court's approval of a case plan having the goal of
1738 reunification with the parent, whichever occurs first; or

1739 2. The parent or parents have materially breached the case
1740 plan. Time is of the essence for permanency of children in the
1741 dependency system. In order to prove the parent or parents have
1742 materially breached the case plan, the court must find by clear
1743 and convincing evidence that the parent or parents are unlikely
1744 or unable to substantially comply with the case plan before time
1745 to comply with the case plan expires.

1746 3. The child has been in care for any 12 of the last 22
1747 months and the parents have not substantially complied with the
1748 case plan so as to permit reunification under s. 39.522(2)
1749 unless the failure to substantially comply with the case plan
1750 was due to the parent's lack of financial resources or to the
1751 failure of the department to make reasonable efforts to reunify



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1752 the parent and child.

1753 (f) The parent or parents engaged in egregious conduct or
1754 had the opportunity and capability to prevent and knowingly
1755 failed to prevent egregious conduct that threatens the life,
1756 safety, or physical, mental, or emotional health of the child or
1757 the child's sibling. Proof of a nexus between egregious conduct
1758 to a child and the potential harm to the child's sibling is not
1759 required.

1760 1. As used in this subsection, the term "sibling" means
1761 another child who resides with or is cared for by the parent or
1762 parents regardless of whether the child is related legally or by
1763 consanguinity.

1764 2. As used in this subsection, the term "egregious conduct"
1765 means abuse, abandonment, neglect, or any other conduct that is
1766 deplorable, flagrant, or outrageous by a normal standard of
1767 conduct. Egregious conduct may include an act or omission that
1768 occurred only once but was of such intensity, magnitude, or
1769 severity as to endanger the life of the child.

1770 (h) The parent or parents have committed the murder,
1771 manslaughter, aiding or abetting the murder, or conspiracy or
1772 solicitation to murder the other parent or another child, or a
1773 felony battery that resulted in serious bodily injury to the
1774 child or to another child. Proof of a nexus between the murder,
1775 manslaughter, aiding or abetting the murder, or conspiracy or
1776 solicitation to murder the other parent or another child, or a
1777 felony battery to a child and the potential harm to a child or
1778 another child is not required.

1779 (n) The parent is convicted of an offense that requires the
1780 parent to register as a sexual predator under s. 775.21.



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1781 Section 20. Paragraph (g) of subsection (1) and subsection
1782 (8) of section 63.212, Florida Statutes, are amended to read:

1783 63.212 Prohibited acts; penalties for violation.—

1784 (1) It is unlawful for any person:

1785 (g) Except an adoption entity, to place an advertisement
1786 ~~advertise~~ or offer to the public, in any way, by any medium
1787 whatever that a minor is available for adoption or that a minor
1788 is sought for adoption; and, further, it is unlawful for any
1789 person purchasing advertising space or purchasing broadcast time
1790 to advertise adoption services to fail to include in any
1791 publication ~~publish~~ or fail to include in the broadcast for any
1792 such advertisement ~~the or assist an unlicensed person or entity~~
1793 in publishing or broadcasting any such advertisement without
1794 including a Florida license number of the adoption entity agency
1795 or the Florida Bar number of the attorney placing the
1796 advertisement.

1797 1. Only a person who is an attorney licensed to practice
1798 law in this state or an adoption entity licensed under the laws
1799 of this state may place a paid advertisement or paid listing of
1800 the person's telephone number, on the person's own behalf, in a
1801 telephone directory that:

- 1802 a. A child is offered or wanted for adoption; or
1803 b. The person is able to place, locate, or receive a child
1804 for adoption.

1805 2. A person who publishes a telephone directory that is
1806 distributed in this state:

- 1807 ~~a.~~ shall include, at the beginning of any classified
1808 heading for adoption and adoption services, a statement that
1809 informs directory users that only attorneys licensed to practice



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1810 law in this state and licensed adoption entities may legally
1811 provide adoption services under state law.

1812 ~~3.b.~~ A person who places ~~may publish~~ an advertisement
1813 described in subparagraph 1. in a ~~the~~ telephone directory must
1814 include ~~only if the advertisement contains~~ the following
1815 information:

1816 a.~~(I)~~ For an attorney licensed to practice law in this
1817 state, the person's Florida Bar number.

1818 b.~~(II)~~ For a child-placing ~~child-placing~~ agency licensed
1819 under the laws of this state, the number on the person's
1820 adoption entity license.

1821 (8) Unless otherwise indicated, a person who willfully and
1822 with criminal intent violates any provision of this section,
1823 excluding paragraph (1)(g), commits a felony of the third
1824 degree, punishable as provided in s. 775.082, s. 775.083, or s.
1825 775.084. A person who willfully and with criminal intent
1826 violates paragraph (1)(g) commits a misdemeanor of the second
1827 degree, punishable as provided in s. 775.083; and each day of
1828 continuing violation shall be considered a separate offense. ~~In~~
1829 ~~addition, any person who knowingly publishes or assists with the~~
1830 ~~publication of any advertisement or other publication which~~
1831 ~~violates the requirements of paragraph (1)(g) commits a~~
1832 ~~misdemeanor of the second degree, punishable as provided in s.~~
1833 ~~775.083, and may be required to pay a fine of up to \$150 per day~~
1834 ~~for each day of continuing violation.~~

1835 Section 21. Subsection (1), paragraph (b) of subsection
1836 (2), and paragraph (c) of subsection (3) of section 383.402,
1837 Florida Statutes, are amended to read:

1838 383.402 Child abuse death review; State Child Abuse Death



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1839 Review Committee; local child abuse death review committees.-

1840 (1) It is the intent of the Legislature to establish a
1841 statewide multidisciplinary, multiagency child abuse death
1842 assessment and prevention system that consists of state and
1843 local review committees. The state and local review committees
1844 shall review the facts and circumstances of all deaths of
1845 children from birth through age 18 which occur in this state and
1846 are reported to the central abuse hotline of the Department of
1847 Children and Families ~~as the result of verified child abuse or~~
1848 ~~neglect~~. The purpose of the review shall be to:

1849 (a) Achieve a greater understanding of the causes and
1850 contributing factors of deaths resulting from child abuse.

1851 (b) Whenever possible, develop a communitywide approach to
1852 address such cases and contributing factors.

1853 (c) Identify any gaps, deficiencies, or problems in the
1854 delivery of services to children and their families by public
1855 and private agencies which may be related to deaths that are the
1856 result of child abuse.

1857 (d) Make and implement recommendations for changes in law,
1858 rules, and policies, as well as develop practice standards that
1859 support the safe and healthy development of children and reduce
1860 preventable child abuse deaths.

1861 (2)

1862 (b) In addition, the State Surgeon General shall appoint
1863 the following members to the state committee, based on
1864 recommendations from the Department of Health and the agencies
1865 listed in paragraph (a), and ensuring that the committee
1866 represents the regional, gender, and ethnic diversity of the
1867 state to the greatest extent possible:



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- 1868 1. A board-certified pediatrician.
- 1869 2. A public health nurse.
- 1870 3. A mental health professional who treats children or
1871 adolescents.
- 1872 4. An employee of the Department of Children and Families
1873 ~~Family Services~~ who supervises family services counselors and
1874 who has at least 5 years of experience in child protective
1875 investigations.
- 1876 5. The medical director of a child protection team.
- 1877 6. A member of a child advocacy organization.
- 1878 7. A social worker who has experience in working with
1879 victims and perpetrators of child abuse.
- 1880 8. A person trained as a paraprofessional in patient
1881 resources who is employed in a child abuse prevention program.
- 1882 9. A law enforcement officer who has at least 5 years of
1883 experience in children's issues.
- 1884 10. A representative of the Florida Coalition Against
1885 Domestic Violence.
- 1886 11. A representative from a private provider of programs on
1887 preventing child abuse and neglect.
- 1888 (3) The State Child Abuse Death Review Committee shall:
- 1889 (c) Prepare an annual statistical report on the incidence
1890 and causes of death resulting from reported child abuse in the
1891 state during the prior calendar year. The state committee shall
1892 submit a copy of the report by October 1 ~~December 31~~ of each
1893 year to the Governor, the President of the Senate, and the
1894 Speaker of the House of Representatives. The report must include
1895 recommendations to the Department of Children and Families
1896 regarding ~~for state and local action, including specific policy~~



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1897 and procedural changes to the child protection and child
1898 welfare system and regulatory or statutory changes, and any
1899 other recommended preventive action.

1900 Section 22. Subsection (5) of section 402.40, Florida
1901 Statutes, is amended, and paragraph (g) is added to subsection
1902 (3) of that section, to read:

1903 402.40 Child welfare training and certification.—

1904 (3) THIRD-PARTY CREDENTIALING ENTITIES.—The department
1905 shall approve one or more third-party credentialing entities for
1906 the purpose of developing and administering child welfare
1907 certification programs for persons who provide child welfare
1908 services. A third-party credentialing entity shall request such
1909 approval in writing from the department. In order to obtain
1910 approval, the third-party credentialing entity must:

1911 (g) Maintain an advisory committee, including
1912 representatives from each region of the department, each
1913 sheriff's office providing child protective services, and each
1914 community-based care lead agency, who shall be appointed by the
1915 organization they represent. The third-party credentialing
1916 entity may appoint additional members to the advisory committee.

1917 (5) CORE COMPETENCIES AND SPECIALIZATIONS.—

1918 (a) The Department of Children and Families ~~Family Services~~
1919 shall approve the core competencies and related preservice
1920 curricula that ensures that each person delivering child welfare
1921 services obtains the knowledge, skills, and abilities to
1922 competently carry out his or her work responsibilities.

1923 (b) The identification of these core competencies and
1924 development of preservice curricula shall be a collaborative
1925 effort that includes professionals who have expertise in child



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1926 welfare services, department-approved third-party credentialing
1927 entities, and providers that will be affected by the curriculum,
1928 including, but not limited to, representatives from the
1929 community-based care lead agencies, the Florida Coalition
1930 Against Domestic Violence, the Florida Alcohol and Drug Abuse
1931 Association, the Florida Council for Community Mental Health,
1932 sheriffs' offices conducting child protection investigations,
1933 and child welfare legal services providers.

1934 (c) Community-based care agencies, sheriffs' offices, and
1935 the department may contract for the delivery of preservice and
1936 any additional training for persons delivering child welfare
1937 services if the curriculum satisfies the department-approved
1938 core competencies.

1939 (d) The department may also approve certifications
1940 involving specializations in serving specific populations or in
1941 skills relevant to child protection to be awarded to persons
1942 delivering child welfare services by a third-party credentialing
1943 entity approved pursuant to subsection (3).

1944 (e) ~~(d)~~ Department-approved credentialing entities shall,
1945 for a period of at least 12 months after implementation of the
1946 third-party child welfare certification programs, grant
1947 reciprocity and award a child welfare certification to
1948 individuals who hold current department-issued child welfare
1949 certification in good standing, at no cost to the department or
1950 the certificateholder.

1951 Section 23. Section 402.402, Florida Statutes, is created
1952 to read:

1953 402.402 Child protection and child welfare personnel;
1954 attorneys employed by the department.-



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1955 (1) DEFINITIONS.—As used in this section, the term:
1956 (a) "Child protection and child welfare personnel" includes
1957 child protective investigators and child protective
1958 investigation supervisors employed by the department and case
1959 managers and case manager supervisors employed by a community-
1960 based care lead agency or a subcontractor of a community-based
1961 care lead agency.
1962 (b) "Human services-related field" means psychology,
1963 sociology, counseling, special education, human development,
1964 child development, family development, marriage and family
1965 therapy, and nursing.
1966 (2) CHILD PROTECTIVE INVESTIGATION PROFESSIONAL STAFF
1967 REQUIREMENTS.—The department is responsible for recruitment of
1968 qualified professional staff to serve as child protective
1969 investigators and child protective investigation supervisors.
1970 The department shall make every effort to recruit and hire
1971 persons qualified by their education and experience to perform
1972 social work functions. The department's efforts shall be guided
1973 by the goal that by July 1, 2019, at least half of all child
1974 protective investigators and supervisors will have a bachelor's
1975 degree or a master's degree in social work from a college or
1976 university social work program accredited by the Council on
1977 Social Work Education. The department, in collaboration with the
1978 lead agencies, subcontracted provider organizations, and other
1979 partners in the child welfare system, shall develop a protocol
1980 for screening candidates for child protective positions which
1981 reflects the preferences specified in paragraphs (a)-(f). The
1982 following persons shall be given preference in the recruitment
1983 of qualified professional staff, but the preferences serve only



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1984 as guidance and do not limit the department's discretion to
1985 select the best available candidates:

1986 (a) Child protective investigators with bachelor's degrees
1987 in social work and child protective investigation supervisors
1988 with master's degrees in social work from a college or
1989 university social work program accredited by the Council on
1990 Social Work Education.

1991 (b) Child protective investigators and supervisors with
1992 baccalaureate or master's degrees in a human service-related
1993 field such as counseling, sociology, special education, human
1994 development, child development, family development, marriage and
1995 family therapy, and nursing.

1996 (c) Child protective investigators and supervisors with
1997 work experience demonstrating critical thinking skills, formal
1998 assessment processes, communication skills, problem solving, and
1999 empathy.

2000 (d) Child protective investigators and supervisors with a
2001 combination of work and volunteer experience in public service
2002 fields, especially those related to children's services.

2003 (e) Child protective investigators and supervisors with a
2004 commitment to helping children and families, a capacity to work
2005 as part of a team, and an interest in continuous development of
2006 skills and knowledge.

2007 (f) Child protective investigators and supervisors with
2008 personal strength and resilience to manage competing demands and
2009 handle workplace stresses.

2010 (3) REPORT.—By each October 1, the department shall submit
2011 a report on the educational qualifications, turnover, and
2012 working conditions of the child protective investigators and



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2013 supervisors to the Governor, the President of the Senate, and
2014 the Speaker of the House of Representatives.

