

By the Committees on Fiscal Policy; and Children, Families, and Elder Affairs

594-04419-15

20157078c1

1 A bill to be entitled
2 An act relating to child welfare; amending s. 39.2015,
3 F.S.; authorizing critical incident rapid response
4 teams to review cases of child deaths occurring during
5 an open investigation; requiring the advisory
6 committee to meet quarterly and submit quarterly
7 reports; amending s. 39.3068, F.S.; requiring case
8 staffing when medical neglect is substantiated;
9 amending s. 383.402, F.S.; requiring an
10 epidemiological child abuse death assessment and
11 prevention system; providing intent for the operation
12 of and interaction between the state and local death
13 review committees; limiting members of the state
14 committee to terms of 2 years, not to exceed three
15 consecutive terms; requiring the committee to elect a
16 chairperson and authorizing specified duties of the
17 chairperson; providing for per diem and reimbursement
18 of expenses; specifying duties of the state committee;
19 deleting obsolete provisions; providing for the
20 convening of county or multicounty local review
21 committees and support by the county health department
22 directors; specifying membership and duties of local
23 review committees; requiring the state review
24 committee to submit an annual statistical report to
25 the Governor and the Legislature; identifying the
26 required content for the report; specifying that
27 certain responsibilities of the Department of Children
28 and Families are to be administered at the regional
29 level, rather than at the district level; amending s.

594-04419-15

20157078c1

30 409.977, F.S.; authorizing Medicaid managed care
31 specialty plans to serve specified children; amending
32 s. 409.986, F.S.; revising legislative intent to
33 require community-based care lead agencies to give
34 priority to the use of evidence-based and trauma-
35 informed services; amending s. 409.988; requiring lead
36 agencies to give priority to the use of evidence-based
37 and trauma-informed services; amending s. 435.02,
38 F.S.; redefining a term; providing an effective date.
39

40 Be It Enacted by the Legislature of the State of Florida:
41

42 Section 1. Subsections (2) and (11) of section 39.2015,
43 Florida Statutes, are amended to read:

44 39.2015 Critical incident rapid response team.—

45 (2) An immediate onsite investigation conducted by a
46 critical incident rapid response team is required for all child
47 deaths reported to the department if the child or another child
48 in his or her family was the subject of a verified report of
49 suspected abuse or neglect during the previous 12 months. The
50 secretary may direct an immediate investigation for other cases
51 involving death or serious injury to a child, including, but not
52 limited to, a death or serious injury occurring during an open
53 investigation.

54 (11) The secretary shall appoint an advisory committee made
55 up of experts in child protection and child welfare, including
56 the Statewide Medical Director for Child Protection under the
57 Department of Health, a representative from the institute
58 established pursuant to s. 1004.615, an expert in organizational

594-04419-15

20157078c1

59 management, and an attorney with experience in child welfare, to
60 conduct an independent review of investigative reports from the
61 critical incident rapid response teams and to make
62 recommendations to improve policies and practices related to
63 child protection and child welfare services. The advisory
64 committee shall meet at least once each quarter and ~~By October 1~~
65 ~~of each year, the advisory committee shall submit~~ quarterly
66 reports ~~a report~~ to the secretary which include ~~includes~~
67 findings and recommendations. The secretary shall submit each
68 ~~the~~ report to the Governor, the President of the Senate, and the
69 Speaker of the House of Representatives.

70 Section 2. Subsection (3) of section 39.3068, Florida
71 Statutes, is amended to read:

72 39.3068 Reports of medical neglect.—

73 (3) The child shall be evaluated by the child protection
74 team as soon as practicable. If ~~After receipt of the report from~~
75 ~~the child protection team~~ reports that medical neglect is
76 substantiated, the department shall convene a case staffing
77 which shall be attended, at a minimum, by the child protective
78 investigator; department legal staff; and representatives from
79 the child protection team that evaluated the child, Children's
80 Medical Services, the Agency for Health Care Administration, the
81 community-based care lead agency, and any providers of services
82 to the child. However, the Agency for Health Care Administration
83 is not required to attend the staffing if the child is not
84 Medicaid eligible. The staffing shall consider, at a minimum,
85 available services, given the family's eligibility for services;
86 services that are effective in addressing conditions leading to
87 medical neglect allegations; and services that would enable the

594-04419-15

20157078c1

88 child to safely remain at home. Any services that are available
89 and effective shall be provided.

