

1 A bill to be entitled
2 An act relating to child welfare; amending s. 39.2015,
3 F.S.; allowing critical incident rapid response teams
4 to review open cases of child deaths besides those
5 with a verified report of abuse or neglect under
6 certain circumstances; requiring quarterly reports
7 from the advisory committee; amending s. 39.3068,
8 F.S.; requiring case staffing when medical neglect is
9 substantiated; 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 state committee members to
14 three consecutive terms; providing for per diem and
15 reimbursement of expenses; specifying duties of the
16 state committee; providing for the convening of county
17 or multicounty local review committees and support by
18 the county health department directors; specifying
19 membership and duties of local review committees;
20 requiring an annual statistical report; changing
21 references to "districts" and "district
22 administrators"; amending s. 409.986, F.S.; requiring
23 community-based care lead agencies to give priority to
24 the use of evidence-based and trauma-informed
25 services; amending s. 409.988; requiring community-
26 based care lead agencies to provide trauma-informed

27 services; providing an effective date.

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

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

33 39.2015 Critical incident rapid response team.—

34 (2) An immediate onsite investigation conducted by a
 35 critical incident rapid response team is required for all child
 36 deaths reported to the department if the child or another child
 37 in his or her family was the subject of a verified report of
 38 suspected abuse or neglect during the previous 12 months. The
 39 secretary may direct an immediate investigation for other cases
 40 involving death or serious injury to a child, including, but not
 41 limited to, a death or serious injury occurring during an open
 42 investigation.

43 (11) The secretary shall appoint an advisory committee
 44 made up of experts in child protection and child welfare,
 45 including the Statewide Medical Director for Child Protection
 46 under the Department of Health, a representative from the
 47 institute established pursuant to s. 1004.615, an expert in
 48 organizational management, and an attorney with experience in
 49 child welfare, to conduct an independent review of investigative
 50 reports from the critical incident rapid response teams and to
 51 make recommendations to improve policies and practices related
 52 to child protection and child welfare services. The advisory

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53 committee shall meet and ~~By October 1 of each year, the advisory~~
54 ~~committee shall~~ submit quarterly reports ~~a report~~ to the
55 secretary which include ~~includes~~ findings and recommendations.
56 The secretary shall submit the reports ~~report~~ to the Governor,
57 the President of the Senate, and the Speaker of the House of
58 Representatives.

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

61 39.3068 Reports of medical neglect.—

62 (3) The child shall be evaluated by the child protection
63 team as soon as practicable. ~~If After receipt of the report from~~
64 the child protection team reports that medical neglect was
65 substantiated, the department shall convene a case staffing
66 which shall be attended, at a minimum, by the child protective
67 investigator; department legal staff; and representatives from
68 the child protection team that evaluated the child, Children's
69 Medical Services, the Agency for Health Care Administration, the
70 community-based care lead agency, and any providers of services
71 to the child. However, the Agency for Health Care Administration
72 is not required to attend the staffing if the child is not
73 Medicaid eligible. The staffing shall consider, at a minimum,
74 available services, given the family's eligibility for services;
75 services that are effective in addressing conditions leading to
76 medical neglect allegations; and services that would enable the
77 child to safely remain at home. Any services that are available
78 and effective shall be provided.

79 Section 3. Section 383.402, Florida Statutes, is amended
 80 to read:

81 383.402 Child abuse death review; State Child Abuse Death
 82 Review Committee; local child abuse death review committees.—

83 (1) INTENT.—It is the intent of the Legislature to
 84 establish a statewide multidisciplinary, multiagency,
 85 epidemiological child abuse death assessment and prevention
 86 system that consists of state and local review committees. The
 87 ~~state and local review~~ committees shall review the facts and
 88 circumstances of all deaths of children from birth ~~to~~ through
 89 age 18 which occur in this state and are reported to the central
 90 abuse hotline of the Department of Children and Families. The
 91 state committee and the local review committees shall work
 92 cooperatively. The state committee shall primarily provide
 93 direction and leadership for the review system and analyze data
 94 and recommendations from local committees to identify issues,
 95 trends, and recommended action on a statewide basis. The local
 96 committees shall primarily conduct individual case reviews of
 97 deaths, generate information, and make recommendations and
 98 implement improvements at the local level. The ~~purpose of the~~
 99 review shall use a data-based, epidemiological approach ~~be~~ to:

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

102 (b) Whenever possible, develop a communitywide approach to
 103 address such causes ~~cases~~ and contributing factors.