2015 (4) ATTORNEYS EMPLOYED BY THE DEPARTMENT TO HANDLE CHILD
2016 WELFARE CASES.—Attorneys hired on or after July 1, 2014, whose
2017 primary responsibility is representing the department in child
2018 welfare cases shall, within the first 6 months of employment,
2019 receive training in:

2020 (a) The dependency court process, including the attorney's
2021 role in preparing and reviewing documents prepared for
2022 dependency court for accuracy and completeness;

2023 (b) Preparing and presenting child welfare cases, including
2024 at least 1 week shadowing an experienced children's legal
2025 services attorney preparing and presenting cases;

2026 (c) Safety assessment, safety decisionmaking tools, and
2027 safety plans;

2028 (d) Developing information presented by investigators and
2029 case managers to support decisionmaking in the best interest of
2030 children; and

2031 (e) The experiences and techniques of case managers and
2032 investigators, including shadowing an experienced child
2033 protective investigator and an experienced case manager for at
2034 least 8 hours.

2035 Section 24. Section 402.403, Florida Statutes, is created
2036 to read:

2037 402.403 Child Protection and Child Welfare Personnel
2038 Tuition Exemption Program.—

2039 (1) There is established within the department the Child
2040 Protection and Child Welfare Personnel Tuition Exemption Program
2041 for the purpose of recruiting and retaining high-performing



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2042 individuals who are employed as child protection and child
2043 welfare personnel as defined in s. 402.402 and who do not
2044 possess a master's degree in social work or a certificate in an
2045 area related to child welfare.

2046 (2) Child protection and child welfare personnel who meet
2047 the requirements specified in subsection (3) are exempt from the
2048 payment of tuition and fees at a state university.

2049 (3) The department may approve child protection and child
2050 welfare personnel for the tuition and fee exemption if such
2051 personnel:

2052 (a) Are employed as child protection and child welfare
2053 personnel and are determined by their employers to perform at a
2054 high level as established by their personnel evaluations; and

2055 (b) Are accepted in a graduate-level social work program or
2056 a certificate program related to child welfare which is
2057 accredited by the Council on Social Work Education.

2058 (4) Child protection and child welfare personnel who meet
2059 the requirements specified in subsection (3) may enroll for up
2060 to 6 credit hours of courses per term.

2061 (5) Child protection and child welfare personnel who are
2062 accepted into a graduate-level social work program or a
2063 certificate program related to child welfare which is accredited
2064 by the Council on Social Work Education shall take courses
2065 associated with the degree or certificate program online if such
2066 courses are offered online.

2067 (6) All child protection and child welfare personnel who
2068 participate in the tuition exemption program established under
2069 this section must remain employed by the department, a state
2070 agency, or a contracted provider for 5 years after completion of



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2071 a graduate level social work program. If employment ends before
2072 the 5-year period, the benefit shall be repaid according to a
2073 pro rata calculation based on the number of years of service.

2074 Section 26. Section 409.165, Florida Statutes, is amended
2075 to read:

2076 409.165 Alternate care for children.—

2077 (1) Within funds appropriated, the department shall
2078 establish and supervise a program of emergency shelters, runaway
2079 shelters, foster homes, group homes, agency-operated group
2080 treatment homes, nonpsychiatric residential group care
2081 facilities, psychiatric residential treatment facilities, and
2082 other appropriate facilities to provide shelter and care for
2083 dependent children who must be placed away from their families.
2084 The department, in accordance with outcome ~~established~~ goals
2085 established in s. 409.986, shall contract for the provision of
2086 such shelter and care by counties, municipalities, nonprofit
2087 corporations, and other entities capable of providing needed
2088 services if:

2089 (a) The services ~~se~~ provided comply with all department
2090 standards, policies, and procedures are available;

2091 (b) The services can be ~~se~~ provided at a reasonable cost
2092 ~~are more cost-effective than those provided by the department;~~
2093 and

2094 (c) Unless otherwise provided by law, such providers of
2095 shelter and care are licensed by the department.

2096
2097 ~~It is the legislative intent that the~~

2098 (2) Funds appropriated for the alternate care of children
2099 as described in this section may be used to meet the needs of



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2100 children in their own homes or those of relatives if the
2101 children can be safely served in such settings ~~their own homes,~~
2102 ~~or the homes of relatives,~~ and the expenditure of funds in such
2103 manner is equal to or less than the cost of out-of-home
2104 placement ~~calculated by the department to be an eventual cost~~
2105 ~~savings over placement of children.~~

2106 (3) ~~(2)~~ The department shall ~~may~~ cooperate with all child
2107 service institutions or agencies within the state which meet the
2108 department's standards in order to maintain a comprehensive,
2109 coordinated, and inclusive system for promoting and protecting
2110 the well-being of children, consistent with the goals
2111 established in s. 409.986 ~~rules for proper care and supervision~~
2112 ~~prescribed by the department for the well-being of children.~~

2113 (a) The department shall work with the Department of Health
2114 in the development, use, and monitoring of medical foster homes
2115 for medically complex children.

2116 (b) The department shall collaborate with all relevant
2117 state and local agencies to provide such supports and services
2118 as may be necessary to maintain medically complex children in
2119 the least restrictive and most nurturing environment.

2120 (4) ~~(3)~~ With the written consent of parents, custodians, or
2121 guardians, or in accordance with those provisions in chapter 39
2122 that relate to dependent children, the department, under rules
2123 properly adopted, may place a child:

2124 (a) With a relative;

2125 (b) With an adult nonrelative approved by the court for
2126 long-term custody;

2127 (c) With a person who is considering the adoption of a
2128 child in the manner provided for by law;



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2129 (d) When limited, except as provided in paragraph (b), to
2130 temporary emergency situations, with a responsible adult
2131 approved by the court;

2132 (e) With a person or family licensed by the department and
2133 approved by the Department of Health to serve as a medical
2134 foster home;

2135 (f) ~~(e)~~ With a person or agency licensed by the department
2136 in accordance with s. 409.175; or

2137 (g) ~~(f)~~ In a subsidized independent living situation,
2138 subject to the provisions of s. 409.1451(4) (c),

2139
2140 under such conditions as are determined to be for the best
2141 interests or the welfare of the child. Any child placed in an
2142 institution or in a family home by the department or its agency
2143 may be removed by the department or its agency, and such other
2144 disposition may be made as is for the best interest of the
2145 child, including transfer of the child to another institution,
2146 another home, or the home of the child. Expenditure of funds
2147 appropriated for out-of-home care can be used to meet the needs
2148 of a child in the child's own home or the home of a relative if
2149 the child can be safely served in the child's own home or that
2150 of a relative if placement can be avoided by the expenditure of
2151 such funds, and if the expenditure of such funds in this manner
2152 is equal to or less than the cost of out-of-home placement
2153 ~~calculated by the department to be a potential cost savings.~~

2154 Section 6. Paragraphs (b), (d), (h), and (i) of subsection
2155 (6) of section 409.175, Florida Statutes, are amended to read:

2156 409.175 Licensure of family foster homes, residential
2157 child-caring agencies, and child-placing agencies; public



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2158 records exemption.-

2159 (6)

2160 (b) Upon application, the department shall conduct a
2161 licensing study based on its licensing rules; shall inspect the
2162 home or the agency and the records, including financial records,
2163 of the agency; and shall interview the applicant. The department
2164 may authorize a licensed child-placing agency to conduct the
2165 licensing study of a family foster home to be used exclusively
2166 by that agency and to verify to the department that the home
2167 meets the licensing requirements established by the department.
2168 Upon certification by a licensed child-placing agency that a
2169 family foster home meets the licensing requirements and
2170 receiving a letter from the community based care lead agency in
2171 the service area where the home will be licensed indicating the
2172 family foster home meets the criteria created by the lead
2173 agency, the department shall issue the license. A letter from
2174 the lead agency is not required if the lead agency where the
2175 proposed home is located is directly supervising foster homes in
2176 the same service area.

2177 (d)1. The department may pursue other remedies provided in
2178 this section in addition to denial or revocation of a license
2179 for failure to comply with the screening requirements. The
2180 disciplinary actions determination to be made by the department
2181 and the procedure for hearing for applicants and licensees shall
2182 be in accordance with chapter 120.

2183 2. When the department has reasonable cause to believe that
2184 grounds for denial or termination of employment exist, it shall
2185 notify, in writing, the applicant, licensee, or summer or
2186 recreation camp, and the personnel affected, stating the



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2187 specific record which indicates noncompliance with the screening
2188 requirements.

2189 3. Procedures established for hearing under chapter 120
2190 shall be available to the applicant, licensee, summer day camp,
2191 or summer 24-hour camp, and affected personnel, in order to
2192 present evidence relating either to the accuracy of the basis
2193 for exclusion or to the denial of an exemption from
2194 disqualification. Such procedures may also be used to challenge
2195 a decision by a community-based care lead agency's refusal to
2196 issue a letter supporting an application for licensure. If the
2197 challenge is to the actions of the community-based care lead
2198 agency, the respondent to the challenge will be the lead agency
2199 and the department shall be notified of the proceedings.

2200 4. Refusal on the part of an applicant to dismiss personnel
2201 who have been found not to be in compliance with the
2202 requirements for good moral character of personnel shall result
2203 in automatic denial or revocation of license in addition to any
2204 other remedies provided in this section which may be pursued by
2205 the department.

2206 (h) Upon determination that the applicant meets the state
2207 minimum licensing requirements and has obtained a letter from a
2208 community-based care lead agency indicating the family foster
2209 home meets criteria created by the lead agency, the department
2210 shall issue a license without charge to a specific person or
2211 agency at a specific location. A license may be issued if all
2212 the screening materials have been timely submitted; however, a
2213 license may not be issued or renewed if any person at the home
2214 or agency has failed the required screening. The license is
2215 nontransferable. A copy of the license shall be displayed in a



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2216 conspicuous place. Except as provided in paragraph (j), the
2217 license is valid for 1 year from the date of issuance, unless
2218 the license is suspended or revoked by the department or is
2219 voluntarily surrendered by the licensee. The license is the
2220 property of the department.

2221 (i) The issuance of a license to operate a family foster
2222 home or agency does not require any lead agency to place a child
2223 with the home or agency. A license issued for the operation of a
2224 family foster home or agency, unless sooner suspended, revoked,
2225 or voluntarily returned, will expire automatically 1 year from
2226 the date of issuance except as provided in paragraph (j). Ninety
2227 days prior to the expiration date, an application for renewal
2228 shall be submitted to the department by a licensee who wishes to
2229 have the license renewed. A license shall be renewed upon the
2230 filing of an application on forms furnished by the department if
2231 the applicant has first met the requirements established under
2232 this section and the rules promulgated hereunder.

2233 Section 27. Paragraph (c) of subsection (2) of section
2234 409.967, Florida Statutes, is amended to read:

2235 409.967 Managed care plan accountability.—

2236 (2) The agency shall establish such contract requirements
2237 as are necessary for the operation of the statewide managed care
2238 program. In addition to any other provisions the agency may deem
2239 necessary, the contract must require:

2240 (c) Access.—

2241 1. The agency shall establish specific standards for the
2242 number, type, and regional distribution of providers in managed
2243 care plan networks to ensure access to care for both adults and
2244 children. Each plan must maintain a regionwide network of



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2245 providers in sufficient numbers to meet the access standards for
2246 specific medical services for all recipients enrolled in the
2247 plan. The exclusive use of mail-order pharmacies may not be
2248 sufficient to meet network access standards. Consistent with the
2249 standards established by the agency, provider networks may
2250 include providers located outside the region. A plan may
2251 contract with a new hospital facility before the date the
2252 hospital becomes operational if the hospital has commenced
2253 construction, will be licensed and operational by January 1,
2254 2013, and a final order has issued in any civil or
2255 administrative challenge. Each plan shall establish and maintain
2256 an accurate and complete electronic database of contracted
2257 providers, including information about licensure or
2258 registration, locations and hours of operation, specialty
2259 credentials and other certifications, specific performance
2260 indicators, and such other information as the agency deems
2261 necessary. The database must be available online to both the
2262 agency and the public and have the capability to compare the
2263 availability of providers to network adequacy standards and to
2264 accept and display feedback from each provider's patients. Each
2265 plan shall submit quarterly reports to the agency identifying
2266 the number of enrollees assigned to each primary care provider.

2267 2. Each managed care plan must publish any prescribed drug
2268 formulary or preferred drug list on the plan's website in a
2269 manner that is accessible to and searchable by enrollees and
2270 providers. The plan must update the list within 24 hours after
2271 making a change. Each plan must ensure that the prior
2272 authorization process for prescribed drugs is readily accessible
2273 to health care providers, including posting appropriate contact



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2274 information on its website and providing timely responses to
2275 providers. For Medicaid recipients diagnosed with hemophilia who
2276 have been prescribed anti-hemophilic-factor replacement
2277 products, the agency shall provide for those products and
2278 hemophilia overlay services through the agency's hemophilia
2279 disease management program.

2280 3. Managed care plans, and their fiscal agents or
2281 intermediaries, must accept prior authorization requests for any
2282 service electronically.

2283 4. Managed care plans serving children in the care and
2284 custody of the Department of Children and Families or serving
2285 parents of such children must maintain complete medical, dental,
2286 and behavioral health information and provide such information
2287 to the department for inclusion in the state's child welfare
2288 data system. Using such documentation, the agency and the
2289 department shall determine the plan's compliance with standards
2290 for access to medical, dental, and behavioral health services;
2291 the use of psychotropic medications; and followup on all
2292 medically necessary services recommended as a result of early
2293 and periodic screening, diagnosis, and treatment.

2294 Section 28. Paragraph (f) is added to subsection (2) of
2295 section 409.972, Florida Statutes, to read:

2296 409.972 Mandatory and voluntary enrollment.—

2297 (2) The following Medicaid-eligible persons are exempt from
2298 mandatory managed care enrollment required by s. 409.965, and
2299 may voluntarily choose to participate in the managed medical
2300 assistance program:

2301 (f) Medicaid recipients residing in a group home facility
2302 licensed under chapter 393.



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2303 Section 29. The Division of Law Revision and Information is
2304 directed to create part V of chapter 409, Florida Statutes,
2305 consisting of ss. 409.986-409.997, to be entitled "Community-
2306 based Child Welfare."

2307 Section 30. Section 409.986, Florida Statutes, is created
2308 to read:

2309 409.986 Legislative findings and intent; child protection
2310 and child welfare outcomes; definitions.-

2311 (1) LEGISLATIVE FINDINGS AND INTENT.-

2312 (a) It is the intent of the Legislature that the Department
2313 of Children and Families provide child protection and child
2314 welfare services to children through contracting with community-
2315 based care lead agencies. Counties that provide children and
2316 family services with at least 40 licensed residential group care
2317 beds by July 1, 2003, and that provide at least \$2 million
2318 annually in county general revenue funds to supplement foster
2319 and family care services shall continue to contract directly
2320 with the state. It is the further intent of the Legislature that
2321 communities have responsibility for and participate in ensuring
2322 safety, permanence, and well-being for all children in the
2323 state.