90 Section 3. Section 383.402, Florida Statutes, is amended to
91 read:

92 383.402 Child abuse death review; State Child Abuse Death
93 Review Committee; local child abuse death review committees.—

94 (1) INTENT.—It is the intent of the Legislature to
95 establish a statewide multidisciplinary, multiagency,
96 epidemiological child abuse death assessment and prevention
97 system that consists of state and local review committees. The
98 ~~state and local review~~ committees shall review the facts and
99 circumstances of all deaths of children from birth ~~to~~ through
100 age 18 which occur in this state and are reported to the central
101 abuse hotline of the Department of Children and Families. The
102 state and local review committees shall work cooperatively. The
103 primary function of the state review committee is to provide
104 direction and leadership for the review system and to analyze
105 data and recommendations from local review committees to
106 identify issues and trends and to recommend statewide action.
107 The primary function of the local review committees is to
108 conduct individual case reviews of deaths, generate information,
109 make recommendations, and implement improvements at the local
110 level. Each case ~~The purpose of the review must use a data-~~
111 based, epidemiological approach ~~shall be~~ to:

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

114 (b) Whenever possible, develop a communitywide approach to
115 address such causes ~~eases~~ and contributing factors.

116 (c) Identify any gaps, deficiencies, or problems in the

594-04419-15

20157078c1

117 delivery of services to children and their families by public
118 and private agencies which may be related to deaths that are the
119 result of child abuse.

120 (d) Recommend ~~Make and implement recommendations for~~
121 changes in law, rules, and policies at the state and local
122 levels, as well as develop practice standards that support the
123 safe and healthy development of children and reduce preventable
124 child abuse deaths.

125 (e) Implement approved recommendations, to the extent
126 possible.

127 (2) STATE CHILD ABUSE DEATH REVIEW COMMITTEE.—

128 (a) Membership.—

129 1. The State Child Abuse Death Review Committee is
130 established within the Department of Health and shall consist of
131 a representative of the Department of Health, appointed by the
132 State Surgeon General, who shall serve as the state committee
133 coordinator. The head of each of the following agencies or
134 organizations shall also appoint a representative to the state
135 committee:

136 a.1. The Department of Legal Affairs.

137 b.2. The Department of Children and Families.

138 c.3. The Department of Law Enforcement.

139 d.4. The Department of Education.

140 e.5. The Florida Prosecuting Attorneys Association, Inc.

141 f.6. The Florida Medical Examiners Commission, whose
142 representative must be a forensic pathologist.

143 2.(b) In addition, the State Surgeon General shall appoint
144 the following members to the state committee, based on
145 recommendations from the Department of Health and the agencies

594-04419-15

20157078c1

146 listed in subparagraph 1. ~~paragraph (a)~~, and ensuring that the
147 committee represents the regional, gender, and ethnic diversity
148 of the state to the greatest extent possible:

149 ~~a.1.~~ The Department of Health Statewide Child Protection
150 Team Medical Director ~~for Child Protection.~~

151 ~~b.2.~~ A public health nurse.

152 ~~c.3.~~ A mental health professional who treats children or
153 adolescents.

154 ~~d.4.~~ An employee of the Department of Children and Families
155 who supervises family services counselors and who has at least 5
156 years of experience in child protective investigations.

157 ~~e.5.~~ The medical director of a child protection team.

158 ~~f.6.~~ A member of a child advocacy organization.

159 ~~g.7.~~ A social worker who has experience in working with
160 victims and perpetrators of child abuse.

161 ~~h.8.~~ A person trained as a paraprofessional in patient
162 resources who is employed in a child abuse prevention program.

163 ~~i.9.~~ A law enforcement officer who has at least 5 years of
164 experience in children's issues.

165 ~~j.10.~~ A representative of the Florida Coalition Against
166 Domestic Violence.

167 ~~k.11.~~ A representative from a private provider of programs
168 on preventing child abuse and neglect.

169 1. A substance abuse treatment professional.

170 3. The members of the state committee shall be appointed to
171 staggered terms not to exceed 2 years each, as determined by the
172 State Surgeon General. Members may be appointed to no more than
173 three consecutive terms. The state committee shall elect a
174 chairperson from among its members to serve for a 2-year term,

594-04419-15

20157078c1

175 and the chairperson may appoint ad hoc committees as necessary
176 to carry out the duties of the committee.

