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LEGISLATIVE ACTION

Senate	.	House
Comm: RCS	.	
04/06/2014	.	
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	.	

Appropriations Subcommittee on Health and Human Services (Sobel)
recommended 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) and present subsection
(4) are amended, and a new subsection (3) is added to that
section, to read:

20.19 Department of Children and Families.—There is created



915192

11 a Department of Children and Families.

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



915192

40 Program Office.

41 ~~(5)~~~~(4)~~ COMMUNITY ALLIANCES.—

42 (a) The department shall, in consultation with local
43 communities, establish a community alliance ~~or similar group of~~
44 ~~the stakeholders, community leaders, client representatives and~~
45 ~~fundors of human services~~ in each county to provide a focal
46 point for community participation and feedback into governance
47 ~~of~~ community-based services. An alliance may cover more than one
48 county when such arrangement is determined to provide for more
49 effective representation. The community alliance shall represent
50 the diversity of the community.

51 (b) The duties of the community alliance include, but are
52 not limited to:

53 1. Providing independent and community-focused assessment
54 of child protection and child welfare services and the local
55 system of community-based care as described in s. 409.998.

56 ~~2.1.~~ Joint planning for resource utilization in the
57 community, including resources appropriated to the department
58 and any funds that local funding sources choose to provide.

59 ~~3.2.~~ Needs assessment and establishment of community
60 priorities for service delivery.

61 ~~4.3.~~ Determining community outcome goals to supplement
62 state-required outcomes.

63 ~~5.4.~~ Serving as a catalyst for community resource
64 development.

65 ~~6.5.~~ Providing for community education and advocacy on
66 issues related to delivery of services.

67 ~~7.6.~~ Promoting prevention and early intervention services.

68 (c) The department shall ensure, to the greatest extent



915192

69 possible, that the formation of each community alliance builds
70 on the strengths of the existing community human services
71 infrastructure.

72 (d) The initial membership of the community alliance in a
73 county shall be composed of the following:

- 74 1. A representative from the department.
- 75 2. A representative from county government.
- 76 3. A representative from the school district.
- 77 4. A representative from the county United Way.
- 78 5. A representative from the county sheriff's office.
- 79 6. A representative from the circuit court corresponding to
80 the county.
- 81 7. A representative from the county children's board, if
82 one exists.

83
84 This paragraph is repealed on July 1, 2015.

85 (e) No later than July 1, 2015, the alliance shall ensure
86 its membership and member selection process meets the following
87 requirements:

88 1. The total number of voting members shall be at least
89 nine and no more than 25 individuals. The alliance may establish
90 committees, task forces, and other advisory groups to create
91 opportunities for participation for community representatives
92 who are not voting members of the alliance.

93 2. The voting members of the alliance shall include
94 individuals with a variety of backgrounds and experience. At
95 least one member must be from a family who has received
96 community services. At least one person shall have experience in
97 each of the following areas:



915192

- 98 a. Community service organizations;
- 99 b. Education;
- 100 c. Law enforcement;
- 101 d. Local government;
- 102 e. Legal services;
- 103 f. The judiciary;
- 104 g. Philanthropic organizations; and
- 105 h. Children's service organizations.

106 3. The alliance shall include two ex officio, nonvoting
107 members, one of whom is designated by the secretary to represent
108 the department and one of whom is designated by the community-
109 based care lead agency.

110 4. The recruitment and selection of alliance members shall
111 be an open and transparent process that allows for individuals
112 and organizations to nominate potential candidates.

113 (f) The community alliance shall adopt or amend bylaws to
114 comply with paragraph (e).

115 (g) The department shall appoint a statewide advisory
116 committee to assist alliances to comply with this subsection.
117 The advisory committee shall consist of a representative of the
118 department designated by the secretary, the chief child
119 advocate, a representative designated by the Florida Coalition
120 of Children, and two persons currently serving on an alliance.

121 ~~(e) At any time after the initial meeting of the community~~
122 ~~alliance, the community alliance shall adopt bylaws and may~~
123 ~~increase the membership of the alliance to include the state~~
124 ~~attorney for the judicial circuit in which the community~~
125 ~~alliance is located, or his or her designee, the public defender~~
126 ~~for the judicial circuit in which the community alliance is~~



915192

127 ~~located, or his or her designee, and other individuals and~~
128 ~~organizations who represent funding organizations, are community~~
129 ~~leaders, have knowledge of community-based service issues, or~~
130 ~~otherwise represent perspectives that will enable them to~~
131 ~~accomplish the duties listed in paragraph (b), if, in the~~
132 ~~judgment of the alliance, such change is necessary to adequately~~
133 ~~represent the diversity of the population within the community~~
134 ~~alliance service circuits.~~

135 (h) ~~(f)~~ A member of the community alliance, other than a
136 member specified in paragraph (d), may not receive payment for
137 contractual services from the department or a community-based
138 care lead agency.

139 (i) ~~(g)~~ Members of the community alliances shall serve
140 without compensation, but are entitled to receive reimbursement
141 for per diem and travel expenses, as provided in s. 112.061.
142 Payment may also be authorized for preapproved child care
143 expenses or lost wages for members who are consumers of the
144 department's services and for preapproved child care expenses
145 for other members who demonstrate hardship.

146 (j) ~~(h)~~ Members of a community alliance are subject to the
147 provisions of part III of chapter 112, the Code of Ethics for
148 Public Officers and Employees.

149 (k) ~~(i)~~ Actions taken by a community alliance must be
150 consistent with department policy and state and federal laws,
151 rules, and regulations.

152 (l) ~~(j)~~ Alliance members shall annually submit a disclosure
153 statement of services interests to the department's inspector
154 general. Any member who has an interest in a matter under
155 consideration by the alliance must abstain from voting on that



915192

156 matter.

157 ~~(m)-(k)~~ All alliance meetings are open to the public
158 pursuant to s. 286.011 and the public records provision of s.
159 119.07(1).

160 Section 2. Paragraphs (b), (c), (g), and (k) of subsection
161 (1) of section 39.001, Florida Statutes, are amended, paragraphs
162 (o) and (p) are added to that subsection, present paragraphs (f)
163 through (h) of subsection (3) are redesignated as paragraphs (g)
164 through (i), respectively, and a new paragraph (f) is added to
165 that subsection, present subsections (4) through (11) are
166 renumbered as subsections (5) through (12), respectively, and a
167 new subsection (4) is added to that section, and paragraph (c)
168 of present subsection (8) and paragraph (b) of present
169 subsection (10) of that section are amended, to read:

170 39.001 Purposes and intent; personnel standards and
171 screening.—

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

173 (b) To recognize that most families desire to be competent
174 caregivers and providers for their children and that children
175 achieve their greatest potential when families are able to
176 support and nurture the growth and development of their
177 children. Therefore, the Legislature finds that policies and
178 procedures that provide for prevention and intervention through
179 the department's child protection system should be based on the
180 following principles:

181 1. The health and safety of the children served shall be of
182 paramount concern.

183 2. The prevention and intervention should engage families
184 in constructive, supportive, and nonadversarial relationships.



915192

185 3. The prevention and intervention should intrude as little
186 as possible into the life of the family, be focused on clearly
187 defined objectives, and take the most parsimonious path to
188 remedy a family's problems, keeping the safety of the child or
189 children as the paramount concern.

190 4. The prevention and intervention should be based upon
191 outcome evaluation results that demonstrate success in
192 protecting children and supporting families.

193 (c) To provide a child protection system that reflects a
194 partnership between the department, other agencies, the courts,
195 law enforcement agencies, service providers, and local
196 communities.

197 (g) To ensure that the parent or legal custodian from whose
198 custody the child has been taken assists the department to the
199 fullest extent possible in locating relatives suitable to serve
200 as caregivers for the child and provides all medical and
201 educational information, or consent for access thereto, needed
202 to help the child.

203 (k) To make every possible effort, if ~~when~~ two or more
204 children who are in the care or under the supervision of the
205 department are siblings, to place the siblings in the same home;
206 and in the event of permanent placement of the siblings, to
207 place them in the same adoptive home or, if the siblings are
208 separated while under the care or supervision of the department
209 or in a permanent placement, to keep them in contact with each
210 other.

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

213 (p) To provide protective investigations that are conducted



915192

214 by trained persons in a complete and fair manner, that are
215 promptly concluded, and that consider the purposes of this
216 subsection and the general protections provided by law relating
217 to child welfare.

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

221 (f) Access to sufficient home and community-based support
222 for medically complex children to allow them to remain in the
223 least restrictive and most nurturing environment, which includes
224 sufficient services in an amount and scope comparable to those
225 services the child would receive in out-of-home care placement.

226 (4) SERVICES FOR MEDICALLY COMPLEX CHILDREN.—The department
227 shall maintain a program of family-centered services and
228 supports for medically complex children. The purpose of the
229 program is to prevent abuse and neglect of medically complex
230 children while enhancing the capacity of families to provide for
231 their children's needs. Program services must include outreach,
232 early intervention, and the provision of home and community-
233 based services, such as care coordination, respite care, and
234 direct home care. The department shall work with the Agency for
235 Health Care Administration and the Department of Health to
236 provide such services.

237 (9)-(8) OFFICE OF ADOPTION AND CHILD PROTECTION.—

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

239 1. Oversee the preparation and implementation of the state
240 plan established under subsection (10) ~~(9)~~ and revise and update
241 the state plan as necessary.

242 2. Provide for or make available continuing professional



915192

243 education and training in the prevention of child abuse and
244 neglect.

245 3. Work to secure funding in the form of appropriations,
246 gifts, and grants from the state, the Federal Government, and
247 other public and private sources in order to ensure that
248 sufficient funds are available for the promotion of adoption,
249 support of adoptive families, and child abuse prevention
250 efforts.

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

253 a. Programs and services for the promotion of adoption,
254 support of adoptive families, and prevention of child abuse and
255 neglect.

256 b. Training programs for the prevention of child abuse and
257 neglect.

258 c. Multidisciplinary and discipline-specific training
259 programs for professionals with responsibilities affecting
260 children, young adults, and families.

261 d. Efforts to promote adoption.

262 e. Postadoptive services to support adoptive families.

263 5. Monitor, evaluate, and review the development and
264 quality of local and statewide services and programs for the
265 promotion of adoption, support of adoptive families, and
266 prevention of child abuse and neglect and shall publish and
267 distribute an annual report of its findings on or before January
268 1 of each year to the Governor, the Speaker of the House of
269 Representatives, the President of the Senate, the head of each
270 state agency affected by the report, and the appropriate
271 substantive committees of the Legislature. The report shall



915192

272 include:

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

274 b. A summary of the adoption data collected and reported to
275 the federal Adoption and Foster Care Analysis and Reporting
276 System (AFCARS) and the federal Administration for Children and
277 Families.

278 c. A summary of the child abuse prevention data collected
279 and reported to the National Child Abuse and Neglect Data System
280 (NCANDS) and the federal Administration for Children and
281 Families.

282 d. A summary detailing the timeliness of the adoption
283 process for children adopted from within the child welfare
284 system.

285 e. Recommendations, by state agency, for the further
286 development and improvement of services and programs for the
287 promotion of adoption, support of adoptive families, and
288 prevention of child abuse and neglect.

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

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

293 (11)~~(10)~~ FUNDING AND SUBSEQUENT PLANS.—

294 (b) The office and the other agencies and organizations
295 listed in paragraph (10) (a) ~~(9) (a)~~ shall readdress the state
296 plan and make necessary revisions every 5 years, at a minimum.
297 Such revisions shall be submitted to the Speaker of the House of
298 Representatives and the President of the Senate no later than
299 June 30 of each year divisible by 5. At least biennially, the
300 office shall review the state plan and make any necessary



915192

301 revisions based on changing needs and program evaluation
302 results. An annual progress report shall be submitted to update
303 the state plan in the years between the 5-year intervals. In
304 order to avoid duplication of effort, these required plans may
305 be made a part of or merged with other plans required by either
306 the state or Federal Government, so long as the portions of the
307 other state or Federal Government plan that constitute the state
308 plan for the promotion of adoption, support of adoptive
309 families, and prevention of child abuse, abandonment, and
310 neglect are clearly identified as such and are provided to the
311 Speaker of the House of Representatives and the President of the
312 Senate as required under this section above.

313 Section 3. Present subsections (59) through (65) are
314 redesignated as subsections (60) through (66), respectively,
315 present subsections (67) through (69) are redesignated as
316 subsections (68) through (70), respectively, present subsections
317 (70) through (76) are redesignated as subsections (72) through
318 (78), respectively, new subsections (31), (41), (59), (67), and
319 (71) are added to that section, and subsections (7), (14), (18),
320 (22), (26), and (27) and present subsections (28) through (41),
321 (59), and (65) of that section are amended, to read:

322 39.01 Definitions.—When used in this chapter, unless the
323 context otherwise requires:

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

325 ~~(a) A child 12 years of age or younger who is alleged to~~
326 ~~have committed a violation of chapter 794, chapter 796, chapter~~
327 ~~800, s. 827.071, or s. 847.0133; or~~

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



915192

330 "Juvenile sexual abuse" means any sexual behavior which occurs
331 without consent, without equality, or as a result of coercion.
332 For purposes of this subsection ~~paragraph~~, the following
333 definitions apply:

334 (a)~~1.~~ "Coercion" means the exploitation of authority or the
335 use of bribes, threats of force, or intimidation to gain
336 cooperation or compliance.

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

340 (c)~~3.~~ "Consent" means an agreement, including all of the
341 following:

342 1.a.~~1.~~ Understanding what is proposed based on age, maturity,
343 developmental level, functioning, and experience.

344 2.b.~~2.~~ Knowledge of societal standards for what is being
345 proposed.

346 3.c.~~3.~~ Awareness of potential consequences and alternatives.

347 4.d.~~4.~~ Assumption that agreement or disagreement will be
348 accepted equally.

349 5.e.~~5.~~ Voluntary decision.

350 6.f.~~6.~~ Mental competence.

351

352 Juvenile sexual ~~offender~~ behavior ranges from noncontact sexual
353 behavior such as making obscene phone calls, exhibitionism,
354 voyeurism, and the showing or taking of lewd photographs to
355 varying degrees of direct sexual contact, such as frottage,
356 fondling, digital penetration, rape, fellatio, sodomy, and
357 various other sexually aggressive acts.

358 (14) "Child who has exhibited inappropriate sexual



915192

359 behavior" means a child ~~who is 12 years of age or younger and~~
360 who has been found by the department or the court to have
361 committed an inappropriate sexual act.

362 (18) "Comprehensive assessment" or "assessment" means the
363 gathering of information for the evaluation of a child's and
364 caregiver's physical, psychiatric, psychological, or mental
365 health; developmental delays or challenges; and, educational,
366 vocational, and social condition and family environment as they
367 relate to the child's and caregiver's need for rehabilitative
368 and treatment services, including substance abuse treatment
369 services, mental health services, developmental services,
370 literacy services, medical services, family services, and other
371 specialized services, as appropriate.

372 (22) "Diligent efforts by a parent" means a course of
373 conduct which results in a meaningful change in the behavior of
374 a parent that reduces ~~reduction in~~ risk to the child in the
375 child's home to the extent that ~~would allow~~ the child may ~~to~~ be
376 safely placed permanently back in the home as set forth in the
377 case plan.

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

380 ~~(27) "District administrator" means the chief operating~~
381 ~~officer of each service district of the department as defined in~~
382 ~~s. 20.19(5) and, where appropriate, includes any district~~
383 ~~administrator whose service district falls within the boundaries~~
384 ~~of a judicial circuit.~~

385 ~~(26)~~ ~~(28)~~ "Expedited termination of parental rights" means
386 proceedings wherein a case plan with the goal of reunification
387 is not being offered.



915192

388 ~~(27)-(29)~~ "False report" means a report of abuse, neglect,
389 or abandonment of a child to the central abuse hotline, which
390 report is maliciously made for the purpose of:

- 391 (a) Harassing, embarrassing, or harming another person;
392 (b) Personal financial gain for the reporting person;
393 (c) Acquiring custody of a child; or
394 (d) Personal benefit for the reporting person in any other
395 private dispute involving a child.

396

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

400 ~~(28)-(30)~~ "Family" means a collective body of persons,
401 consisting of a child and a parent, legal custodian, or adult
402 relative, in which:

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

407 ~~(29)-(31)~~ "Foster care" means care provided a child in a
408 foster family or boarding home, group home, agency boarding
409 home, child care institution, or any combination thereof.

410 ~~(30)-(32)~~ "Harm" to a child's health or welfare can occur
411 when any person:

- 412 (a) Inflicts or allows to be inflicted upon the child
413 physical, mental, or emotional injury. In determining whether
414 harm has occurred, the following factors must be considered in
415 evaluating any physical, mental, or emotional injury to a child:
416 the age of the child; any prior history of injuries to the



915192

417 child; the location of the injury on the body of the child; the
418 multiplicity of the injury; and the type of trauma inflicted.

419 Such injury includes, but is not limited to:

420 1. Willful acts that produce the following specific
421 injuries:

422 a. Sprains, dislocations, or cartilage damage.

423 b. Bone or skull fractures.

424 c. Brain or spinal cord damage.

425 d. Intracranial hemorrhage or injury to other internal
426 organs.

427 e. Asphyxiation, suffocation, or drowning.

428 f. Injury resulting from the use of a deadly weapon.

429 g. Burns or scalding.

430 h. Cuts, lacerations, punctures, or bites.

431 i. Permanent or temporary disfigurement.

432 j. Permanent or temporary loss or impairment of a body part
433 or function.

434

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

438 2. Purposely giving a child poison, alcohol, drugs, or
439 other substances that substantially affect the child's behavior,
440 motor coordination, or judgment or that result in sickness or
441 internal injury. For the purposes of this subparagraph, the term
442 "drugs" means prescription drugs not prescribed for the child or
443 not administered as prescribed, and controlled substances as
444 outlined in Schedule I or Schedule II of s. 893.03.

445 3. Leaving a child without adult supervision or arrangement



915192

446 appropriate for the child's age or mental or physical condition,
447 so that the child is unable to care for the child's own needs or
448 another's basic needs or is unable to exercise good judgment in
449 responding to any kind of physical or emotional crisis.

450 4. Inappropriate or excessively harsh disciplinary action
451 that is likely to result in physical injury, mental injury as
452 defined in this section, or emotional injury. The significance
453 of any injury must be evaluated in light of the following
454 factors: the age of the child; any prior history of injuries to
455 the child; the location of the injury on the body of the child;
456 the multiplicity of the injury; and the type of trauma
457 inflicted. Corporal discipline may be considered excessive or
458 abusive when it results in any of the following or other similar
459 injuries:

- 460 a. Sprains, dislocations, or cartilage damage.
- 461 b. Bone or skull fractures.
- 462 c. Brain or spinal cord damage.
- 463 d. Intracranial hemorrhage or injury to other internal
464 organs.
- 465 e. Asphyxiation, suffocation, or drowning.
- 466 f. Injury resulting from the use of a deadly weapon.
- 467 g. Burns or scalding.
- 468 h. Cuts, lacerations, punctures, or bites.
- 469 i. Permanent or temporary disfigurement.
- 470 j. Permanent or temporary loss or impairment of a body part
471 or function.
- 472 k. Significant bruises or welts.

473 (b) Commits, or allows to be committed, sexual battery, as
474 defined in chapter 794, or lewd or lascivious acts, as defined



915192

475 in chapter 800, against the child.

476 (c) Allows, encourages, or forces the sexual exploitation
477 of a child, which includes allowing, encouraging, or forcing a
478 child to:

- 479 1. Solicit for or engage in prostitution; or
480 2. Engage in a sexual performance, as defined by chapter
481 827.

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

484 (e) Abandons the child. Within the context of the
485 definition of "harm," the term "abandoned the child" or
486 "abandonment of the child" means a situation in which the parent
487 or legal custodian of a child or, in the absence of a parent or
488 legal custodian, the caregiver, while being able, has made no
489 significant contribution to the child's care and maintenance or
490 has failed to establish or maintain a substantial and positive
491 relationship with the child, or both. For purposes of this
492 paragraph, "establish or maintain a substantial and positive
493 relationship" includes, but is not limited to, frequent and
494 regular contact with the child through frequent and regular
495 visitation or frequent and regular communication to or with the
496 child, and the exercise of parental rights and responsibilities.
497 Marginal efforts and incidental or token visits or
498 communications are not sufficient to establish or maintain a
499 substantial and positive relationship with a child. The term
500 "abandoned" does not include a surrendered newborn infant as
501 described in s. 383.50, a child in need of services as defined
502 in chapter 984, or a family in need of services as defined in
503 chapter 984. The incarceration, repeated incarceration, or



915192

504 extended incarceration of a parent, legal custodian, or
505 caregiver responsible for a child's welfare may support a
506 finding of abandonment.

507 (f) Neglects the child. Within the context of the
508 definition of "harm," the term "neglects the child" means that
509 the parent or other person responsible for the child's welfare
510 fails to supply the child with adequate food, clothing, shelter,
511 or health care, although financially able to do so or although
512 offered financial or other means to do so. However, a parent or
513 legal custodian who, by reason of the legitimate practice of
514 religious beliefs, does not provide specified medical treatment
515 for a child may not be considered abusive or neglectful for that
516 reason alone, but such an exception does not:

517 1. Eliminate the requirement that such a case be reported
518 to the department;

519 2. Prevent the department from investigating such a case;
520 or

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

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

529 1. A test, administered at birth, which indicated that the
530 child's blood, urine, or meconium contained any amount of
531 alcohol or a controlled substance or metabolites of such
532 substances, the presence of which was not the result of medical



915192

533 treatment administered to the mother or the newborn infant; or
534 2. Evidence of extensive, abusive, and chronic use of a
535 controlled substance or alcohol by a parent when the child is
536 demonstrably adversely affected by such usage.

537

538 As used in this paragraph, the term "controlled substance" means
539 prescription drugs not prescribed for the parent or not
540 administered as prescribed and controlled substances as outlined
541 in Schedule I or Schedule II of s. 893.03.

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

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

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

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

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

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

561 (32)-(33) "Institutional child abuse or neglect" means



915192

562 situations of known or suspected child abuse or neglect in which
563 the person allegedly perpetrating the child abuse or neglect is
564 an employee of a private school, public or private day care
565 center, residential home, institution, facility, or agency or
566 any other person at such institution responsible for the child's
567 care as defined in subsection (47).

568 (33)~~(34)~~ "Judge" means the circuit judge exercising
569 jurisdiction pursuant to this chapter.

570 (34)~~(35)~~ "Legal custody" means a legal status created by a
571 court which vests in a custodian of the person or guardian,
572 whether an agency or an individual, the right to have physical
573 custody of the child and the right and duty to protect, nurture,
574 guide, and discipline the child and to provide him or her with
575 food, shelter, education, and ordinary medical, dental,
576 psychiatric, and psychological care.

577 (35)~~(36)~~ "Licensed child-caring agency" means a person,
578 society, association, or agency licensed by the department to
579 care for, receive, and board children.

580 (36)~~(37)~~ "Licensed child-placing agency" means a person,
581 society, association, or institution licensed by the department
582 to care for, receive, or board children and to place children in
583 a licensed child-caring institution or a foster or adoptive
584 home.

585 (37)~~(38)~~ "Licensed health care professional" means a
586 physician licensed under chapter 458, an osteopathic physician
587 licensed under chapter 459, a nurse licensed under part I of
588 chapter 464, a physician assistant licensed under chapter 458 or
589 chapter 459, or a dentist licensed under chapter 466.

590 (38)~~(39)~~ "Likely to injure oneself" means that, as



915192

591 evidenced by violent or other actively self-destructive
592 behavior, it is more likely than not that within a 24-hour
593 period the child will attempt to commit suicide or inflict
594 serious bodily harm on himself or herself.

595 ~~(39)-(40)~~ "Likely to injure others" means that it is more
596 likely than not that within a 24-hour period the child will
597 inflict serious and unjustified bodily harm on another person.

598 ~~(40)-(41)~~ "Mediation" means a process whereby a neutral
599 third person called a mediator acts to encourage and facilitate
600 the resolution of a dispute between two or more parties. It is
601 an informal and nonadversarial process with the objective of
602 helping the disputing parties reach a mutually acceptable and
603 voluntary agreement. The role of the mediator includes, but is
604 not limited to, assisting the parties in identifying issues,
605 fostering joint problem solving, and exploring settlement
606 alternatives.