2324 (b) The Legislature finds that when private entities assume
2325 responsibility for the care of children in the child protection
2326 and child welfare system, comprehensive oversight of the
2327 programmatic, administrative, and fiscal operation of those
2328 entities is essential. The Legislature further finds that the
2329 appropriate care of children is ultimately the responsibility of
2330 the state and that outsourcing such care does not relieve the
2331 state of its responsibility to ensure that appropriate care is



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2332 provided.

2333 (2) CHILD PROTECTION AND CHILD WELFARE OUTCOMES.—It is the
2334 goal of the department to protect the best interest of children
2335 by achieving the following outcomes in conjunction with the
2336 community-based care lead agency, community-based
2337 subcontractors, and the community alliance:

2338 (a) Children are first and foremost protected from abuse
2339 and neglect.

2340 (b) Children are safely maintained in their homes, if
2341 possible and appropriate.

2342 (c) Services are provided to protect children and prevent
2343 their removal from their home.

2344 (d) Children have permanency and stability in their living
2345 arrangements.

2346 (e) Family relationships and connections are preserved for
2347 children.

2348 (f) Families have enhanced capacity to provide for their
2349 children's needs.

2350 (g) Children receive appropriate services to meet their
2351 educational needs.

2352 (h) Children receive services to meet their physical and
2353 mental health needs.

2354 (i) Children develop the capacity for independent living
2355 and competence as an adult.

2356 (3) DEFINITIONS.—As used in this part, except as otherwise
2357 provided, the term:

2358 (a) "Care" means services of any kind which are designed to
2359 facilitate a child remaining safely in his or her own home,
2360 returning safely to his or her own home if he or she is removed



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2361 from the home, or obtaining an alternative permanent home if he
2362 or she cannot remain at home or be returned home. The term
2363 includes, but is not be limited to, prevention, diversion, and
2364 related services.

2365 (b) "Child" or "children" has the same meaning as provided
2366 in s. 39.01.

2367 (c) "Community alliance" or "alliance" means the group of
2368 stakeholders, community leaders, client representatives, and
2369 fundors of human services established pursuant to s. 20.19(5) to
2370 provide a focal point for community participation and oversight
2371 of community-based services.

2372 (d) "Community-based care lead agency" or "lead agency"
2373 means a single entity with which the department has a contract
2374 for the provision of care for children in the child protection
2375 and child welfare system in a community that is no smaller than
2376 a county and no larger than two contiguous judicial circuits.
2377 The secretary of the department may authorize more than one
2378 eligible lead agency within a single county if doing so will
2379 result in more effective delivery of services to children.

2380 (e) "Related services" includes, but is not limited to,
2381 family preservation, independent living, emergency shelter,
2382 residential group care, foster care, therapeutic foster care,
2383 intensive residential treatment, foster care supervision, case
2384 management, coordination of mental health services,
2385 postplacement supervision, permanent foster care, and family
2386 reunification.

2387 Section 31. Section 409.987, Florida Statutes, is created
2388 to read:

2389 409.987 Lead agency procurement.-



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2390 (1) Community-based care lead agencies shall be procured by
2391 the department through a competitive process as required under
2392 chapter 287.

2393 (2) The department shall produce a schedule for the
2394 procurement of community-based care lead agencies and provide
2395 the schedule to the community alliances established pursuant to
2396 s. 20.19(5) and post the schedule on the department's website.

2397 (3) Notwithstanding s. 287.057, the department shall use 5-
2398 year contracts with lead agencies.

2399 (4) In order to serve as a lead agency, an entity must:

2400 (a) Be organized as a Florida corporation or a governmental
2401 entity.

2402 (b) Be governed by a board of directors or a board
2403 committee composed of board members. The membership of the board
2404 of directors or board committee must be described in the bylaws
2405 or articles of incorporation of each lead agency, which must
2406 provide that at least 75 percent of the membership of the board
2407 of directors or board committee must consist of persons residing
2408 in this state, and at least 51 percent of the state residents on
2409 the board of directors must reside within the service area of
2410 the lead agency. However, for procurements of lead agency
2411 contracts initiated on or after July 1, 2014:

2412 1. At least 75 percent of the membership of the board of
2413 directors must consist of persons residing in this state, and at
2414 least 51 percent of the membership of the board of directors
2415 must consist of persons residing within the service area of the
2416 lead agency. If a board committee governs the lead agency, 100
2417 percent of its membership must consist of persons residing
2418 within the service area of the lead agency.



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2419 2. The powers of the board of directors or board committee
2420 include, but are not limited to, approving the lead agency's
2421 budget and setting the lead agency's operational policy and
2422 procedures. A board of directors must additionally have the
2423 power to hire the lead agency's executive director, unless a
2424 board committee governs the lead agency, in which case the board
2425 committee must have the power to confirm the selection of the
2426 lead agency's executive director.

2427 (c) Demonstrate financial responsibility through an
2428 organized plan for regular fiscal audits and the posting of a
2429 performance bond.

2430 (5) The department's procurement team procuring any lead
2431 agencies' contracts must include individuals from the community
2432 alliance in the area to be served under the contract. All
2433 meetings at which vendors make presentations to or negotiate
2434 with the procurement team shall be held in the area to be served
2435 by the contract.

2436 Section 32. Section 409.988, Florida Statutes, is created
2437 to read:

2438 409.988 Lead agency duties; general provisions.-

2439 (1) DUTIES.-A lead agency:

2440 (a) Shall serve all children referred as a result of a
2441 report of abuse, neglect, or abandonment to the department's
2442 central abuse hotline, including, but not limited to, children
2443 who are the subject of verified reports and children who are not
2444 the subject of verified reports but who are at moderate to
2445 extremely high risk of abuse, neglect, or abandonment, as
2446 determined using the department's risk assessment instrument,
2447 regardless of the level of funding allocated to the lead agency



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2448 by the state if all related funding is transferred. The lead
2449 agency may also serve children who have not been the subject of
2450 reports of abuse, neglect, or abandonment, but who are at risk
2451 of abuse, neglect, or abandonment, to prevent their entry into
2452 the child protection and child welfare system.

2453 (b) Shall provide accurate and timely information necessary
2454 for oversight by the department pursuant to the child welfare
2455 results-oriented accountability system required by s. 409.997.

2456 (c) Shall follow the financial guidelines developed by the
2457 department and provide for a regular independent auditing of its
2458 financial activities. Such financial information shall be
2459 provided to the community alliance established under s.
2460 20.19(5).

2461 (d) Shall prepare all judicial reviews, case plans, and
2462 other reports necessary for court hearings for dependent
2463 children, except those related to the investigation of a
2464 referral from the department's child abuse hotline, and shall
2465 submit these documents timely to the department's attorneys for
2466 review, any necessary revision, and filing with the court. The
2467 lead agency shall make the necessary staff available to
2468 department attorneys for preparation for dependency proceedings,
2469 and shall provide testimony and other evidence required for
2470 dependency court proceedings in coordination with the
2471 department's attorneys. This duty does not include the
2472 preparation of legal pleadings or other legal documents, which
2473 remain the responsibility of the department.

2474 (e) Shall ensure that all individuals providing care for
2475 dependent children receive appropriate training and meet the
2476 minimum employment standards established by the department.



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2477 (f) Shall maintain eligibility to receive all available
2478 federal child welfare funds.

2479 (g) Shall maintain written agreements with Healthy Families
2480 Florida lead entities in its service area pursuant to s. 409.153
2481 to promote cooperative planning for the provision of prevention
2482 and intervention services.

2483 (h) Shall comply with federal and state statutory
2484 requirements and agency rules in the provision of contractual
2485 services.

2486 (i) May subcontract for the provision of services required
2487 by the contract with the lead agency and the department;
2488 however, the subcontracts must specify how the provider will
2489 contribute to the lead agency meeting the performance standards
2490 established pursuant to the child welfare results-oriented
2491 accountability system required by s. 409.997. The lead agency
2492 shall directly provide no more than 35 percent of all child
2493 welfare services provided.

2494 (2) LICENSURE.—

2495 (a) A lead agency must be licensed as a child-caring or
2496 child-placing agency by the department under this chapter.

2497 (b) Each foster home, therapeutic foster home, emergency
2498 shelter, or other placement facility operated by the lead agency
2499 must be licensed by the department under chapter 402 or this
2500 chapter.

2501 (c) Substitute care providers who are licensed under s.
2502 409.175 and who have contracted with a lead agency are also
2503 authorized to provide registered or licensed family day care
2504 under s. 402.313 if such care is consistent with federal law and
2505 if the home has met the requirements of s. 402.313.



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2506 (d) In order to eliminate or reduce the number of duplicate
2507 inspections by various program offices, the department shall
2508 coordinate inspections required for licensure of agencies under
2509 this subsection.

2510 (e) The department may adopt rules to administer this
2511 subsection.

2512 (3) SERVICES.—A lead agency must serve dependent children
2513 through services that are supported by research or are best
2514 child welfare practices. The agency may also provide innovative
2515 services, including, but not limited to, family-centered,
2516 cognitive-behavioral, trauma-informed interventions designed to
2517 mitigate out-of-home placements.

2518 (4) LEAD AGENCY ACTING AS GUARDIAN.—

2519 (a) If a lead agency or other provider has accepted case
2520 management responsibilities for a child who is sheltered or
2521 found to be dependent and who is assigned to the care of the
2522 lead agency or other provider, the agency or provider may act as
2523 the child's guardian for the purpose of registering the child in
2524 school if a parent or guardian of the child is unavailable and
2525 his or her whereabouts cannot reasonably be ascertained.

2526 (b) The lead agency or other provider may also seek
2527 emergency medical attention for the child, but only if a parent
2528 or guardian of the child is unavailable, the parent or
2529 guardian's whereabouts cannot reasonably be ascertained, and a
2530 court order for such emergency medical services cannot be
2531 obtained because of the severity of the emergency or because it
2532 is after normal working hours.

2533 (c) A lead agency or other provider may not consent to
2534 sterilization, abortion, or termination of life support.



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2535 (d) If a child's parents' rights have been terminated, the
2536 lead agency shall act as guardian of the child in all
2537 circumstances.

2538 Section 33. Section 409.990, Florida Statutes, is created
2539 to read:

2540 409.990 Funding for lead agencies.—A contract established
2541 between the department and a lead agency must be funded by a
2542 grant of general revenue, other applicable state funds, or
2543 applicable federal funding sources.

2544 (1) The method of payment for a fixed-price contract with a
2545 lead agency must provide for a 2-month advance payment at the
2546 beginning of each fiscal year and equal monthly payments
2547 thereafter.

2548 (2) Notwithstanding s. 215.425, all documented federal
2549 funds earned for the current fiscal year by the department and
2550 lead agencies which exceed the amount appropriated by the
2551 Legislature shall be distributed to all entities that
2552 contributed to the excess earnings based on a schedule and
2553 methodology developed by the department and approved by the
2554 Executive Office of the Governor.

2555 (a) Distribution shall be pro rata, based on total
2556 earnings, and shall be made only to those entities that
2557 contributed to excess earnings.

2558 (b) Excess earnings of lead agencies shall be used only in
2559 the service district in which they were earned.

2560 (c) Additional state funds appropriated by the Legislature
2561 for lead agencies or made available pursuant to the budgetary
2562 amendment process described in s. 216.177 shall be transferred
2563 to the lead agencies.



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2564 (d) The department shall amend a lead agency's contract to
2565 permit expenditure of the funds.

2566 (3) Notwithstanding any other provision of this section,
2567 the amount of the annual contract for a lead agency may be
2568 increased by excess federal funds earned in accordance with s.
2569 216.181(11).

2570 (4) Each contract with a lead agency shall provide for the
2571 payment by the department to the lead agency of a reasonable
2572 administrative cost in addition to funding for the provision of
2573 services.

2574 (5) A lead agency may carry forward documented unexpended
2575 state funds from one fiscal year to the next; however, the
2576 cumulative amount carried forward may not exceed 8 percent of
2577 the total contract. Any unexpended state funds in excess of that
2578 percentage must be returned to the department.

2579 (a) The funds carried forward may not be used in any way
2580 that would create increased recurring future obligations, and
2581 such funds may not be used for any type of program or service
2582 that is not currently authorized by the existing contract with
2583 the department.

2584 (b) Expenditures of funds carried forward must be
2585 separately reported to the department.

2586 (c) Any unexpended funds that remain at the end of the
2587 contract period shall be returned to the department.

2588 (d) Funds carried forward may be retained through any
2589 contract renewals and any new procurements as long as the same
2590 lead agency is retained by the department.

2591 (6) It is the intent of the Legislature to improve services
2592 and local participation in community-based care initiatives by



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2593 fostering community support and providing enhanced prevention
2594 and in-home services, thereby reducing the risk otherwise faced
2595 by lead agencies. A community partnership matching grant program
2596 is established and shall be operated by the department to
2597 encourage local participation in community-based care for
2598 children in the child welfare system. A children's services
2599 council or another local entity that makes a financial
2600 commitment to a community-based care lead agency may be eligible
2601 for a matching grant. The total amount of the local contribution
2602 may be matched on a one-to-one basis up to a maximum annual
2603 amount of \$500,000 per lead agency. Awarded matching grant funds
2604 may be used for any prevention or in-home services that can be
2605 reasonably expected to reduce the number of children entering
2606 the child welfare system. Funding available for the matching
2607 grant program is subject to legislative appropriation of
2608 nonrecurring funds provided for this purpose.

2609 (7) (a) The department, in consultation with the Florida
2610 Coalition for Children, Inc., shall develop and implement a
2611 community-based care risk pool initiative to mitigate the
2612 financial risk to eligible lead agencies. This initiative must
2613 include:

2614 1. A risk pool application and protocol developed by the
2615 department which outlines submission criteria, including, but
2616 not limited to, financial and program management, descriptive
2617 data requirements, and timeframes for submission of
2618 applications. Requests for funding from risk pool applicants
2619 must be based on relevant and verifiable service trends and
2620 changes that have occurred during the current fiscal year. The
2621 application must confirm that expenditure of approved risk pool



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2622 funds by the lead agency will be completed within the current
2623 fiscal year.