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

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

108 (d) Make ~~and implement~~ recommendations for changes in law,
 109 rules, and policies at the state and local levels, as well as
 110 develop practice standards that support the safe and healthy
 111 development of children and reduce preventable child abuse
 112 deaths.

113 (e) Implement such recommendations to the extent possible.

114 (2) STATE CHILD ABUSE DEATH REVIEW COMMITTEE.-

115 (a) Membership.-

116 1. The State Child Abuse Death Review Committee is
 117 established within the Department of Health and shall consist of
 118 a representative of the Department of Health, appointed by the
 119 State Surgeon General, who shall serve as the state committee
 120 coordinator. The head of each of the following agencies or
 121 organizations shall also appoint a representative to the state
 122 committee:

123 a.1. The Department of Legal Affairs.

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

125 c.3. The Department of Law Enforcement.

126 d.4. The Department of Education.

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

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

130 2.(b) In addition, the State Surgeon General shall appoint

131 the following members to the state committee, based on
132 recommendations from the Department of Health and the agencies
133 listed in subparagraph 1. ~~paragraph (a)~~, and ensuring that the
134 committee represents the regional, gender, and ethnic diversity
135 of the state to the greatest extent possible:

136 ~~a.1.~~ The Department of Health Statewide Child Protection
137 Team Medical Director ~~for Child Protection~~.

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

139 ~~c.3.~~ A mental health professional who treats children or
140 adolescents.

141 ~~d.4.~~ An employee of the Department of Children and
142 Families who supervises family services counselors and who has
143 at least 5 years of experience in child protective
144 investigations.

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

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

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

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

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

153 ~~j.10.~~ A representative of the Florida Coalition Against
154 Domestic Violence.

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

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1. A substance abuse treatment professional.

3. The members of the state committee shall be appointed to staggered terms not to exceed 2 years each, as determined by the State Surgeon General. Members may be appointed to no more than three consecutive terms. The state committee shall elect a chairperson from among its members to serve for a 2-year term, and the chairperson may appoint ad hoc committees as necessary to carry out the duties of the committee.

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

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

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

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

183 ~~(c) Prepare an annual statistical report on the incidence~~
184 ~~and causes of death resulting from reported child abuse in the~~
185 ~~state during the prior calendar year. The state committee shall~~
186 ~~submit a copy of the report by October 1 of each year to the~~
187 ~~Governor, the President of the Senate, and the Speaker of the~~
188 ~~House of Representatives. The report must include~~
189 ~~recommendations for state and local action, including specific~~
190 ~~policy, procedural, regulatory, or statutory changes, and any~~
191 ~~other recommended preventive action.~~

192 3.(d) Provide training to local child abuse death review
193 committee members on the dynamics and impact of domestic
194 violence, substance abuse, or mental health disorders when there
195 is a co-occurrence of child abuse. Training shall be provided by
196 the Florida Coalition Against Domestic Violence, the Florida
197 Alcohol and Drug Abuse Association, and the Florida Council for
198 Community Mental Health in each entity's respective area of
199 expertise.

200 4.(e) Develop statewide uniform guidelines, standards, and
201 protocols, including a protocol for standardized data
202 collection, and reporting, for local child abuse death review
203 committees, and provide training and technical assistance to
204 local committees.

205 5.(f) Develop statewide uniform guidelines for reviewing
206 deaths that are the result of child abuse, including guidelines
207 to be used by law enforcement agencies, prosecutors, medical
208 examiners, health care practitioners, health care facilities,

209 and social service agencies.

210 6.(g) Study the adequacy of laws, rules, training, and
 211 services to determine what changes are needed to decrease the
 212 incidence of child abuse deaths and develop strategies and
 213 recruit partners to implement these changes.

214 7.(h) Provide consultation on individual cases to local
 215 committees upon request.