607 (41) "Medical neglect" means the failure to provide or the
608 failure to allow needed care as recommended by a health care
609 practitioner for a physical injury, illness, medical condition,
610 or impairment, or the failure to seek timely and appropriate
611 medical care for a serious health problem that a reasonable
612 person would have recognized as requiring professional medical
613 attention. Medical neglect does not occur if the parent or legal
614 guardian of the child has made reasonable attempts to obtain
615 necessary health care services or the immediate health condition
616 giving rise to the allegation of neglect is a known and expected
617 complication of the child's diagnosis or treatment and:

618 (a) The recommended care offers limited net benefit to the
619 child and the morbidity or other side effects of the treatment



915192

620 may be considered to be greater than the anticipated benefit; or

621 (b) The parent or legal guardian received conflicting

622 medical recommendations for treatment from multiple

623 practitioners and did not follow all recommendations.

624 (59) "Present danger" means a significant and clearly

625 observable family condition that is occurring at the current

626 moment and is already endangering or threatening to endanger the

627 child. Present danger threats are conspicuous and require that

628 an immediate protective action be taken to ensure the child's

629 safety.

630 (60)-(59) "Preventive services" means social services and

631 other supportive and rehabilitative services provided to the

632 parent or legal custodian of the child and to the child for the

633 purpose of averting the removal of the child from the home or

634 disruption of a family which will or could result in the

635 placement of a child in foster care. Social services and other

636 supportive and rehabilitative services shall promote the child's

637 developmental needs and need for physical, mental, and emotional

638 health and a safe, stable, living environment;

639 shall promote family autonomy;

640 and shall strengthen family life, whenever

641 possible.

642 (66)-(65) "Reunification services" means social services and

643 other supportive and rehabilitative services provided to the

644 parent of the child, to the child, and, where appropriate, to

645 the relative placement, nonrelative placement, or foster parents

646 of the child, for the purpose of enabling a child who has been

647 placed in out-of-home care to safely return to his or her parent

648 at the earliest possible time. The health and safety of the



915192

649 supportive and rehabilitative services. The services shall
650 promote the child's need for physical, developmental, mental,
651 and emotional health and a safe, stable, living environment;
652 shall promote family autonomy;
653 life, whenever possible.

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

658 (71) "Sibling" means:

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

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

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

665 39.013 Procedures and jurisdiction; right to counsel.-

666 (12) The department shall be represented by counsel in each
667 dependency proceeding. Through its attorneys, the department
668 shall make recommendations to the court on issues before the
669 court and may support its recommendations through testimony and
670 other evidence by its own employees, employees of sheriff's
671 offices providing child protection services, employees of its
672 contractors, employees of its contractor's subcontractors, or
673 from any other relevant source.

674 Section 5. Paragraph (c) of subsection (2) of section
675 39.201, Florida Statutes, is amended to read:

676 39.201 Mandatory reports of child abuse, abandonment, or
677 neglect; mandatory reports of death; central abuse hotline.-



915192

678 (2)
679 (c) Reports involving ~~a known or suspected~~ juvenile sexual
680 abuse offender or a child who has exhibited inappropriate sexual
681 behavior shall be made and received by the department. An
682 alleged incident of juvenile sexual abuse involving a child who
683 is in the custody of or protective supervision of the department
684 shall be reported to the department's central abuse hotline.

685 ~~1. The department shall determine the age of the alleged~~
686 ~~offender, if known.~~

687 ~~2. If the alleged offender is 12 years of age or younger,~~
688 The central abuse hotline shall immediately electronically
689 transfer the report or call to the county sheriff's office. The
690 department shall conduct an assessment and assist the family in
691 receiving appropriate services pursuant to s. 39.307, and send a
692 written report of the allegation to the appropriate county
693 sheriff's office within 48 hours after the initial report is
694 made to the central abuse hotline.

695 2. The department shall ensure that the facts and results
696 of any investigation of child sexual abuse involving a child in
697 the custody of or under the protective supervision of the
698 department are made known to the court at the next hearing or
699 included in the next report to the court concerning the child.

700 ~~3. If the alleged offender is 13 years of age or older, the~~
701 ~~central abuse hotline shall immediately electronically transfer~~
702 ~~the report or call to the appropriate county sheriff's office~~
703 ~~and send a written report to the appropriate county sheriff's~~
704 ~~office within 48 hours after the initial report to the central~~
705 ~~abuse hotline.~~

706 Section 6. Section 39.2015, Florida Statutes, is created to



915192

707 read:

708 39.2015 Critical incident rapid response team.—

709 (1) The department shall conduct an immediate investigation
710 of certain incidents involving children using critical incident
711 rapid response teams as provided in subsection (2). The purpose
712 of such investigation is to identify root causes and rapidly
713 determine the need to change policies and practices related to
714 child protection and child welfare.

715 (2) An immediate onsite investigation conducted by a
716 critical incident rapid response team is required for all child
717 deaths reported to the department if the child or another child
718 in his or her family was the subject of a verified report of
719 suspected abuse or neglect during the previous 12 months. The
720 secretary may direct an immediate investigation for other cases
721 involving serious injury to a child.

722 (3) Each investigation shall be conducted by a team of at
723 least five professionals with expertise in child protection,
724 child welfare, and organizational management. The team may
725 consist of employees of the department, community-based care
726 lead agencies, and other provider organizations; faculty from
727 the institute consisting of public and private universities
728 offering degrees in social work established pursuant to s.
729 1004.615; or any other person with the required expertise. The
730 majority of the team must reside in judicial circuits outside
731 the location of the incident. The secretary shall appoint a team
732 leader for each group assigned to an investigation.

733 (4) An investigation shall be initiated as soon as
734 possible, but not later than 2 business days after the case is
735 reported to the department. A preliminary report on each case



915192

736 shall be provided to the secretary no later than 30 days after
737 the investigation begins.

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

740 (6) All employees of the department or other state agencies
741 and all personnel from contracted provider organizations must
742 cooperate with the investigation by participating in interviews
743 and timely responding to any requests for information.

744 (7) The secretary shall develop cooperative agreements with
745 other entities and organizations as necessary to facilitate the
746 work of the team.

747 (8) The members of the team may be reimbursed by the
748 department for per diem, mileage, and other reasonable expenses
749 as provided in s. 112.061. The department may also reimburse the
750 team member's employer for the associated salary and benefits
751 during the time the team member is fulfilling the duties
752 required under this section.

753 (9) Upon completion of the investigation, the department
754 shall make the team's final report available on its website.

755 (10) The secretary, in conjunction with the institute
756 established pursuant to s. 1004.615, shall develop guidelines
757 for investigations conducted by critical incident rapid response
758 teams and provide training to team members. Such guidelines must
759 direct the teams in the conduct of a root-cause analysis that
760 identifies, classifies, and attributes responsibility for both
761 direct and latent causes for the death or other incident,
762 including organizational factors, preconditions, and specific
763 acts or omissions resulting from either error or a violation of
764 procedures.



915192

765 (11) The secretary shall appoint an advisory committee made
766 up of experts in child protection and child welfare to conduct
767 an independent review of investigative reports from the critical
768 incident rapid response teams and make recommendations to
769 improve policies and practices related to child protection and
770 child welfare services. By October 1 of each year, the advisory
771 committee shall submit a report to the secretary that includes
772 findings and recommendations. The secretary shall submit the
773 report to the Governor, the President of the Senate, and the
774 Speaker of the House of Representatives.

775 Section 7. Section 39.2022, Florida Statutes, is created to
776 read:

777 39.2022 Public disclosure of reported child deaths.-

778 (1) It is the intent of the Legislature to provide prompt
779 disclosure of the basic facts of all deaths of children from
780 birth through 18 years of age which occur in this state and
781 which are reported to the department's central abuse hotline.
782 Disclosure shall be posted on the department's public website.
783 This section does not limit the public access to records under
784 any other provision of law.

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

788 (a) The initials, age, race, and gender of the child.

789 (b) The date of the child's death.

790 (c) Any allegations of the cause of death or the
791 preliminary cause of death, and the verified cause of death, if
792 known.

793 (d) The county and placement of the child at the time of



915192

794 the incident leading to the child's death, if applicable.

795 (e) The name of the community-based care lead agency, case
796 management agency, or out-of-home licensing agency involved with
797 the child, family, or licensed caregiver, if applicable.

798 (f) The relationship of the person adjudicated guilty of
799 any criminal offense related to the child's death.

800 (g) Whether the child has been the subject of any prior
801 verified reports to the department's central abuse hotline.

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

804 39.301 Initiation of protective investigations.-

805 (9) (a) For each report received from the central abuse
806 hotline and accepted for investigation, the department or the
807 sheriff providing child protective investigative services under
808 s. 39.3065, shall perform the following child protective
809 investigation activities to determine child safety:

810 1. Conduct a review of all relevant, available information
811 specific to the child and family and alleged maltreatment;
812 family child welfare history; local, state, and federal criminal
813 records checks; and requests for law enforcement assistance
814 provided by the abuse hotline. Based on a review of available
815 information, including the allegations in the current report, a
816 determination shall be made as to whether immediate consultation
817 should occur with law enforcement, the child protection team, a
818 domestic violence shelter or advocate, or a substance abuse or
819 mental health professional. Such consultations should include
820 discussion as to whether a joint response is necessary and
821 feasible. A determination shall be made as to whether the person
822 making the report should be contacted before the face-to-face



915192

823 interviews with the child and family members.

824 2. Conduct face-to-face interviews with the child; other
825 siblings, if any; and the parents, legal custodians, or
826 caregivers.

827 3. Assess the child's residence, including a determination
828 of the composition of the family and household, including the
829 name, address, date of birth, social security number, sex, and
830 race of each child named in the report; any siblings or other
831 children in the same household or in the care of the same
832 adults; the parents, legal custodians, or caregivers; and any
833 other adults in the same household.

834 4. Determine whether there is any indication that any child
835 in the family or household has been abused, abandoned, or
836 neglected; the nature and extent of present or prior injuries,
837 abuse, or neglect, and any evidence thereof; and a determination
838 as to the person or persons apparently responsible for the
839 abuse, abandonment, or neglect, including the name, address,
840 date of birth, social security number, sex, and race of each
841 such person.

842 5. Complete assessment of immediate child safety for each
843 child based on available records, interviews, and observations
844 with all persons named in subparagraph 2. and appropriate
845 collateral contacts, which may include other professionals. The
846 department's child protection investigators are hereby
847 designated a criminal justice agency for the purpose of
848 accessing criminal justice information to be used for enforcing
849 this state's laws concerning the crimes of child abuse,
850 abandonment, and neglect. This information shall be used solely
851 for purposes supporting the detection, apprehension,



915192

852 prosecution, pretrial release, posttrial release, or
853 rehabilitation of criminal offenders or persons accused of the
854 crimes of child abuse, abandonment, or neglect and may not be
855 further disseminated or used for any other purpose.

856 6. Document the present and impending dangers to each child
857 based on the identification of inadequate protective capacity
858 through utilization of a standardized safety assessment
859 instrument. If present or impending danger is identified, the
860 child protective investigator must implement a safety plan or
861 take the child into custody. If present danger is identified and
862 the child is not removed, the child protective investigator
863 shall create and implement a safety plan before leaving the home
864 or the location where there is present danger. If impending
865 danger is identified, the child protective investigator shall
866 create and implement a safety plan as soon as necessary to
867 protect the safety of the child. The child protective
868 investigator may modify the safety plan if he or she identifies
869 additional impending danger.

870 a. If the child protective investigator implements a safety
871 plan, the plan must be specific, sufficient, feasible, and
872 sustainable in response to the realities of the present or
873 impending danger. A safety plan may be an in-home plan or an
874 out-of-home plan, or a combination of both. A safety plan may
875 not rely solely on promissory commitments by the parent,
876 caregiver, or legal custodian who is currently not able to
877 protect the child or on services that are not available or will
878 not result in the safety of the child. A safety plan may not be
879 implemented if for any reason the parents, guardian, or legal
880 custodian lacks the capacity or ability to comply with the plan.



915192

881 If the department is not able to develop a plan that is
882 specific, sufficient, feasible, and sustainable, the department
883 shall file a shelter petition. A child protective investigator
884 shall implement separate safety plans for the perpetrator of
885 domestic violence and the parent who is a victim of domestic
886 violence as defined in s. 741.28. The safety plan for the parent
887 who is a victim of domestic violence may not be shared with the
888 perpetrator. If any party to a safety plan fails to comply with
889 the safety plan resulting in the child being unsafe, the
890 department shall file a shelter petition.

891 b. The child protective investigator shall collaborate with
892 the community-based care lead agency in the development of the
893 safety plan as necessary to ensure that the safety plan is
894 specific, sufficient, feasible, and sustainable. The child
895 protective investigator shall identify services necessary for
896 the successful implementation of the safety plan. The child
897 protective investigator and the community-based care lead agency
898 shall mobilize service resources to assist all parties in
899 complying with the safety plan. The community-based care lead
900 agency shall prioritize safety plan services to families who
901 have multiple risk factors, including, but not limited to, two
902 or more of the following:

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

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

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



915192

910 (IV) The parent or legal custodian or an adult currently
911 living in or frequently visiting the home has been the subject
912 of multiple allegations by reputable reports of abuse or
913 neglect;

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

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

916 c. The child protective investigator shall monitor the
917 implementation of the plan to ensure the child's safety until
918 the case is transferred to the lead agency at which time the
919 lead agency shall monitor the implementation.

920 ~~(b) Upon completion of the immediate safety assessment, the~~
921 ~~department shall determine the additional activities necessary~~
922 ~~to assess impending dangers, if any, and close the~~
923 ~~investigation.~~

924 (b)(e) For each report received from the central abuse
925 hotline, the department or the sheriff providing child
926 protective investigative services under s. 39.3065, shall
927 determine the protective, treatment, and ameliorative services
928 necessary to safeguard and ensure the child's safety and well-
929 being and development, and cause the delivery of those services
930 through the early intervention of the department or its agent.
931 As applicable, child protective investigators must inform
932 parents and caregivers how and when to use the injunction
933 process under s. 741.30 to remove a perpetrator of domestic
934 violence from the home as an intervention to protect the child.

935 1. If the department or the sheriff providing child
936 protective investigative services determines that the interests
937 of the child and the public will be best served by providing the
938 child care or other treatment voluntarily accepted by the child



915192

939 and the parents or legal custodians, the parent or legal
940 custodian and child may be referred for such care, case
941 management, or other community resources.

942 2. If the department or the sheriff providing child
943 protective investigative services determines that the child is
944 in need of protection and supervision, the department may file a
945 petition for dependency.

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

949 4. At the close of an investigation, the department or the
950 sheriff providing child protective services shall provide to the
951 person who is alleged to have caused the abuse, neglect, or
952 abandonment and the parent or legal custodian a summary of
953 findings from the investigation and provide information about
954 their right to access confidential reports in accordance with s.
955 39.202.

956 (14) (a) If the department or its agent determines that a
957 child requires immediate or long-term protection through:

958 ~~1. medical or other health care;~~ or

959 ~~2. homemaker care, day care, protective supervision, or~~
960 other services to stabilize the home environment, including
961 intensive family preservation services through the Intensive
962 Crisis Counseling Program, such services shall first be offered
963 for voluntary acceptance unless:

964 1. There are high-risk factors that may impact the ability
965 of the parents or legal custodians to exercise judgment. Such
966 factors may include the parents' or legal custodians' young age
967 or history of substance abuse, mental illness, or domestic



915192

968 violence; or

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

972 (b) The parents or legal custodians shall be informed of
973 the right to refuse services, as well as the responsibility of
974 the department to protect the child regardless of the acceptance
975 or refusal of services. If the services are refused, a
976 collateral contact shall include a relative, if the protective
977 investigator has knowledge of and the ability to contact a
978 relative. If the services are refused and the department deems
979 that the child's need for protection ~~se~~ requires services, the
980 department shall take the child into protective custody or
981 petition the court as provided in this chapter. At any time
982 after the commencement of a protective investigation, a relative
983 may submit in writing to the protective investigator or case
984 manager a request to receive notification of all proceedings and
985 hearings in accordance with s. 39.502. The request shall include
986 the relative's name, address, and phone number and the
987 relative's relationship to the child. The protective
988 investigator or case manager shall forward such request to the
989 attorney for the department. The failure to provide notice to
990 either a relative who requests it pursuant to this subsection or
991 to a relative who is providing out-of-home care for a child may
992 not result in any previous action of the court at any stage or
993 proceeding in dependency or termination of parental rights under
994 any part of this chapter being set aside, reversed, modified, or
995 in any way changed absent a finding by the court that a change
996 is required in the child's best interests.



915192

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

999 1. Criteria that are factors requiring that the department
1000 take the child into custody, petition the court as provided in
1001 this chapter, or, if the child is not taken into custody or a
1002 petition is not filed with the court, conduct an administrative
1003 review. Such factors must include, but are not limited to,
1004 noncompliance with a safety plan or the case plan developed by
1005 the department, and the family under this chapter, and prior
1006 abuse reports with findings that involve the child, the child's
1007 sibling, or the child's caregiver.

1008 2. Requirements that if after an administrative review the
1009 department determines not to take the child into custody or
1010 petition the court, the department shall document the reason for
1011 its decision in writing and include it in the investigative
1012 file. For all cases that were accepted by the local law
1013 enforcement agency for criminal investigation pursuant to
1014 subsection (2), the department must include in the file written
1015 documentation that the administrative review included input from
1016 law enforcement. In addition, for all cases that must be
1017 referred to child protection teams pursuant to s. 39.303(2) and
1018 (3), the file must include written documentation that the
1019 administrative review included the results of the team's
1020 evaluation. Factors that must be included in the development of
1021 the rule include noncompliance with the case plan developed by
1022 the department, or its agent, and the family under this chapter
1023 and prior abuse reports with findings that involve the child or
1024 caregiver.

1025 Section 9. Section 39.303, Florida Statutes, is amended to



915192

1026 read:

1027 39.303 Child protection teams; services; eligible cases.—
1028 The Children's Medical Services Program in the Department of
1029 Health shall develop, maintain, and coordinate the services of
1030 one or more multidisciplinary child protection teams in each of
1031 the service districts of the Department of Children and Families
1032 ~~Family Services~~. Such teams may be composed of appropriate
1033 representatives of school districts and appropriate health,
1034 mental health, social service, legal service, and law
1035 enforcement agencies. ~~The Legislature finds that optimal~~
1036 ~~coordination of child protection teams and sexual abuse~~
1037 ~~treatment programs requires collaboration between~~ The Department
1038 of Health and the Department of Children and Families ~~Family~~
1039 ~~Services~~. ~~The two departments~~ shall maintain an interagency
1040 agreement that establishes protocols for oversight and
1041 operations of child protection teams and sexual abuse treatment
1042 programs. The State Surgeon General and the Deputy Secretary for
1043 Children's Medical Services, in consultation with the Secretary
1044 of Children and Families ~~Family Services~~, shall maintain the
1045 responsibility for the screening, employment, and, if necessary,
1046 the termination of child protection team medical directors, at
1047 headquarters and in the 15 districts. Child protection team
1048 medical directors shall be responsible for oversight of the
1049 teams in the districts.

1050 (1) The Department of Health shall use ~~utilize~~ and convene
1051 the teams to supplement the assessment and protective
1052 supervision activities of the family safety and preservation
1053 program of the Department of Children and Families ~~Family~~
1054 ~~Services~~. ~~Nothing in~~ This section does not ~~shall be construed to~~



915192

1055 remove or reduce the duty and responsibility of any person to
1056 report pursuant to this chapter all suspected or actual cases of
1057 child abuse, abandonment, or neglect or sexual abuse of a child.
1058 The role of the teams shall be to support activities of the
1059 program and to provide services deemed by the teams to be
1060 necessary and appropriate to abused, abandoned, and neglected
1061 children upon referral. The specialized diagnostic assessment,
1062 evaluation, coordination, consultation, and other supportive
1063 services that a child protection team shall be capable of
1064 providing include, but are not limited to, the following:

1065 (a) Medical diagnosis and evaluation services, including
1066 provision or interpretation of X rays and laboratory tests, and
1067 related services, as needed, and documentation of related
1068 findings ~~relative thereto~~.

1069 (b) Telephone consultation services in emergencies and in
1070 other situations.

1071 (c) Medical evaluation related to abuse, abandonment, or
1072 neglect, as defined by policy or rule of the Department of
1073 Health.

1074 (d) Such psychological and psychiatric diagnosis and
1075 evaluation services for the child or the child's parent or
1076 parents, legal custodian or custodians, or other caregivers, or
1077 any other individual involved in a child abuse, abandonment, or
1078 neglect case, as the team may determine to be needed.

1079 (e) Expert medical, psychological, and related professional
1080 testimony in court cases.

1081 (f) Case staffings to develop treatment plans for children
1082 whose cases have been referred to the team. A child protection
1083 team may provide consultation with respect to a child who is



915192

1084 alleged or is shown to be abused, abandoned, or neglected, which
1085 consultation shall be provided at the request of a
1086 representative of the family safety and preservation program or
1087 at the request of any other professional involved with a child
1088 or the child's parent or parents, legal custodian or custodians,
1089 or other caregivers. In every such child protection team case
1090 staffing, consultation, or staff activity involving a child, a
1091 family safety and preservation program representative shall
1092 attend and participate.

1093 (g) Case service coordination and assistance, including the
1094 location of services available from other public and private
1095 agencies in the community.

1096 (h) Such training services for program and other employees
1097 of the Department of Children and Families ~~Family Services~~,
1098 employees of the Department of Health, and other medical
1099 professionals as is deemed appropriate to enable them to develop
1100 and maintain their professional skills and abilities in handling
1101 child abuse, abandonment, and neglect cases.

1102 (i) Educational and community awareness campaigns on child
1103 abuse, abandonment, and neglect in an effort to enable citizens
1104 more successfully to prevent, identify, and treat child abuse,
1105 abandonment, and neglect in the community.

1106 (j) Child protection team assessments that include, as
1107 appropriate, medical evaluations, medical consultations, family
1108 psychosocial interviews, specialized clinical interviews, or
1109 forensic interviews.

1110
1111 All medical personnel participating on a child protection team
1112 must successfully complete the required child protection team



915192

1113 training curriculum as set forth in protocols determined by the
1114 Deputy Secretary for Children's Medical Services and the
1115 Statewide Medical Director for Child Protection. A child
1116 protection team that is evaluating a report of medical neglect
1117 and assessing the health care needs of a medically complex child
1118 shall consult with a physician who has experience in treating
1119 children with the same condition.

1120 (2) The child abuse, abandonment, and neglect reports that
1121 must be referred by the department to child protection teams of
1122 the Department of Health for an assessment and other appropriate
1123 available support services as set forth in subsection (1) must
1124 include cases involving:

1125 (a) Injuries to the head, bruises to the neck or head,
1126 burns, or fractures in a child of any age.

1127 (b) Bruises anywhere on a child 5 years of age or under.

1128 (c) Any report alleging sexual abuse of a child.

1129 (d) Any sexually transmitted disease in a prepubescent
1130 child.

1131 (e) Reported malnutrition of a child and failure of a child
1132 to thrive.

1133 (f) Reported medical neglect of a child.

1134 (g) Any family in which one or more children have been
1135 pronounced dead on arrival at a hospital or other health care
1136 facility, or have been injured and later died, as a result of
1137 suspected abuse, abandonment, or neglect, when any sibling or
1138 other child remains in the home.

1139 (h) Symptoms of serious emotional problems in a child when
1140 emotional or other abuse, abandonment, or neglect is suspected.