2624 2. A risk pool peer review committee, appointed by the
2625 secretary and consisting of department staff and representatives
2626 from at least three nonapplicant lead agencies, which reviews
2627 and assesses all risk pool applications. Upon completion of each
2628 application review, the peer review committee shall report its
2629 findings and recommendations to the secretary, providing, at a
2630 minimum, the following information:

2631 a. Justification for the specific funding amount required
2632 by the risk pool applicant based on the current year's service
2633 trend data, including validation that the applicant's financial
2634 need was caused by circumstances beyond the control of the lead
2635 agency management;

2636 b. Verification that the proposed use of risk pool funds
2637 meets at least one of the purposes specified in paragraph (c);
2638 and

2639 c. Evidence of technical assistance provided in an effort
2640 to avoid the need to access the risk pool and recommendations
2641 for technical assistance to the lead agency to ensure that risk
2642 pool funds are expended effectively and that the agency's need
2643 for future risk pool funding is diminished.

2644 (b) Upon approval by the secretary of a risk pool
2645 application, the department may request funds from the risk pool
2646 in accordance with s. 216.181(6) (a).

2647 (c) The purposes for which the community-based care risk
2648 pool shall be used include:

2649 1. Significant changes in the number or composition of
2650 clients eligible to receive services.



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2651 2. Significant changes in the services that are eligible
2652 for reimbursement.

2653 3. Continuity of care in the event of failure,
2654 discontinuance of service, or financial misconduct by a lead
2655 agency.

2656 4. Significant changes in the mix of available funds.

2657 (d) The department may also request in its annual
2658 legislative budget request, and the Governor may recommend, that
2659 the funding necessary to effect paragraph (c) be appropriated to
2660 the department. In addition, the department may request the
2661 allocation of funds from the community-based care risk pool in
2662 accordance with s. 216.181(6) (a). Funds from the pool may be
2663 used to match available federal dollars.

2664 1. Such funds shall constitute partial security for
2665 contract performance by lead agencies and shall be used to
2666 offset the need for a performance bond.

2667 2. The department may separately require a bond to mitigate
2668 the financial consequences of potential acts of malfeasance or
2669 misfeasance or criminal violations by the service provider.

2670 Section 34. Section 409.16713, Florida Statutes, is
2671 transferred and renumbered as section 409.991, Florida Statutes,
2672 and paragraph (a) of subsection (1) of that section is amended,
2673 to read:

2674 409.991 ~~409.16713~~ Allocation of funds for community-based
2675 care lead agencies.-

2676 (1) As used in this section, the term:

2677 (a) "Core services funding" means all funds allocated to
2678 community-based care lead agencies operating under contract with
2679 the department pursuant to s. 409.987 ~~s. 409.1671~~, with the



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2680 following exceptions:

- 2681 1. Funds appropriated for independent living;
2682 2. Funds appropriated for maintenance adoption subsidies;
2683 3. Funds allocated by the department for protective
2684 investigations training;
2685 4. Nonrecurring funds;
2686 5. Designated mental health wrap-around services funds; and
2687 6. Funds for special projects for a designated community-
2688 based care lead agency.

2689 Section 35. Section 409.992, Florida Statutes, is created
2690 to read:

2691 409.992 Lead agency expenditures.—

2692 (1) The procurement of commodities or contractual services
2693 by lead agencies shall be governed by the financial guidelines
2694 developed by the department and must comply with applicable
2695 state and federal law and follow good business practices.

2696 Pursuant to s. 11.45, the Auditor General may provide technical
2697 advice in the development of the financial guidelines.

2698 (2) Notwithstanding any other provision of law, a
2699 community-based care lead agency may make expenditures for staff
2700 cellular telephone allowances, contracts requiring deferred
2701 payments and maintenance agreements, security deposits for
2702 office leases, related agency professional membership dues other
2703 than personal professional membership dues, promotional
2704 materials, and grant writing services. Expenditures for food and
2705 refreshments, other than those provided to clients in the care
2706 of the agency or to foster parents, adoptive parents, and
2707 caseworkers during training sessions, are not allowable.

2708 (3) A lead community-based care agency and its



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2709 subcontractors are exempt from state travel policies as provided
2710 in s. 112.061(3)(a) for their travel expenses incurred in order
2711 to comply with the requirements of this section.

2712 Section 36. Section 409.993, Florida Statutes, is created
2713 to read:

2714 409.993 Lead agencies and subcontractor liability.—

2715 (1) FINDINGS.—

2716 (a) The Legislature finds that the state has traditionally
2717 provided foster care services to children who are the
2718 responsibility of the state. As such, foster children have not
2719 had the right to recover for injuries beyond the limitations
2720 specified in s. 768.28. The Legislature has determined that
2721 foster care and related services should be outsourced pursuant
2722 to this section and that the provision of such services is of
2723 paramount importance to the state. The purpose of such
2724 outsourcing is to increase the level of safety, security, and
2725 stability of children who are or become the responsibility of
2726 the state. One of the components necessary to secure a safe and
2727 stable environment for such children is the requirement that
2728 private providers maintain liability insurance. As such,
2729 insurance needs to be available and remain available to
2730 nongovernmental foster care and related services providers
2731 without the resources of such providers being significantly
2732 reduced by the cost of maintaining such insurance.

2733 (b) The Legislature further finds that, by requiring the
2734 following minimum levels of insurance, children in outsourced
2735 foster care and related services will gain increased protection
2736 and rights of recovery in the event of injury than currently
2737 provided in s. 768.28.



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2738 (2) LEAD AGENCY LIABILITY.-
2739 (a) Other than an entity to which s. 768.28 applies, an
2740 eligible community-based care lead agency, or its employees or
2741 officers, except as otherwise provided in paragraph (b), shall,
2742 as a part of its contract, obtain a minimum of \$1 million per
2743 occurrence with a policy period aggregate limit of \$3 million in
2744 general liability insurance coverage. The lead agency must also
2745 require that staff who transport client children and families in
2746 their personal automobiles in order to carry out their job
2747 responsibilities obtain minimum bodily injury liability
2748 insurance in the amount of \$100,000 per person per any one
2749 automobile accident, and subject to such limits for each person,
2750 \$300,000 for all damages resulting from any one automobile
2751 accident, on their personal automobiles. In lieu of personal
2752 motor vehicle insurance, the lead agency's casualty, liability,
2753 or motor vehicle insurance carrier may provide nonowned
2754 automobile liability coverage. This insurance provides liability
2755 insurance for an automobile that the lead agency uses in
2756 connection with the lead agency's business but does not own,
2757 lease, rent, or borrow. This coverage includes an automobile
2758 owned by an employee of the lead agency or a member of the
2759 employee's household but only while the automobile is used in
2760 connection with the lead agency's business. The nonowned
2761 automobile coverage for the lead agency applies as excess
2762 coverage over any other collectible insurance. The personal
2763 automobile policy for the employee of the lead agency shall be
2764 primary insurance, and the nonowned automobile coverage of the
2765 lead agency acts as excess insurance to the primary insurance.
2766 The lead agency shall provide a minimum limit of \$1 million in



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2767 nonowned automobile coverage. In a tort action brought against
2768 such a lead agency or employee, net economic damages shall be
2769 limited to \$1 million per liability claim and \$200,000 per
2770 automobile claim, including, but not limited to, past and future
2771 medical expenses, wage loss, and loss of earning capacity,
2772 offset by any collateral source payment paid or payable. In any
2773 tort action brought against a lead agency, noneconomic damages
2774 shall be limited to \$400,000 per claim. A claims bill may be
2775 brought on behalf of a claimant pursuant to s. 768.28 for any
2776 amount exceeding the limits specified in this paragraph. Any
2777 offset of collateral source payments made as of the date of the
2778 settlement or judgment shall be in accordance with s. 768.76.
2779 The lead agency is not liable in tort for the acts or omissions
2780 of its subcontractors or the officers, agents, or employees of
2781 its subcontractors.

2782 (b) The liability of a lead agency described in this
2783 section shall be exclusive and in place of all other liability
2784 of such lead agency. The same immunities from liability enjoyed
2785 by such lead agencies shall extend to each employee of the lead
2786 agency if he or she is acting in furtherance of the lead
2787 agency's business, including the transportation of clients
2788 served, as described in this subsection, in privately owned
2789 vehicles. Such immunities are not applicable to a lead agency or
2790 an employee who acts in a culpably negligent manner or with
2791 willful and wanton disregard or unprovoked physical aggression
2792 if such acts result in injury or death or such acts proximately
2793 cause such injury or death. Such immunities are not applicable
2794 to employees of the same lead agency when each is operating in
2795 the furtherance of the agency's business, but they are assigned



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2796 primarily to unrelated work within private or public employment.
2797 The same immunity provisions enjoyed by a lead agency also apply
2798 to any sole proprietor, partner, corporate officer or director,
2799 supervisor, or other person who, in the course and scope of his
2800 or her duties, acts in a managerial or policymaking capacity and
2801 the conduct that caused the alleged injury arose within the
2802 course and scope of those managerial or policymaking duties. As
2803 used in this subsection and subsection (3), the term "culpably
2804 negligent manner" means reckless indifference or grossly
2805 careless disregard of human life.

2806 (3) SUBCONTRACTOR LIABILITY.—

2807 (a) A subcontractor of an eligible community-based care
2808 lead agency that is a direct provider of foster care and related
2809 services to children and families, and its employees or
2810 officers, except as otherwise provided in paragraph (b), must,
2811 as a part of its contract, obtain a minimum of \$1 million per
2812 occurrence with a policy period aggregate limit of \$3 million in
2813 general liability insurance coverage. The subcontractor of a
2814 lead agency must also require that staff who transport client
2815 children and families in their personal automobiles in order to
2816 carry out their job responsibilities obtain minimum bodily
2817 injury liability insurance in the amount of \$100,000 per person
2818 in any one automobile accident, and subject to such limits for
2819 each person, \$300,000 for all damages resulting from any one
2820 automobile accident, on their personal automobiles. In lieu of
2821 personal motor vehicle insurance, the subcontractor's casualty,
2822 liability, or motor vehicle insurance carrier may provide
2823 nonowned automobile liability coverage. This insurance provides
2824 liability insurance for automobiles that the subcontractor uses



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2825 in connection with the subcontractor's business but does not
2826 own, lease, rent, or borrow. This coverage includes automobiles
2827 owned by the employees of the subcontractor or a member of the
2828 employee's household but only while the automobiles are used in
2829 connection with the subcontractor's business. The nonowned
2830 automobile coverage for the subcontractor applies as excess
2831 coverage over any other collectible insurance. The personal
2832 automobile policy for the employee of the subcontractor shall be
2833 primary insurance, and the nonowned automobile coverage of the
2834 subcontractor acts as excess insurance to the primary insurance.
2835 The subcontractor shall provide a minimum limit of \$1 million in
2836 nonowned automobile coverage. In a tort action brought against
2837 such subcontractor or employee, net economic damages shall be
2838 limited to \$1 million per liability claim and \$200,000 per
2839 automobile claim, including, but not limited to, past and future
2840 medical expenses, wage loss, and loss of earning capacity,
2841 offset by any collateral source payment paid or payable. In a
2842 tort action brought against such subcontractor, noneconomic
2843 damages shall be limited to \$400,000 per claim. A claims bill
2844 may be brought on behalf of a claimant pursuant to s. 768.28 for
2845 any amount exceeding the limits specified in this paragraph. Any
2846 offset of collateral source payments made as of the date of the
2847 settlement or judgment shall be in accordance with s. 768.76.

2848 (b) The liability of a subcontractor of a lead agency that
2849 is a direct provider of foster care and related services as
2850 described in this section is exclusive and in place of all other
2851 liability of such provider. The same immunities from liability
2852 enjoyed by such subcontractor provider extend to each employee
2853 of the subcontractor when such employee is acting in furtherance



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2854 of the subcontractor's business, including the transportation of
2855 clients served, as described in this subsection, in privately
2856 owned vehicles. Such immunities are not applicable to a
2857 subcontractor or an employee who acts in a culpably negligent
2858 manner or with willful and wanton disregard or unprovoked
2859 physical aggression if such acts result in injury or death or if
2860 such acts proximately cause such injury or death. Such
2861 immunities are not applicable to employees of the same
2862 subcontractor who are operating in the furtherance of the
2863 subcontractor's business but are assigned primarily to unrelated
2864 works within private or public employment. The same immunity
2865 provisions enjoyed by a subcontractor also apply to any sole
2866 proprietor, partner, corporate officer or director, supervisor,
2867 or other person who, in the course and scope of his or her
2868 duties, acts in a managerial or policymaking capacity and the
2869 conduct that caused the alleged injury arose within the course
2870 and scope of those managerial or policymaking duties.

2871 Section 37. Section 409.1675, Florida Statutes, is
2872 transferred, renumbered as section 409.994, Florida Statutes,
2873 and amended to read:

2874 409.994 ~~409.1675~~ ~~Lead~~ Community-based care lead agencies
2875 ~~providers~~; receivership.-

2876 (1) The Department of Children and Families ~~Family Services~~
2877 may petition a court of competent jurisdiction for the
2878 appointment of a receiver for a ~~lead~~ community-based care lead
2879 agency provider established pursuant to s. 409.987 if ~~s.~~
2880 ~~409.1671~~ when any of the following conditions exist:

2881 (a) The lead agency ~~community-based provider~~ is operating
2882 without a license as a child-placing agency.



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2883 (b) The lead agency ~~community-based provider~~ has given less
2884 than 120 days' notice of its intent to cease operations, and
2885 arrangements have not been made for another lead agency
2886 ~~community-based provider~~ or for the department to continue the
2887 uninterrupted provision of services.

2888 (c) The department determines that conditions exist in the
2889 lead agency ~~community-based provider~~ which present an imminent
2890 danger to the health, safety, or welfare of the dependent
2891 children under that agency's ~~provider's~~ care or supervision.
2892 Whenever possible, the department shall make a reasonable effort
2893 to facilitate the continued operation of the program.