216 8.(i) Educate the public regarding the provisions of
 217 chapter 99-168, Laws of Florida, the incidence and causes of
 218 child abuse death, and ways by which such deaths may be
 219 prevented.

220 9.(j) Promote continuing education for professionals who
 221 investigate, treat, and prevent child abuse or neglect.

222 10.(k) Recommend, when appropriate, the review of the
 223 death certificate of a child who died as a result of abuse or
 224 neglect.

225 ~~(4) The members of the state committee shall be appointed~~
 226 ~~to staggered terms of office which may not exceed 2 years, as~~
 227 ~~determined by the State Surgeon General. Members are eligible~~
 228 ~~for 2 reappointments. The state committee shall elect a~~
 229 ~~chairperson from among its members to serve for a 2-year term,~~
 230 ~~and the chairperson may appoint ad hoc committees as necessary~~
 231 ~~to carry out the duties of the committee.~~

232 ~~(5) Members of the state committee shall serve without~~
 233 ~~compensation but are entitled to reimbursement for per diem and~~
 234 ~~travel expenses incurred in the performance of their duties as~~

235 ~~provided in s. 112.061 and to the extent that funds are~~
 236 ~~available.~~

237 (3) LOCAL DEATH REVIEW COMMITTEES.—

238 ~~(6)~~ At the direction of the State Surgeon General, a
 239 county or multicounty death review committee shall be convened
 240 ~~the director of each county health department, or the directors~~
 241 ~~of two or more county health departments by agreement, may~~
 242 ~~convene and support a county or multicounty child abuse death~~
 243 ~~review committee in accordance with the protocols established by~~
 244 ~~the State Child Abuse Death Review Committee and supported by~~
 245 the local county health department directors.

246 (a) Membership.—Each local committee must include local
 247 representatives from:

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

250 2. The medical examiner's office.

251 3. The local Department of Children and Families child
 252 protective investigations unit.

253 4. The Department of Health child protection team.

254 5. The community-based care lead agency.

255 6. Law enforcement.

256 7. The school district.

257 8. A mental health treatment provider.

258 9. A certified domestic violence center.

259 10. A substance abuse treatment provider.

260 11. Any other members that are determined by guidelines

261 developed by the State Child Abuse Death Review Committee.
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 263 To the extent possible, individuals from these organizations or
 264 entities that were involved with a child whose death was
 265 verified as caused by abuse or neglect, or with the family of
 266 the child, shall attend any meetings where the child's case is
 267 reviewed. The members of a local committee shall be appointed to
 268 2-year terms and may be reappointed. ~~The local committee shall~~
 269 ~~elect a chairperson from among its members.~~ Members shall serve
 270 without compensation but may receive ~~are entitled to~~
 271 reimbursement for per diem and travel expenses incurred in the
 272 performance of their duties as provided in s. 112.061 and to the
 273 extent that funds are available.

274 (b)(7) Duties.—Each local child abuse death review
 275 committee shall:

276 1.(a) Assist the state committee in collecting data on
 277 deaths that are the result of child abuse, in accordance with
 278 the protocol established by the state committee. The local
 279 committee shall complete the individual case report in the Child
 280 Death Review Case Reporting System to the fullest extent
 281 possible.

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

- 284 a. Nonidentifying information on individual cases.
- 285 b. A listing of any system issues identified through the
 286 review process and recommendations for system improvements and

287 needed resources, training, and information dissemination where
 288 gaps or deficiencies may exist. ~~and~~

289 c. Any ~~the~~ steps taken by the local committee and private
 290 and public agencies to implement necessary changes and improve
 291 the coordination of services and reviews.

292 3.(e) Submit all records requested by the state committee
 293 at the conclusion of its review of a death resulting from child
 294 abuse.

295 4.(d) Abide by the standards and protocols developed by
 296 the state committee.