1141 (3) All abuse and neglect cases transmitted for



915192

1142 investigation to a district by the hotline must be
1143 simultaneously transmitted to the Department of Health child
1144 protection team for review. For the purpose of determining
1145 whether face-to-face medical evaluation by a child protection
1146 team is necessary, all cases transmitted to the child protection
1147 team which meet the criteria in subsection (2) must be timely
1148 reviewed by:

1149 (a) A physician licensed under chapter 458 or chapter 459
1150 who holds board certification in pediatrics and is a member of a
1151 child protection team;

1152 (b) A physician licensed under chapter 458 or chapter 459
1153 who holds board certification in a specialty other than
1154 pediatrics, who may complete the review only when working under
1155 the direction of a physician licensed under chapter 458 or
1156 chapter 459 who holds board certification in pediatrics and is a
1157 member of a child protection team;

1158 (c) An advanced registered nurse practitioner licensed
1159 under chapter 464 who has a specialty ~~speciality~~ in pediatrics
1160 or family medicine and is a member of a child protection team;

1161 (d) A physician assistant licensed under chapter 458 or
1162 chapter 459, who may complete the review only when working under
1163 the supervision of a physician licensed under chapter 458 or
1164 chapter 459 who holds board certification in pediatrics and is a
1165 member of a child protection team; or

1166 (e) A registered nurse licensed under chapter 464, who may
1167 complete the review only when working under the direct
1168 supervision of a physician licensed under chapter 458 or chapter
1169 459 who holds certification in pediatrics and is a member of a
1170 child protection team.



915192

1171 (4) A face-to-face medical evaluation by a child protection
1172 team is not necessary when:

1173 (a) The child was examined for the alleged abuse or neglect
1174 by a physician who is not a member of the child protection team,
1175 and a consultation between the child protection team board-
1176 certified pediatrician, advanced registered nurse practitioner,
1177 physician assistant working under the supervision of a child
1178 protection team board-certified pediatrician, or registered
1179 nurse working under the direct supervision of a child protection
1180 team board-certified pediatrician, and the examining physician
1181 concludes that a further medical evaluation is unnecessary;

1182 (b) The child protective investigator, with supervisory
1183 approval, has determined, after conducting a child safety
1184 assessment, that there are no indications of injuries as
1185 described in paragraphs (2) (a)-(h) as reported; or

1186 (c) The child protection team board-certified pediatrician,
1187 as authorized in subsection (3), determines that a medical
1188 evaluation is not required.

1189
1190 Notwithstanding paragraphs (a), (b), and (c), a child protection
1191 team pediatrician, as authorized in subsection (3), may
1192 determine that a face-to-face medical evaluation is necessary.

1193 (5) In all instances in which a child protection team is
1194 providing certain services to abused, abandoned, or neglected
1195 children, other offices and units of the Department of Health,
1196 and offices and units of the Department of Children and Families
1197 ~~Family Services~~, shall avoid duplicating the provision of those
1198 services.

1199 (6) The Department of Health child protection team quality



915192

1200 assurance program and the Family Safety Program Office of the
1201 Department of Children and Families ~~Family Services' Family~~
1202 ~~Safety Program Office~~ quality assurance program shall
1203 collaborate to ensure referrals and responses to child abuse,
1204 abandonment, and neglect reports are appropriate. Each quality
1205 assurance program shall include a review of records in which
1206 there are no findings of abuse, abandonment, or neglect, and the
1207 findings of these reviews shall be included in each department's
1208 quality assurance reports.

1209 Section 10. Section 39.3068, Florida Statutes, is created
1210 to read:

1211 39.3068 Reports of medical neglect.—

1212 (1) Upon receiving a report alleging medical neglect, the
1213 department or sheriff's office shall assign the case to a child
1214 protective investigator who has specialized training in
1215 addressing medical neglect or working with medically complex
1216 children, if such investigator is available. If a child
1217 protective investigator with specialized training is not
1218 available, the child protective investigator shall consult with
1219 department staff with such expertise.

1220 (2) The child protective investigator who has interacted
1221 with the child and the child's family shall promptly contact and
1222 provide information to the child protection team. The child
1223 protection team shall assist the child protective investigator
1224 in identifying immediate responses to address the medical needs
1225 of the child with the priority of maintaining the child in the
1226 home if the parents will be able to meet the needs of the child
1227 with additional services. The child protective investigator and
1228 the child protection team must use a family-centered approach to



915192

1229 assess the capacity of the family to meet those needs. A family-
1230 centered approach is intended to increase independence on the
1231 part of the family, accessibility to programs and services
1232 within the community, and collaboration between families and
1233 their service providers. The ethnic, cultural, economic, racial,
1234 social, and religious diversity of families must be respected
1235 and considered in the development and provision of services.

1236 (3) The child shall be evaluated by the child protection
1237 team as soon as practicable. After receipt of the report from
1238 the child protection team, the department shall convene a case
1239 staffing which shall be attended, at a minimum, by the child
1240 protective investigator; department legal staff; and
1241 representatives from the child protection team that evaluated
1242 the child, Children's Medical Services, the Agency for Health
1243 Care Administration, the community-based care lead agency, and
1244 any providers of services to the child. However, the Agency for
1245 Health Care Administration is not required to attend the
1246 staffing if the child is not Medicaid-eligible. The staffing
1247 shall consider, at a minimum, available services, given the
1248 family's eligibility for services; services that are effective
1249 in addressing conditions leading to medical neglect allegations;
1250 and services that would enable the child to safely remain at
1251 home. Any services that are available and effective, shall be
1252 provided.

1253 Section 11. Section 39.307, Florida Statutes, is amended to
1254 read:

1255 39.307 Reports of child-on-child sexual abuse.—

1256 (1) Upon receiving a report alleging juvenile sexual abuse
1257 or inappropriate sexual behavior as defined in s. 39.01(7), the



915192

1258 department shall assist the family, child, and caregiver in
1259 receiving appropriate services to address the allegations of the
1260 report.

1261 (a) The department shall ensure that information describing
1262 the child's history of child sexual abuse is included in the
1263 child's electronic record. This record must also include
1264 information describing the services the child has received as a
1265 result of his or her involvement with child sexual abuse.

1266 (b) Placement decisions for a child who has been involved
1267 with child sexual abuse must include consideration of the needs
1268 of the child and any other children in the placement.

1269 (c) The department shall monitor the occurrence of child
1270 sexual abuse and the provision of services to children involved
1271 in child sexual abuse, juvenile sexual abuse, or who have
1272 displayed inappropriate sexual behavior.

1273 (2) The department, contracted sheriff's office providing
1274 protective investigation services, or contracted case management
1275 personnel responsible for providing services, at a minimum,
1276 shall adhere to the following procedures:

1277 (a) The purpose of the response to a report alleging
1278 juvenile sexual abuse behavior or inappropriate sexual behavior
1279 shall be explained to the caregiver.

1280 1. The purpose of the response shall be explained in a
1281 manner consistent with legislative purpose and intent provided
1282 in this chapter.

1283 2. The name and office telephone number of the person
1284 responding shall be provided to the caregiver of the alleged
1285 abuser ~~juvenile sexual offender~~ or child who has exhibited
1286 inappropriate sexual behavior and the victim's caregiver.



915192

1287 3. The possible consequences of the department's response,
1288 including outcomes and services, shall be explained to the
1289 caregiver of the alleged abuser ~~juvenile sexual offender~~ or
1290 child who has exhibited inappropriate sexual behavior and the
1291 victim's caregiver.

1292 (b) The caregiver of the alleged abuser ~~juvenile sexual~~
1293 ~~offender~~ or child who has exhibited inappropriate sexual
1294 behavior and the victim's caregiver shall be involved to the
1295 fullest extent possible in determining the nature of the sexual
1296 behavior concerns and the nature of any problem or risk to other
1297 children.

1298 (c) The assessment of risk and the perceived treatment
1299 needs of the alleged abuser ~~juvenile sexual offender~~ or child
1300 who has exhibited inappropriate sexual behavior, the victim, and
1301 respective caregivers shall be conducted by the district staff,
1302 the child protection team of the Department of Health, and other
1303 providers under contract with the department to provide services
1304 to the caregiver of the alleged offender, the victim, and the
1305 victim's caregiver.

1306 (d) The assessment shall be conducted in a manner that is
1307 sensitive to the social, economic, and cultural environment of
1308 the family.

1309 (e) If necessary, the child protection team of the
1310 Department of Health shall conduct a physical examination of the
1311 victim, which is sufficient to meet forensic requirements.

1312 (f) Based on the information obtained from the alleged
1313 abuser ~~juvenile sexual offender~~ or child who has exhibited
1314 inappropriate sexual behavior, his or her caregiver, the victim,
1315 and the victim's caregiver, an assessment of service and



915192

1316 treatment needs must be completed and, if needed, a case plan
1317 developed within 30 days.

1318 (g) The department shall classify the outcome of the report
1319 as follows:

1320 1. Report closed. Services were not offered because the
1321 department determined that there was no basis for intervention.

1322 2. Services accepted by alleged abuser ~~juvenile sexual~~
1323 ~~offender~~. Services were offered to the alleged abuser ~~juvenile~~
1324 ~~sexual offender~~ or child who has exhibited inappropriate sexual
1325 behavior and accepted by the caregiver.

1326 3. Report closed. Services were offered to the alleged
1327 abuser ~~juvenile sexual offender~~ or child who has exhibited
1328 inappropriate sexual behavior, but were rejected by the
1329 caregiver.

1330 4. Notification to law enforcement. The risk to the
1331 victim's safety and well-being cannot be reduced by the
1332 provision of services or the caregiver rejected services, and
1333 notification of the alleged delinquent act or violation of law
1334 to the appropriate law enforcement agency was initiated.

1335 5. Services accepted by victim. Services were offered to
1336 the victim and accepted by the caregiver.

1337 6. Report closed. Services were offered to the victim but
1338 were rejected by the caregiver.

1339 (3) If services have been accepted by the alleged abuser
1340 ~~juvenile sexual offender~~ or child who has exhibited
1341 inappropriate sexual behavior, the victim, and respective
1342 caregivers, the department shall designate a case manager and
1343 develop a specific case plan.

1344 (a) Upon receipt of the plan, the caregiver shall indicate



915192

1345 its acceptance of the plan in writing.

1346 (b) The case manager shall periodically review the progress
1347 toward achieving the objectives of the plan in order to:

1348 1. Make adjustments to the plan or take additional action
1349 as provided in this part; or

1350 2. Terminate the case if indicated by successful or
1351 substantial achievement of the objectives of the plan.

1352 (4) Services provided to the alleged abuser ~~juvenile sexual~~
1353 ~~offender~~ or child who has exhibited inappropriate sexual
1354 behavior, the victim, and respective caregivers or family must
1355 be voluntary and of necessary duration.

1356 (5) If the family or caregiver of the alleged abuser
1357 ~~juvenile sexual offender~~ or child who has exhibited
1358 inappropriate sexual behavior fails to adequately participate or
1359 allow for the adequate participation of the child in the
1360 services or treatment delineated in the case plan, the case
1361 manager may recommend that the department:

1362 (a) Close the case;

1363 (b) Refer the case to mediation or arbitration, if
1364 available; or

1365 (c) Notify the appropriate law enforcement agency of
1366 failure to comply.

1367 (6) At any time, as a result of additional information,
1368 findings of facts, or changing conditions, the department may
1369 pursue a child protective investigation as provided in this
1370 chapter.

1371 (7) The department may adopt ~~is authorized to develop~~ rules
1372 ~~and other policy directives necessary to~~ administer ~~implement~~
1373 ~~the provisions of~~ this section.



915192

1374 Section 12. Paragraph (h) of subsection (8) and subsection
1375 (9) of section 39.402, Florida Statutes, are amended to read:

1376 39.402 Placement in a shelter.—

1377 (8)

1378 (h) The order for placement of a child in shelter care must
1379 identify the parties present at the hearing and must contain
1380 written findings:

1381 1. That placement in shelter care is necessary based on the
1382 criteria in subsections (1) and (2).

1383 2. That placement in shelter care is in the best interest
1384 of the child.

1385 3. That continuation of the child in the home is contrary
1386 to the welfare of the child because the home situation presents
1387 a substantial and immediate danger to the child's physical,
1388 mental, or emotional health or safety which cannot be mitigated
1389 by the provision of preventive services.

1390 4. That based upon the allegations of the petition for
1391 placement in shelter care, there is probable cause to believe
1392 that the child is dependent or that the court needs additional
1393 time, which may not exceed 72 hours, in which to obtain and
1394 review documents pertaining to the family in order to
1395 appropriately determine the risk to the child.

1396 5. That the department has made reasonable efforts to
1397 prevent or eliminate the need for removal of the child from the
1398 home. A finding of reasonable effort by the department to
1399 prevent or eliminate the need for removal may be made and the
1400 department is deemed to have made reasonable efforts to prevent
1401 or eliminate the need for removal if:

1402 a. The first contact of the department with the family



915192

1403 occurs during an emergency;

1404 b. The appraisal of the home situation by the department
1405 indicates that the home situation presents a substantial and
1406 immediate danger to the child's physical, mental, or emotional
1407 health or safety which cannot be mitigated by the provision of
1408 preventive services;

1409 c. The child cannot safely remain at home, either because
1410 there are no preventive services that can ensure the health and
1411 safety of the child or because, even with appropriate and
1412 available services being provided, the health and safety of the
1413 child cannot be ensured; or

1414 d. The parent or legal custodian is alleged to have
1415 committed any of the acts listed as grounds for expedited
1416 termination of parental rights in s. 39.806(1)(f)-(i).

1417 6. That the department has made reasonable efforts to keep
1418 siblings together if they are removed and placed in out-of-home
1419 care unless such placement is not in the best interest of each
1420 child. Reasonable efforts shall include short-term placement in
1421 a group home with the ability to accommodate sibling groups if
1422 such a placement is available. The department shall report to
1423 the court its efforts to place siblings together unless the
1424 court finds that such placement is not in the best interest of a
1425 child or his or her sibling.

1426 ~~7.6.~~ That the court notified the parents, relatives that
1427 are providing out-of-home care for the child, or legal
1428 custodians of the time, date, and location of the next
1429 dependency hearing and of the importance of the active
1430 participation of the parents, relatives that are providing out-
1431 of-home care for the child, or legal custodians in all



915192

1432 proceedings and hearings.

1433 8.7. That the court notified the parents or legal
1434 custodians of their right to counsel to represent them at the
1435 shelter hearing and at each subsequent hearing or proceeding,
1436 and the right of the parents to appointed counsel, pursuant to
1437 the procedures set forth in s. 39.013.

1438 9.8. That the court notified relatives who are providing
1439 out-of-home care for a child as a result of the shelter petition
1440 being granted that they have the right to attend all subsequent
1441 hearings, to submit reports to the court, and to speak to the
1442 court regarding the child, if they so desire.

1443 (9) (a) At any shelter hearing, the department shall provide
1444 to the court a recommendation for scheduled contact between the
1445 child and parents, if appropriate. The court shall determine
1446 visitation rights absent a clear and convincing showing that
1447 visitation is not in the best interest of the child. Any order
1448 for visitation or other contact must conform to ~~the provisions~~
1449 ~~of~~ s. 39.0139. If visitation is ordered but will not commence
1450 within 72 hours of the shelter hearing, the department shall
1451 provide justification to the court.

1452 (b) If siblings who are removed from the home cannot be
1453 placed together, the department shall provide to the court a
1454 recommendation for frequent visitation or other ongoing
1455 interaction between the siblings unless this interaction would
1456 be contrary to a sibling's safety or well-being. If visitation
1457 among siblings is ordered but will not commence within 72 hours
1458 after the shelter hearing, the department shall provide
1459 justification to the court for the delay.

1460 Section 13. Paragraph (d) of subsection (3) of section



915192

1461 39.501, Florida Statutes, is amended to read:

1462 39.501 Petition for dependency.—

1463 (3)

1464 (d) The petitioner must state in the petition, if known,
1465 whether:

1466 1. A parent or legal custodian named in the petition has
1467 previously unsuccessfully participated in voluntary services
1468 offered by the department;

1469 2. A parent or legal custodian named in the petition has
1470 participated in mediation and whether a mediation agreement
1471 exists;

1472 3. A parent or legal custodian has rejected the voluntary
1473 services offered by the department;

1474 4. A parent or legal custodian named in the petition has
1475 not fully complied with a safety plan; or

1476 5.4. The department has determined that voluntary services
1477 are not appropriate for the parent or legal custodian and the
1478 reasons for such determination.

1479
1480 If the department is the petitioner, it shall provide all safety
1481 assessments and safety plans involving the parent or legal
1482 custodian to the court.

1483 Section 14. Section 39.5085, Florida Statutes, is amended
1484 to read:

1485 39.5085 Relative Caregiver Program.—

1486 (1) It is the intent of the Legislature in enacting this
1487 section to:

1488 (a) Provide for the establishment of procedures and
1489 protocols that serve to advance the continued safety of children



915192

1490 by acknowledging the valued resource uniquely available through
1491 grandparents, ~~and~~ relatives of children, and specified
1492 nonrelatives of children pursuant to subparagraph (2)(a)3.

1493 (b) Recognize family relationships in which a grandparent
1494 or other relative is the head of a household that includes a
1495 child otherwise at risk of foster care placement.

1496 (c) Enhance family preservation and stability by
1497 recognizing that most children in such placements with
1498 grandparents and other relatives do not need intensive
1499 supervision of the placement by the courts or by the department.

1500 (d) Recognize that permanency in the best interests of the
1501 child can be achieved through a variety of permanency options,
1502 including permanent guardianship under s. 39.6221 if the
1503 guardian is a relative, by permanent placement with a fit and
1504 willing relative under s. 39.6231, by a relative, guardianship
1505 under chapter 744, or adoption, by providing additional
1506 placement options and incentives that will achieve permanency
1507 and stability for many children who are otherwise at risk of
1508 foster care placement because of abuse, abandonment, or neglect,
1509 but who may successfully be able to be placed by the dependency
1510 court in the care of such relatives.

1511 (e) Reserve the limited casework and supervisory resources
1512 of the courts and the department for those cases in which
1513 children do not have the option for safe, stable care within the
1514 family.

1515 (f) Recognize that a child may have a close relationship
1516 with a person who is not a blood relative or a relative by
1517 marriage and that such person should be eligible for financial
1518 assistance under this section if he or she is able and willing



915192

1519 to care for the child and provide a safe, stable home
1520 environment.

1521 (2) (a) The Department of Children and Families ~~Family~~
1522 ~~Services~~ shall establish and operate the Relative Caregiver
1523 Program pursuant to eligibility guidelines established in this
1524 section as further implemented by rule of the department. The
1525 Relative Caregiver Program shall, within the limits of available
1526 funding, provide financial assistance to:

1527 1. Relatives who are within the fifth degree by blood or
1528 marriage to the parent or stepparent of a child and who are
1529 caring full-time for that dependent child in the role of
1530 substitute parent as a result of a court's determination of
1531 child abuse, neglect, or abandonment and subsequent placement
1532 with the relative under this chapter.

1533 2. Relatives who are within the fifth degree by blood or
1534 marriage to the parent or stepparent of a child and who are
1535 caring full-time for that dependent child, and a dependent half-
1536 brother or half-sister of that dependent child, in the role of
1537 substitute parent as a result of a court's determination of
1538 child abuse, neglect, or abandonment and subsequent placement
1539 with the relative under this chapter.

1540 3. Nonrelatives who are willing to assume custody and care
1541 of a dependent child and a dependent half-brother or half-sister
1542 of that dependent child in the role of substitute parent as a
1543 result of a court's determination of child abuse, neglect, or
1544 abandonment and subsequent placement with the nonrelative
1545 caregiver under this chapter. The court must find that a
1546 proposed placement under this subparagraph is in the best
1547 interest of the child.



915192

1548
1549 The placement may be court-ordered temporary legal custody to
1550 the relative or nonrelative under protective supervision of the
1551 department pursuant to s. 39.521(1)(b)3., or court-ordered
1552 placement in the home of a relative or nonrelative as a
1553 permanency option under s. 39.6221 or s. 39.6231 or under former
1554 s. 39.622 if the placement was made before July 1, 2006. The
1555 Relative Caregiver Program shall offer financial assistance to
1556 caregivers ~~who are relatives and~~ who would be unable to serve in
1557 that capacity without the ~~relative~~ caregiver payment because of
1558 financial burden, thus exposing the child to the trauma of
1559 placement in a shelter or in foster care.

1560 (b) Caregivers ~~who are relatives and~~ who receive assistance
1561 under this section must be capable, as determined by a home
1562 study, of providing a physically safe environment and a stable,
1563 supportive home for the children under their care, and must
1564 assure that the children's well-being is met, including, but not
1565 limited to, the provision of immunizations, education, and
1566 mental health services as needed.

1567 (c) Relatives or nonrelatives who qualify for and
1568 participate in the Relative Caregiver Program are not required
1569 to meet foster care licensing requirements under s. 409.175.

1570 (d) Relatives or nonrelatives who are caring for children
1571 placed with them by the court pursuant to this chapter shall
1572 receive a special monthly ~~relative~~ caregiver benefit established
1573 by rule of the department. The amount of the special benefit
1574 payment shall be based on the child's age within a payment
1575 schedule established by rule of the department and subject to
1576 availability of funding. The statewide average monthly rate for



915192

1577 children judicially placed with relatives or nonrelatives who
1578 are not licensed as foster homes may not exceed 82 percent of
1579 the statewide average foster care rate, and ~~nor may~~ the cost of
1580 providing the assistance described in this section to any
1581 ~~relative~~ caregiver may not exceed the cost of providing out-of-
1582 home care in emergency shelter or foster care.

1583 (e) Children receiving cash benefits under this section are
1584 not eligible to simultaneously receive WAGES cash benefits under
1585 chapter 414.

1586 (f) Within available funding, the Relative Caregiver
1587 Program shall provide ~~relative~~ caregivers with family support
1588 and preservation services, flexible funds in accordance with s.
1589 409.165, school readiness, and other available services in order
1590 to support the child's safety, growth, and healthy development.
1591 Children living with ~~relative~~ caregivers who are receiving
1592 assistance under this section shall be eligible for Medicaid
1593 coverage.

1594 (g) The department may use appropriate available state,
1595 federal, and private funds to operate the Relative Caregiver
1596 Program. The department may develop liaison functions to be
1597 available to relatives or nonrelatives who care for children
1598 pursuant to this chapter to ensure placement stability in
1599 extended family settings.

1600 Section 15. Subsections (3) and (4) of section 39.604,
1601 Florida Statutes, are amended to read:

1602 39.604 Rilya Wilson Act; short title; legislative intent;
1603 requirements; attendance and reporting responsibilities.—

1604 (3) REQUIREMENTS.—A child from birth to the age of ~~who is~~
1605 ~~age 3 years to~~ school entry, under court-ordered ~~court-ordered~~



915192

1606 protective supervision or in the custody of the Family Safety
1607 Program Office of the Department of Children and Families ~~Family~~
1608 ~~Services~~ or a community-based lead agency, and enrolled in a
1609 licensed early education or child care program must attend ~~be~~
1610 ~~enrolled to participate in~~ the program 5 days a week.

1611 Notwithstanding ~~the requirements of~~ s. 39.202, the Department of
1612 Children and Families ~~Family Services~~ must notify operators of
1613 the licensed early education or child care program, subject to
1614 the reporting requirements of this act, of the enrollment of any
1615 child from birth to the age of ~~age 3 years to~~ school entry,
1616 under court-ordered ~~court-ordered~~ protective supervision or in
1617 the custody of the Family Safety Program Office of the
1618 Department of Children and Families ~~Family Services~~ or a
1619 community-based lead agency. When a child is enrolled in an
1620 early education or child care program regulated by the
1621 department, the child's attendance in the program must be a
1622 required action in the safety plan or the case plan developed
1623 for the ~~a~~ child pursuant to this chapter ~~who is enrolled in a~~
1624 ~~licensed early education or child care program must contain the~~
1625 ~~participation in this program as a required action.~~ An exemption
1626 to participating in the licensed early education or child care
1627 program 5 days a week may be granted by the court.

1628 (4) ATTENDANCE AND REPORTING REQUIREMENTS.—

1629 (a) A child enrolled in a licensed early education or child
1630 care program who meets the requirements of subsection (3) may
1631 not be withdrawn from the program without the prior written
1632 approval of the Family Safety Program Office of the Department
1633 of Children and Families ~~Family Services~~ or the community-based
1634 lead agency.