2894 (d) The lead agency ~~community-based provider~~ cannot meet
2895 its current financial obligations to its employees, contractors,
2896 or foster parents. Issuance of bad checks or the existence of
2897 delinquent obligations for payment of salaries, utilities, or
2898 invoices for essential services or commodities shall constitute
2899 prima facie evidence that the lead agency ~~community-based~~
2900 ~~provider~~ lacks the financial ability to meet its financial
2901 obligations.

2902 (2) (a) The petition for receivership shall take precedence
2903 over other court business unless the court determines that some
2904 other pending proceeding, having statutory precedence, has
2905 priority.

2906 (b) A hearing shall be conducted within 5 days after the
2907 filing of the petition, at which time interested parties shall
2908 have the opportunity to present evidence as to whether a
2909 receiver should be appointed. The department shall give
2910 reasonable notice of the hearing on the petition to the lead
2911 agency ~~community-based provider~~.



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2912 (c) The court shall grant the petition upon finding that
2913 one or more of the conditions in subsection (1) exists and the
2914 continued existence of the condition or conditions jeopardizes
2915 the health, safety, or welfare of dependent children. A receiver
2916 may be appointed ex parte when the court determines that one or
2917 more of the conditions in subsection (1) exists. After such
2918 finding, the court may appoint any person, including an employee
2919 of the department who is qualified by education, training, or
2920 experience to carry out the duties of the receiver pursuant to
2921 this section, except that the court may ~~shall~~ not appoint any
2922 member of the governing board or any officer of the lead agency
2923 ~~community-based provider~~. The receiver may be selected from a
2924 list of persons qualified to act as receivers which is developed
2925 by the department and presented to the court with each petition
2926 of receivership.

2927 (d) A receiver may be appointed for up to 90 days, and the
2928 department may petition the court for additional 30-day
2929 extensions. Sixty days after appointment of a receiver and every
2930 30 days thereafter until the receivership is terminated, the
2931 department shall submit to the court an assessment of the lead
2932 agency's ~~community-based provider's~~ ability to ensure the
2933 health, safety, and welfare of the dependent children under its
2934 supervision.

2935 (3) The receiver shall take such steps as are reasonably
2936 necessary to ensure the continued health, safety, and welfare of
2937 the dependent children under the supervision of the lead agency
2938 ~~community-based provider~~ and shall exercise those powers and
2939 perform those duties set out by the court, including, but not
2940 limited to:



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2941 (a) Taking such action as is reasonably necessary to
2942 protect or conserve the assets or property of the lead agency
2943 ~~community-based provider~~. The receiver may use the assets and
2944 property and any proceeds from any transfer thereof only in the
2945 performance of the powers and duties provided ~~set forth~~ in this
2946 section and by order of the court.

2947 (b) Using the assets of the lead agency ~~community-based~~
2948 ~~provider~~ in the provision of care and services to dependent
2949 children.

2950 (c) Entering into contracts and hiring agents and employees
2951 to carry out the powers and duties of the receiver under this
2952 section.

2953 (d) Having full power to direct, manage, hire, and
2954 discharge employees of the lead agency ~~community-based provider~~.
2955 The receiver shall hire and pay new employees at the rate of
2956 compensation, including benefits, approved by the court.

2957 (e) Honoring all leases, mortgages, and contractual
2958 obligations of the lead agency ~~community-based provider~~, but
2959 only to the extent of payments that become due during the period
2960 of the receivership.

2961 (4) (a) The receiver shall deposit funds received in a
2962 separate account and shall use this account for all
2963 disbursements.

2964 (b) A payment to the receiver of any sum owing to the lead
2965 agency ~~community-based provider~~ shall discharge any obligation
2966 to the provider to the extent of the payment.

2967 (5) A receiver may petition the court for temporary relief
2968 from obligations entered into by the lead agency ~~community-based~~
2969 ~~provider~~ if the rent, price, or rate of interest required to be



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2970 paid under the agreement was substantially in excess of a
2971 reasonable rent, price, or rate of interest at the time the
2972 contract was entered into, or if any material provision of the
2973 agreement was unreasonable when compared to contracts negotiated
2974 under similar conditions. Any relief in this form provided by
2975 the court shall be limited to the life of the receivership,
2976 unless otherwise determined by the court.

2977 (6) The court shall set the compensation of the receiver,
2978 which shall be considered a necessary expense of a receivership
2979 and may grant to the receiver such other authority necessary to
2980 ensure the health, safety, and welfare of the children served.

2981 (7) A receiver may be held liable in a personal capacity
2982 only for the receiver's own gross negligence, intentional acts,
2983 or breaches of fiduciary duty. This section may ~~shall~~ not be
2984 interpreted to be a waiver of sovereign immunity should the
2985 department be appointed receiver.

2986 (8) If the receiver is not the department, the court may
2987 require a receiver to post a bond to ensure the faithful
2988 performance of these duties.

2989 (9) The court may terminate a receivership when:

2990 (a) The court determines that the receivership is no longer
2991 necessary because the conditions that gave rise to the
2992 receivership no longer exist; or

2993 (b) The department has entered into a contract with a new
2994 lead agency ~~community-based provider~~ pursuant to s. 409.987 ~~s.~~
2995 ~~409.1671~~, and that contractor is ready and able to assume the
2996 duties of the previous lead agency ~~provider~~.

2997 (10) Within 30 days after the termination, unless this time
2998 period is extended by the court, the receiver shall give the



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2999 court a complete accounting of all property of which the
3000 receiver has taken possession, of all funds collected and
3001 disbursed, and of the expenses of the receivership.

3002 (11) ~~Nothing in~~ This section does not ~~shall be construed to~~
3003 relieve any employee of the lead agency ~~community-based provider~~
3004 placed in receivership of any civil or criminal liability
3005 incurred, or any duty imposed by law, by reason of acts or
3006 omissions of the employee before ~~prior to~~ the appointment of a
3007 receiver, ~~and; nor shall anything contained in this section does~~
3008 not be construed to suspend during the receivership any
3009 obligation of the employee for payment of taxes or other
3010 operating or maintenance expenses of the lead agency ~~community-~~
3011 ~~based provider~~ or for the payment of mortgages or liens. The
3012 lead agency ~~community-based provider~~ shall retain the right to
3013 sell or mortgage any facility under receivership, subject to the
3014 prior approval of the court that ordered the receivership.

3015 Section 38. Section 409.996, Florida Statutes, is created
3016 to read:

3017 409.996 Duties of the Department of Children and Families.-
3018 The department shall contract for the delivery, administration,
3019 or management of care for children in the child protection and
3020 child welfare system. In doing so, the department retains
3021 responsibility for the quality of contracted services and
3022 programs and shall ensure that services are delivered in
3023 accordance with applicable federal and state statutes and
3024 regulations.

3025 (1) The department shall enter into contracts with lead
3026 agencies for the performance of the duties by the lead agencies
3027 pursuant to s. 409.988. At a minimum, the contracts must:



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3028 (a) Provide for the services needed to accomplish the
3029 duties established in s. 409.988 and provide information to the
3030 department which is necessary to meet the requirements for a
3031 quality assurance program pursuant to subsection (18) and the
3032 child welfare results-oriented accountability system pursuant to
3033 s. 409.997.

3034 (b) Provide for graduated penalties for failure to comply
3035 with contract terms. Such penalties may include financial
3036 penalties, enhanced monitoring and reporting, corrective action
3037 plans, and early termination of contracts or other appropriate
3038 action to ensure contract compliance.

3039 (c) Ensure that the lead agency shall furnish current and
3040 accurate information on its activities in all cases in client
3041 case records in the state's statewide automated child welfare
3042 information system.

3043 (d) Specify the procedures to be used by the parties to
3044 resolve differences in interpreting the contract or to resolve
3045 disputes as to the adequacy of the parties' compliance with
3046 their respective obligations under the contract.

3047 (2) The department must adopt written policies and
3048 procedures for monitoring the contract for delivery of services
3049 by lead agencies which must be posted on the department's
3050 website. These policies and procedures must, at a minimum,
3051 address the evaluation of fiscal accountability and program
3052 operations, including provider achievement of performance
3053 standards, provider monitoring of subcontractors, and timely
3054 followup of corrective actions for significant monitoring
3055 findings related to providers and subcontractors. These policies
3056 and procedures must also include provisions for reducing the



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3057 duplication of the department's program monitoring activities
3058 both internally and with other agencies, to the extent possible.
3059 The department's written procedures must ensure that the written
3060 findings, conclusions, and recommendations from monitoring the
3061 contract for services of lead agencies are communicated to the
3062 director of the provider agency and the community alliance as
3063 expeditiously as possible.

3064 (3) The department shall receive federal and state funds as
3065 appropriated for the operation of the child welfare system,
3066 transmit these funds to the lead agencies as agreed to in the
3067 contract, and provide information on its website of the
3068 distribution of the federal funds. The department retains
3069 responsibility for the appropriate spending of these funds. The
3070 department shall monitor lead agencies to assess compliance with
3071 the financial guidelines established pursuant to s. 409.992 and
3072 other applicable state and federal laws.

3073 (4) The department shall provide technical assistance and
3074 consultation to lead agencies in the provision of care to
3075 children in the child protection and child welfare system.

3076 (5) The department retains the responsibility for the
3077 review, approval or denial, and issuances of all foster home
3078 licenses.

3079 (6) The department shall process all applications submitted
3080 by lead agencies for the Interstate Compact on the Placement of
3081 Children and the Interstate Compact on Adoption and Medical
3082 Assistance.

3083 (7) The department shall assist lead agencies with access
3084 to and coordination with other service programs within the
3085 department.



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3086 (8) The department shall determine Medicaid eligibility for
3087 all referred children and shall coordinate services with the
3088 Agency for Health Care Administration.

3089 (9) The department shall develop, in cooperation with the
3090 lead agencies and a third-party credentialing entity approved
3091 pursuant to s. 402.40(3), a standardized competency-based
3092 curriculum for certification training for child protection
3093 staff.

3094 (10) The department shall maintain the statewide adoptions
3095 website and provide information and training to the lead
3096 agencies relating to the website.

3097 (11) The department shall provide training and assistance
3098 to lead agencies regarding the responsibility of lead agencies
3099 relating to children receiving supplemental security income,
3100 social security, railroad retirement, or veterans' benefits.

3101 (12) With the assistance of a lead agency, the department
3102 shall develop and implement statewide and local interagency
3103 agreements needed to coordinate services for children and
3104 parents involved in the child welfare system who are also
3105 involved with the Agency for Persons with Disabilities, the
3106 Department of Juvenile Justice, the Department of Education, the
3107 Department of Health, and other governmental organizations that
3108 share responsibilities for children or parents in the child
3109 welfare system.

3110 (13) With the assistance of a lead agency, the department
3111 shall develop and implement a working agreement between the lead
3112 agency and the substance abuse and mental health managing entity
3113 to integrate services and supports for children and parents
3114 serviced in the child welfare system.



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3115 (14) The department shall work with the Agency for Health
3116 Care Administration to provide each Medicaid-eligible child with
3117 early and periodic screening, diagnosis, and treatment,
3118 including 72-hour screening, periodic child health checkups, and
3119 prescribed followup for ordered services, including, but not
3120 limited to, medical, dental, and vision care.

3121 (15) The department shall assist lead agencies in
3122 developing an array of services in compliance with the Title IV-
3123 E waiver and shall monitor the provision of such services.

3124 (16) The department shall provide a mechanism to allow lead
3125 agencies to request a waiver of department policies and
3126 procedures that create inefficiencies or inhibit the performance
3127 of the lead agency's duties.

3128 (17) The department shall directly or through contract
3129 provide attorneys to prepare and present cases in dependency
3130 court and shall ensure that the court is provided with adequate
3131 information for informed decisionmaking in dependency cases,
3132 including a face sheet for each case which lists the names and
3133 contact information for any child protective investigator, child
3134 protective investigation supervisor, case manager, and case
3135 manager supervisor, and the regional department official
3136 responsible for the lead agency contract. The department shall
3137 provide to the court the case information and recommendations
3138 provided by the lead agency or subcontractor. For the Sixth
3139 Judicial Circuit, the department shall contract with the state
3140 attorney for the provision of these services.

3141 (18) The department, in consultation with lead agencies,
3142 shall establish a quality assurance program for contracted
3143 services to dependent children. The quality assurance program



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3144 shall be based on standards established by federal and state law
3145 and national accrediting organizations.

3146 (a) The department must evaluate each lead agency under
3147 contract at least annually. These evaluations shall cover the
3148 programmatic, operational, and fiscal operations of the lead
3149 agency and must be consistent with the child welfare results-
3150 oriented accountability system required by s. 409.997. The
3151 department must consult with dependency judges in the circuit or
3152 circuits served by the lead agency on the performance of the
3153 lead agency.

3154 (b) The department and each lead agency shall monitor out-
3155 of-home placements, including the extent to which sibling groups
3156 are placed together or provisions to provide visitation and
3157 other contacts if siblings are separated. The data shall
3158 identify reasons for sibling separation. Information related to
3159 sibling placement shall be incorporated into the results-
3160 oriented accountability system required pursuant to s. 409.997
3161 and in the evaluation of the outcome specified in s.
3162 409.986(2)(e).

3163 (c) The department shall, to the extent possible, use
3164 independent financial audits provided by the lead agency to
3165 eliminate or reduce the ongoing contract and administrative
3166 reviews conducted by the department. If the department
3167 determines that such independent financial audits are
3168 inadequate, other audits, as necessary, may be conducted by the
3169 department. This paragraph does not abrogate the requirements of
3170 s. 215.97.

3171 (d) The department may suggest additional items to be
3172 included in such independent financial audits to meet the



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3173 department's needs.

3174 (e) The department may outsource programmatic,
3175 administrative, or fiscal monitoring oversight of lead agencies.

3176 (f) A lead agency must assure that all subcontractors are
3177 subject to the same quality assurance activities as the lead
3178 agency.

3179 (19) The department and its attorneys have the
3180 responsibility to ensure that the court is fully informed about
3181 issues before it, to make recommendations to the court, and to
3182 present competent evidence, including testimony by the
3183 department's employees, contractors, and subcontractors, as well
3184 as other individuals, to support all recommendations made to the
3185 court. The department's attorneys shall coordinate lead agency
3186 or subcontractor staff to ensure that dependency cases are
3187 presented appropriately to the court, giving consideration to
3188 the information developed by the case manager and direction to
3189 the case manager if more information is needed.