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

299 (4) ANNUAL STATISTICAL REPORT.—The state committee shall
 300 prepare and submit an annual statistical report by October 1 of
 301 each year to the Governor, the President of the Senate, and the
 302 Speaker of the House of Representatives. The report must be
 303 comprehensive and include data, trends, analysis, findings, and
 304 recommendations for state and local action regarding deaths from
 305 child abuse. Data must be presented on an individual calendar
 306 year basis and in the context of a multiyear trend. At a
 307 minimum, the report must include:

308 (a) Descriptive statistics, including demographic
 309 information regarding victims and caregivers and the causes and
 310 nature of deaths.

311 b. A detailed statistical analysis of the incidence and
 312 causes of deaths.

313 c. Specific issues identified within current policy,
314 procedure, rule, or statute and recommendations to address those
315 issues from both the state and local committees.

316 e. Other recommendations to prevent deaths from child
317 abuse based on an analysis of the data presented in the report.

318 (5)(8) ACCESS TO AND USE OF RECORDS.-

319 (a) Notwithstanding any other law, the chairperson of the
320 State Child Abuse Death Review Committee, or the chairperson of
321 a local committee, shall be provided with access to any
322 information or records that pertain to a child whose death is
323 being reviewed by the committee and that are necessary for the
324 committee to carry out its duties, including information or
325 records that pertain to the child's family, as follows:

326 1.(a) Patient records in the possession of a public or
327 private provider of medical, dental, or mental health care,
328 including, but not limited to, a facility licensed under chapter
329 393, chapter 394, or chapter 395, or a health care practitioner
330 as defined in s. 456.001. Providers may charge a fee for copies
331 not to exceed 50 cents per page for paper records and \$1 per
332 fiche for microfiche records.

333 2.(b) Information or records of any state agency or
334 political subdivision which might assist a committee in
335 reviewing a child's death, including, but not limited to,
336 information or records of the Department of Children and
337 Families, the Department of Health, the Department of Education,
338 or the Department of Juvenile Justice.

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339 (b) ~~(9)~~ The State Child Abuse Death Review Committee or a
340 local committee shall have access to all information of a law
341 enforcement agency which is not the subject of an active
342 investigation and which pertains to the review of the death of a
343 child. A committee may not disclose any information that is not
344 subject to public disclosure by the law enforcement agency, and
345 active criminal intelligence information or criminal
346 investigative information, as defined in s. 119.011(3), may not
347 be made available for review or access under this section.

348 (c) ~~(10)~~ The state committee and any local committee may
349 share any relevant information that pertains to the review of
350 the death of a child.

351 (d) ~~(11)~~ A member of the state committee or a local
352 committee may not contact, interview, or obtain information by
353 request or subpoena directly from a member of a deceased child's
354 family as part of a committee's review of a child abuse death,
355 except that if a committee member is also a public officer or
356 state employee, that member may contact, interview, or obtain
357 information from a member of the deceased child's family, if
358 necessary, as part of the committee's review. A member of the
359 deceased child's family may voluntarily provide records or
360 information to the state committee or a local committee.

361 (e) ~~(12)~~ The chairperson of the State Child Abuse Death
362 Review Committee may require the production of records by
363 requesting a subpoena, through the Department of Legal Affairs,
364 in any county of the state. Such subpoena is effective

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365 throughout the state and may be served by any sheriff. Failure
366 to obey the subpoena is punishable as provided by law.

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

370 (g) ~~(14)~~ A person who has attended a meeting of the state
371 committee or a local committee or who has otherwise participated
372 in activities authorized by this section may not be permitted or
373 required to testify in any civil, criminal, or administrative
374 proceeding as to any records or information produced or
375 presented to a committee during meetings or other activities
376 authorized by this section. However, this subsection does not
377 prevent any person who testifies before the committee or who is
378 a member of the committee from testifying as to matters
379 otherwise within his or her knowledge. An organization,
380 institution, committee member, or other person who furnishes
381 information, data, reports, or records to the state committee or
382 a local committee is not liable for damages to any person and is
383 not subject to any other civil, criminal, or administrative
384 recourse. This subsection does not apply to any person who
385 admits to committing a crime.

386 (6) ~~(15)~~ DEPARTMENT OF HEALTH RESPONSIBILITIES.-

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

390 (b) ~~(16)~~ To the extent that funds are available, the

391 Department of Health may hire staff or consultants to assist a
 392 review committee in performing its duties. Funds may also be
 393 used to reimburse reasonable expenses of the staff and
 394 consultants for the state committee and the local committees.