915192

1635 (b)1. If a child covered by this section is absent from the
1636 program on a day when he or she is supposed to be present, the
1637 person with whom the child resides must report the absence to
1638 the program by the end of the business day. If the person with
1639 whom the child resides, whether the parent or caregiver, fails
1640 to timely report the absence, the absence is considered to be
1641 unexcused. The program shall report any unexcused absence or
1642 seven consecutive excused absences of a child who is enrolled in
1643 the program and covered by this act to the local designated
1644 staff of the Family Safety Program Office of the Department of
1645 Children and Families ~~Family Services~~ or the community-based
1646 lead agency by the end of the business day following the
1647 unexcused absence or seventh consecutive excused absence.

1648 2. The department or community-based lead agency shall
1649 conduct a site visit to the residence of the child upon
1650 receiving a report of two consecutive unexcused absences or
1651 seven consecutive excused absences.

1652 3. If the site visit results in a determination that the
1653 child is missing, the department or community-based lead agency
1654 shall report the child as missing to a law enforcement agency
1655 and proceed with the necessary actions to locate the child
1656 pursuant to procedures for locating missing children.

1657 4. If the site visit results in a determination that the
1658 child is not missing, the parent or caregiver shall be notified
1659 that failure to ensure that the child attends the licensed early
1660 education or child care program is a violation of the safety
1661 plan or the case plan. If more than two site visits are
1662 conducted pursuant to this subsection, staff shall initiate
1663 action to notify the court of the parent or caregiver's



915192

1664 noncompliance with the case plan.

1665 Section 16. Paragraph (c) of subsection (2) and paragraph
1666 (a) of subsection (3) of section 39.701, Florida Statutes, are
1667 amended to read:

1668 39.701 Judicial review.—

1669 (2) REVIEW HEARINGS FOR CHILDREN YOUNGER THAN 18 YEARS OF
1670 AGE.—

1671 (c) *Review determinations.*—The court and any citizen review
1672 panel shall take into consideration the information contained in
1673 the social services study and investigation and all medical,
1674 psychological, and educational records that support the terms of
1675 the case plan; testimony by the social services agency, the
1676 parent, the foster parent or legal custodian, the guardian ad
1677 litem or surrogate parent for educational decisionmaking if one
1678 has been appointed for the child, and any other person deemed
1679 appropriate; and any relevant and material evidence submitted to
1680 the court, including written and oral reports to the extent of
1681 their probative value. These reports and evidence may be
1682 received by the court in its effort to determine the action to
1683 be taken with regard to the child and may be relied upon to the
1684 extent of their probative value, even though not competent in an
1685 adjudicatory hearing. In its deliberations, the court and any
1686 citizen review panel shall seek to determine:

1687 1. If the parent was advised of the right to receive
1688 assistance from any person or social service agency in the
1689 preparation of the case plan.

1690 2. If the parent has been advised of the right to have
1691 counsel present at the judicial review or citizen review
1692 hearings. If not so advised, the court or citizen review panel



915192

1693 shall advise the parent of such right.

1694 3. If a guardian ad litem needs to be appointed for the
1695 child in a case in which a guardian ad litem has not previously
1696 been appointed or if there is a need to continue a guardian ad
1697 litem in a case in which a guardian ad litem has been appointed.

1698 4. Who holds the rights to make educational decisions for
1699 the child. If appropriate, the court may refer the child to the
1700 district school superintendent for appointment of a surrogate
1701 parent or may itself appoint a surrogate parent under the
1702 Individuals with Disabilities Education Act and s. 39.0016.

1703 5. The compliance or lack of compliance of all parties with
1704 applicable items of the case plan, including the parents'
1705 compliance with child support orders.

1706 6. The compliance or lack of compliance with a visitation
1707 contract between the parent and the social service agency for
1708 contact with the child, including the frequency, duration, and
1709 results of the parent-child visitation and the reason for any
1710 noncompliance.

1711 7. The frequency, kind, and duration of contacts among
1712 siblings who have been separated during placement, as well as
1713 any efforts undertaken to reunite separated siblings if doing so
1714 is in the best interest of the child.

1715 ~~8.7.~~ The compliance or lack of compliance of the parent in
1716 meeting specified financial obligations pertaining to the care
1717 of the child, including the reason for failure to comply, if
1718 applicable ~~such is the case.~~

1719 ~~9.8.~~ Whether the child is receiving safe and proper care
1720 according to s. 39.6012, including, but not limited to, the
1721 appropriateness of the child's current placement, including



915192

1722 whether the child is in a setting that is as family-like and as
1723 close to the parent's home as possible, consistent with the
1724 child's best interests and special needs, and including
1725 maintaining stability in the child's educational placement, as
1726 documented by assurances from the community-based care provider
1727 that:

1728 a. The placement of the child takes into account the
1729 appropriateness of the current educational setting and the
1730 proximity to the school in which the child is enrolled at the
1731 time of placement.

1732 b. The community-based care agency has coordinated with
1733 appropriate local educational agencies to ensure that the child
1734 remains in the school in which the child is enrolled at the time
1735 of placement.

1736 ~~10.9.~~ A projected date likely for the child's return home
1737 or other permanent placement.

1738 ~~11.10.~~ When appropriate, the basis for the unwillingness or
1739 inability of the parent to become a party to a case plan. The
1740 court and the citizen review panel shall determine if the
1741 efforts of the social service agency to secure party
1742 participation in a case plan were sufficient.

1743 ~~12.11.~~ For a child who has reached 13 years of age but is
1744 not yet 18 years of age, the adequacy of the child's preparation
1745 for adulthood and independent living.

1746 ~~13.12.~~ If amendments to the case plan are required.
1747 Amendments to the case plan must be made under s. 39.6013.

1748 (3) REVIEW HEARINGS FOR CHILDREN 17 YEARS OF AGE.—

1749 (a) In addition to the review and report required under
1750 paragraphs (1) (a) and (2) (a), respectively, the court shall hold



915192

1751 a judicial review hearing within 90 days after a child's 17th
1752 birthday. The court shall also issue an order, separate from the
1753 order on judicial review, that the disability of nonage of the
1754 child has been removed pursuant to ss. 743.044, 743.045, and
1755 743.046, and for any of these disabilities that the court finds
1756 is in the child's best interest to remove. The court ~~s. 743.045~~
1757 ~~and~~ shall continue to hold timely judicial review hearings. If
1758 necessary, the court may review the status of the child more
1759 frequently during the year before the child's 18th birthday. At
1760 each review hearing held under this subsection, in addition to
1761 any information or report provided to the court by the foster
1762 parent, legal custodian, or guardian ad litem, the child shall
1763 be given the opportunity to address the court with any
1764 information relevant to the child's best interest, particularly
1765 in relation to independent living transition services. The
1766 department shall include in the social study report for judicial
1767 review written verification that the child has:

1768 1. A current Medicaid card and all necessary information
1769 concerning the Medicaid program sufficient to prepare the child
1770 to apply for coverage upon reaching the age of 18, if such
1771 application is appropriate.

1772 2. A certified copy of the child's birth certificate and,
1773 if the child does not have a valid driver license, a Florida
1774 identification card issued under s. 322.051.

1775 3. A social security card and information relating to
1776 social security insurance benefits if the child is eligible for
1777 those benefits. If the child has received such benefits and they
1778 are being held in trust for the child, a full accounting of
1779 these funds must be provided and the child must be informed as



915192

1780 to how to access those funds.

1781 4. All relevant information related to the Road-to-
1782 Independence Program, including, but not limited to, eligibility
1783 requirements, information on participation, and assistance in
1784 gaining admission to the program. If the child is eligible for
1785 the Road-to-Independence Program, he or she must be advised that
1786 he or she may continue to reside with the licensed family home
1787 or group care provider with whom the child was residing at the
1788 time the child attained his or her 18th birthday, in another
1789 licensed family home, or with a group care provider arranged by
1790 the department.

1791 5. An open bank account or the identification necessary to
1792 open a bank account and to acquire essential banking and
1793 budgeting skills.

1794 6. Information on public assistance and how to apply for
1795 public assistance.

1796 7. A clear understanding of where he or she will be living
1797 on his or her 18th birthday, how living expenses will be paid,
1798 and the educational program or school in which he or she will be
1799 enrolled.

1800 8. Information related to the ability of the child to
1801 remain in care until he or she reaches 21 years of age under s.
1802 39.013.

1803 9. A letter providing the dates that the child is under the
1804 jurisdiction of the court.

1805 10. A letter stating that the child is in compliance with
1806 financial aid documentation requirements.

1807 11. The child's educational records.

1808 12. The child's entire health and mental health records.



915192

1809 13. The process for accessing his or her case file.

1810 14. A statement encouraging the child to attend all
1811 judicial review hearings occurring after the child's 17th
1812 birthday.

1813 Section 17. Subsection (2) of section 39.802, Florida
1814 Statutes, is amended to read:

1815 39.802 Petition for termination of parental rights; filing;
1816 elements.—

1817 (2) The form of the petition is governed by the Florida
1818 Rules of Juvenile Procedure. The petition must be in writing and
1819 signed by the petitioner ~~or, if the department is the~~
1820 ~~petitioner, by an employee of the department,~~ under oath stating
1821 the petitioner's good faith in filing the petition.

1822 Section 18. Paragraph (g) of subsection (1) of section
1823 63.212, Florida Statutes, is amended to read:

1824 63.212 Prohibited acts; penalties for violation.—

1825 (1) It is unlawful for any person:

1826 (g) Except an adoption entity, to advertise or offer to the
1827 public, in any way, by any medium whatever that a minor is
1828 available for adoption or that a minor is sought for adoption;
1829 and, further, it is unlawful for any person to publish or
1830 broadcast any such advertisement or assist an unlicensed person
1831 or entity in publishing or broadcasting any such advertisement
1832 without including a Florida license number of the agency or
1833 attorney placing the advertisement.

1834 1. Only a person who is an attorney licensed to practice
1835 law in this state or an adoption entity licensed under the laws
1836 of this state may place a paid advertisement or paid listing of
1837 the person's telephone number, on the person's own behalf, in a



915192

1838 telephone directory that:

1839 a. A child is offered or wanted for adoption; or

1840 b. The person is able to place, locate, or receive a child
1841 for adoption.

1842 2. A person who publishes a telephone directory that is
1843 distributed in this state:

1844 ~~a.~~ shall include, at the beginning of any classified
1845 heading for adoption and adoption services, a statement that
1846 informs directory users that only attorneys licensed to practice
1847 law in this state and licensed adoption entities may legally
1848 provide adoption services under state law.

1849 3.b. ~~A person who places may publish~~ an advertisement
1850 described in subparagraph 1. in ~~a the~~ telephone directory must
1851 include only if the advertisement contains the following
1852 information:

1853 a. ~~(I)~~ For an attorney licensed to practice law in this
1854 state, the person's Florida Bar number.

1855 b. ~~(II)~~ For a child placing agency licensed under the laws
1856 of this state, the number on the person's adoption entity
1857 license.

1858 Section 19. Subsection (1) and paragraph (c) of subsection
1859 (3) of section 383.402, Florida Statutes, are amended to read:

1860 383.402 Child abuse death review; State Child Abuse Death
1861 Review Committee; local child abuse death review committees.—

1862 (1) It is the intent of the Legislature to establish a
1863 statewide multidisciplinary, multiagency child abuse death
1864 assessment and prevention system that consists of state and
1865 local review committees. The state and local review committees
1866 shall review the facts and circumstances of all deaths of



915192

1867 children from birth through age 18 which occur in this state and
1868 are reported to the central abuse hotline of the Department of
1869 Children and Families ~~as the result of verified child abuse or~~
1870 ~~neglect~~. The purpose of the review shall be to:

1871 (a) Achieve a greater understanding of the causes and
1872 contributing factors of deaths resulting from child abuse.

1873 (b) Whenever possible, develop a communitywide approach to
1874 address such cases and contributing factors.

1875 (c) Identify any gaps, deficiencies, or problems in the
1876 delivery of services to children and their families by public
1877 and private agencies which may be related to deaths that are the
1878 result of child abuse.

1879 (d) Make and implement recommendations for changes in law,
1880 rules, and policies, as well as develop practice standards that
1881 support the safe and healthy development of children and reduce
1882 preventable child abuse deaths.

1883 (3) The State Child Abuse Death Review Committee shall:

1884 (c) Prepare an annual statistical report on the incidence
1885 and causes of death resulting from reported child abuse in the
1886 state during the prior calendar year. The state committee shall
1887 submit a copy of the report by October 1 ~~December 31~~ of each
1888 year to the Governor, the President of the Senate, and the
1889 Speaker of the House of Representatives. The report must include
1890 recommendations for state and local action, including specific
1891 policy, procedural, regulatory, or statutory changes, and any
1892 other recommended preventive action.

1893 Section 20. Subsection (5) of section 402.40, Florida
1894 Statutes, is amended, and paragraph (g) is added to subsection
1895 (3) of that section, to read:



915192

1896 402.40 Child welfare training and certification.—
1897 (3) THIRD-PARTY CREDENTIALING ENTITIES.—The department
1898 shall approve one or more third-party credentialing entities for
1899 the purpose of developing and administering child welfare
1900 certification programs for persons who provide child welfare
1901 services. A third-party credentialing entity shall request such
1902 approval in writing from the department. In order to obtain
1903 approval, the third-party credentialing entity must:
1904 (g) Maintain an advisory committee, including
1905 representatives from each region of the department, each
1906 sheriff's office providing child protective services, and each
1907 community-based care lead agency, who shall be appointed by the
1908 organization they represent. The third-party credentialing
1909 entity may appoint additional members to the advisory committee.
1910 (5) CORE COMPETENCIES AND SPECIALIZATIONS.—
1911 (a) The Department of Children and Families ~~Family Services~~
1912 shall approve the core competencies and related preservice
1913 curricula that ensures that each person delivering child welfare
1914 services obtains the knowledge, skills, and abilities to
1915 competently carry out his or her work responsibilities.
1916 (b) The identification of these core competencies and
1917 development of preservice curricula shall be a collaborative
1918 effort that includes professionals who have expertise in child
1919 welfare services, department-approved third-party credentialing
1920 entities, and providers that will be affected by the curriculum,
1921 including, but not limited to, representatives from the
1922 community-based care lead agencies, sheriffs' offices conducting
1923 child protection investigations, and child welfare legal
1924 services providers.



915192

1925 (c) Community-based care agencies, sheriffs' offices, and
1926 the department may contract for the delivery of preservice and
1927 any additional training for persons delivering child welfare
1928 services if the curriculum satisfies the department-approved
1929 core competencies.

1930 (d) The department may also approve certifications
1931 involving specializations in serving specific populations or in
1932 skills relevant to child protection to be awarded to persons
1933 delivering child welfare services by a third-party credentialing
1934 entity approved pursuant to subsection (3).

1935 (e) ~~(d)~~ Department-approved credentialing entities shall,
1936 for a period of at least 12 months after implementation of the
1937 third-party child welfare certification programs, grant
1938 reciprocity and award a child welfare certification to
1939 individuals who hold current department-issued child welfare
1940 certification in good standing, at no cost to the department or
1941 the certificateholder.

1942 Section 21. Section 402.402, Florida Statutes, is created
1943 to read:

1944 402.402 Child protection and child welfare personnel;
1945 attorneys employed by the department.-

1946 (1) DEFINITIONS.-As used in this section, the term:

1947 (a) "Child protection and child welfare personnel" includes
1948 child protective investigators and child protective investigator
1949 supervisors employed by the department and case managers and
1950 case manager supervisors employed by a community-based care lead
1951 agency or a subcontractor of a community-based care lead agency.

1952 (b) "Human services-related field" means psychology,
1953 sociology, counseling, special education, human development,



915192

1954 child development, family development, marriage and family
1955 therapy, and nursing.

1956 (2) CHILD PROTECTION AND CHILD WELFARE PERSONNEL
1957 REQUIREMENTS.—

1958 (a) On an annual and statewide basis, 80 percent of child
1959 protective investigators and child protective investigation
1960 supervisors hired by the department on or after July 1, 2014,
1961 must have a bachelor's degree or master's degree in social work
1962 from a college or university social work program accredited by
1963 the Council on Social Work Education. If no viable candidates
1964 are available, the department may hire a person with a
1965 bachelor's degree or master's degree in a human services-related
1966 field. However, such employees must complete certification
1967 pursuant to s. 402.40(3) and complete at least 6 credit hours of
1968 college level coursework that imparts knowledge and leads to the
1969 development of skills with direct application to the child
1970 protection field within 3 years of the date of hire.

1971 (b) Child protective investigators and child protective
1972 investigation supervisors employed by the department or a
1973 sheriff's office before July 1, 2014, are exempt from the
1974 requirements of paragraph (a).

1975 (c) Child protective investigators and child protective
1976 investigation supervisors employed by a sheriff's office must
1977 have a bachelor's degree and, within 3 years of hire, complete
1978 at least 6 credit hours of college level coursework that impart
1979 knowledge and lead to the development of skills with direct
1980 application to the child protection field.

1981 (d) All child protective investigators and child protective
1982 investigation supervisors employed by the department or a



915192

1983 sheriff's office must complete specialized training focused on
1984 serving a specific population, including, but not limited to,
1985 medically fragile children, sexually exploited children,
1986 children under 3 years of age, or families with a history of
1987 domestic violence, mental illness, or substance abuse, or
1988 focused on performing certain aspects of child protection
1989 practice, including, but not limited to, investigation
1990 techniques and analysis of family dynamics. The specialized
1991 training may be used to fulfill continuing education
1992 requirements under s. 402.40(3)(e). Individuals hired before
1993 July 1, 2014, shall complete the specialized training by June
1994 30, 2016, and individuals hired on or after July 1, 2014, shall
1995 complete the specialized training within 2 years after hire. An
1996 individual may receive specialized training in multiple areas.

1997 (3) ATTORNEYS EMPLOYED BY THE DEPARTMENT TO HANDLE CHILD
1998 WELFARE CASES.—Attorneys hired on or after July 1, 2014, whose
1999 primary responsibility is representing the department in child
2000 welfare cases shall, within the first 6 months of employment,
2001 receive training in:

2002 (a) The dependency court process, including the attorney's
2003 role in preparing and reviewing documents prepared for
2004 dependency court for accuracy and completeness;

2005 (b) Preparing and presenting child welfare cases, including
2006 at least 1 week shadowing an experienced children's legal
2007 services attorney preparing and presenting cases;

2008 (c) Safety assessment, safety decisionmaking tools, and
2009 safety plans;

2010 (d) Developing information presented by investigators and
2011 case managers to support decisionmaking in the best interest of



915192

2012 children; and

2013 (e) The experiences and techniques of case managers and
2014 investigators, including shadowing an experienced child
2015 protective investigator and an experienced case manager for at
2016 least 8 hours.

2017 Section 22. Section 402.403, Florida Statutes, is created
2018 to read:

2019 402.403 Child Protection and Child Welfare Personnel
2020 Tuition Exemption Program.—

2021 (1) There is established within the department the Child
2022 Protection and Child Welfare Personnel Tuition Exemption Program
2023 for the purpose of recruiting and retaining high-performing
2024 individuals who are employed as child protection and child
2025 welfare personnel as defined in s. 402.402 and who do not
2026 possess a master's degree in social work or a certificate in an
2027 area related to child welfare.

2028 (2) Child protection and child welfare personnel who meet
2029 the requirements specified in subsection (3) are exempt from the
2030 payment of tuition and fees at a state university.

2031 (3) The department may approve child protection and child
2032 welfare personnel for the tuition and fee exemption if such
2033 personnel:

2034 (a) Are employed as child protection and child welfare
2035 personnel and are determined by their employers to perform at a
2036 high level as established by their personnel evaluations; and

2037 (b) Are accepted in a graduate-level social work program or
2038 a certificate program related to child welfare which is
2039 accredited by the Council on Social Work Education.

2040 (4) Child protection and child welfare personnel who meet



915192

2041 the requirements specified in subsection (3) may enroll for up
2042 to 6 credit hours of courses per term.

2043 (5) Child protection and child welfare personnel who are
2044 accepted into a graduate-level social work program or a
2045 certificate program related to child welfare which is accredited
2046 by the Council on Social Work Education shall take courses
2047 associated with the degree or certificate program online if such
2048 courses are offered online.

2049 Section 23. Section 402.404, Florida Statutes, is created
2050 to read:

2051 402.404 Child Protective Investigator and Supervisor
2052 Student Loan Forgiveness Program.—

2053 (1) There is established within the department the Child
2054 Protective Investigator and Supervisor Student Loan Forgiveness
2055 Program. The purpose of the program is to increase employment
2056 and retention of high-performing individuals who have either a
2057 bachelor's degree or a master's degree in social work and work
2058 in child protection or child welfare for the department, a
2059 community-based care lead agency, or a community-based care
2060 subcontractor by making payments toward loans received by
2061 students from federal or state programs or commercial lending
2062 institutions for the support of prior postsecondary study in
2063 accredited social work programs.

2064 (2) To be eligible for the program, a candidate must:

2065 (a) Be employed by the department as a child protective
2066 investigator or a child protective investigation supervisor or
2067 be employed by a community-based care lead agency or
2068 subcontractor as a case manager or case manager supervisor;

2069 (b) Be determined by the department or his or her employer



915192

2070 to have a high level of performance based on his or her personal
2071 evaluation; and

2072 (c) Have graduated from an accredited social work program
2073 with either a bachelor's degree or a master's degree in social
2074 work.

2075 (3) Only loans to pay the costs of tuition, books, fees,
2076 and living expenses shall be covered.

2077 (4) The department or lead agency may make loan payments of
2078 up to \$3,000 each year for up to 4 years on behalf of selected
2079 graduates of an accredited social work program from the funds
2080 appropriated for this purpose. All payments are contingent upon
2081 continued proof of employment and shall be made directly to the
2082 holder of the loan.

2083 (5) A student who receives a tuition exemption pursuant to
2084 s. 402.403 is not eligible to participate in the Child
2085 Protective Investigator and Supervisor Student Loan Forgiveness
2086 Program.

2087 (6) The department shall prioritize funds appropriated for
2088 this purpose to regions with high average caseloads and low
2089 workforce retention rates.

2090 Section 24. Section 409.165, Florida Statutes, is amended
2091 to read:

2092 409.165 Alternate care for children.—

2093 (1) Within funds appropriated, the department shall
2094 establish and supervise a program of emergency shelters, runaway
2095 shelters, foster homes, group homes, agency-operated group
2096 treatment homes, nonpsychiatric residential group care
2097 facilities, psychiatric residential treatment facilities, and
2098 other appropriate facilities to provide shelter and care for



915192

2099 dependent children who must be placed away from their families.
2100 The department, in accordance with outcome established goals
2101 established in s. 409.986, shall contract for the provision of
2102 such shelter and care by counties, municipalities, nonprofit
2103 corporations, and other entities capable of providing needed
2104 services if:

2105 (a) The services ~~se~~ provided comply with all department
2106 standards, policies, and procedures are available;

2107 (b) The services can be se provided at a reasonable cost
2108 ~~are more cost-effective than those provided by the department~~;
2109 and

2110 (c) Unless otherwise provided by law, such providers of
2111 shelter and care are licensed by the department.

2112
2113 ~~It is the legislative intent that the~~

2114 (2) Funds appropriated for the alternate care of children
2115 as described in this section may be used to meet the needs of
2116 children in their own homes or those of relatives if the
2117 children can be safely served in such settings ~~their own homes,~~
2118 ~~or the homes of relatives~~, and the expenditure of funds in such
2119 manner is equal to or less than the cost of out-of-home
2120 placement ~~calculated by the department to be an eventual cost~~
2121 ~~savings over placement of children~~.

2122 (3) ~~(2)~~ The department shall may cooperate with all child
2123 service institutions or agencies within the state which meet the
2124 department's standards in order to maintain a comprehensive,
2125 coordinated, and inclusive system for promoting and protecting
2126 the well-being of children, consistent with the goals
2127 established in s. 409.986 ~~rules for proper care and supervision~~



915192

2128 ~~prescribed by the department for the well-being of children.~~

2129 (a) The department shall work with the Department of Health
2130 in the development, use, and monitoring of medical foster homes
2131 for medically complex children.