3190 (20) The department, in consultation with lead agencies,
3191 shall develop a dispute resolution process so that disagreements
3192 between legal staff, investigators, and case management staff
3193 can be resolved in the best interest of the child in question
3194 before court appearances regarding that child.

3195 (21) The department shall periodically, and before
3196 procuring a lead agency, solicit comments and recommendations
3197 from the community alliance established in s. 20.19(5), any
3198 other community groups, or public hearings. The recommendations
3199 must include, but are not limited to:

3200 (a) The current and past performance of a lead agency.

3201 (b) The relationship between a lead agency and its



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3202 community partners.

3203 (c) Any local conditions or service needs in child
3204 protection and child welfare.

3205 Section 39. Effective January 1, 2015, section 409.997,
3206 Florida Statutes, is created to read:

3207 409.997 Child welfare results-oriented accountability
3208 system.-

3209 (1) The department, the community-based care lead agencies,
3210 and the lead agencies' subcontractors share the responsibility
3211 for achieving the outcome goals specified in s. 409.986(2).

3212 (2) In order to assess the achievement of the outcome goals
3213 specified in s. 409.986(2), the department shall maintain a
3214 comprehensive, results-oriented accountability system that
3215 monitors the use of resources, the quality and amount of
3216 services provided, and child and family outcomes through data
3217 analysis, research review, evaluation, and quality improvement.
3218 The system shall provide information about individual entities'
3219 performance as well as the performance of groups of entities
3220 working together as an integrated system of care on a local,
3221 regional, and statewide basis. The department shall issue a
3222 request for information for the accountability system to
3223 identify system development and implementation approaches,
3224 technical and operational solutions, timeframes for
3225 implementation, pricing and costs, and implementation
3226 considerations; assess respondents' experience in providing
3227 similar systems and interest in providing the accountability
3228 system; and generate any other information determined by the
3229 department to be useful in establishing the system. The
3230 department shall provide a report to the Governor, the President



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3231 of the Senate, and the Speaker of the House of Representatives
3232 by February 1, 2015, summarizing the responses and providing the
3233 department's recommendations regarding procurement and
3234 implementation of the system. In maintaining the accountability
3235 system, the department shall:

3236 (a) Identify valid and reliable outcome measures for each
3237 of the goals specified in this subsection. The outcome data set
3238 must consist of a limited number of understandable measures
3239 using available data to quantify outcomes as children move
3240 through the system of care. Such measures may aggregate multiple
3241 variables that affect the overall achievement of the outcome
3242 goals. Valid and reliable measures must be based on adequate
3243 sample sizes, be gathered over suitable time periods, and
3244 reflect authentic rather than spurious results, and may not be
3245 susceptible to manipulation.

3246 (b) Implement a monitoring system to track the identified
3247 outcome measures on a statewide, regional, and provider-specific
3248 basis. The monitoring system must identify trends and chart
3249 progress toward achievement of the goals specified s.
3250 409.986(2). The requirements of the monitoring system may be
3251 incorporated into the quality assurance program required under
3252 s. 409.996(18). The monitoring system shall track the placement
3253 of siblings in the child welfare system, including the extent to
3254 which siblings are placed together and, if the siblings are not
3255 placed together, the efforts to maintain the relationship
3256 between siblings through face-to-face visitation and written and
3257 electronic contact.

3258 (c) Develop and maintain an analytical system that builds
3259 on the outcomes monitoring system to assess the statistical



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3260 validity of observed associations between child welfare
3261 interventions and the measured outcomes. The analysis must use
3262 quantitative methods to adjust for variations in demographic or
3263 other conditions. The analysis must include longitudinal studies
3264 to evaluate longer-term outcomes such as continued safety,
3265 family permanence, and transition to self-sufficiency. The
3266 analysis may also include qualitative research methods to
3267 provide insight into statistical patterns.

3268 (d) Develop and maintain a program of research review to
3269 identify interventions that are supported by evidence as
3270 causally linked to improved outcomes.

3271 (e) Support an ongoing process of evaluation to determine
3272 the efficacy and effectiveness of various interventions.
3273 Efficacy evaluation is intended to determine the validity of a
3274 causal relationship between an intervention and an outcome.
3275 Effectiveness evaluation is intended to determine the extent to
3276 which the results can be generalized.

3277 (f) Develop and maintain an inclusive, interactive, and
3278 evidence-supported program of quality improvement which promotes
3279 individual skill building as well as organizational learning.

3280 (g) Develop and implement a method for making the results
3281 of the accountability system transparent for all parties
3282 involved in the child welfare system as well as policymakers and
3283 the public. The presentation of the results shall provide a
3284 comprehensible, visual report card for the state and each
3285 community-based care region, indicating the current status
3286 relative to each goal and trends in that status over time. The
3287 presentation shall identify and report outcome measures that
3288 assess the performance of the department, the community-based



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3289 care lead agency, and the lead agency's subcontractors working
3290 together as an integrated system of care.

3291 (3) The department shall establish a technical advisory
3292 panel consisting of representatives from lead agencies,
3293 community-based care providers, other contract providers,
3294 community alliances, and family representatives. The President
3295 of the Senate and the Speaker of the House of Representatives
3296 shall each appoint a member to serve as a legislative liaison to
3297 the panel. The technical advisory panel shall advise the
3298 department on meeting the requirements of this section.

3299 (4) The accountability system may not rank or compare
3300 performance among community-based care regions unless adequate
3301 and specific adjustments are adopted that account for the
3302 diversity in regions' demographics, resources, and other
3303 relevant characteristics.

3304 (5) The results of the accountability system must provide
3305 the basis for performance incentives if funds for such payments
3306 are made available through the General Appropriations Act.

3307 (6) At least quarterly, the department shall make the
3308 results of the accountability system available to the public
3309 through publication on its website. The website must allow for
3310 custom searches of the performance data.

3311 (7) By October 1 of each year, the department shall submit
3312 a report on the statewide and individual community-based care
3313 lead agency results for child protection and child welfare
3314 systems. The department shall use the accountability system and
3315 consult with the community alliance and the chief judge or
3316 judges in the community-based care service area to prepare the
3317 report. The report shall be submitted to the Governor, the



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3318 President of the Senate, and the Speaker of the House of
3319 Representatives.

3320 Section 40. Section 827.10, Florida Statutes, is created to
3321 read:

3322 827.10 Unlawful desertion of a child.-

3323 (1) As used in this section, the term:

3324 (a) "Care" means support and services necessary to maintain
3325 the child's physical and mental health, including, but not
3326 limited to, food, nutrition, clothing, shelter, supervision,
3327 medicine, and medical services that a prudent person would
3328 consider essential for the well-being of the child.

3329 (b) "Caregiver" has the same meaning as provided in s.
3330 39.01.

3331 (c) "Child" means a child for whose care the caregiver is
3332 legally responsible.

3333 (d) "Desertion" or "deserts" means to leave a child in a
3334 place or with a person other than a relative with the intent not
3335 to return to the child and with the intent not to provide for
3336 the care of the child.

3337 (e) "Relative" has the same meaning as provided in s.
3338 39.01.

3339 (2) A caregiver who deserts a child under circumstances in
3340 which the caregiver knew or should have known that the desertion
3341 exposes the child to unreasonable risk of harm commits a felony
3342 of the third degree, punishable as provided in s. 775.082, s.
3343 775.083, or s. 775.084.

3344 (3) This section does not apply to a person who surrenders
3345 a newborn infant in compliance with s. 383.50.

3346 (4) This section does not preclude prosecution for a



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3347 criminal act under any other law, including, but not limited to,
3348 prosecution of child abuse or neglect of a child under s.
3349 827.03.

3350 Section 41. Paragraph (d) of subsection (4) of section
3351 985.04, Florida Statutes, is amended to read:

3352 985.04 Oaths; records; confidential information.—

3353 (4)

3354 (d) The department shall disclose to the school
3355 superintendent the presence of any child in the care and custody
3356 or under the jurisdiction or supervision of the department who
3357 has a known history of criminal sexual behavior with other
3358 juveniles; ~~is an~~ alleged to have committed juvenile sexual abuse
3359 ~~offender,~~ as defined in s. 39.01; or has pled guilty or nolo
3360 contendere to, or has been found to have committed, a violation
3361 of chapter 794, chapter 796, chapter 800, s. 827.071, or s.
3362 847.0133, regardless of adjudication. Any employee of a district
3363 school board who knowingly and willfully discloses such
3364 information to an unauthorized person commits a misdemeanor of
3365 the second degree, punishable as provided in s. 775.082 or s.
3366 775.083.

3367 Section 43. Paragraph (h) is added to subsection (1) of
3368 section 1009.25, Florida Statutes, to read:

3369 1009.25 Fee exemptions.—

3370 (1) The following students are exempt from the payment of
3371 tuition and fees, including lab fees, at a school district that
3372 provides workforce education programs, Florida College System
3373 institution, or state university:

3374 (h) Pursuant to s. 402.403, child protection and child
3375 welfare personnel as defined in s. 402.402 who are enrolled in



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3376 an accredited bachelor's degree or master's degree in social
3377 work program, provided that the student attains at least a grade
3378 of "B" in all courses for which tuition and fees are exempted.

3379 Section 44. Section 402.401, Florida Statutes, is repealed.

3380 Section 45. Section 409.1671, Florida Statutes, is
3381 repealed.

3382 Section 46. Section 409.16715, Florida Statutes, is
3383 repealed.

3384 Section 47. Section 409.16745, Florida Statutes, is
3385 repealed.

3386 Section 48. Section 1004.61, Florida Statutes, is repealed.

3387 Section 49. Paragraph (g) of subsection (1) of section
3388 39.201, Florida Statutes, is amended to read:

3389 39.201 Mandatory reports of child abuse, abandonment, or
3390 neglect; mandatory reports of death; central abuse hotline.—

3391 (1)

3392 (g) Nothing in this chapter or in the contracting with
3393 community-based care providers for foster care and related
3394 services as specified in s. 409.987 ~~s. 409.1671~~ shall be
3395 construed to remove or reduce the duty and responsibility of any
3396 person, including any employee of the community-based care
3397 provider, to report a suspected or actual case of child abuse,
3398 abandonment, or neglect or the sexual abuse of a child to the
3399 department's central abuse hotline.

3400 Section 50. Subsection (1) of section 39.302, Florida
3401 Statutes, is amended to read:

3402 39.302 Protective investigations of institutional child
3403 abuse, abandonment, or neglect.—

3404 (1) The department shall conduct a child protective



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3405 investigation of each report of institutional child abuse,
3406 abandonment, or neglect. Upon receipt of a report that alleges
3407 that an employee or agent of the department, or any other entity
3408 or person covered by s. 39.01(32) ~~s. 39.01(33)~~ or (47), acting
3409 in an official capacity, has committed an act of child abuse,
3410 abandonment, or neglect, the department shall initiate a child
3411 protective investigation within the timeframe established under
3412 s. 39.201(5) and notify the appropriate state attorney, law
3413 enforcement agency, and licensing agency, which shall
3414 immediately conduct a joint investigation, unless independent
3415 investigations are more feasible. When conducting investigations
3416 or having face-to-face interviews with the child, investigation
3417 visits shall be unannounced unless it is determined by the
3418 department or its agent that unannounced visits threaten the
3419 safety of the child. If a facility is exempt from licensing, the
3420 department shall inform the owner or operator of the facility of
3421 the report. Each agency conducting a joint investigation is
3422 entitled to full access to the information gathered by the
3423 department in the course of the investigation. A protective
3424 investigation must include an interview with the child's parent
3425 or legal guardian. The department shall make a full written
3426 report to the state attorney within 3 working days after making
3427 the oral report. A criminal investigation shall be coordinated,
3428 whenever possible, with the child protective investigation of
3429 the department. Any interested person who has information
3430 regarding the offenses described in this subsection may forward
3431 a statement to the state attorney as to whether prosecution is
3432 warranted and appropriate. Within 15 days after the completion
3433 of the investigation, the state attorney shall report the



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3434 findings to the department and shall include in the report a
3435 determination of whether or not prosecution is justified and
3436 appropriate in view of the circumstances of the specific case.

3437 Section 51. Subsection (1) of section 39.524, Florida
3438 Statutes, is amended to read:

3439 39.524 Safe-harbor placement.—

3440 (1) Except as provided in s. 39.407 or s. 985.801, a
3441 dependent child 6 years of age or older who has been found to be
3442 a victim of sexual exploitation as defined in s. 39.01(68)(g) ~~s.~~
3443 ~~39.01(67)(g)~~ must be assessed for placement in a safe house as
3444 provided in s. 409.1678. The assessment shall be conducted by
3445 the department or its agent and shall incorporate and address
3446 current and historical information from any law enforcement
3447 reports; psychological testing or evaluation that has occurred;
3448 current and historical information from the guardian ad litem,
3449 if one has been assigned; current and historical information
3450 from any current therapist, teacher, or other professional who
3451 has knowledge of the child and has worked with the child; and
3452 any other information concerning the availability and
3453 suitability of safe-house placement. If such placement is
3454 determined to be appropriate as a result of this assessment, the
3455 child may be placed in a safe house, if one is available. As
3456 used in this section, the term "available" as it relates to a
3457 placement means a placement that is located within the circuit
3458 or otherwise reasonably accessible.

3459 Section 52. Subsection (6) of section 316.613, Florida
3460 Statutes, is amended to read:

3461 316.613 Child restraint requirements.—

3462 (6) The child restraint requirements imposed by this



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3463 section do not apply to a chauffeur-driven taxi, limousine,
3464 sedan, van, bus, motor coach, or other passenger vehicle if the
3465 operator and the motor vehicle are hired and used for the
3466 transportation of persons for compensation. It is the obligation
3467 and responsibility of the parent, guardian, or other person
3468 responsible for a child's welfare, as defined in s. 39.01(47),
3469 to comply with the requirements of this section.