395 (c) ~~(17)~~ For the purpose of carrying out the
 396 responsibilities assigned to the State Child Abuse Death Review
 397 Committee and the local review committees, the State Surgeon
 398 General may substitute an existing entity whose function and
 399 organization include the function and organization of the
 400 committees established by this section.

401 (7) ~~(18)~~ DEPARTMENT OF CHILDREN AND FAMILIES
 402 RESPONSIBILITIES.—

403 (a) Each regional managing director ~~district administrator~~
 404 of the Department of Children and Families must appoint a child
 405 abuse death review coordinator for the region ~~district~~. The
 406 coordinator must have knowledge and expertise in the area of
 407 child abuse and neglect. The coordinator's general
 408 responsibilities include:

409 1. ~~(a)~~ Coordinating with the local child abuse death review
 410 committee.

411 2. ~~(b)~~ Ensuring the appropriate implementation of the child
 412 abuse death review process and all regional ~~district~~ activities
 413 related to the review of child abuse deaths.

414 3. ~~(c)~~ Working with the committee to ensure that the
 415 reviews are thorough and that all issues are appropriately
 416 addressed.

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417 4.(d) Maintaining a system of logging child abuse deaths
418 covered by this procedure and tracking cases during the child
419 abuse death review process.

420 5.(e) Conducting or arranging for a Florida Safe Families
421 Network Abuse Hotline Information System (FAHIS) record check on
422 all child abuse deaths covered by this procedure to determine
423 whether there were any prior reports concerning the child or
424 concerning any siblings, other children, or adults in the home.

425 6.(f) Coordinating child abuse death review activities, as
426 needed, with individuals in the community and the Department of
427 Health.

428 7.(g) Notifying the regional managing director ~~district~~
429 ~~administrator~~, the Secretary of Children and Families, the
430 Department of Health Deputy Secretary for Health/Deputy State
431 Health Officer for Children's Medical Services, and the
432 Department of Health Child Abuse Death Review Coordinator of all
433 ~~child abuse~~ deaths meeting criteria for review as specified in
434 this section within 1 working day after case closure ~~verifying~~
435 ~~the child's death was due to abuse, neglect, or abandonment.~~

436 8.(h) Ensuring that all critical issues identified by the
437 local child abuse death review committee are brought to the
438 attention of the regional managing director ~~district~~
439 ~~administrator~~ and the Secretary of Children and Families.

440 9.(i) Providing technical assistance to the local child
441 abuse death review committee during the review of any child
442 abuse death.

443 Section 4. Paragraph (a) of subsection (1) of section
 444 409.986, Florida Statutes, is amended to read:

445 409.986 Legislative findings and intent; child protection
 446 and child welfare outcomes; definitions.—

447 (1) LEGISLATIVE FINDINGS AND INTENT.—

448 (a) It is the intent of the Legislature that the
 449 Department of Children and Families provide child protection and
 450 child welfare services to children through contracting with
 451 community-based care lead agencies. The community-based lead
 452 agencies shall give priority to the use of services that are
 453 evidence-based and trauma-informed. Counties that provide
 454 children and family services with at least 40 licensed
 455 residential group care beds by July 1, 2003, and that provide at
 456 least \$2 million annually in county general revenue funds to
 457 supplement foster and family care services shall continue to
 458 contract directly with the state. It is the further intent of
 459 the Legislature that communities have responsibility for and
 460 participate in ensuring safety, permanence, and well-being for
 461 all children in the state.

462 Section 5. Subsection (3) of section 409.988, Florida
 463 Statutes, is amended to read:

464 409.988 Lead agency duties; general provisions.—

465 (3) SERVICES.—A lead agency must serve dependent children
 466 through services that are trauma-informed and supported by
 467 research or are best child welfare practices. The agency may
 468 also provide innovative services, including, but not limited to,

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469 family-centered, cognitive-behavioral, trauma-informed
470 interventions designed to mitigate out-of-home placements.
471 Section 6. This act shall take effect July 1, 2015.