2132 (b) The department shall work with the Agency for Health
2133 Care Administration and the Agency for Persons with Disabilities
2134 to provide such services as may be necessary to maintain
2135 medically complex children in the least restrictive and most
2136 nurturing environment consistent with the subsection (2).

2137 (4)~~(3)~~ With the written consent of parents, custodians, or
2138 guardians, or in accordance with those provisions in chapter 39
2139 that relate to dependent children, the department, under rules
2140 properly adopted, may place a child:

2141 (a) With a relative;

2142 (b) With an adult nonrelative approved by the court for
2143 long-term custody;

2144 (c) With a person who is considering the adoption of a
2145 child in the manner provided for by law;

2146 (d) When limited, except as provided in paragraph (b), to
2147 temporary emergency situations, with a responsible adult
2148 approved by the court;

2149 (e) With a person or family approved by the department to
2150 serve as a medical foster home;

2151 (f)~~(e)~~ With a person or agency licensed by the department
2152 in accordance with s. 409.175; or

2153 (g)~~(f)~~ In a subsidized independent living situation,
2154 subject to the provisions of s. 409.1451(4)(c),

2155
2156 under such conditions as are determined to be for the best



915192

2157 interests or the welfare of the child. Any child placed in an
2158 institution or in a family home by the department or its agency
2159 may be removed by the department or its agency, and such other
2160 disposition may be made as is for the best interest of the
2161 child, including transfer of the child to another institution,
2162 another home, or the home of the child. Expenditure of funds
2163 appropriated for out-of-home care can be used to meet the needs
2164 of a child in the child's own home or the home of a relative if
2165 the child can be safely served in the child's own home or that
2166 of a relative if placement can be avoided by the expenditure of
2167 such funds, and if the expenditure of such funds in this manner
2168 is equal to or less than the cost of out-of-home placement
2169 ~~calculated by the department to be a potential cost savings.~~

2170 Section 25. Paragraph (c) of subsection (2) of section
2171 409.967, Florida Statutes, is amended to read:

2172 409.967 Managed care plan accountability.—

2173 (2) The agency shall establish such contract requirements
2174 as are necessary for the operation of the statewide managed care
2175 program. In addition to any other provisions the agency may deem
2176 necessary, the contract must require:

2177 (c) Access.—

2178 1. The agency shall establish specific standards for the
2179 number, type, and regional distribution of providers in managed
2180 care plan networks to ensure access to care for both adults and
2181 children. Each plan must maintain a regionwide network of
2182 providers in sufficient numbers to meet the access standards for
2183 specific medical services for all recipients enrolled in the
2184 plan. The exclusive use of mail-order pharmacies may not be
2185 sufficient to meet network access standards. Consistent with the



915192

2186 standards established by the agency, provider networks may
2187 include providers located outside the region. A plan may
2188 contract with a new hospital facility before the date the
2189 hospital becomes operational if the hospital has commenced
2190 construction, will be licensed and operational by January 1,
2191 2013, and a final order has issued in any civil or
2192 administrative challenge. Each plan shall establish and maintain
2193 an accurate and complete electronic database of contracted
2194 providers, including information about licensure or
2195 registration, locations and hours of operation, specialty
2196 credentials and other certifications, specific performance
2197 indicators, and such other information as the agency deems
2198 necessary. The database must be available online to both the
2199 agency and the public and have the capability to compare the
2200 availability of providers to network adequacy standards and to
2201 accept and display feedback from each provider's patients. Each
2202 plan shall submit quarterly reports to the agency identifying
2203 the number of enrollees assigned to each primary care provider.

2204 2. Each managed care plan must publish any prescribed drug
2205 formulary or preferred drug list on the plan's website in a
2206 manner that is accessible to and searchable by enrollees and
2207 providers. The plan must update the list within 24 hours after
2208 making a change. Each plan must ensure that the prior
2209 authorization process for prescribed drugs is readily accessible
2210 to health care providers, including posting appropriate contact
2211 information on its website and providing timely responses to
2212 providers. For Medicaid recipients diagnosed with hemophilia who
2213 have been prescribed anti-hemophilic-factor replacement
2214 products, the agency shall provide for those products and



915192

2215 hemophilia overlay services through the agency's hemophilia
2216 disease management program.

2217 3. Managed care plans, and their fiscal agents or
2218 intermediaries, must accept prior authorization requests for any
2219 service electronically.

2220 4. Managed care plans serving children in the care and
2221 custody of the Department of Children and Families must maintain
2222 complete medical, dental, and behavioral health information and
2223 provide such information to the department for inclusion in the
2224 state's child welfare data system. Using such documentation, the
2225 agency and the department shall determine the plan's compliance
2226 with standards for access to medical, dental, and behavioral
2227 health services; the use of psychotropic medications; and
2228 followup on all medically necessary services recommended as a
2229 result of early and periodic screening, diagnosis, and
2230 treatment.

2231 Section 26. Paragraph (f) is added to subsection (2) of
2232 section 409.972, Florida Statutes, to read:

2233 409.972 Mandatory and voluntary enrollment.—

2234 (2) The following Medicaid-eligible persons are exempt from
2235 mandatory managed care enrollment required by s. 409.965, and
2236 may voluntarily choose to participate in the managed medical
2237 assistance program:

2238 (f) Medicaid recipients residing in a group home facility
2239 licensed under chapter 393.

2240 Section 27. The Division of Law Revision and Information is
2241 directed to create part V of chapter 409, Florida Statutes,
2242 consisting of ss. 409.986-409.998, to be entitled "Community-
2243 based child welfare."



915192

2244 Section 28. Section 409.986, Florida Statutes, is created
2245 to read:

2246 409.986 Legislative findings and intent; child protection
2247 and child welfare outcomes; definitions.-

2248 (1) LEGISLATIVE FINDINGS AND INTENT.-

2249 (a) It is the intent of the Legislature that the Department
2250 of Children and Families provide child protection and child
2251 welfare services to children through contracting with community-
2252 based care lead agencies. It is the further intent of the
2253 Legislature that communities have responsibility for and
2254 participate in ensuring safety, permanence, and well-being for
2255 all children in the state.

2256 (b) The Legislature finds that when private entities assume
2257 responsibility for the care of children in the child protection
2258 and child welfare system, comprehensive oversight of the
2259 programmatic, administrative, and fiscal operation of those
2260 entities is essential. The Legislature further finds that the
2261 appropriate care of children is ultimately the responsibility of
2262 the state and that outsourcing such care does not relieve the
2263 state of its responsibility to ensure that appropriate care is
2264 provided.

2265 (2) CHILD PROTECTION AND CHILD WELFARE OUTCOMES.-It is the
2266 goal of the department to protect the best interest of children
2267 by achieving the following outcomes in conjunction with the
2268 community-based care lead agency, community-based
2269 subcontractors, and the community alliance:

2270 (a) Children are first and foremost protected from abuse
2271 and neglect.

2272 (b) Children are safely maintained in their homes, if



915192

2273 possible and appropriate.

2274 (c) Services are provided to protect children and prevent
2275 their removal from their home.

2276 (d) Children have permanency and stability in their living
2277 arrangements.

2278 (e) Family relationships and connections are preserved for
2279 children.

2280 (f) Families have enhanced capacity to provide for their
2281 children's needs.

2282 (g) Children receive appropriate services to meet their
2283 educational needs.

2284 (h) Children receive adequate services to meet their
2285 physical and mental health needs.

2286 (i) Children develop the capacity for independent living
2287 and competence as an adult.

2288 (3) DEFINITIONS.—As used in this part, except as otherwise
2289 provided, the term:

2290 (a) "Care" means services of any kind which are designed to
2291 facilitate a child remaining safely in his or her own home,
2292 returning safely to his or her own home if he or she is removed
2293 from the home, or obtaining an alternative permanent home if he
2294 or she cannot remain at home or be returned home. The term
2295 includes, but is not be limited to, prevention, diversion, and
2296 related services.

2297 (b) "Child" or "children" has the same meaning as provided
2298 in s. 39.01.

2299 (c) "Community alliance" or "alliance" means the group of
2300 stakeholders, community leaders, client representatives, and
2301 funders of human services established pursuant to s. 20.19(5) to



915192

2302 provide a focal point for community participation and oversight
2303 of community-based services.

2304 (d) "Community-based care lead agency" or "lead agency"
2305 means a single entity with which the department has a contract
2306 for the provision of care for children in the child protection
2307 and child welfare system in a community that is no smaller than
2308 a county and no larger than two contiguous judicial circuits.
2309 The secretary of the department may authorize more than one
2310 eligible lead agency within a single county if doing so will
2311 result in more effective delivery of services to children.

2312 (e) "Related services" includes, but is not limited to,
2313 family preservation, independent living, emergency shelter,
2314 residential group care, foster care, therapeutic foster care,
2315 intensive residential treatment, foster care supervision, case
2316 management, coordination of mental health services,
2317 postplacement supervision, permanent foster care, and family
2318 reunification.

2319 Section 29. Section 409.987, Florida Statutes, is created
2320 to read:

2321 409.987 Lead agency procurement.—

2322 (1) Community-based care lead agencies shall be procured by
2323 the department through a competitive process as required under
2324 chapter 287.

2325 (2) The department shall produce a schedule for the
2326 procurement of community-based care lead agencies and provide
2327 the schedule to the community alliances established pursuant to
2328 s. 409.998 and post the schedule on the department's website.

2329 (3) Notwithstanding s. 287.057, the department shall use 5-
2330 year contracts with lead agencies.



915192

2331 (4) In order to serve as a lead agency, an entity must:
2332 (a) Be organized as a Florida corporation or a governmental
2333 entity.
2334 (b) Be governed by a board of directors or a board
2335 committee composed of board members. The membership of the board
2336 of directors or board committee must be described in the bylaws
2337 or articles of incorporation of each lead agency, which must
2338 provide that at least 75 percent of the membership of the board
2339 of directors or board committee must consist of persons residing
2340 in this state, and at least 51 percent of the state residents on
2341 the board of directors must reside within the service area of
2342 the lead agency. However, for procurements of lead agency
2343 contracts initiated on or after July 1, 2014:
2344 1. At least 75 percent of the membership of the board of
2345 directors must consist of persons residing in this state, and at
2346 least 51 percent of the membership of the board of directors
2347 must consist of persons residing within the service area of the
2348 lead agency. If a board committee governs the lead agency, 100
2349 percent of its membership must consist of persons residing
2350 within the service area of the lead agency.
2351 2. The powers of the board of directors or board committee
2352 include, are not limited to, approving the lead agency's budget
2353 and setting the lead agency's operational policy and procedures.
2354 A board of directors must additionally have the power to hire
2355 the lead agency's executive director, unless a board committee
2356 governs the lead agency, in which case the board committee must
2357 have the power to confirm the selection of the lead agency's
2358 executive director.
2359 (c) Demonstrate financial responsibility through an



915192

2360 organized plan for regular fiscal audits and the posting of a
2361 performance bond.

2362 (5) The department's procurement team procuring any lead
2363 agencies' contracts must include individuals from the community
2364 alliance in the area to be served under the contract. All
2365 meetings at which vendors make presentations to or negotiate
2366 with the procurement team shall be held in the area to be served
2367 by the contract.

2368 (6) Upon award and execution of a contract between the
2369 department and a lead agency, the parties shall enter into a
2370 letter of engagement that the department will provide legal
2371 representation to the lead agency or its subcontractors for the
2372 preparation and presentation of dependency court proceedings.
2373 The department may not charge the lead agency for such legal
2374 representation.

2375 Section 30. Section 409.988, Florida Statutes, is created
2376 to read:

2377 409.988 Lead agency duties; general provisions.-

2378 (1) DUTIES.-A lead agency:

2379 (a) Shall serve all children referred as a result of a
2380 report of abuse, neglect, or abandonment to the department's
2381 central abuse hotline, including, but not limited to, children
2382 who are the subject of verified reports and children who are not
2383 the subject of verified reports but who are at moderate to
2384 extremely high risk of abuse, neglect, or abandonment, as
2385 determined using the department's risk assessment instrument,
2386 regardless of the level of funding allocated to the lead agency
2387 by the state if all related funding is transferred. The lead
2388 agency may also serve children who have not been the subject of



915192

2389 reports of abuse, neglect, or abandonment, but who are at risk
2390 of abuse, neglect, or abandonment, to prevent their entry into
2391 the child protection and child welfare system.

2392 (b) Shall provide accurate and timely information necessary
2393 for oversight by the department pursuant to the child welfare
2394 results-oriented accountability system required by s. 409.997.

2395 (c) Shall follow the financial guidelines developed by the
2396 department and provide for a regular independent auditing of its
2397 financial activities. Such financial information shall be
2398 provided to the community alliance established under s. 409.998.

2399 (d) Shall post on its website the current budget for the
2400 lead agency, including the salaries, bonuses, and other
2401 compensation paid, by position, for the agency's chief executive
2402 officer, chief financial officer, chief operating officer, or
2403 their equivalents.

2404 (e) Shall prepare all judicial reviews, case plans, and
2405 other reports necessary for court hearings for dependent
2406 children, except those related to the investigation of a
2407 referral from the department's child abuse hotline, and shall
2408 submit these documents timely to the department's attorneys for
2409 review, any necessary revision, and filing with the court. The
2410 lead agency shall make the necessary staff available to
2411 department attorneys for preparation for dependency proceedings,
2412 and shall provide testimony and other evidence required for
2413 dependency court proceedings in coordination with the
2414 department's attorneys. This duty does not include the
2415 preparation of legal pleadings or other legal documents, which
2416 remain the responsibility of the department.

2417 (f) Shall ensure that all individuals providing care for



915192

2418 dependent children receive appropriate training and meet the
2419 minimum employment standards established by the department.

2420 (g) Shall maintain eligibility to receive all available
2421 federal child welfare funds.

2422 (h) Shall maintain written agreements with Healthy Families
2423 Florida lead entities in its service area pursuant to s. 409.153
2424 to promote cooperative planning for the provision of prevention
2425 and intervention services.

2426 (i) Shall comply with federal and state statutory
2427 requirements and agency rules in the provision of contractual
2428 services.

2429 (j) May subcontract for the provision of services required
2430 by the contract with the lead agency and the department;
2431 however, the subcontracts must specify how the provider will
2432 contribute to the lead agency meeting the performance standards
2433 established pursuant to the child welfare results-oriented
2434 accountability system required by s. 409.997. The lead agency
2435 shall directly provide no more than 35 percent of all child
2436 welfare services provided.

2437 (k) Shall post on its website by the 15th day of each month
2438 at a minimum the information contained in subparagraphs 1.-4.
2439 for the preceding calendar month regarding its case management
2440 services. The following information shall be reported by each
2441 individual subcontracted case management provider, by the lead
2442 agency, if the lead agency provides case management services,
2443 and in total for all case management services subcontracted or
2444 directly provided by the lead agency:

2445 1. The average caseload of case managers, including only
2446 filled positions;



915192

2447 2. The turnover rate for case managers and case management
2448 supervisors for the previous 12 months;

2449 3. The percentage of required home visits completed; and

2450 4. Performance on outcome measures required pursuant to s.
2451 409.997 for the previous 12 months.

2452 (2) LICENSURE.—

2453 (a) A lead agency must be licensed as a child-caring or
2454 child-placing agency by the department under this chapter.

2455 (b) Each foster home, therapeutic foster home, emergency
2456 shelter, or other placement facility operated by the lead agency
2457 must be licensed by the department under chapter 402 or this
2458 chapter.

2459 (c) Substitute care providers who are licensed under s.
2460 409.175 and who have contracted with a lead agency are also
2461 authorized to provide registered or licensed family day care
2462 under s. 402.313 if such care is consistent with federal law and
2463 if the home has met the requirements of s. 402.313.

2464 (d) In order to eliminate or reduce the number of duplicate
2465 inspections by various program offices, the department shall
2466 coordinate inspections required for licensure of agencies under
2467 this subsection.

2468 (e) The department may adopt rules to administer this
2469 subsection.

2470 (3) SERVICES.—A lead agency must serve dependent children
2471 through services that are supported by research or are best
2472 child welfare practices. The agency may also provide innovative
2473 services, including, but not limited to, family-centered,
2474 cognitive-behavioral, trauma-informed interventions designed to
2475 mitigate out-of-home placements.



915192

2476 (4) LEAD AGENCY ACTING AS GUARDIAN.—

2477 (a) If a lead agency or other provider has accepted case
2478 management responsibilities for a child who is sheltered or
2479 found to be dependent and who is assigned to the care of the
2480 lead agency or other provider, the agency or provider may act as
2481 the child's guardian for the purpose of registering the child in
2482 school if a parent or guardian of the child is unavailable and
2483 his or her whereabouts cannot reasonably be ascertained.

2484 (b) The lead agency or other provider may also seek
2485 emergency medical attention for the child, but only if a parent
2486 or guardian of the child is unavailable, the parent or
2487 guardian's whereabouts cannot reasonably be ascertained, and a
2488 court order for such emergency medical services cannot be
2489 obtained because of the severity of the emergency or because it
2490 is after normal working hours.

2491 (c) A lead agency or other provider may not consent to
2492 sterilization, abortion, or termination of life support.

2493 (d) If a child's parents' rights have been terminated, the
2494 lead agency shall act as guardian of the child in all
2495 circumstances.

2496 Section 31. Section 409.990, Florida Statutes, is created
2497 to read:

2498 409.990 Funding for lead agencies.—A contract established
2499 between the department and a lead agency must be funded by a
2500 grant of general revenue, other applicable state funds, or
2501 applicable federal funding sources.

2502 (1) The method of payment for a fixed-price contract with a
2503 lead agency must provide for a 2-month advance payment at the
2504 beginning of each fiscal year and equal monthly payments



915192

2505 thereafter.

2506 (2) Notwithstanding s. 215.425, all documented federal
2507 funds earned for the current fiscal year by the department and
2508 lead agencies which exceed the amount appropriated by the
2509 Legislature shall be distributed to all entities that
2510 contributed to the excess earnings based on a schedule and
2511 methodology developed by the department and approved by the
2512 Executive Office of the Governor.

2513 (a) Distribution shall be pro rata, based on total
2514 earnings, and shall be made only to those entities that
2515 contributed to excess earnings.

2516 (b) Excess earnings of lead agencies shall be used only in
2517 the service district in which they were earned.

2518 (c) Additional state funds appropriated by the Legislature
2519 for lead agencies or made available pursuant to the budgetary
2520 amendment process described in s. 216.177 shall be transferred
2521 to the lead agencies.

2522 (d) The department shall amend a lead agency's contract to
2523 permit expenditure of the funds.

2524 (3) Notwithstanding any other provision of this section,
2525 the amount of the annual contract for a lead agency may be
2526 increased by excess federal funds earned in accordance with s.
2527 216.181(11).

2528 (4) Each contract with a lead agency shall provide for the
2529 payment by the department to the lead agency of a reasonable
2530 administrative cost in addition to funding for the provision of
2531 services.

2532 (5) A lead agency may carry forward documented unexpended
2533 state funds from one fiscal year to the next; however, the



915192

2534 cumulative amount carried forward may not exceed 8 percent of
2535 the total contract. Any unexpended state funds in excess of that
2536 percentage must be returned to the department.

2537 (a) The funds carried forward may not be used in any way
2538 that would create increased recurring future obligations, and
2539 such funds may not be used for any type of program or service
2540 that is not currently authorized by the existing contract with
2541 the department.

2542 (b) Expenditures of funds carried forward must be
2543 separately reported to the department.

2544 (c) Any unexpended funds that remain at the end of the
2545 contract period shall be returned to the department.

2546 (d) Funds carried forward may be retained through any
2547 contract renewals and any new procurements as long as the same
2548 lead agency is retained by the department.

2549 (6) It is the intent of the Legislature to improve services
2550 and local participation in community-based care initiatives by
2551 fostering community support and providing enhanced prevention
2552 and in-home services, thereby reducing the risk otherwise faced
2553 by lead agencies. A community partnership matching grant program
2554 is established and shall be operated by the department to
2555 encourage local participation in community-based care for
2556 children in the child welfare system. A children's services
2557 council or another local entity that makes a financial
2558 commitment to a community-based care lead agency may be eligible
2559 for a matching grant. The total amount of the local contribution
2560 may be matched on a one-to-one basis up to a maximum annual
2561 amount of \$500,000 per lead agency. Awarded matching grant funds
2562 may be used for any prevention or in-home services that can be



915192

2563 reasonably expected to reduce the number of children entering
2564 the child welfare system. Funding available for the matching
2565 grant program is subject to legislative appropriation of
2566 nonrecurring funds provided for this purpose.

2567 (7) (a) The department, in consultation with the Florida
2568 Coalition for Children, Inc., shall develop and implement a
2569 community-based care risk pool initiative to mitigate the
2570 financial risk to eligible lead agencies. This initiative must
2571 include:

2572 1. A risk pool application and protocol developed by the
2573 department which outlines submission criteria, including, but
2574 not limited to, financial and program management, descriptive
2575 data requirements, and timeframes for submission of
2576 applications. Requests for funding from risk pool applicants
2577 must be based on relevant and verifiable service trends and
2578 changes that have occurred during the current fiscal year. The
2579 application must confirm that expenditure of approved risk pool
2580 funds by the lead agency will be completed within the current
2581 fiscal year.

2582 2. A risk pool peer review committee, appointed by the
2583 secretary and consisting of department staff and representatives
2584 from at least three nonapplicant lead agencies, which reviews
2585 and assesses all risk pool applications. Upon completion of each
2586 application review, the peer review committee shall report its
2587 findings and recommendations to the secretary, providing, at a
2588 minimum, the following information:

2589 a. Justification for the specific funding amount required
2590 by the risk pool applicant based on the current year's service
2591 trend data, including validation that the applicant's financial



915192

2592 need was caused by circumstances beyond the control of the lead
2593 agency management;

2594 b. Verification that the proposed use of risk pool funds
2595 meets at least one of the purposes specified in paragraph (c);
2596 and

2597 c. Evidence of technical assistance provided in an effort
2598 to avoid the need to access the risk pool and recommendations
2599 for technical assistance to the lead agency to ensure that risk
2600 pool funds are expended effectively and that the agency's need
2601 for future risk pool funding is diminished.

2602 (b) Upon approval by the secretary of a risk pool
2603 application, the department may request funds from the risk pool
2604 in accordance with s. 216.181(6) (a).

2605 (c) The purposes for which the community-based care risk
2606 pool shall be used include:

2607 1. Significant changes in the number or composition of
2608 clients eligible to receive services.

2609 2. Significant changes in the services that are eligible
2610 for reimbursement.

2611 3. Continuity of care in the event of failure,
2612 discontinuance of service, or financial misconduct by a lead
2613 agency.

2614 4. Significant changes in the mix of available funds.

2615 (d) The department may also request in its annual
2616 legislative budget request, and the Governor may recommend, that
2617 the funding necessary to effect paragraph (c) be appropriated to
2618 the department. In addition, the department may request the
2619 allocation of funds from the community-based care risk pool in
2620 accordance with s. 216.181(6) (a). Funds from the pool may be



915192

2621 used to match available federal dollars.

2622 1. Such funds shall constitute partial security for
2623 contract performance by lead agencies and shall be used to
2624 offset the need for a performance bond.

2625 2. The department may separately require a bond to mitigate
2626 the financial consequences of potential acts of malfeasance or
2627 misfeasance or criminal violations by the service provider.

2628 Section 32. Section 409.16713, Florida Statutes, is
2629 transferred, renumbered as section 409.991, Florida Statutes,
2630 and paragraph (a) of subsection (1) of that section is amended
2631 to read:

2632 409.991 ~~409.16713~~ Allocation of funds for community-based
2633 care lead agencies.—

2634 (1) As used in this section, the term:

2635 (a) "Core services funding" means all funds allocated to
2636 community-based care lead agencies operating under contract with
2637 the department pursuant to s. 409.987 ~~s. 409.1671~~, with the
2638 following exceptions:

- 2639 1. Funds appropriated for independent living;
2640 2. Funds appropriated for maintenance adoption subsidies;
2641 3. Funds allocated by the department for protective
2642 investigations training;
2643 4. Nonrecurring funds;
2644 5. Designated mental health wrap-around services funds; and
2645 6. Funds for special projects for a designated community-
2646 based care lead agency.