3470 Section 53. Subsections (1), (3), and (5) of section
3471 409.1676, Florida Statutes, are amended to read:

3472 409.1676 Comprehensive residential group care services to
3473 children who have extraordinary needs.-

3474 (1) It is the intent of the Legislature to provide
3475 comprehensive residential group care services, including
3476 residential care, case management, and other services, to
3477 children in the child protection system who have extraordinary
3478 needs. These services are to be provided in a residential group
3479 care setting by a not-for-profit corporation or a local
3480 government entity under a contract with the Department of
3481 Children and Families ~~Family Services~~ or by a lead agency as
3482 described in s. 409.987 ~~s. 409.1671~~. These contracts should be
3483 designed to provide an identified number of children with access
3484 to a full array of services for a fixed price. Further, it is
3485 the intent of the Legislature that the Department of Children
3486 and Families ~~Family Services~~ and the Department of Juvenile
3487 Justice establish an interagency agreement by December 1, 2002,
3488 which describes respective agency responsibilities for referral,
3489 placement, service provision, and service coordination for
3490 dependent and delinquent youth who are referred to these
3491 residential group care facilities. The agreement must require



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3492 interagency collaboration in the development of terms,
3493 conditions, and performance outcomes for residential group care
3494 contracts serving the youth referred who have been adjudicated
3495 both dependent and delinquent.

3496 (3) The department, in accordance with a specific
3497 appropriation for this program, shall contract with a not-for-
3498 profit corporation, a local government entity, or the lead
3499 agency that has been established in accordance with s. 409.987
3500 ~~s. 409.1671~~ for the performance of residential group care
3501 services described in this section. A lead agency that is
3502 currently providing residential care may provide this service
3503 directly with the approval of the local community alliance. The
3504 department or a lead agency may contract for more than one site
3505 in a county if that is determined to be the most effective way
3506 to achieve the goals set forth in this section.

3507 (5) The department may transfer all casework
3508 responsibilities for children served under this program to the
3509 entity that provides this service, including case management and
3510 development and implementation of a case plan in accordance with
3511 current standards for child protection services. When the
3512 department establishes this program in a community that has a
3513 lead agency as described in s. 409.987 ~~s. 409.1671~~, the casework
3514 responsibilities must be transferred to the lead agency.

3515 Section 54. Subsection (2) of section 409.1677, Florida
3516 Statutes, is amended to read:

3517 409.1677 Model comprehensive residential services
3518 programs.—

3519 (2) The department shall establish a model comprehensive
3520 residential services program in Manatee and Miami-Dade Counties



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3521 through a contract with the designated lead agency established
3522 in accordance with s. 409.987 ~~s. 409.1671~~ or with a private
3523 entity capable of providing residential group care and home-
3524 based care and experienced in the delivery of a range of
3525 services to foster children, if no lead agency exists. These
3526 model programs are to serve that portion of eligible children
3527 within each county which is specified in the contract, based on
3528 funds appropriated, to include a full array of services for a
3529 fixed price. The private entity or lead agency is responsible
3530 for all programmatic functions necessary to carry out the intent
3531 of this section.

3532 Section 55. Paragraph (d) of subsection (1) of section
3533 409.1678, Florida Statutes, is amended to read:

3534 409.1678 Safe harbor for children who are victims of sexual
3535 exploitation.—

3536 (1) As used in this section, the term:

3537 (d) "Sexually exploited child" means a dependent child who
3538 has suffered sexual exploitation as defined in s. 39.01(68)(g)
3539 ~~s. 39.01(67)(g)~~ and is ineligible for relief and benefits under
3540 the federal Trafficking Victims Protection Act, 22 U.S.C. ss.
3541 7101 et seq.

3542 Section 56. Subsection (24) of section 409.906, Florida
3543 Statutes, is amended to read:

3544 409.906 Optional Medicaid services.—Subject to specific
3545 appropriations, the agency may make payments for services which
3546 are optional to the state under Title XIX of the Social Security
3547 Act and are furnished by Medicaid providers to recipients who
3548 are determined to be eligible on the dates on which the services
3549 were provided. Any optional service that is provided shall be



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3550 provided only when medically necessary and in accordance with
3551 state and federal law. Optional services rendered by providers
3552 in mobile units to Medicaid recipients may be restricted or
3553 prohibited by the agency. Nothing in this section shall be
3554 construed to prevent or limit the agency from adjusting fees,
3555 reimbursement rates, lengths of stay, number of visits, or
3556 number of services, or making any other adjustments necessary to
3557 comply with the availability of moneys and any limitations or
3558 directions provided for in the General Appropriations Act or
3559 chapter 216. If necessary to safeguard the state's systems of
3560 providing services to elderly and disabled persons and subject
3561 to the notice and review provisions of s. 216.177, the Governor
3562 may direct the Agency for Health Care Administration to amend
3563 the Medicaid state plan to delete the optional Medicaid service
3564 known as "Intermediate Care Facilities for the Developmentally
3565 Disabled." Optional services may include:

3566 (24) CHILD-WELFARE-TARGETED CASE MANAGEMENT.—The Agency for
3567 Health Care Administration, in consultation with the Department
3568 of Children and Families ~~Family Services~~, may establish a
3569 targeted case-management project in those counties identified by
3570 the Department of Children and Families ~~Family Services~~ and for
3571 all counties with a community-based child welfare project, as
3572 authorized under s. 409.987 ~~s. 409.1671~~, which have been
3573 specifically approved by the department. The covered group of
3574 individuals who are eligible to receive targeted case management
3575 include children who are eligible for Medicaid; who are between
3576 the ages of birth through 21; and who are under protective
3577 supervision or postplacement supervision, under foster-care
3578 supervision, or in shelter care or foster care. The number of



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3579 individuals who are eligible to receive targeted case management
3580 is limited to the number for whom the Department of Children and
3581 Families ~~Family Services~~ has matching funds to cover the costs.
3582 The general revenue funds required to match the funds for
3583 services provided by the community-based child welfare projects
3584 are limited to funds available for services described under s.
3585 409.990 ~~s. 409.1671~~. The Department of Children and Families
3586 ~~Family Services~~ may transfer the general revenue matching funds
3587 as billed by the Agency for Health Care Administration.

3588 Section 57. Paragraph (b) of subsection (4) of section
3589 409.912, Florida Statutes, is amended to read:

3590 409.912 Cost-effective purchasing of health care.—The
3591 agency shall purchase goods and services for Medicaid recipients
3592 in the most cost-effective manner consistent with the delivery
3593 of quality medical care. To ensure that medical services are
3594 effectively utilized, the agency may, in any case, require a
3595 confirmation or second physician's opinion of the correct
3596 diagnosis for purposes of authorizing future services under the
3597 Medicaid program. This section does not restrict access to
3598 emergency services or poststabilization care services as defined
3599 in 42 C.F.R. part 438.114. Such confirmation or second opinion
3600 shall be rendered in a manner approved by the agency. The agency
3601 shall maximize the use of prepaid per capita and prepaid
3602 aggregate fixed-sum basis services when appropriate and other
3603 alternative service delivery and reimbursement methodologies,
3604 including competitive bidding pursuant to s. 287.057, designed
3605 to facilitate the cost-effective purchase of a case-managed
3606 continuum of care. The agency shall also require providers to
3607 minimize the exposure of recipients to the need for acute



3608 inpatient, custodial, and other institutional care and the
3609 inappropriate or unnecessary use of high-cost services. The
3610 agency shall contract with a vendor to monitor and evaluate the
3611 clinical practice patterns of providers in order to identify
3612 trends that are outside the normal practice patterns of a
3613 provider's professional peers or the national guidelines of a
3614 provider's professional association. The vendor must be able to
3615 provide information and counseling to a provider whose practice
3616 patterns are outside the norms, in consultation with the agency,
3617 to improve patient care and reduce inappropriate utilization.
3618 The agency may mandate prior authorization, drug therapy
3619 management, or disease management participation for certain
3620 populations of Medicaid beneficiaries, certain drug classes, or
3621 particular drugs to prevent fraud, abuse, overuse, and possible
3622 dangerous drug interactions. The Pharmaceutical and Therapeutics
3623 Committee shall make recommendations to the agency on drugs for
3624 which prior authorization is required. The agency shall inform
3625 the Pharmaceutical and Therapeutics Committee of its decisions
3626 regarding drugs subject to prior authorization. The agency is
3627 authorized to limit the entities it contracts with or enrolls as
3628 Medicaid providers by developing a provider network through
3629 provider credentialing. The agency may competitively bid single-
3630 source-provider contracts if procurement of goods or services
3631 results in demonstrated cost savings to the state without
3632 limiting access to care. The agency may limit its network based
3633 on the assessment of beneficiary access to care, provider
3634 availability, provider quality standards, time and distance
3635 standards for access to care, the cultural competence of the
3636 provider network, demographic characteristics of Medicaid



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3637 beneficiaries, practice and provider-to-beneficiary standards,
3638 appointment wait times, beneficiary use of services, provider
3639 turnover, provider profiling, provider licensure history,
3640 previous program integrity investigations and findings, peer
3641 review, provider Medicaid policy and billing compliance records,
3642 clinical and medical record audits, and other factors. Providers
3643 are not entitled to enrollment in the Medicaid provider network.
3644 The agency shall determine instances in which allowing Medicaid
3645 beneficiaries to purchase durable medical equipment and other
3646 goods is less expensive to the Medicaid program than long-term
3647 rental of the equipment or goods. The agency may establish rules
3648 to facilitate purchases in lieu of long-term rentals in order to
3649 protect against fraud and abuse in the Medicaid program as
3650 defined in s. 409.913. The agency may seek federal waivers
3651 necessary to administer these policies.

3652 (4) The agency may contract with:

3653 (b) An entity that is providing comprehensive behavioral
3654 health care services to certain Medicaid recipients through a
3655 capitated, prepaid arrangement pursuant to the federal waiver
3656 provided for by s. 409.905(5). Such entity must be licensed
3657 under chapter 624, chapter 636, or chapter 641, or authorized
3658 under paragraph (c) or paragraph (d), and must possess the
3659 clinical systems and operational competence to manage risk and
3660 provide comprehensive behavioral health care to Medicaid
3661 recipients. As used in this paragraph, the term "comprehensive
3662 behavioral health care services" means covered mental health and
3663 substance abuse treatment services that are available to
3664 Medicaid recipients. The secretary of the Department of Children
3665 and Families ~~Family Services~~ shall approve provisions of



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3666 procurements related to children in the department's care or
3667 custody before enrolling such children in a prepaid behavioral
3668 health plan. Any contract awarded under this paragraph must be
3669 competitively procured. In developing the behavioral health care
3670 prepaid plan procurement document, the agency shall ensure that
3671 the procurement document requires the contractor to develop and
3672 implement a plan to ensure compliance with s. 394.4574 related
3673 to services provided to residents of licensed assisted living
3674 facilities that hold a limited mental health license. Except as
3675 provided in subparagraph 5., and except in counties where the
3676 Medicaid managed care pilot program is authorized pursuant to s.
3677 409.91211, the agency shall seek federal approval to contract
3678 with a single entity meeting these requirements to provide
3679 comprehensive behavioral health care services to all Medicaid
3680 recipients not enrolled in a Medicaid managed care plan
3681 authorized under s. 409.91211, a provider service network
3682 authorized under paragraph (d), or a Medicaid health maintenance
3683 organization in an AHCA area. In an AHCA area where the Medicaid
3684 managed care pilot program is authorized pursuant to s.
3685 409.91211 in one or more counties, the agency may procure a
3686 contract with a single entity to serve the remaining counties as
3687 an AHCA area or the remaining counties may be included with an
3688 adjacent AHCA area and are subject to this paragraph. Each
3689 entity must offer a sufficient choice of providers in its
3690 network to ensure recipient access to care and the opportunity
3691 to select a provider with whom they are satisfied. The network
3692 shall include all public mental health hospitals. To ensure
3693 unimpaired access to behavioral health care services by Medicaid
3694 recipients, all contracts issued pursuant to this paragraph must



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3695 require 80 percent of the capitation paid to the managed care
3696 plan, including health maintenance organizations and capitated
3697 provider service networks, to be expended for the provision of
3698 behavioral health care services. If the managed care plan
3699 expends less than 80 percent of the capitation paid for the
3700 provision of behavioral health care services, the difference
3701 shall be returned to the agency. The agency shall provide the
3702 plan with a certification letter indicating the amount of
3703 capitation paid during each calendar year for behavioral health
3704 care services pursuant to this section. The agency may reimburse
3705 for substance abuse treatment services on a fee-for-service
3706 basis until the agency finds that adequate funds are available
3707 for capitated, prepaid arrangements.

3708 1. The agency shall modify the contracts with the entities
3709 providing comprehensive inpatient and outpatient mental health
3710 care services to Medicaid recipients in Hillsborough, Highlands,
3711 Hardee, Manatee, and Polk Counties, to include substance abuse
3712 treatment services.

3713 2. Except as provided in subparagraph 5., the agency and
3714 the Department of Children and Families ~~Family Services~~ shall
3715 contract with managed care entities in each AHCA area except
3716 area 6 or arrange to provide comprehensive inpatient and
3717 outpatient mental health and substance abuse services through
3718 capitated prepaid arrangements to all Medicaid recipients who
3719 are eligible to participate in such plans under federal law and
3720 regulation. In AHCA areas where eligible individuals number less
3721 than 150,000, the agency shall contract with a single managed
3722 care plan to provide comprehensive behavioral health services to
3723 all recipients who are not enrolled in a Medicaid health



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3724 maintenance organization, a provider service network authorized
3725 under paragraph (d), or a Medicaid capitated managed care plan
3726 authorized under s. 409.91211. The agency may contract with more
3727 than one comprehensive behavioral health provider to provide
3728 care to recipients who are not enrolled in a Medicaid capitated
3729 managed care plan authorized under s. 409.91211, a provider
3730 service network authorized under paragraph (d), or a Medicaid
3731 health maintenance organization in AHCA areas where the eligible
3732 population exceeds 150,000. In an AHCA area where the Medicaid
3733 managed care pilot program is authorized pursuant to s.
3734 409.91211 in one or more counties, the agency may procure a
3735 contract with a single entity to serve the remaining counties as
3736 an AHCA area or the remaining counties may be included with an
3737 adjacent AHCA area and shall be subject to this paragraph.
3738 Contracts for comprehensive behavioral health providers awarded
3739 pursuant to this section shall be competitively procured. Both
3740 for-profit and not-for-profit corporations are eligible to
3741 compete. Managed care plans contracting with the agency under
3742 subsection (3) or paragraph (d) shall provide and receive
3743 payment for the same comprehensive behavioral health benefits as
3744 provided in AHCA rules, including handbooks incorporated by
3745 reference. In AHCA area 11, the agency shall contract with at
3746 least two comprehensive behavioral health care providers to
3747 provide behavioral health care to recipients in that area who
3748 are enrolled in, or assigned to, the MediPass program. One of
3749 the behavioral health care contracts must be with the existing
3750 provider service network pilot project, as described in
3751 paragraph (d), for the purpose of demonstrating the cost-
3752 effectiveness of the provision of quality mental health services



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3753 through a public hospital-operated managed care model. Payment
3754 shall be at an agreed-upon capitated rate to ensure cost
3755 savings. Of the recipients in area 11 who are assigned to
3756 MediPass under s. 409.9122(2)(k), a minimum of 50,000 of those
3757 MediPass-enrolled recipients shall be assigned to the existing
3758 provider service network in area 11 for their behavioral care.