177 4. Members of the state committee shall serve without
178 compensation but may receive reimbursement for per diem and
179 travel expenses incurred in the performance of their duties as
180 provided in s. 112.061 and to the extent that funds are
181 available.

182 (b)(3) Duties.—The State Child Abuse Death Review Committee
183 shall:

184 1.(a) Develop a system for collecting data from local
185 committees on deaths that are reported to the central abuse
186 hotline the result of child abuse. The system must include a
187 protocol for the uniform collection of data statewide, which
188 must, at a minimum, use the National Child Death Review Case
189 Reporting System administered by the National Center for the
190 Review and Prevention of Child Deaths ~~uses existing data-~~
191 ~~collection systems to the greatest extent possible.~~

192 2.(b) Provide training to cooperating agencies,
193 individuals, and local child abuse death review committees on
194 the use of the child abuse death data system.

195 ~~(c) Prepare an annual statistical report on the incidence~~
196 ~~and causes of death resulting from reported child abuse in the~~
197 ~~state during the prior calendar year. The state committee shall~~
198 ~~submit a copy of the report by October 1 of each year to the~~
199 ~~Governor, the President of the Senate, and the Speaker of the~~
200 ~~House of Representatives. The report must include~~
201 ~~recommendations for state and local action, including specific~~
202 ~~policy, procedural, regulatory, or statutory changes, and any~~
203 ~~other recommended preventive action.~~

594-04419-15

20157078c1

204 ~~3.(d)~~ Provide training to local child abuse death review
205 committee members on the dynamics and impact of domestic
206 violence, substance abuse, or mental health disorders when there
207 is a co-occurrence of child abuse. Training must ~~shall~~ be
208 provided by the Florida Coalition Against Domestic Violence, the
209 Florida Alcohol and Drug Abuse Association, and the Florida
210 Council for Community Mental Health in each entity's respective
211 area of expertise.

212 ~~4.(e)~~ Develop statewide uniform guidelines, standards, and
213 protocols, including a protocol for standardized data
214 collection, and reporting, for local child abuse death review
215 committees, and provide training and technical assistance to
216 local committees.

217 ~~5.(f)~~ Develop statewide uniform guidelines for reviewing
218 deaths that are the result of child abuse, including guidelines
219 to be used by law enforcement agencies, prosecutors, medical
220 examiners, health care practitioners, health care facilities,
221 and social service agencies.

222 ~~6.(g)~~ Study the adequacy of laws, rules, training, and
223 services to determine what changes are needed to decrease the
224 incidence of child abuse deaths and develop strategies and
225 recruit partners to implement these changes.

226 ~~7.(h)~~ Provide consultation on individual cases to local
227 committees upon request.

228 ~~8.(i)~~ Educate the public regarding the provisions of
229 chapter 99-168, Laws of Florida, the incidence and causes of
230 child abuse death, and ways by which such deaths may be
231 prevented.

232 ~~9.(j)~~ Promote continuing education for professionals who

594-04419-15

20157078c1

233 investigate, treat, and prevent child abuse or neglect.

234 10.~~(k)~~ Recommend, when appropriate, the review of the death
235 certificate of a child who died as a result of abuse or neglect.

236 ~~(4) The members of the state committee shall be appointed~~
237 ~~to staggered terms of office which may not exceed 2 years, as~~
238 ~~determined by the State Surgeon General. Members are eligible~~
239 ~~for 2 reappointments. The state committee shall elect a~~
240 ~~chairperson from among its members to serve for a 2-year term,~~
241 ~~and the chairperson may appoint ad hoc committees as necessary~~
242 ~~to carry out the duties of the committee.~~

243 ~~(5) Members of the state committee shall serve without~~
244 ~~compensation but are entitled to reimbursement for per diem and~~
245 ~~travel expenses incurred in the performance of their duties as~~
246 ~~provided in s. 112.061 and to the extent that funds are~~
247 ~~available.~~

248 (3)~~(6)~~ LOCAL CHILD ABUSE DEATH REVIEW COMMITTEES.—At the
249 direction of the State Surgeon General, a county or multicounty
250 child abuse death review committee shall be convened and
251 supported by the county health department directors ~~the director~~
252 ~~of each county health department, or the directors of two or~~
253 ~~more county health departments by agreement, may convene and~~
254 ~~support a county or multicounty child abuse death review~~
255 ~~committee~~ in accordance with the protocols established by the
256 State Child Abuse Death Review Committee.