2647 Section 33. Section 409.992, Florida Statutes, is created
2648 to read:

2649 409.992 Lead agency expenditures.—



915192

2650 (1) The procurement of commodities or contractual services
2651 by lead agencies shall be governed by the financial guidelines
2652 developed by the department and must comply with applicable
2653 state and federal law and follow good business practices.

2654 Pursuant to s. 11.45, the Auditor General may provide technical
2655 advice in the development of the financial guidelines.

2656 (2) Notwithstanding any other provision of law, a
2657 community-based care lead agency may make expenditures for staff
2658 cellular telephone allowances, contracts requiring deferred
2659 payments and maintenance agreements, security deposits for
2660 office leases, related agency professional membership dues other
2661 than personal professional membership dues, promotional
2662 materials, and grant writing services. Expenditures for food and
2663 refreshments, other than those provided to clients in the care
2664 of the agency or to foster parents, adoptive parents, and
2665 caseworkers during training sessions, are not allowable.

2666 (3) A lead community-based care agency and its
2667 subcontractors are exempt from state travel policies as provided
2668 in s. 112.061(3)(a) for their travel expenses incurred in order
2669 to comply with the requirements of this section.

2670 Section 34. Section 409.993, Florida Statutes, is created
2671 to read:

2672 409.993 Lead agencies and subcontractor liability.-

2673 (1) FINDINGS.-

2674 (a) The Legislature finds that the state has traditionally
2675 provided foster care services to children who are the
2676 responsibility of the state. As such, foster children have not
2677 had the right to recover for injuries beyond the limitations
2678 specified in s. 768.28. The Legislature has determined that



915192

2679 foster care and related services should be outsourced pursuant
2680 to this section and that the provision of such services is of
2681 paramount importance to the state. The purpose of such
2682 outsourcing is to increase the level of safety, security, and
2683 stability of children who are or become the responsibility of
2684 the state. One of the components necessary to secure a safe and
2685 stable environment for such children is the requirement that
2686 private providers maintain liability insurance. As such,
2687 insurance needs to be available and remain available to
2688 nongovernmental foster care and related services providers
2689 without the resources of such providers being significantly
2690 reduced by the cost of maintaining such insurance.

2691 (b) The Legislature further finds that, by requiring the
2692 following minimum levels of insurance, children in outsourced
2693 foster care and related services will gain increased protection
2694 and rights of recovery in the event of injury than currently
2695 provided in s. 768.28.

2696 (2) LEAD AGENCY LIABILITY.-

2697 (a) Other than an entity to which s. 768.28 applies, an
2698 eligible community-based care lead agency, or its employees or
2699 officers, except as otherwise provided in paragraph (b), shall,
2700 as a part of its contract, obtain general liability insurance
2701 coverage sufficient to pay any successful tort action up to the
2702 liability caps established in this subsection. In a tort action
2703 brought against such an eligible community-based care lead
2704 agency or employee, net economic damages shall be limited to \$2
2705 million per liability claim and \$200,000 per automobile claim,
2706 including, but not limited to, past and future medical expenses,
2707 wage loss, and loss of earning capacity, offset by any



915192

2708 collateral source payment paid or payable. In any tort action
2709 brought against such an eligible community-based care lead
2710 agency, noneconomic damages shall be limited to \$400,000 per
2711 claim. A claims bill may be brought on behalf of a claimant
2712 pursuant to s. 768.28 for any amount exceeding the limits
2713 specified in this paragraph. Any offset of collateral source
2714 payments made as of the date of the settlement or judgment shall
2715 be in accordance with s. 768.76. The community-based care lead
2716 agency is not liable in tort for the acts or omissions of its
2717 subcontractors or the officers, agents, or employees of its
2718 subcontractors.

2719 (b) The liability of an eligible community-based care lead
2720 agency described in this section shall be exclusive and in place
2721 of all other liability of such lead agency. The same immunities
2722 from liability enjoyed by such lead agencies shall extend to
2723 each employee of the lead agency if he or she is acting in
2724 furtherance of the lead agency's business, including the
2725 transportation of clients served, as described in this
2726 subsection, in privately owned vehicles. Such immunities are not
2727 applicable to a lead agency or an employee who acts in a
2728 culpably negligent manner or with willful and wanton disregard
2729 or unprovoked physical aggression if such acts result in injury
2730 or death or such acts proximately cause such injury or death.
2731 Such immunities are not applicable to employees of the same lead
2732 agency when each is operating in the furtherance of the agency's
2733 business, but they are assigned primarily to unrelated work
2734 within private or public employment. The same immunity
2735 provisions enjoyed by a lead agency also apply to any sole
2736 proprietor, partner, corporate officer or director, supervisor,



915192

2737 or other person who, in the course and scope of his or her
2738 duties, acts in a managerial or policymaking capacity and the
2739 conduct that caused the alleged injury arose within the course
2740 and scope of those managerial or policymaking duties. As used in
2741 this subsection and subsection (3), the term "culpably negligent
2742 manner" means reckless indifference or grossly careless
2743 disregard of human life.

2744 (3) SUBCONTRACTOR LIABILITY.—

2745 (a) A subcontractor of an eligible community-based care
2746 lead agency that is a direct provider of foster care and related
2747 services to children and families, and its employees or
2748 officers, except as otherwise provided in paragraph (b), must,
2749 as a part of its contract, obtain general liability insurance
2750 coverage sufficient to pay any successful tort action up to the
2751 liability caps established in this subsection. In a tort action
2752 brought against such subcontractor or employee, net economic
2753 damages shall be limited to \$2 million per liability claim and
2754 \$200,000 per automobile claim, including, but not limited to,
2755 past and future medical expenses, wage loss, and loss of earning
2756 capacity, offset by any collateral source payment paid or
2757 payable. In a tort action brought against such subcontractor,
2758 noneconomic damages shall be limited to \$400,000 per claim. A
2759 claims bill may be brought on behalf of a claimant pursuant to
2760 s. 768.28 for any amount exceeding the limits specified in this
2761 paragraph. Any offset of collateral source payments made as of
2762 the date of the settlement or judgment shall be in accordance
2763 with s. 768.76.

2764 (b) The liability of a subcontractor of an eligible
2765 community-based care lead agency that is a direct provider of



915192

2766 foster care and related services as described in this section is
2767 exclusive and in place of all other liability of such provider.
2768 The same immunities from liability enjoyed by such subcontractor
2769 provider extend to each employee of the subcontractor when such
2770 employee is acting in furtherance of the subcontractor's
2771 business, including the transportation of clients served, as
2772 described in this subsection, in privately owned vehicles. Such
2773 immunities are not applicable to a subcontractor or an employee
2774 who acts in a culpably negligent manner or with willful and
2775 wanton disregard or unprovoked physical aggression if such acts
2776 result in injury or death or if such acts proximately cause such
2777 injury or death. Such immunities are not applicable to employees
2778 of the same subcontractor who are operating in the furtherance
2779 of the subcontractor's business but are assigned primarily to
2780 unrelated works within private or public employment. The same
2781 immunity provisions enjoyed by a subcontractor also apply to any
2782 sole proprietor, partner, corporate officer or director,
2783 supervisor, or other person who, in the course and scope of his
2784 or her duties, acts in a managerial or policymaking capacity and
2785 the conduct that caused the alleged injury arose within the
2786 course and scope of those managerial or policymaking duties.

2787 (4) LIMITATIONS ON DAMAGES.—The Legislature is cognizant of
2788 the increasing costs of goods and services each year and
2789 recognizes that fixing a set amount of compensation has the
2790 effect of a reduction in compensation each year. Accordingly,
2791 the conditional limitations on damages in this section shall be
2792 increased at the rate of 5 percent each year, prorated from July
2793 1, 2014, to the date at which damages subject to such
2794 limitations are awarded by final judgment or settlement.



915192

2795 Section 35. Section 409.1675, Florida Statutes, is
2796 transferred, renumbered as section 409.994, Florida Statutes,
2797 and amended to read:

2798 409.994 ~~409.1675~~ ~~Lead~~ Community-based care lead agencies
2799 ~~providers~~; receivership.-

2800 (1) The Department of Children and Families ~~Family Services~~
2801 may petition a court of competent jurisdiction for the
2802 appointment of a receiver for a ~~lead~~ community-based care lead
2803 agency provider established pursuant to s. 409.987 if ~~s.~~
2804 ~~409.1671~~ when any of the following conditions exist:

2805 (a) The lead agency ~~community-based provider~~ is operating
2806 without a license as a child-placing agency.

2807 (b) The lead agency ~~community-based provider~~ has given less
2808 than 120 days' notice of its intent to cease operations, and
2809 arrangements have not been made for another lead agency
2810 ~~community-based provider~~ or for the department to continue the
2811 uninterrupted provision of services.

2812 (c) The department determines that conditions exist in the
2813 lead agency ~~community-based provider~~ which present an imminent
2814 danger to the health, safety, or welfare of the dependent
2815 children under that agency's ~~provider's~~ care or supervision.
2816 Whenever possible, the department shall make a reasonable effort
2817 to facilitate the continued operation of the program.

2818 (d) The lead agency ~~community-based provider~~ cannot meet
2819 its current financial obligations to its employees, contractors,
2820 or foster parents. Issuance of bad checks or the existence of
2821 delinquent obligations for payment of salaries, utilities, or
2822 invoices for essential services or commodities shall constitute
2823 prima facie evidence that the lead agency ~~community-based~~



915192

2824 ~~provider~~ lacks the financial ability to meet its financial
2825 obligations.

2826 (2) (a) The petition for receivership shall take precedence
2827 over other court business unless the court determines that some
2828 other pending proceeding, having statutory precedence, has
2829 priority.

2830 (b) A hearing shall be conducted within 5 days after the
2831 filing of the petition, at which time interested parties shall
2832 have the opportunity to present evidence as to whether a
2833 receiver should be appointed. The department shall give
2834 reasonable notice of the hearing on the petition to the lead
2835 agency ~~community-based provider~~.

2836 (c) The court shall grant the petition upon finding that
2837 one or more of the conditions in subsection (1) exists and the
2838 continued existence of the condition or conditions jeopardizes
2839 the health, safety, or welfare of dependent children. A receiver
2840 may be appointed ex parte when the court determines that one or
2841 more of the conditions in subsection (1) exists. After such
2842 finding, the court may appoint any person, including an employee
2843 of the department who is qualified by education, training, or
2844 experience to carry out the duties of the receiver pursuant to
2845 this section, except that the court may ~~shall~~ not appoint any
2846 member of the governing board or any officer of the lead agency
2847 ~~community-based provider~~. The receiver may be selected from a
2848 list of persons qualified to act as receivers which is developed
2849 by the department and presented to the court with each petition
2850 of receivership.

2851 (d) A receiver may be appointed for up to 90 days, and the
2852 department may petition the court for additional 30-day



915192

2853 extensions. Sixty days after appointment of a receiver and every
2854 30 days thereafter until the receivership is terminated, the
2855 department shall submit to the court an assessment of the lead
2856 agency's ~~community-based provider's~~ ability to ensure the
2857 health, safety, and welfare of the dependent children under its
2858 supervision.

2859 (3) The receiver shall take such steps as are reasonably
2860 necessary to ensure the continued health, safety, and welfare of
2861 the dependent children under the supervision of the lead agency
2862 ~~community-based provider~~ and shall exercise those powers and
2863 perform those duties set out by the court, including, but not
2864 limited to:

2865 (a) Taking such action as is reasonably necessary to
2866 protect or conserve the assets or property of the lead agency
2867 ~~community-based provider~~. The receiver may use the assets and
2868 property and any proceeds from any transfer thereof only in the
2869 performance of the powers and duties provided ~~set forth~~ in this
2870 section and by order of the court.

2871 (b) Using the assets of the lead agency ~~community-based~~
2872 ~~provider~~ in the provision of care and services to dependent
2873 children.

2874 (c) Entering into contracts and hiring agents and employees
2875 to carry out the powers and duties of the receiver under this
2876 section.

2877 (d) Having full power to direct, manage, hire, and
2878 discharge employees of the lead agency ~~community-based provider~~.
2879 The receiver shall hire and pay new employees at the rate of
2880 compensation, including benefits, approved by the court.

2881 (e) Honoring all leases, mortgages, and contractual



915192

2882 obligations of the lead agency ~~community-based provider~~, but
2883 only to the extent of payments that become due during the period
2884 of the receivership.

2885 (4) (a) The receiver shall deposit funds received in a
2886 separate account and shall use this account for all
2887 disbursements.

2888 (b) A payment to the receiver of any sum owing to the lead
2889 agency ~~community-based provider~~ shall discharge any obligation
2890 to the provider to the extent of the payment.

2891 (5) A receiver may petition the court for temporary relief
2892 from obligations entered into by the lead agency ~~community-based~~
2893 ~~provider~~ if the rent, price, or rate of interest required to be
2894 paid under the agreement was substantially in excess of a
2895 reasonable rent, price, or rate of interest at the time the
2896 contract was entered into, or if any material provision of the
2897 agreement was unreasonable when compared to contracts negotiated
2898 under similar conditions. Any relief in this form provided by
2899 the court shall be limited to the life of the receivership,
2900 unless otherwise determined by the court.

2901 (6) The court shall set the compensation of the receiver,
2902 which shall be considered a necessary expense of a receivership
2903 and may grant to the receiver such other authority necessary to
2904 ensure the health, safety, and welfare of the children served.

2905 (7) A receiver may be held liable in a personal capacity
2906 only for the receiver's own gross negligence, intentional acts,
2907 or breaches of fiduciary duty. This section may ~~shall~~ not be
2908 interpreted to be a waiver of sovereign immunity should the
2909 department be appointed receiver.

2910 (8) If the receiver is not the department, the court may



915192

2911 require a receiver to post a bond to ensure the faithful
2912 performance of these duties.

2913 (9) The court may terminate a receivership when:

2914 (a) The court determines that the receivership is no longer
2915 necessary because the conditions that gave rise to the
2916 receivership no longer exist; or

2917 (b) The department has entered into a contract with a new
2918 lead agency ~~community-based provider~~ pursuant to s. 409.987 s.
2919 ~~409.1671~~, and that contractor is ready and able to assume the
2920 duties of the previous lead agency ~~provider~~.

2921 (10) Within 30 days after the termination, unless this time
2922 period is extended by the court, the receiver shall give the
2923 court a complete accounting of all property of which the
2924 receiver has taken possession, of all funds collected and
2925 disbursed, and of the expenses of the receivership.

2926 (11) ~~Nothing in~~ This section does not ~~shall be construed to~~
2927 relieve any employee of the lead agency ~~community-based provider~~
2928 placed in receivership of any civil or criminal liability
2929 incurred, or any duty imposed by law, by reason of acts or
2930 omissions of the employee before ~~prior to~~ the appointment of a
2931 receiver, and; ~~nor shall anything contained in this section~~ does
2932 not ~~be construed to~~ suspend during the receivership any
2933 obligation of the employee for payment of taxes or other
2934 operating or maintenance expenses of the lead agency ~~community-~~
2935 ~~based provider~~ or for the payment of mortgages or liens. The
2936 lead agency ~~community-based provider~~ shall retain the right to
2937 sell or mortgage any facility under receivership, subject to the
2938 prior approval of the court that ordered the receivership.

2939 Section 36. Section 409.996, Florida Statutes, is created



915192

2940 to read:

2941 409.996 Duties of the Department of Children and Families.—

2942 The department shall contract for the delivery, administration,
2943 or management of care for children in the child protection and
2944 child welfare system. In doing so, the department retains
2945 responsibility for the quality of contracted services and
2946 programs and shall ensure that services are delivered in
2947 accordance with applicable federal and state statutes and
2948 regulations.

2949 (1) The department shall enter into contracts with lead
2950 agencies for the performance of the duties by the lead agencies
2951 pursuant to s. 409.988. At a minimum, the contracts must:

2952 (a) Provide for the services needed to accomplish the
2953 duties established in s. 409.988 and provide information to the
2954 department which is necessary to meet the requirements for a
2955 quality assurance program pursuant to subsection (18) and the
2956 child welfare results-oriented accountability system pursuant to
2957 s. 409.997.

2958 (b) Provide for graduated penalties for failure to comply
2959 with contract terms. Such penalties may include financial
2960 penalties, enhanced monitoring and reporting, corrective action
2961 plans, and early termination of contracts or other appropriate
2962 action to ensure contract compliance.

2963 (c) Ensure that the lead agency shall furnish current and
2964 accurate information on its activities in all cases in client
2965 case records in the state's statewide automated child welfare
2966 information system.

2967 (d) Specify the procedures to be used by the parties to
2968 resolve differences in interpreting the contract or to resolve



915192

2969 disputes as to the adequacy of the parties' compliance with
2970 their respective obligations under the contract.

2971 (2) The department must adopt written policies and
2972 procedures for monitoring the contract for delivery of services
2973 by lead agencies which must be posted on the department's
2974 website. These policies and procedures must, at a minimum,
2975 address the evaluation of fiscal accountability and program
2976 operations, including provider achievement of performance
2977 standards, provider monitoring of subcontractors, and timely
2978 followup of corrective actions for significant monitoring
2979 findings related to providers and subcontractors. These policies
2980 and procedures must also include provisions for reducing the
2981 duplication of the department's program monitoring activities
2982 both internally and with other agencies, to the extent possible.
2983 The department's written procedures must ensure that the written
2984 findings, conclusions, and recommendations from monitoring the
2985 contract for services of lead agencies are communicated to the
2986 director of the provider agency and the community alliance as
2987 expeditiously as possible.

2988 (3) The department shall receive federal and state funds as
2989 appropriated for the operation of the child welfare system and
2990 shall transmit these funds to the lead agencies as agreed to in
2991 the contract. The department retains responsibility for the
2992 appropriate spending of these funds. The department shall
2993 monitor lead agencies to assess compliance with the financial
2994 guidelines established pursuant to s. 409.992 and other
2995 applicable state and federal laws.

2996 (4) The department shall provide technical assistance and
2997 consultation to lead agencies in the provision of care to



915192

2998 children in the child protection and child welfare system.
2999 (5) The department retains the responsibility for the
3000 review, approval or denial, and issuances of all foster home
3001 licenses.
3002 (6) The department shall process all applications submitted
3003 by lead agencies for the Interstate Compact on the Placement of
3004 Children and the Interstate Compact on Adoption and Medical
3005 Assistance.
3006 (7) The department shall assist lead agencies with access
3007 to and coordination with other service programs within the
3008 department.
3009 (8) The department shall determine Medicaid eligibility for
3010 all referred children and shall coordinate services with the
3011 Agency for Health Care Administration.
3012 (9) The department shall develop, in cooperation with the
3013 lead agencies and the third-party credentialing entity approved
3014 pursuant to s. 402.40(3), a standardized competency-based
3015 curriculum for certification training for child protection
3016 staff.
3017 (10) The department shall maintain the statewide adoptions
3018 website and provide information and training to the lead
3019 agencies relating to the website.
3020 (11) The department shall provide training and assistance
3021 to lead agencies regarding the responsibility of lead agencies
3022 relating to children receiving supplemental security income,
3023 social security, railroad retirement, or veterans' benefits.
3024 (12) With the assistance of a lead agency, the department
3025 shall develop and implement statewide and local interagency
3026 agreements needed to coordinate services for children and



915192

3027 parents involved in the child welfare system who are also
3028 involved with the Agency for Persons with Disabilities, the
3029 Department of Juvenile Justice, the Department of Education, the
3030 Department of Health, and other governmental organizations that
3031 share responsibilities for children or parents in the child
3032 welfare system.

3033 (13) With the assistance of a lead agency, the department
3034 shall develop and implement a working agreement between the lead
3035 agency and the substance abuse and mental health managing entity
3036 to integrate services and supports for children and parents
3037 serviced in the child welfare system.

3038 (14) The department shall work with the Agency for Health
3039 Care Administration to provide each Medicaid-eligible child with
3040 early and periodic screening, diagnosis, and treatment,
3041 including 72-hour screening, periodic child health checkups, and
3042 prescribed followup for ordered services, including, but not
3043 limited to, medical, dental, and vision care.

3044 (15) The department shall assist lead agencies in
3045 developing an array of services in compliance with the Title IV-
3046 E waiver and shall monitor the provision of such services.

3047 (16) The department shall provide a mechanism to allow lead
3048 agencies to request a waiver of department policies and
3049 procedures that create inefficiencies or inhibit the performance
3050 of the lead agency's duties.

3051 (17) The department shall directly or through contract
3052 provide attorneys to prepare and present cases in dependency
3053 court and shall ensure that the court is provided with adequate
3054 information for informed decisionmaking in dependency cases,
3055 including a fact sheet for each case which lists the names and



915192

3056 contact information for any child protective investigator, child
3057 protective investigation supervisor, case manager, and case
3058 manager supervisor, and the regional department official
3059 responsible for the lead agency contract. For the Sixth Judicial
3060 Circuit, the department shall contract with the state attorney
3061 for the provision of these services.

3062 (18) The department, in consultation with lead agencies,
3063 shall establish a quality assurance program for contracted
3064 services to dependent children. The quality assurance program
3065 shall be based on standards established by federal and state law
3066 and national accrediting organizations.

3067 (a) The department must evaluate each lead agency under
3068 contract at least annually. These evaluations shall cover the
3069 programmatic, operational, and fiscal operations of the lead
3070 agency and must be consistent with the child welfare results-
3071 oriented accountability system required by s. 409.997. The
3072 department must consult with dependency judges in the circuit or
3073 circuits served by the lead agency on the performance of the
3074 lead agency.

3075 (b) The department and each lead agency shall monitor out-
3076 of-home placements, including the extent to which sibling groups
3077 are placed together or provisions to provide visitation and
3078 other contacts if siblings are separated. The data shall
3079 identify reasons for sibling separation. Information related to
3080 sibling placement shall be incorporated into the results-
3081 oriented accountability system required pursuant to s. 409.997
3082 and in the evaluation of the outcome specified in s.
3083 409.986(2) (e). The information related to sibling placement
3084 shall also be made available to the institute established



915192

3085 pursuant s. 1004.615 for use in assessing the performance of
3086 child welfare services in relation to the outcome specified in
3087 s. 409.986(2) (e).

3088 (c) The department shall, to the extent possible, use
3089 independent financial audits provided by the lead agency to
3090 eliminate or reduce the ongoing contract and administrative
3091 reviews conducted by the department. If the department
3092 determines that such independent financial audits are
3093 inadequate, other audits, as necessary, may be conducted by the
3094 department. This paragraph does not abrogate the requirements of
3095 s. 215.97.

3096 (d) The department may suggest additional items to be
3097 included in such independent financial audits to meet the
3098 department's needs.

3099 (e) The department may outsource programmatic,
3100 administrative, or fiscal monitoring oversight of lead agencies.

3101 (f) A lead agency must assure that all subcontractors are
3102 subject to the same quality assurance activities as the lead
3103 agency.

3104 (19) The department and its attorneys have the
3105 responsibility to ensure that the court is fully informed about
3106 issues before it, to make recommendations to the court, and to
3107 present competent evidence, including testimony by the
3108 department's employees, contractors, and subcontractors, as well
3109 as other individuals, to support all recommendations made to the
3110 court. The department's attorneys shall coordinate lead agency
3111 or subcontractor staff to ensure that dependency cases are
3112 presented appropriately to the court, giving deference to the
3113 information developed by the case manager and direction to the



915192

3114 case manager if more information is needed.

3115 (20) The department, in consultation with lead agencies,
3116 shall develop a dispute resolution process so that disagreements
3117 between legal staff, investigators, and case management staff
3118 can be resolved in the best interest of the child in question
3119 before court appearances regarding that child.

3120 Section 37. Section 409.997, Florida Statutes, is created
3121 to read:

3122 409.997 Child welfare results-oriented accountability
3123 system.-

3124 (1) The department and its contract providers, including
3125 lead agencies, community-based care providers, and other
3126 community partners participating in the state's child protection
3127 and child welfare system, share the responsibility for achieving
3128 the outcome goals specified in s. 409.986(2).