3759 3. Children residing in a statewide inpatient psychiatric
3760 program, or in a Department of Juvenile Justice or a Department
3761 of Children and Families ~~Family Services~~ residential program
3762 approved as a Medicaid behavioral health overlay services
3763 provider may not be included in a behavioral health care prepaid
3764 health plan or any other Medicaid managed care plan pursuant to
3765 this paragraph.

3766 4. Traditional community mental health providers under
3767 contract with the Department of Children and Families ~~Family~~
3768 ~~Services~~ pursuant to part IV of chapter 394, child welfare
3769 providers under contract with the Department of Children and
3770 Families ~~Family Services~~ in areas 1 and 6, and inpatient mental
3771 health providers licensed pursuant to chapter 395 must be
3772 offered an opportunity to accept or decline a contract to
3773 participate in any provider network for prepaid behavioral
3774 health services.

3775 5. All Medicaid-eligible children, except children in area
3776 1 and children in Highlands County, Hardee County, Polk County,
3777 or Manatee County of area 6, which ~~that~~ are open for child
3778 welfare services in the statewide automated child welfare
3779 information system, shall receive their behavioral health care
3780 services through a specialty prepaid plan operated by community-
3781 based lead agencies through a single agency or formal agreements



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3782 among several agencies. The agency shall work with the specialty
3783 plan to develop clinically effective, evidence-based
3784 alternatives as a downward substitution for the statewide
3785 inpatient psychiatric program and similar residential care and
3786 institutional services. The specialty prepaid plan must result
3787 in savings to the state comparable to savings achieved in other
3788 Medicaid managed care and prepaid programs. Such plan must
3789 provide mechanisms to maximize state and local revenues. The
3790 specialty prepaid plan shall be developed by the agency and the
3791 Department of Children and Families ~~Family Services~~. The agency
3792 may seek federal waivers to implement this initiative. Medicaid-
3793 eligible children whose cases are open for child welfare
3794 services in the statewide automated child welfare information
3795 system and who reside in AHCA area 10 shall be enrolled in a
3796 capitated provider service network or other capitated managed
3797 care plan, which, in coordination with available community-based
3798 care providers specified in s. 409.987 ~~s. 409.1671~~, shall
3799 provide sufficient medical, developmental, and behavioral health
3800 services to meet the needs of these children.

3801
3802 Effective July 1, 2012, in order to ensure continuity of care,
3803 the agency is authorized to extend or modify current contracts
3804 based on current service areas or on a regional basis, as
3805 determined appropriate by the agency, with comprehensive
3806 behavioral health care providers as described in this paragraph
3807 during the period prior to its expiration. This paragraph
3808 expires October 1, 2014.

3809 Section 58. Paragraph (dd) of subsection (3) of section
3810 409.91211, Florida Statutes, is amended to read:



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3811 409.91211 Medicaid managed care pilot program.-
3812 (3) The agency shall have the following powers, duties, and
3813 responsibilities with respect to the pilot program:
3814 (dd) To implement service delivery mechanisms within a
3815 specialty plan in area 10 to provide behavioral health care
3816 services to Medicaid-eligible children whose cases are open for
3817 child welfare services in the HomeSafeNet system. These services
3818 must be coordinated with community-based care providers as
3819 specified in s. 409.986 ~~s. 409.1671~~, where available, and be
3820 sufficient to meet the developmental, behavioral, and emotional
3821 needs of these children. Children in area 10 who have an open
3822 case in the HomeSafeNet system shall be enrolled into the
3823 specialty plan. These service delivery mechanisms must be
3824 implemented no later than July 1, 2011, in AHCA area 10 in order
3825 for the children in AHCA area 10 to remain exempt from the
3826 statewide plan under s. 409.912(4)(b)5. An administrative fee
3827 may be paid to the specialty plan for the coordination of
3828 services based on the receipt of the state share of that fee
3829 being provided through intergovernmental transfers.
3830 Section 59. Paragraph (d) of subsection (1) of section
3831 420.628, Florida Statutes, is amended to read:
3832 420.628 Affordable housing for children and young adults
3833 leaving foster care; legislative findings and intent.-
3834 (1)
3835 (d) The Legislature intends that the Florida Housing
3836 Finance Corporation, agencies within the State Housing
3837 Initiative Partnership Program, local housing finance agencies,
3838 public housing authorities, and their agents, and other
3839 providers of affordable housing coordinate with the Department



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3840 of Children and Families ~~Family Services~~, their agents, and
3841 community-based care providers who provide services under s.
3842 409.986 ~~s. 409.1671~~ to develop and implement strategies and
3843 procedures designed to make affordable housing available
3844 whenever and wherever possible to young adults who leave the
3845 child welfare system.

3846 Section 60. Subsection (5) of section 960.065, Florida
3847 Statutes, is amended to read:

3848 960.065 Eligibility for awards.—

3849 (5) A person is not ineligible for an award pursuant to
3850 paragraph (2) (a), paragraph (2) (b), or paragraph (2) (c) if that
3851 person is a victim of sexual exploitation of a child as defined
3852 in s. 39.01(68) (g) ~~s. 39.01(67) (g)~~.

3853 Section 61. Except as otherwise expressly provided in this
3854 act, this act shall take effect July 1, 2014.

3855
3856 ===== T I T L E A M E N D M E N T =====

3857 And the title is amended as follows:

3858 Delete everything before the enacting clause
3859 and insert:

3860 A bill to be entitled
3861 An act relating to child welfare; amending s. 20.19,
3862 F.S.; requiring the Secretary of Children and Families
3863 to appoint an Assistant Secretary for Child Welfare;
3864 providing qualifications and responsibilities;
3865 amending s. 39.001, F.S.; revising the purposes of ch.
3866 39, F.S.; requiring the department to provide for
3867 certain services for medically complex children;
3868 amending s. 39.01, F.S.; providing, revising, and



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3869 deleting definitions; amending s. 39.013, F.S.;

3870 clarifying responsibilities of the department in

3871 dependency proceedings; amending s. 39.201, F.S.;

3872 requiring alleged incidents of juvenile sexual abuse

3873 involving specified children to be reported to the

3874 department's central abuse hotline; requiring the

3875 department to provide specified information on an

3876 investigation of child sexual abuse to the court;

3877 creating s. 39.2015, F.S.; requiring the department to

3878 conduct specified investigations using critical

3879 incident rapid response teams; providing requirements

3880 for such investigations and for team membership;

3881 authorizing team access to specified information;

3882 requiring the cooperation of specified agencies and

3883 organizations; requiring the team to provide an

3884 investigation report; requiring the secretary to

3885 develop guidelines for investigations and provide team

3886 member training; creating s. 39.2022, F.S.; providing

3887 legislative intent; requiring the department to

3888 publish specified information on its website regarding

3889 the death of a child reported to the central abuse

3890 hotline; amending s. 39.301, F.S.; requiring the use

3891 of safety plans in child protection investigations in

3892 cases of present or impending danger; providing

3893 requirements for implementation of a safety plan;

3894 providing conditions for filing a petition for

3895 dependency; amending s. 39.303, F.S.; requiring

3896 physician involvement when a child protection team

3897 evaluates a report of medical neglect of a medically



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3898 complex child; creating s. 39.3068, F.S.; providing
3899 requirements for investigating medical neglect;
3900 providing duties of the department; amending s.
3901 39.307, F.S.; requiring the department to assist the
3902 family, child, and caregiver in receiving services
3903 upon a report alleging juvenile sexual abuse or
3904 inappropriate sexual behavior; requiring the
3905 department to maintain specified records; requiring
3906 child sexual abuse to be taken into account in
3907 placement consideration; requiring the department to
3908 monitor the occurrence of child sexual abuse and
3909 related services; amending s. 39.402, F.S.; requiring
3910 the department to make a reasonable effort to keep
3911 siblings together when they are placed in out-of-home
3912 care under certain circumstances; providing for
3913 sibling visitation under certain conditions; amending
3914 s. 39.501, F.S.; requiring compliance with a safety
3915 plan to be considered when deciding a petition for
3916 dependency; amending s. 39.504, F.S.; authorizing the
3917 court to order a person to comply with a safety plan
3918 that is implemented in an injunction; amending s.
3919 39.5085, F.S.; revising legislative intent;
3920 authorizing placement of a child with a nonrelative
3921 caregiver and financial assistance for such
3922 nonrelative caregiver through the Relative Caregiver
3923 Program under certain circumstances; amending s.
3924 39.604, F.S.; requiring certain children to attend a
3925 licensed early education or child care program;
3926 requiring the inclusion of attendance at a licensed



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3927 early education or child care program in a child's
3928 safety plan; amending s. 39.701, F.S.; requiring the
3929 court to consider contact among siblings in judicial
3930 reviews; authorizing the court to remove specified
3931 disabilities of nonage at judicial reviews; amending
3932 s. 39.802, F.S.; removing department authorization to
3933 sign a petition for termination of parental rights;
3934 amending s. 39.806, F.S.; providing additional grounds
3935 for termination of parental rights; amending s.
3936 63.212, F.S.; revising advertising requirements for
3937 adoption services; requiring a person who places an
3938 advertisement for adoption services to provide
3939 specified information; deleting a criminal penalty for
3940 knowingly publishing or assisting in the publication
3941 of an advertisement that violates specified
3942 provisions; amending s. 383.402, F.S.; requiring state
3943 and local review committees to review all child deaths
3944 that are reported to the department's central abuse
3945 hotline; revising the due date for and contents of a
3946 report; amending s. 402.40, F.S.; requiring a third-
3947 party credentialing entity to establish an advisory
3948 committee; authorizing the department to approve
3949 certification of specializations; creating s. 402.402,
3950 F.S.; defining terms; providing preferences for
3951 education and work experience for child protection and
3952 child welfare personnel; requiring a report; providing
3953 training requirements for department attorneys;
3954 creating s. 402.403, F.S.; establishing a tuition
3955 exemption program for child protection and child



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3956 welfare personnel; providing eligibility requirements;
3957 amending s. 409.165, F.S.; enhancing provision of care
3958 to medically complex children; amending s. 409.175,
3959 F.S.; revising requirements relating to licensure of
3960 family foster homes, residential child-caring
3961 agencies, and child-placing agencies; amending s.
3962 409.967, F.S.; revising standards for Medicaid managed
3963 care plan accountability with respect to services for
3964 dependent children and their parents; amending s.
3965 409.972, F.S.; exempting certain Medicaid recipients
3966 from mandatory enrollment in managed care plans;
3967 providing a directive to the Division of Law Revision
3968 and Information; creating part V of ch. 409, F.S.;
3969 creating s. 409.986, F.S.; providing legislative
3970 findings and intent; providing child protection and
3971 child welfare outcome goals; defining terms; creating
3972 s. 409.987, F.S.; providing for department procurement
3973 of community-based care lead agencies; providing
3974 requirements for contracting as a lead agency;
3975 creating s. 409.988, F.S.; providing duties of a
3976 community-based care lead agency; providing licensure
3977 requirements for a lead agency; specifying services
3978 provided by a lead agency; providing conditions for an
3979 agency or provider to act as a child's guardian;
3980 creating s. 409.990, F.S.; providing general funding
3981 provisions for lead agencies; providing for a matching
3982 grant program and the maximum amount of funds that may
3983 be awarded; requiring the department to develop and
3984 implement a community-based care risk pool initiative;



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3985 providing requirements for the risk pool;
3986 transferring, renumbering, and amending s. 409.16713,
3987 F.S.; transferring provisions relating to the
3988 allocation of funds for community-based care lead
3989 agencies; conforming a cross-reference; creating s.
3990 409.992, F.S.; providing requirements for community-
3991 based care lead agency expenditures; creating s.
3992 409.993, F.S.; providing legislative findings;
3993 providing for lead agency and subcontractor liability;
3994 transferring, renumbering, and amending s. 409.1675,
3995 F.S.; transferring provisions relating to receivership
3996 from community-based providers to lead agencies;
3997 conforming cross-references and terminology; creating
3998 s. 409.996, F.S.; providing duties of the department
3999 relating to community-based care and lead agencies;
4000 creating s. 409.997, F.S.; providing outcome goals for
4001 the department and specified entities with respect to
4002 the delivery of child welfare services; requiring the
4003 department to maintain an accountability system;
4004 requiring a report to the Governor and the
4005 Legislature; requiring the department to establish a
4006 technical advisory panel; requiring the department to
4007 make the results of the accountability system public;
4008 requiring a report to the Governor and the Legislature
4009 by a specified date; creating s. 827.10, F.S.;
4010 providing definitions; establishing the criminal
4011 offense of unlawful desertion of a child; providing
4012 criminal penalties; providing exceptions; amending s.
4013 985.04, F.S.; conforming terminology; amending s.



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4014 1009.25, F.S.; exempting specified child protective
4015 investigators and child protective investigation
4016 supervisors from certain tuition and fee requirements;
4017 repealing s. 402.401, F.S., relating to child welfare
4018 worker student loan forgiveness; repealing s.
4019 409.1671, F.S., relating to outsourcing of foster care
4020 and related services; repealing s. 409.16715, F.S.,
4021 relating to certain therapy for foster children;
4022 repealing s. 409.16745, F.S., relating to the
4023 community partnership matching grant program;
4024 repealing s. 1004.61, F.S., relating to a partnership
4025 between the Department of Children and Families and
4026 state universities; amending ss. 39.201, 39.302,
4027 39.524, 316.613, 409.1676, 409.1677, 409.1678,
4028 409.906, 409.912, 409.91211, 420.628, and 960.065,
4029 F.S.; conforming cross-references; providing effective
4030 dates.