257 (a) Membership.—Each local child abuse death review
258 committee must include local representatives from:

259 1. The state attorney's office. ~~a local state attorney, or~~
260 ~~his or her designee, and~~

261 2. The medical examiner's office.

594-04419-15

20157078c1

262 3. The local Department of Children and Families child
263 protective investigations unit.

264 4. The Department of Health child protection team.

265 5. The community-based care lead agency.

266 6. State, county, or local law enforcement agencies.

267 7. The school district.

268 8. A mental health treatment provider.

269 9. A certified domestic violence center.

270 10. A substance abuse treatment provider.

271 11. Any other members that are determined by guidelines
272 developed by the State Child Abuse Death Review Committee.

273
274 To the extent possible, individuals from these organizations or
275 entities who, in a professional capacity, dealt with a child
276 whose death is verified as caused by abuse or neglect, or with
277 the family of the child, shall attend any meetings where the
278 child's case is reviewed. The members of a local committee shall
279 be appointed to 2-year terms and may be reappointed. ~~The local~~
280 committee shall elect a chairperson from among its members.
281 Members shall serve without compensation but may receive are
282 entitled to reimbursement for per diem and travel expenses
283 incurred in the performance of their duties as provided in s.
284 112.061 and to the extent that funds are available.

285 (b) ~~(7)~~ Duties.—Each local child abuse death review
286 committee shall:

287 1. ~~(a)~~ Assist the state committee in collecting data on
288 deaths that are the result of child abuse, in accordance with
289 the protocol established by the state committee. The local
290 committee shall complete, to the fullest extent possible, the

594-04419-15

20157078c1

291 individual case report in the National Child Death Review Case
292 Reporting System.

293 2. ~~(b)~~ Submit written reports as required by at the
294 ~~direction of~~ the state committee. The reports must include:

295 a. Nonidentifying information from ~~an~~ individual cases.

296 b. Identification of any problems with the data system
297 uncovered through the review process and the committee's
298 recommendations for system improvements and needed resources,
299 training, and information dissemination, where gaps or
300 deficiencies may exist. ~~and~~

301 c. All ~~the~~ steps taken by the local committee and private
302 and public agencies to implement necessary changes and improve
303 the coordination of services and reviews.

304 3. ~~(e)~~ Submit all records requested by the state committee
305 at the conclusion of its review of a death resulting from child
306 abuse.

307 4. ~~(d)~~ Abide by the standards and protocols developed by the
308 state committee.

309 5. ~~(e)~~ On a case-by-case basis, request that the state
310 committee review the data of a particular case.

311 (4) ANNUAL STATISTICAL REPORT.—The state committee shall
312 prepare and submit a comprehensive statistical report by October
313 1 of each year to the Governor, the President of the Senate, and
314 the Speaker of the House of Representatives which includes data,
315 trends, analysis, findings, and recommendations for state and
316 local action regarding deaths from child abuse. Data must be
317 presented on an individual calendar year basis and in the
318 context of a multiyear trend. At a minimum, the report must
319 include:

594-04419-15

20157078c1

320 (a) Descriptive statistics, including demographic
321 information regarding victims and caregivers, and the causes and
322 nature of deaths.

323 (b) A detailed statistical analysis of the incidence and
324 causes of deaths.

325 (c) Specific issues identified within current policy,
326 procedure, rule, or statute and recommendations to address those
327 issues from both the state and local committees.

328 (d) Other recommendations to prevent deaths from child
329 abuse based on an analysis of the data presented in the report.

330 (5) ~~(8)~~ ACCESS TO AND USE OF RECORDS.-

331 (a) Notwithstanding any other law, the chairperson of the
332 State Child Abuse Death Review Committee, or the chairperson of
333 a local committee, shall be provided with access to any
334 information or records that pertain to a child whose death is
335 being reviewed by the committee and that are necessary for the
336 committee to carry out its duties, including information or
337 records that pertain to the child's family, as follows:

338 1. ~~(a)~~ Patient records in the possession of a public or
339 private provider of medical, dental, or mental health care,
340 including, but not limited to, a facility licensed under chapter
341 393, chapter 394, or chapter 395, or a health care practitioner
342 as defined in s. 456.001. Providers may charge a fee for copies
343 not to exceed 50 cents per page for paper records and \$1 per
344 fiche for microfiche records.