3129 (2) In order to assess the achievement of the outcome goals
3130 specified in s. 409.986(2), the department shall maintain a
3131 comprehensive, results-oriented accountability system that
3132 monitors the use of resources, the quality and amount of
3133 services provided, and child and family outcomes through data
3134 analysis, research review, evaluation, and quality improvement.
3135 The system shall provide information about individual entities'
3136 performance as well as the performance of groups of entities
3137 working together as an integrated system of care on a local,
3138 regional, and statewide basis. In maintaining the accountability
3139 system, the department shall:

3140 (a) Identify valid and reliable outcome measures for each
3141 of the goals specified in this subsection. The outcome data set
3142 must consist of a limited number of understandable measures



915192

3143 using available data to quantify outcomes as children move
3144 through the system of care. Such measures may aggregate multiple
3145 variables that affect the overall achievement of the outcome
3146 goals. Valid and reliable measures must be based on adequate
3147 sample sizes, be gathered over suitable time periods, and
3148 reflect authentic rather than spurious results, and may not be
3149 susceptible to manipulation.

3150 (b) Implement a monitoring system to track the identified
3151 outcome measures on a statewide, regional, and provider-specific
3152 basis. The monitoring system must identify trends and chart
3153 progress toward achievement of the goals specified s.
3154 409.986(2). The requirements of the monitoring system may be
3155 incorporated into the quality assurance program required under
3156 s. 409.996(18).

3157 (c) Develop and maintain an analytical system that builds
3158 on the outcomes monitoring system to assess the statistical
3159 validity of observed associations between child welfare
3160 interventions and the measured outcomes. The analysis must use
3161 quantitative methods to adjust for variations in demographic or
3162 other conditions. The analysis must include longitudinal studies
3163 to evaluate longer-term outcomes such as continued safety,
3164 family permanence, and transition to self-sufficiency. The
3165 analysis may also include qualitative research methods to
3166 provide insight into statistical patterns.

3167 (d) Develop and maintain a program of research review to
3168 identify interventions that are supported by evidence as
3169 causally linked to improved outcomes.

3170 (e) Support an ongoing process of evaluation to determine
3171 the efficacy and effectiveness of various interventions.



915192

3172 Efficacy evaluation is intended to determine the validity of a
3173 causal relationship between an intervention and an outcome.

3174 Effectiveness evaluation is intended to determine the extent to
3175 which the results can be generalized.

3176 (f) Develop and maintain an inclusive, interactive, and
3177 evidence-supported program of quality improvement which promotes
3178 individual skill building as well as organizational learning.

3179 (g) Develop and implement a method for making the results
3180 of the accountability system transparent for all parties
3181 involved in the child welfare system as well as policymakers and
3182 the public. The presentation of the results shall provide a
3183 comprehensible, visual report card for the state and each
3184 community-based care region, indicating the current status
3185 relative to each goal and trends in that status over time. The
3186 presentation shall identify and report outcome measures that
3187 assess the performance of the department, the community-based
3188 care lead agency, and the lead agency's subcontractors working
3189 together as an integrated system of care.

3190 (3) The department shall establish a technical advisory
3191 panel consisting of representatives from the Florida Institute
3192 for Child Welfare established in s. 1004.615, lead agencies,
3193 community-based care providers, other contract providers,
3194 community alliances, and family representatives. The President
3195 of the Senate and the Speaker of the House of Representatives
3196 shall each appoint a member to serve as a legislative liaison to
3197 the panel. The technical advisory panel shall advise the
3198 department on meeting the requirements of this section.

3199 (4) The accountability system may not rank or compare
3200 performance among community-based care regions unless adequate



915192

3201 and specific adjustments are adopted that account for the
3202 diversity in regions' demographics, resources, and other
3203 relevant characteristics.

3204 (5) The results of the accountability system must provide
3205 the basis for performance incentives if funds for such payments
3206 are made available through the General Appropriations Act.

3207 (6) At least quarterly, the department shall make the
3208 results of the accountability system available to the public
3209 through publication on its website. The website must allow for
3210 custom searches of the performance data.

3211 (7) By October 1 of each year, the department shall submit
3212 a report on the statewide and individual community-based care
3213 lead agency results for child protection and child welfare
3214 systems. The department shall use the accountability system and
3215 consult with the community alliance and the chief judge or
3216 judges in the community-based care service area to prepare the
3217 report. The report shall be submitted to the Governor, the
3218 President of the Senate, and the Speaker of the House of
3219 Representatives.

3220 Section 38. Section 409.998, Florida Statutes, is created
3221 to read:

3222 409.998 Community-based care; assessment by community
3223 alliances.—To provide independent, community-focused assessment
3224 of child protection and child welfare services and the local
3225 system of community-based care, community alliances created in
3226 s. 20.19(5) shall, with the assistance of the department,
3227 perform the following duties:

3228 (1) Conduct a needs assessment and establish community
3229 priorities for child protection and child welfare services.



915192

3230 (2) Review the performance of the department, the sheriff's
3231 office, if the office provides child protective services, and
3232 the lead agency individually and as an integrated system of
3233 care, and advise the department, the sheriff's office, if
3234 applicable, and the lead agency regarding concerns and suggested
3235 areas of improvement.

3236 (3) Recommend a competitive procurement for the lead agency
3237 if programmatic or financial performance is poor. The community
3238 alliance shall make recommendations on the development of the
3239 procurement document for such competitive procurement and may
3240 suggest specific requirements relating to local needs and
3241 services.

3242 (4) Recommend a contract extension for the lead agency if
3243 programmatic and financial performance is superior.

3244 (5) In partnership with the Florida Institute for Child
3245 Welfare established in s. 1004.615, develop recommendations and
3246 submit such recommendations to the department and the community-
3247 based care lead agency to improve child protection and child
3248 welfare policies and practices.

3249 (6) Promote greater community involvement in community-
3250 based care through participation in community-based care lead
3251 agency services and activities, recruitment and retention of
3252 community volunteers, and public awareness efforts.

3253 Section 39. Section 827.10, Florida Statutes, is created to
3254 read:

3255 827.10 Unlawful desertion of a child.-

3256 (1) As used in this section, the term:

3257 (a) "Care" means support and services necessary to maintain
3258 the child's physical and mental health, including, but not



915192

3259 limited to, food, nutrition, clothing, shelter, supervision,
3260 medicine, and medical services that a prudent person would
3261 consider essential for the well-being of the child.

3262 (b) "Caregiver" has the same meaning as provided in s.
3263 39.01.

3264 (c) "Child" means a child for whose care the caregiver is
3265 legally responsible.

3266 (d) "Desertion" or "deserts" means to leave a child in a
3267 place or with a person other than a relative with the intent not
3268 to return to the child and with the intent not to provide for
3269 the care of the child.

3270 (e) "Relative" has the same meaning as provided in s.
3271 39.01.

3272 (2) A caregiver who deserts a child under circumstances in
3273 which the caregiver knew or should have known that the desertion
3274 exposes the child to unreasonable risk of harm commits a felony
3275 of the third degree, punishable as provided in s. 775.082, s.
3276 775.083, or s. 775.084.

3277 (3) This section does not apply to a person who surrenders
3278 a newborn infant in compliance with s. 383.50.

3279 (4) This section does not preclude prosecution for a
3280 criminal act under any other law, including, but not limited to,
3281 prosecution of child abuse or neglect of a child under s.
3282 827.03.

3283 Section 40. Paragraph (d) of subsection (4) of section
3284 985.04, Florida Statutes, is amended to read:

3285 985.04 Oaths; records; confidential information.—

3286 (4)

3287 (d) The department shall disclose to the school



915192

3288 superintendent the presence of any child in the care and custody
3289 or under the jurisdiction or supervision of the department who
3290 has a known history of criminal sexual behavior with other
3291 juveniles; is ~~an~~ alleged to have committed juvenile sexual abuse
3292 offender, as defined in s. 39.01; or has pled guilty or nolo
3293 contendere to, or has been found to have committed, a violation
3294 of chapter 794, chapter 796, chapter 800, s. 827.071, or s.
3295 847.0133, regardless of adjudication. Any employee of a district
3296 school board who knowingly and willfully discloses such
3297 information to an unauthorized person commits a misdemeanor of
3298 the second degree, punishable as provided in s. 775.082 or s.
3299 775.083.

3300 Section 41. Section 1004.615, Florida Statutes, is created
3301 to read:

3302 1004.615 Florida Institute for Child Welfare.—

3303 (1) There is established the Florida Institute for Child
3304 Welfare within the Florida State University College of Social
3305 Work. The purpose of the institute is to advance the well-being
3306 of children and families by improving the performance of child
3307 protection and child welfare services through research, policy
3308 analysis, evaluation, and leadership development. The institute
3309 shall consist of a consortium of public and private universities
3310 offering degrees in social work and shall be housed within the
3311 Florida State University College of Social Work.

3312 (2) Using such resources as authorized in the General
3313 Appropriations Act, the Department of Children and Families
3314 shall contract with the institute for performance of the duties
3315 described in subsection (4) using state appropriations, public
3316 and private grants, and other resources obtained by the



915192

3317 institute.

3318 (3) The institute shall work with the department, sheriffs
3319 providing child protective investigative services, community-
3320 based care lead agencies, community-based care provider
3321 organizations, the court system, the Department of Juvenile
3322 Justice, the federally recognized statewide association for
3323 Florida's certified domestic violence centers, and other
3324 partners who contribute to and participate in providing child
3325 protection and child welfare services.

3326 (4) The institute shall:

3327 (a) Maintain a program of research which contributes to
3328 scientific knowledge and informs both policy and practice
3329 related to child safety, permanency, and child and family well-
3330 being.

3331 (b) Advise the department and other organizations
3332 participating in the child protection and child welfare system
3333 regarding scientific evidence on policy and practice related to
3334 child safety, permanency, and child and family well-being.

3335 (c) Provide advice regarding management practices and
3336 administrative processes used by the department and other
3337 organizations participating in the child protection and child
3338 welfare system and recommend improvements that reduce
3339 burdensome, ineffective requirements for frontline staff and
3340 their supervisors while enhancing their ability to effectively
3341 investigate, analyze, problem solve, and supervise.

3342 (d) Assess the performance of child protection and child
3343 welfare services based on specific outcome measures.

3344 (e) Evaluate the scope and effectiveness of preservice and
3345 inservice training for child protection and child welfare



915192

3346 employees and advise and assist the department in efforts to
3347 improve such training.

3348 (f) Assess the readiness of social work graduates to assume
3349 job responsibilities in the child protection and child welfare
3350 system and identify gaps in education which can be addressed
3351 through the modification of curricula or the establishment of
3352 industry certifications.

3353 (g) Develop and maintain a program of professional support
3354 including training courses and consulting services that assist
3355 both individuals and organizations in implementing adaptive and
3356 resilient responses to workplace stress.

3357 (h) Participate in the department's critical incident
3358 response team, assist in the preparation of reports about such
3359 incidents, and support the committee review of reports and
3360 development of recommendations.

3361 (i) Identify effective policies and promising practices,
3362 including, but not limited to, innovations in coordination
3363 between entities participating in the child protection and child
3364 welfare system, data analytics, working with the local
3365 community, and management of human service organizations, and
3366 communicate these findings to the department and other
3367 organizations participating in the child protection and child
3368 welfare system.

3369 (j) Develop a definition of a child or family at high risk
3370 of abuse or neglect. Such a definition must consider
3371 characteristics associated with a greater probability of abuse
3372 and neglect.

3373 (5) The President of the Florida State University shall
3374 appoint a director of the institute. The director must be a



915192

3375 child welfare professional with a degree in social work who
3376 holds a faculty appointment in the Florida State University
3377 College of Social Work. The institute shall be administered by
3378 the director, and the director's office shall be located at the
3379 Florida State University. The director is responsible for
3380 overall management of the institute and for developing and
3381 executing the work of the institute consistent with the
3382 responsibilities in subsection (4). The director shall engage
3383 individuals in other state universities with accredited colleges
3384 of social work to participate in the institute. Individuals from
3385 other university programs relevant to the institute's work,
3386 including, but not limited to, economics, management, law,
3387 medicine, and education, may also be invited by the director to
3388 contribute to the institute. The universities participating in
3389 the institute shall provide facilities, staff, and other
3390 resources to the institute to establish statewide access to
3391 institute programs and services.

3392 (6) By October 1 of each year, the institute shall provide
3393 a written report to the Governor, the President of the Senate,
3394 and the Speaker of the House of Representatives which outlines
3395 its activities in the preceding year, reports significant
3396 research findings, as well as results of other programs, and
3397 provides specific recommendations for improving child protection
3398 and child welfare services.

3399 (a) The institute shall include an evaluation of the
3400 results of the educational and training requirements for child
3401 protection and child welfare personnel established under this
3402 act and recommendations for application of the results to child
3403 protection personnel employed by sheriff's offices providing



915192

3404 child protection services in its report due October 1, 2017.

3405 (b) The institute shall include an evaluation of the
3406 effects of the other provisions of this act and recommendations
3407 for improvements in child protection and child welfare services
3408 in its report due October 1, 2018.

3409 (7) The institute shall submit a report with
3410 recommendations for improving the state's child welfare system.
3411 The report shall address topics including, but not limited to,
3412 enhancing working relationships between the entities involved in
3413 the child protection and child welfare system, identification of
3414 and replication of best practices, reducing paperwork,
3415 increasing the retention of child protective investigators and
3416 case managers, and caring for medically complex children within
3417 the child welfare system, with the goal of allowing the child to
3418 remain in the least restrictive and most nurturing environment.
3419 The institute shall submit an interim report by February 1,
3420 2015, and final report by November 1, 2015, to the Governor, the
3421 President of the Senate, and the Speaker of the House of
3422 Representatives.

3423 Section 42. Paragraph (h) is added to subsection (1) of
3424 section 1009.25, Florida Statutes, to read:

3425 1009.25 Fee exemptions.-

3426 (1) The following students are exempt from the payment of
3427 tuition and fees, including lab fees, at a school district that
3428 provides workforce education programs, Florida College System
3429 institution, or state university:

3430 (h) Pursuant to s. 402.403, child protection and child
3431 welfare personnel as defined in s. 402.402 who are enrolled in
3432 an accredited bachelor's degree or master's degree in social



915192

3433 work program or completing coursework required pursuant to s.
3434 402.402(2), provided that the student attains at least a grade
3435 of "B" in all courses for which tuition and fees are exempted.

3436 Section 43. Section 402.401, Florida Statutes, is repealed.

3437 Section 44. Section 409.1671, Florida Statutes, is
3438 repealed.

3439 Section 45. Section 409.16715, Florida Statutes, is
3440 repealed.

3441 Section 46. Section 409.16745, Florida Statutes, is
3442 repealed.

3443 Section 47. Section 1004.61, Florida Statutes, is repealed.

3444 Section 48. Paragraph (g) of subsection (1) of section
3445 39.201, Florida Statutes, is amended to read:

3446 39.201 Mandatory reports of child abuse, abandonment, or
3447 neglect; mandatory reports of death; central abuse hotline.—

3448 (1)

3449 (g) Nothing in this chapter or in the contracting with
3450 community-based care providers for foster care and related
3451 services as specified in s. 409.987 ~~s. 409.1671~~ shall be
3452 construed to remove or reduce the duty and responsibility of any
3453 person, including any employee of the community-based care
3454 provider, to report a suspected or actual case of child abuse,
3455 abandonment, or neglect or the sexual abuse of a child to the
3456 department's central abuse hotline.

3457 Section 49. Subsection (1) of section 39.302, Florida
3458 Statutes, is amended to read:

3459 39.302 Protective investigations of institutional child
3460 abuse, abandonment, or neglect.—

3461 (1) The department shall conduct a child protective



915192

3462 investigation of each report of institutional child abuse,
3463 abandonment, or neglect. Upon receipt of a report that alleges
3464 that an employee or agent of the department, or any other entity
3465 or person covered by s. 39.01(32) ~~s. 39.01(33)~~ or (47), acting
3466 in an official capacity, has committed an act of child abuse,
3467 abandonment, or neglect, the department shall initiate a child
3468 protective investigation within the timeframe established under
3469 s. 39.201(5) and notify the appropriate state attorney, law
3470 enforcement agency, and licensing agency, which shall
3471 immediately conduct a joint investigation, unless independent
3472 investigations are more feasible. When conducting investigations
3473 or having face-to-face interviews with the child, investigation
3474 visits shall be unannounced unless it is determined by the
3475 department or its agent that unannounced visits threaten the
3476 safety of the child. If a facility is exempt from licensing, the
3477 department shall inform the owner or operator of the facility of
3478 the report. Each agency conducting a joint investigation is
3479 entitled to full access to the information gathered by the
3480 department in the course of the investigation. A protective
3481 investigation must include an interview with the child's parent
3482 or legal guardian. The department shall make a full written
3483 report to the state attorney within 3 working days after making
3484 the oral report. A criminal investigation shall be coordinated,
3485 whenever possible, with the child protective investigation of
3486 the department. Any interested person who has information
3487 regarding the offenses described in this subsection may forward
3488 a statement to the state attorney as to whether prosecution is
3489 warranted and appropriate. Within 15 days after the completion
3490 of the investigation, the state attorney shall report the



915192

3491 findings to the department and shall include in the report a
3492 determination of whether or not prosecution is justified and
3493 appropriate in view of the circumstances of the specific case.

3494 Section 50. Subsection (1) of section 39.524, Florida
3495 Statutes, is amended to read:

3496 39.524 Safe-harbor placement.—

3497 (1) Except as provided in s. 39.407 or s. 985.801, a
3498 dependent child 6 years of age or older who has been found to be
3499 a victim of sexual exploitation as defined in s. 39.01(68)(g) ~~s.~~
3500 ~~39.01(67)(g)~~ must be assessed for placement in a safe house as
3501 provided in s. 409.1678. The assessment shall be conducted by
3502 the department or its agent and shall incorporate and address
3503 current and historical information from any law enforcement
3504 reports; psychological testing or evaluation that has occurred;
3505 current and historical information from the guardian ad litem,
3506 if one has been assigned; current and historical information
3507 from any current therapist, teacher, or other professional who
3508 has knowledge of the child and has worked with the child; and
3509 any other information concerning the availability and
3510 suitability of safe-house placement. If such placement is
3511 determined to be appropriate as a result of this assessment, the
3512 child may be placed in a safe house, if one is available. As
3513 used in this section, the term "available" as it relates to a
3514 placement means a placement that is located within the circuit
3515 or otherwise reasonably accessible.

3516 Section 51. Subsection (6) of section 316.613, Florida
3517 Statutes, is amended to read:

3518 316.613 Child restraint requirements.—

3519 (6) The child restraint requirements imposed by this



915192

3520 section do not apply to a chauffeur-driven taxi, limousine,
3521 sedan, van, bus, motor coach, or other passenger vehicle if the
3522 operator and the motor vehicle are hired and used for the
3523 transportation of persons for compensation. It is the obligation
3524 and responsibility of the parent, guardian, or other person
3525 responsible for a child's welfare, as defined in s. 39.01(47),
3526 to comply with the requirements of this section.

3527 Section 52. Subsections (1), (3), and (5) of section
3528 409.1676, Florida Statutes, are amended to read:

3529 409.1676 Comprehensive residential group care services to
3530 children who have extraordinary needs.—

3531 (1) It is the intent of the Legislature to provide
3532 comprehensive residential group care services, including
3533 residential care, case management, and other services, to
3534 children in the child protection system who have extraordinary
3535 needs. These services are to be provided in a residential group
3536 care setting by a not-for-profit corporation or a local
3537 government entity under a contract with the Department of
3538 Children and Families ~~Family Services~~ or by a lead agency as
3539 described in s. 409.987 ~~s. 409.1671~~. These contracts should be
3540 designed to provide an identified number of children with access
3541 to a full array of services for a fixed price. Further, it is
3542 the intent of the Legislature that the Department of Children
3543 and Families ~~Family Services~~ and the Department of Juvenile
3544 Justice establish an interagency agreement by December 1, 2002,
3545 which describes respective agency responsibilities for referral,
3546 placement, service provision, and service coordination for
3547 dependent and delinquent youth who are referred to these
3548 residential group care facilities. The agreement must require



915192

3549 interagency collaboration in the development of terms,
3550 conditions, and performance outcomes for residential group care
3551 contracts serving the youth referred who have been adjudicated
3552 both dependent and delinquent.

3553 (3) The department, in accordance with a specific
3554 appropriation for this program, shall contract with a not-for-
3555 profit corporation, a local government entity, or the lead
3556 agency that has been established in accordance with s. 409.987
3557 ~~s. 409.1671~~ for the performance of residential group care
3558 services described in this section. A lead agency that is
3559 currently providing residential care may provide this service
3560 directly with the approval of the local community alliance. The
3561 department or a lead agency may contract for more than one site
3562 in a county if that is determined to be the most effective way
3563 to achieve the goals set forth in this section.

3564 (5) The department may transfer all casework
3565 responsibilities for children served under this program to the
3566 entity that provides this service, including case management and
3567 development and implementation of a case plan in accordance with
3568 current standards for child protection services. When the
3569 department establishes this program in a community that has a
3570 lead agency as described in s. 409.987 ~~s. 409.1671~~, the casework
3571 responsibilities must be transferred to the lead agency.

3572 Section 53. Subsection (2) of section 409.1677, Florida
3573 Statutes, is amended to read:

3574 409.1677 Model comprehensive residential services
3575 programs.—

3576 (2) The department shall establish a model comprehensive
3577 residential services program in Manatee and Miami-Dade Counties



915192

3578 through a contract with the designated lead agency established
3579 in accordance with s. 409.987 ~~s. 409.1671~~ or with a private
3580 entity capable of providing residential group care and home-
3581 based care and experienced in the delivery of a range of
3582 services to foster children, if no lead agency exists. These
3583 model programs are to serve that portion of eligible children
3584 within each county which is specified in the contract, based on
3585 funds appropriated, to include a full array of services for a
3586 fixed price. The private entity or lead agency is responsible
3587 for all programmatic functions necessary to carry out the intent
3588 of this section.

3589 Section 54. Paragraph (d) of subsection (1) of section
3590 409.1678, Florida Statutes, is amended to read:

3591 409.1678 Safe harbor for children who are victims of sexual
3592 exploitation.—

3593 (1) As used in this section, the term:

3594 (d) "Sexually exploited child" means a dependent child who
3595 has suffered sexual exploitation as defined in s. 39.01(68)(g)
3596 ~~s. 39.01(67)(g)~~ and is ineligible for relief and benefits under
3597 the federal Trafficking Victims Protection Act, 22 U.S.C. ss.
3598 7101 et seq.

3599 Section 55. Subsection (24) of section 409.906, Florida
3600 Statutes, is amended to read:

3601 409.906 Optional Medicaid services.—Subject to specific
3602 appropriations, the agency may make payments for services which
3603 are optional to the state under Title XIX of the Social Security
3604 Act and are furnished by Medicaid providers to recipients who
3605 are determined to be eligible on the dates on which the services
3606 were provided. Any optional service that is provided shall be



915192

3607 provided only when medically necessary and in accordance with
3608 state and federal law. Optional services rendered by providers
3609 in mobile units to Medicaid recipients may be restricted or
3610 prohibited by the agency. Nothing in this section shall be
3611 construed to prevent or limit the agency from adjusting fees,
3612 reimbursement rates, lengths of stay, number of visits, or
3613 number of services, or making any other adjustments necessary to
3614 comply with the availability of moneys and any limitations or
3615 directions provided for in the General Appropriations Act or
3616 chapter 216. If necessary to safeguard the state's systems of
3617 providing services to elderly and disabled persons and subject
3618 to the notice and review provisions of s. 216.177, the Governor
3619 may direct the Agency for Health Care Administration to amend
3620 the Medicaid state plan to delete the optional Medicaid service
3621 known as "Intermediate Care Facilities for the Developmentally
3622 Disabled." Optional services may include:

3623 (24) CHILD-WELFARE-TARGETED CASE MANAGEMENT.—The Agency for
3624 Health Care Administration, in consultation with the Department
3625 of Children and Families ~~Family Services~~, may establish a
3626 targeted case-management project in those counties identified by
3627 the Department of Children and Families ~~Family Services~~ and for
3628 all counties with a community-based child welfare project, as
3629 authorized under s. 409.987 ~~s. 409.1671~~, which have been
3630 specifically approved by the department. The covered group of
3631 individuals who are eligible to receive targeted case management
3632 include children who are eligible for Medicaid; who are between
3633 the ages of birth through 21; and who are under protective
3634 supervision or postplacement supervision, under foster-care
3635 supervision, or in shelter care or foster care. The number of



915192

3636 individuals who are eligible to receive targeted case management
3637 is limited to the number for whom the Department of Children and
3638 Families ~~Family Services~~ has matching funds to cover the costs.
3639 The general revenue funds required to match the funds for
3640 services provided by the community-based child welfare projects
3641 are limited to funds available for services described under s.
3642 409.990 ~~s. 409.1671~~. The Department of Children and Families
3643 ~~Family Services~~ may transfer the general revenue matching funds
3644 as billed by the Agency for Health Care Administration.