345 2. ~~(b)~~ Information or records of any state agency or
346 political subdivision which might assist a committee in
347 reviewing a child's death, including, but not limited to,
348 information or records of the Department of Children and

594-04419-15

20157078c1

349 Families, the Department of Health, the Department of Education,
350 or the Department of Juvenile Justice.

351 (b)~~(9)~~ The State Child Abuse Death Review Committee or a
352 local committee shall have access to all information of a law
353 enforcement agency which is not the subject of an active
354 investigation and which pertains to the review of the death of a
355 child. A committee may not disclose any information that is not
356 subject to public disclosure by the law enforcement agency, and
357 active criminal intelligence information or criminal
358 investigative information, as defined in s. 119.011(3), may not
359 be made available for review or access under this section.

360 (c)~~(10)~~ The state committee and any local committee may
361 share with each other any relevant information that pertains to
362 the review of the death of a child.

363 (d)~~(11)~~ A member of the state committee or a local
364 committee may not contact, interview, or obtain information by
365 request or subpoena directly from a member of a deceased child's
366 family as part of a committee's review of a child abuse death,
367 except that if a committee member is also a public officer or
368 state employee, that member may contact, interview, or obtain
369 information from a member of the deceased child's family, if
370 necessary, as part of the committee's review. A member of the
371 deceased child's family may voluntarily provide records or
372 information to the state committee or a local committee.

373 (e)~~(12)~~ The chairperson of the State Child Abuse Death
374 Review Committee may require the production of records by
375 requesting a subpoena, through the Department of Legal Affairs,
376 in any county of the state. Such subpoena is effective
377 throughout the state and may be served by any sheriff. Failure

594-04419-15

20157078c1

378 to obey the subpoena is punishable as provided by law.

379 (f) ~~(13)~~ This section does not authorize the members of the
380 state committee or any local committee to have access to any
381 grand jury proceedings.

382 (g) ~~(14)~~ A person who has attended a meeting of the state
383 committee or a local committee or who has otherwise participated
384 in activities authorized by this section may not be permitted or
385 required to testify in any civil, criminal, or administrative
386 proceeding as to any records or information produced or
387 presented to a committee during meetings or other activities
388 authorized by this section. However, this subsection does not
389 prevent any person who testifies before the committee or who is
390 a member of the committee from testifying as to matters
391 otherwise within his or her knowledge. An organization,
392 institution, committee member, or other person who furnishes
393 information, data, reports, or records to the state committee or
394 a local committee is not liable for damages to any person and is
395 not subject to any other civil, criminal, or administrative
396 recourse. This subsection does not apply to any person who
397 admits to committing a crime.

398 (6) ~~(15)~~ DEPARTMENT OF HEALTH RESPONSIBILITIES.-

399 (a) The Department of Health shall administer the funds
400 appropriated to operate the review committees and may apply for
401 grants and accept donations.

402 (b) ~~(16)~~ To the extent that funds are available, the
403 Department of Health may hire staff or consultants to assist a
404 review committee in performing its duties. Funds may also be
405 used to reimburse reasonable expenses of the staff and
406 consultants for the state committee and the local committees.

594-04419-15

20157078c1

407 (c) ~~(17)~~ For the purpose of carrying out the
408 responsibilities assigned to the State Child Abuse Death Review
409 Committee and the local review committees, the State Surgeon
410 General may substitute an existing entity whose function and
411 organization includes ~~include~~ the function and organization of
412 the committees established by this section.

413 (7) ~~(18)~~ DEPARTMENT OF CHILDREN AND FAMILIES
414 RESPONSIBILITIES.—Each regional managing director ~~district~~
415 ~~administrator~~ of the Department of Children and Families must
416 appoint a child abuse death review coordinator for the region
417 ~~district~~. The coordinator must have knowledge and expertise in
418 the area of child abuse and neglect. The coordinator's general
419 responsibilities include:

420 (a) Coordinating with the local child abuse death review
421 committee.

422 (b) Ensuring the appropriate implementation of the child
423 abuse death review process and all regional ~~district~~ activities
424 related to the review of child abuse deaths.

425 (c) Working with the committee to ensure that the reviews
426 are thorough and that all issues are appropriately addressed.

427 (d) Maintaining a system of logging child abuse deaths
428 covered by this procedure and tracking cases during the child
429 abuse death review process.

430 (e) Conducting or arranging for a Florida Safe Families
431 Network Abuse Hotline Information System ~~(FAHIS)~~ record check on
432 all child abuse deaths covered by this procedure to determine
433 whether there were any prior reports concerning the child or
434 concerning any siblings, other children, or adults in the home.

435 (f) Coordinating child abuse death review activities, as

594-04419-15

20157078c1

436 needed, with individuals in the community and the Department of
437 Health.

438 (g) Notifying the regional managing director ~~district~~
439 ~~administrator~~, the Secretary of Children and Families, the
440 Department of Health Deputy Secretary for Health and Deputy
441 State Health Officer for Children's Medical Services, and the
442 Department of Health Child Abuse Death Review Coordinator of all
443 ~~child abuse~~ deaths meeting criteria for review as specified in
444 this section within 1 working day after case closure ~~verifying~~
445 ~~the child's death was due to abuse, neglect, or abandonment.~~

446 (h) Ensuring that all critical issues identified by the
447 local child abuse death review committee are brought to the
448 attention of the regional managing director ~~district~~
449 ~~administrator~~ and the Secretary of Children and Families.

450 (i) Providing technical assistance to the local child abuse
451 death review committee during the review of any child abuse
452 death.

453 Section 4. Subsection (5) is added to section 409.977,
454 Florida Statutes, to read:

455 409.977 Enrollment.—

456 (5) Specialty plans serving children in the care and
457 custody of the department may serve such children as long as
458 they remain in care, including those remaining in extended
459 foster care pursuant to s. 39.6251, or are in subsidized
460 adoption and continue to be eligible for Medicaid pursuant to s.
461 409.903.

462 Section 5. Paragraph (a) of subsection (1) of section
463 409.986, Florida Statutes, is amended to read:

464 409.986 Legislative findings and intent; child protection

594-04419-15

20157078c1

465 and child welfare outcomes; definitions.—

466 (1) LEGISLATIVE FINDINGS AND INTENT.—

467 (a) It is the intent of the Legislature that the Department
468 of Children and Families provide child protection and child
469 welfare services to children through contracting with community-
470 based care lead agencies. The community-based lead agencies
471 shall give priority to the use of services that are evidence-
472 based and trauma-informed. Counties that provide children and
473 family services with at least 40 licensed residential group care
474 beds by July 1, 2003, and that provide at least \$2 million
475 annually in county general revenue funds to supplement foster
476 and family care services shall continue to contract directly
477 with the state. It is the further intent of the Legislature that
478 communities have responsibility for and participate in ensuring
479 safety, permanence, and well-being for all children in the
480 state.

481 Section 6. Subsection (3) of section 409.988, Florida
482 Statutes, is amended to read:

483 409.988 Lead agency duties; general provisions.—

484 (3) SERVICES.—A lead agency must provide ~~serve~~ dependent
485 children with ~~through~~ services that are supported by research or
486 that are recognized as best practices in the best child welfare
487 field practices. The agency shall give priority to the use of
488 services that are evidence-based and trauma-informed and may
489 also provide other innovative services, including, but not
490 limited to, family-centered and, ~~cognitive-behavioral, trauma-~~
491 ~~informed~~ interventions designed to mitigate out-of-home
492 placements.

493 Section 7. Subsection (5) of section 435.02, Florida

594-04419-15

20157078c1

494 Statutes, is amended to read:

495 435.02 Definitions.—For the purposes of this chapter, the
496 term:

497 (5) "Specified agency" means the Department of Health, the
498 Department of Children and Families, the Division of Vocational
499 Rehabilitation within the Department of Education, the Agency
500 for Health Care Administration, the Department of Elderly
501 Affairs, the Department of Juvenile Justice, ~~and~~ the Agency for
502 Persons with Disabilities, and local licensing agencies approved
503 pursuant to s. 402.307, when these agencies are conducting state
504 and national criminal history background screening on persons
505 who work with children or persons who are elderly or disabled.

506 Section 8. This act shall take effect July 1, 2015.