3645 Section 56. Paragraph (b) of subsection (4) of section
3646 409.912, Florida Statutes, is amended to read:

3647 409.912 Cost-effective purchasing of health care.—The
3648 agency shall purchase goods and services for Medicaid recipients
3649 in the most cost-effective manner consistent with the delivery
3650 of quality medical care. To ensure that medical services are
3651 effectively utilized, the agency may, in any case, require a
3652 confirmation or second physician's opinion of the correct
3653 diagnosis for purposes of authorizing future services under the
3654 Medicaid program. This section does not restrict access to
3655 emergency services or poststabilization care services as defined
3656 in 42 C.F.R. part 438.114. Such confirmation or second opinion
3657 shall be rendered in a manner approved by the agency. The agency
3658 shall maximize the use of prepaid per capita and prepaid
3659 aggregate fixed-sum basis services when appropriate and other
3660 alternative service delivery and reimbursement methodologies,
3661 including competitive bidding pursuant to s. 287.057, designed
3662 to facilitate the cost-effective purchase of a case-managed
3663 continuum of care. The agency shall also require providers to
3664 minimize the exposure of recipients to the need for acute



915192

3665 inpatient, custodial, and other institutional care and the
3666 inappropriate or unnecessary use of high-cost services. The
3667 agency shall contract with a vendor to monitor and evaluate the
3668 clinical practice patterns of providers in order to identify
3669 trends that are outside the normal practice patterns of a
3670 provider's professional peers or the national guidelines of a
3671 provider's professional association. The vendor must be able to
3672 provide information and counseling to a provider whose practice
3673 patterns are outside the norms, in consultation with the agency,
3674 to improve patient care and reduce inappropriate utilization.
3675 The agency may mandate prior authorization, drug therapy
3676 management, or disease management participation for certain
3677 populations of Medicaid beneficiaries, certain drug classes, or
3678 particular drugs to prevent fraud, abuse, overuse, and possible
3679 dangerous drug interactions. The Pharmaceutical and Therapeutics
3680 Committee shall make recommendations to the agency on drugs for
3681 which prior authorization is required. The agency shall inform
3682 the Pharmaceutical and Therapeutics Committee of its decisions
3683 regarding drugs subject to prior authorization. The agency is
3684 authorized to limit the entities it contracts with or enrolls as
3685 Medicaid providers by developing a provider network through
3686 provider credentialing. The agency may competitively bid single-
3687 source-provider contracts if procurement of goods or services
3688 results in demonstrated cost savings to the state without
3689 limiting access to care. The agency may limit its network based
3690 on the assessment of beneficiary access to care, provider
3691 availability, provider quality standards, time and distance
3692 standards for access to care, the cultural competence of the
3693 provider network, demographic characteristics of Medicaid



915192

3694 beneficiaries, practice and provider-to-beneficiary standards,
3695 appointment wait times, beneficiary use of services, provider
3696 turnover, provider profiling, provider licensure history,
3697 previous program integrity investigations and findings, peer
3698 review, provider Medicaid policy and billing compliance records,
3699 clinical and medical record audits, and other factors. Providers
3700 are not entitled to enrollment in the Medicaid provider network.
3701 The agency shall determine instances in which allowing Medicaid
3702 beneficiaries to purchase durable medical equipment and other
3703 goods is less expensive to the Medicaid program than long-term
3704 rental of the equipment or goods. The agency may establish rules
3705 to facilitate purchases in lieu of long-term rentals in order to
3706 protect against fraud and abuse in the Medicaid program as
3707 defined in s. 409.913. The agency may seek federal waivers
3708 necessary to administer these policies.

3709 (4) The agency may contract with:

3710 (b) An entity that is providing comprehensive behavioral
3711 health care services to certain Medicaid recipients through a
3712 capitated, prepaid arrangement pursuant to the federal waiver
3713 provided for by s. 409.905(5). Such entity must be licensed
3714 under chapter 624, chapter 636, or chapter 641, or authorized
3715 under paragraph (c) or paragraph (d), and must possess the
3716 clinical systems and operational competence to manage risk and
3717 provide comprehensive behavioral health care to Medicaid
3718 recipients. As used in this paragraph, the term "comprehensive
3719 behavioral health care services" means covered mental health and
3720 substance abuse treatment services that are available to
3721 Medicaid recipients. The secretary of the Department of Children
3722 and Families ~~Family Services~~ shall approve provisions of



915192

3723 procurements related to children in the department's care or
3724 custody before enrolling such children in a prepaid behavioral
3725 health plan. Any contract awarded under this paragraph must be
3726 competitively procured. In developing the behavioral health care
3727 prepaid plan procurement document, the agency shall ensure that
3728 the procurement document requires the contractor to develop and
3729 implement a plan to ensure compliance with s. 394.4574 related
3730 to services provided to residents of licensed assisted living
3731 facilities that hold a limited mental health license. Except as
3732 provided in subparagraph 5., and except in counties where the
3733 Medicaid managed care pilot program is authorized pursuant to s.
3734 409.91211, the agency shall seek federal approval to contract
3735 with a single entity meeting these requirements to provide
3736 comprehensive behavioral health care services to all Medicaid
3737 recipients not enrolled in a Medicaid managed care plan
3738 authorized under s. 409.91211, a provider service network
3739 authorized under paragraph (d), or a Medicaid health maintenance
3740 organization in an AHCA area. In an AHCA area where the Medicaid
3741 managed care pilot program is authorized pursuant to s.
3742 409.91211 in one or more counties, the agency may procure a
3743 contract with a single entity to serve the remaining counties as
3744 an AHCA area or the remaining counties may be included with an
3745 adjacent AHCA area and are subject to this paragraph. Each
3746 entity must offer a sufficient choice of providers in its
3747 network to ensure recipient access to care and the opportunity
3748 to select a provider with whom they are satisfied. The network
3749 shall include all public mental health hospitals. To ensure
3750 unimpaired access to behavioral health care services by Medicaid
3751 recipients, all contracts issued pursuant to this paragraph must



915192

3752 require 80 percent of the capitation paid to the managed care
3753 plan, including health maintenance organizations and capitated
3754 provider service networks, to be expended for the provision of
3755 behavioral health care services. If the managed care plan
3756 expends less than 80 percent of the capitation paid for the
3757 provision of behavioral health care services, the difference
3758 shall be returned to the agency. The agency shall provide the
3759 plan with a certification letter indicating the amount of
3760 capitation paid during each calendar year for behavioral health
3761 care services pursuant to this section. The agency may reimburse
3762 for substance abuse treatment services on a fee-for-service
3763 basis until the agency finds that adequate funds are available
3764 for capitated, prepaid arrangements.

3765 1. The agency shall modify the contracts with the entities
3766 providing comprehensive inpatient and outpatient mental health
3767 care services to Medicaid recipients in Hillsborough, Highlands,
3768 Hardee, Manatee, and Polk Counties, to include substance abuse
3769 treatment services.

3770 2. Except as provided in subparagraph 5., the agency and
3771 the Department of Children and Families ~~Family Services~~ shall
3772 contract with managed care entities in each AHCA area except
3773 area 6 or arrange to provide comprehensive inpatient and
3774 outpatient mental health and substance abuse services through
3775 capitated prepaid arrangements to all Medicaid recipients who
3776 are eligible to participate in such plans under federal law and
3777 regulation. In AHCA areas where eligible individuals number less
3778 than 150,000, the agency shall contract with a single managed
3779 care plan to provide comprehensive behavioral health services to
3780 all recipients who are not enrolled in a Medicaid health



915192

3781 maintenance organization, a provider service network authorized
3782 under paragraph (d), or a Medicaid capitated managed care plan
3783 authorized under s. 409.91211. The agency may contract with more
3784 than one comprehensive behavioral health provider to provide
3785 care to recipients who are not enrolled in a Medicaid capitated
3786 managed care plan authorized under s. 409.91211, a provider
3787 service network authorized under paragraph (d), or a Medicaid
3788 health maintenance organization in AHCA areas where the eligible
3789 population exceeds 150,000. In an AHCA area where the Medicaid
3790 managed care pilot program is authorized pursuant to s.
3791 409.91211 in one or more counties, the agency may procure a
3792 contract with a single entity to serve the remaining counties as
3793 an AHCA area or the remaining counties may be included with an
3794 adjacent AHCA area and shall be subject to this paragraph.
3795 Contracts for comprehensive behavioral health providers awarded
3796 pursuant to this section shall be competitively procured. Both
3797 for-profit and not-for-profit corporations are eligible to
3798 compete. Managed care plans contracting with the agency under
3799 subsection (3) or paragraph (d) shall provide and receive
3800 payment for the same comprehensive behavioral health benefits as
3801 provided in AHCA rules, including handbooks incorporated by
3802 reference. In AHCA area 11, the agency shall contract with at
3803 least two comprehensive behavioral health care providers to
3804 provide behavioral health care to recipients in that area who
3805 are enrolled in, or assigned to, the MediPass program. One of
3806 the behavioral health care contracts must be with the existing
3807 provider service network pilot project, as described in
3808 paragraph (d), for the purpose of demonstrating the cost-
3809 effectiveness of the provision of quality mental health services



915192

3810 through a public hospital-operated managed care model. Payment
3811 shall be at an agreed-upon capitated rate to ensure cost
3812 savings. Of the recipients in area 11 who are assigned to
3813 MediPass under s. 409.9122(2)(k), a minimum of 50,000 of those
3814 MediPass-enrolled recipients shall be assigned to the existing
3815 provider service network in area 11 for their behavioral care.

3816 3. Children residing in a statewide inpatient psychiatric
3817 program, or in a Department of Juvenile Justice or a Department
3818 of Children and Families ~~Family Services~~ residential program
3819 approved as a Medicaid behavioral health overlay services
3820 provider may not be included in a behavioral health care prepaid
3821 health plan or any other Medicaid managed care plan pursuant to
3822 this paragraph.

3823 4. Traditional community mental health providers under
3824 contract with the Department of Children and Families ~~Family~~
3825 ~~Services~~ pursuant to part IV of chapter 394, child welfare
3826 providers under contract with the Department of Children and
3827 Families ~~Family Services~~ in areas 1 and 6, and inpatient mental
3828 health providers licensed pursuant to chapter 395 must be
3829 offered an opportunity to accept or decline a contract to
3830 participate in any provider network for prepaid behavioral
3831 health services.

3832 5. All Medicaid-eligible children, except children in area
3833 1 and children in Highlands County, Hardee County, Polk County,
3834 or Manatee County of area 6, which ~~that~~ are open for child
3835 welfare services in the statewide automated child welfare
3836 information system, shall receive their behavioral health care
3837 services through a specialty prepaid plan operated by community-
3838 based lead agencies through a single agency or formal agreements



915192

3839 among several agencies. The agency shall work with the specialty
3840 plan to develop clinically effective, evidence-based
3841 alternatives as a downward substitution for the statewide
3842 inpatient psychiatric program and similar residential care and
3843 institutional services. The specialty prepaid plan must result
3844 in savings to the state comparable to savings achieved in other
3845 Medicaid managed care and prepaid programs. Such plan must
3846 provide mechanisms to maximize state and local revenues. The
3847 specialty prepaid plan shall be developed by the agency and the
3848 Department of Children and Families ~~Family Services~~. The agency
3849 may seek federal waivers to implement this initiative. Medicaid-
3850 eligible children whose cases are open for child welfare
3851 services in the statewide automated child welfare information
3852 system and who reside in AHCA area 10 shall be enrolled in a
3853 capitated provider service network or other capitated managed
3854 care plan, which, in coordination with available community-based
3855 care providers specified in s. 409.987 ~~s. 409.1671~~, shall
3856 provide sufficient medical, developmental, and behavioral health
3857 services to meet the needs of these children.

3858
3859 Effective July 1, 2012, in order to ensure continuity of care,
3860 the agency is authorized to extend or modify current contracts
3861 based on current service areas or on a regional basis, as
3862 determined appropriate by the agency, with comprehensive
3863 behavioral health care providers as described in this paragraph
3864 during the period prior to its expiration. This paragraph
3865 expires October 1, 2014.

3866 Section 57. Paragraph (dd) of subsection (3) of section
3867 409.91211, Florida Statutes, is amended to read:



915192

3868 409.91211 Medicaid managed care pilot program.—
3869 (3) The agency shall have the following powers, duties, and
3870 responsibilities with respect to the pilot program:
3871 (dd) To implement service delivery mechanisms within a
3872 specialty plan in area 10 to provide behavioral health care
3873 services to Medicaid-eligible children whose cases are open for
3874 child welfare services in the HomeSafeNet system. These services
3875 must be coordinated with community-based care providers as
3876 specified in s. 409.986 ~~s. 409.1671~~, where available, and be
3877 sufficient to meet the developmental, behavioral, and emotional
3878 needs of these children. Children in area 10 who have an open
3879 case in the HomeSafeNet system shall be enrolled into the
3880 specialty plan. These service delivery mechanisms must be
3881 implemented no later than July 1, 2011, in AHCA area 10 in order
3882 for the children in AHCA area 10 to remain exempt from the
3883 statewide plan under s. 409.912(4)(b)5. An administrative fee
3884 may be paid to the specialty plan for the coordination of
3885 services based on the receipt of the state share of that fee
3886 being provided through intergovernmental transfers.
3887 Section 58. Paragraph (d) of subsection (1) of section
3888 420.628, Florida Statutes, is amended to read:
3889 420.628 Affordable housing for children and young adults
3890 leaving foster care; legislative findings and intent.—
3891 (1)
3892 (d) The Legislature intends that the Florida Housing
3893 Finance Corporation, agencies within the State Housing
3894 Initiative Partnership Program, local housing finance agencies,
3895 public housing authorities, and their agents, and other
3896 providers of affordable housing coordinate with the Department



915192

3897 of Children and Families ~~Family Services~~, their agents, and
3898 community-based care providers who provide services under s.
3899 409.986 ~~s. 409.1671~~ to develop and implement strategies and
3900 procedures designed to make affordable housing available
3901 whenever and wherever possible to young adults who leave the
3902 child welfare system.

3903 Section 59. Subsection (5) of section 960.065, Florida
3904 Statutes, is amended to read:

3905 960.065 Eligibility for awards.—

3906 (5) A person is not ineligible for an award pursuant to
3907 paragraph (2) (a), paragraph (2) (b), or paragraph (2) (c) if that
3908 person is a victim of sexual exploitation of a child as defined
3909 in s. 39.01(68) (g) ~~s. 39.01(67) (g)~~.

3910 Section 60. This act shall take effect July 1, 2014.

3911
3912 ===== T I T L E A M E N D M E N T =====

3913 And the title is amended as follows:

3914 Delete everything before the enacting clause
3915 and insert:

3916 A bill to be entitled
3917 An act relating to child welfare; amending s. 20.19,
3918 F.S.; requiring the Secretary of Children and Families
3919 to appoint an Assistant Secretary for Child Welfare;
3920 providing qualifications and responsibilities;
3921 revising duties, appointment, and membership of
3922 community alliances; requiring the Department of
3923 Children and Families to appoint a statewide advisory
3924 committee to provide specified assistance to community
3925 alliances; amending s. 39.001, F.S.; revising the



915192

3926 purposes of ch. 39, F.S.; requiring the department to
3927 provide for certain services for medically complex
3928 children; amending s. 39.01, F.S.; providing,
3929 revising, and deleting definitions; amending s.
3930 39.013, F.S.; clarifying responsibilities of the
3931 department in dependency proceedings; amending s.
3932 39.201, F.S.; requiring alleged incidents of juvenile
3933 sexual abuse involving specified children to be
3934 reported to the department's central abuse hotline;
3935 requiring the department to provide specified
3936 information on an investigation of child sexual abuse
3937 to the court; creating s. 39.2015, F.S.; requiring the
3938 department to conduct specified investigations using
3939 critical incident rapid response teams; providing
3940 requirements for such investigations and for team
3941 membership; authorizing team access to specified
3942 information; requiring the cooperation of specified
3943 agencies and organizations; providing for
3944 reimbursement of team members; requiring the team to
3945 provide an investigation report; requiring the
3946 secretary to develop guidelines for investigations and
3947 provide team member training; requiring the secretary
3948 to appoint an advisory committee; requiring the
3949 committee to submit a report to the secretary;
3950 requiring the secretary to submit such report to the
3951 Governor and the Legislature by a specified date;
3952 creating s. 39.2022, F.S.; providing legislative
3953 intent; requiring the department to publish specified
3954 information on its website regarding the death of a



915192

3955 child reported to the central abuse hotline; amending
3956 s. 39.301, F.S.; authorizing the use of safety plans
3957 in child protection investigations in cases of present
3958 or impending danger; providing requirements for
3959 implementation of a safety plan; providing conditions
3960 for filing a petition for dependency; amending s.
3961 39.303, F.S.; requiring physician involvement when a
3962 child protection team evaluates a report of medical
3963 neglect of a medically complex child; creating s.
3964 39.3068, F.S.; providing requirements for
3965 investigating medical neglect; providing duties of the
3966 department; amending s. 39.307, F.S.; requiring the
3967 department to assist the family, child, and caregiver
3968 in receiving services upon a report alleging juvenile
3969 sexual abuse or inappropriate sexual behavior;
3970 requiring the department to maintain specified
3971 records; requiring child sexual abuse to be taken into
3972 account in placement consideration; requiring the
3973 department to monitor the occurrence of child sexual
3974 abuse and related services; amending s. 39.402, F.S.;
3975 requiring the department to make a reasonable effort
3976 to keep siblings together when they are placed in out-
3977 of-home care under certain circumstances; providing
3978 for sibling visitation under certain conditions;
3979 amending s. 39.501, F.S.; requiring compliance with a
3980 safety plan to be considered when deciding a petition
3981 for dependency; amending s. 39.5085, F.S.; revising
3982 legislative intent; authorizing placement of a child
3983 with a nonrelative caregiver and financial assistance



915192

3984 for such nonrelative caregiver through the Relative
3985 Caregiver Program under certain circumstances;
3986 amending s. 39.604, F.S.; requiring certain children
3987 to attend a licensed early education or child care
3988 program; requiring the inclusion of attendance at a
3989 licensed early education or child care program in a
3990 child's safety plan; amending s. 39.701, F.S.;
3991 requiring the court to consider contact among siblings
3992 in judicial reviews; authorizing the court to remove
3993 specified disabilities of nonage at judicial reviews;
3994 amending s. 39.802, F.S.; removing department
3995 authorization to sign a petition for termination of
3996 parental rights; amending s. 63.212, F.S.; requiring a
3997 person who places an advertisement for adoption
3998 services to provide specified information; amending s.
3999 383.402, F.S.; requiring review of all child deaths
4000 reported to the department's central abuse hotline;
4001 revising the due date for a report; amending s.
4002 402.40, F.S.; requiring a third-party credentialing
4003 entity to establish an advisory committee; authorizing
4004 the department to approve certification of
4005 specializations; creating s. 402.402, F.S.; defining
4006 terms; providing education and specialized training
4007 requirements for child protection and child welfare
4008 personnel; providing training requirements for
4009 department attorneys; creating s. 402.403, F.S.;
4010 establishing a tuition exemption program for child
4011 protective and child welfare personnel; providing
4012 eligibility requirements; creating s. 402.404, F.S.;



915192

4013 establishing a student loan forgiveness program for
4014 child protective investigators and supervisors;
4015 providing eligibility requirements; authorizing
4016 community-based care lead agencies to provide student
4017 loan forgiveness to case managers employed by a
4018 community-based care lead agency or its subcontractor;
4019 amending s. 409.165, F.S.; enhancing provision of care
4020 to medically complex children; amending s. 409.967,
4021 F.S.; revising standards for Medicaid managed care
4022 plan accountability with respect to services for
4023 dependent children; amending s. 409.972, F.S.;
4024 exempting certain Medicaid recipients from mandatory
4025 enrollment in managed care plans; providing a
4026 directive to the Division of Law Revision and
4027 Information; creating part V of ch. 409, F.S.;
4028 creating s. 409.986, F.S.; providing legislative
4029 findings and intent; providing child protection and
4030 child welfare outcome goals; defining terms; creating
4031 s. 409.987, F.S.; providing for department procurement
4032 of community-based care lead agencies; providing
4033 requirements for contracting as a lead agency;
4034 creating s. 409.988, F.S.; providing duties of a
4035 community-based care lead agency; providing licensure
4036 requirements for a lead agency; specifying services
4037 provided by a lead agency; providing conditions for an
4038 agency or provider to act as a child's guardian;
4039 creating s. 409.990, F.S.; providing general funding
4040 provisions for lead agencies; providing for a matching
4041 grant program and the maximum amount of funds that may



915192

4042 be awarded; requiring the department to develop and
4043 implement a community-based care risk pool initiative;
4044 providing requirements for the risk pool;
4045 transferring, renumbering, and amending s. 409.16713,
4046 F.S.; transferring provisions relating to the
4047 allocation of funds for community-based lead care
4048 agencies; conforming a cross-reference; creating s.
4049 409.992, F.S.; providing requirements for community-
4050 based care lead agency expenditures; creating s.
4051 409.993, F.S.; providing legislative findings;
4052 providing for lead agency and subcontractor liability;
4053 providing limitations on damages; transferring,
4054 renumbering, and amending s. 409.1675, F.S.;
4055 transferring provisions relating to receivership from
4056 community-based providers to lead agencies; conforming
4057 cross-references and terminology; creating s. 409.996,
4058 F.S.; providing duties of the department relating to
4059 community-based care and lead agencies; creating s.
4060 409.997, F.S.; providing outcome goals for the
4061 department and specified entities with respect to the
4062 delivery of child welfare services; requiring the
4063 department to maintain an accountability system;
4064 requiring the department to establish a technical
4065 advisory panel; requiring the department to make the
4066 results of the accountability system public; requiring
4067 a report to the Governor and the Legislature by a
4068 specified date; creating s. 409.998, F.S.; providing
4069 for assessment of community-based care by community
4070 alliances; creating s. 827.10, F.S.; providing



915192

4071 definitions; establishing the criminal offense of
4072 unlawful desertion of a child; providing criminal
4073 penalties; providing exceptions; amending s. 985.04,
4074 F.S.; conforming terminology; creating s. 1004.615,
4075 F.S.; establishing the Florida Institute for Child
4076 Welfare; providing purpose, duties, and
4077 responsibilities of the institute; requiring the
4078 institute to contract and work with specified
4079 entities; providing for the administration of the
4080 institute; requiring reports to the Governor and the
4081 Legislature by specified dates; amending s. 1009.25,
4082 F.S.; exempting specified child protective
4083 investigators and child protective investigation
4084 supervisors from certain tuition and fee requirements;
4085 repealing s. 402.401, F.S., relating to child welfare
4086 worker student loan forgiveness; repealing s.
4087 409.1671, F.S., relating to outsourcing of foster care
4088 and related services; repealing s. 409.16715, F.S.,
4089 relating to certain therapy for foster children;
4090 repealing s. 409.16745, F.S., relating to the
4091 community partnership matching grant program;
4092 repealing s. 1004.61, F.S., relating to a partnership
4093 between the Department of Children and Families and
4094 state universities; amending ss. 39.201, 39.302,
4095 39.524, 316.613, 409.1676, 409.1677, 409.1678,
4096 409.906, 409.912, 409.91211, 420.628, and 960.065,
4097 F.S.; conforming cross-references; providing an
4098 effective date.