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LEGISLATIVE ACTION

Senate

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House

The Committee on Children, Families, and Elder Affairs
(Albritton) recommended the following:

Senate Amendment (with title amendment)

Delete lines 47 - 819

and insert:

Section 1. Section 39.0012, Florida Statutes, is created to
read:

39.0012 Direct-support organization.-

(1) The Department of Children and Families shall establish
a direct-support organization to assist the Children and Youth
Cabinet in carrying out its purposes and responsibilities



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11 primarily relating to fostering public awareness of children and
12 youth issues and developing new partners in the effort to serve
13 children and youth by raising money; submitting requests for and
14 receiving grants from the Federal Government, the state or its
15 political subdivisions, private foundations, and individuals;
16 and making expenditures to or for the benefit of the cabinet.

17 Such a direct-support organization is an organization that is:

18 (a) Incorporated under chapter 617 and approved by the
19 Department of State as a Florida corporation not for profit;

20 (b) Organized and operated to make expenditures to or for
21 the benefit of the cabinet; and

22 (c) Approved by the department to be operating for the
23 benefit of and in a manner consistent with the goals of the
24 cabinet and in the best interest of the state.

25 (2) The board of directors of the direct-support
26 organization shall consist of seven members appointed by the
27 Governor. Each member of the board of directors shall be
28 appointed to a 4-year term.

29 (3) The direct-support organization shall operate under
30 written contract with the department.

31 (4) All moneys received by the direct-support organization
32 shall be deposited into an account of the direct-support
33 organization and shall be used by the organization in a manner
34 consistent with the goals of the cabinet.

35 (5) This section is repealed October 1, 2024, unless
36 reviewed and saved from repeal by the Legislature.

37 Section 2. Subsection (37) of section 39.01, Florida
38 Statutes, is amended to read:

39 39.01 Definitions.—When used in this chapter, unless the



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40 context otherwise requires:

41 (37) "Institutional child abuse or neglect" means
42 situations of known or suspected child abuse or neglect in which
43 the person allegedly perpetrating the child abuse or neglect is
44 an employee of a public or private school, public or private day
45 care center, residential home, institution, facility, or agency
46 or any other person at such institution responsible for the
47 child's care as defined in this section ~~subsection (54)~~.

48 Section 3. Paragraph (d) of subsection (2) of section
49 39.201, Florida Statutes, is amended, and paragraph (1) is added
50 to that subsection, to read:

51 39.201 Mandatory reports of child abuse, abandonment, or
52 neglect; mandatory reports of death; central abuse hotline.—

53 (2)

54 (d) If the report is of an instance of known or suspected
55 child abuse, abandonment, or neglect which ~~that~~ occurred out of
56 state and the alleged perpetrator and the child alleged to be a
57 victim live out of state, the central abuse hotline may ~~shall~~
58 not accept the report or call for investigation unless the child
59 is currently being evaluated in a medical facility in this
60 state.

61 1. If the child is currently being evaluated in a medical
62 facility in this state, the central abuse hotline shall accept
63 the report or call for investigation and shall transfer the
64 information on the report or call to the appropriate state or
65 country.

66 2. If the child is not currently being evaluated in a
67 medical facility in this state, the central abuse hotline, ~~but~~
68 shall transfer the information on the report to or call to the



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69 appropriate state or country.

70 (1) The department shall initiate an investigation when it
71 receives a report from an emergency room physician.

72 Section 4. Paragraph (i) is added to subsection (4) of
73 section 39.303, Florida Statutes, to read:

74 39.303 Child Protection Teams and sexual abuse treatment
75 programs; services; eligible cases.-

76 (4) The child abuse, abandonment, and neglect reports that
77 must be referred by the department to Child Protection Teams of
78 the Department of Health for an assessment and other appropriate
79 available support services as set forth in subsection (3) must
80 include cases involving:

81 (i) A child who does not live in this state who is
82 currently being evaluated in a medical facility in this state.

83 Section 5. Paragraph (d) of subsection (2) of section
84 39.4015, Florida Statutes, is amended to read:

85 39.4015 Family finding.-

86 (2) DEFINITIONS.-As used in this section, the term:

87 ~~(d) "Fictive kin" means an individual who is unrelated to~~
88 ~~the child by either birth or marriage, but has such a close~~
89 ~~emotional relationship with the child that he or she may be~~
90 ~~considered part of the family.~~

91 Section 6. Paragraph (h) of subsection (8) of section
92 39.402, Florida Statutes, is amended to read:

93 39.402 Placement in a shelter.-

94 (8)

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



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

100 2. That placement in shelter care is in the best interest
101 of the child.

102 3. That continuation of the child in the home is contrary
103 to the welfare of the child because the home situation presents
104 a substantial and immediate danger to the child's physical,
105 mental, or emotional health or safety which cannot be mitigated
106 by the provision of preventive services.

107 4. That based upon the allegations of the petition for
108 placement in shelter care, there is probable cause to believe
109 that the child is dependent or that the court needs additional
110 time, which may not exceed 72 hours, in which to obtain and
111 review documents pertaining to the family in order to
112 appropriately determine the risk to the child.

113 5. That the department has made reasonable efforts to
114 prevent or eliminate the need for removal of the child from the
115 home. A finding of reasonable effort by the department to
116 prevent or eliminate the need for removal may be made and the
117 department is deemed to have made reasonable efforts to prevent
118 or eliminate the need for removal if:

119 a. The first contact of the department with the family
120 occurs during an emergency;

121 b. The appraisal of the home situation by the department
122 indicates that the home situation presents a substantial and
123 immediate danger to the child's physical, mental, or emotional
124 health or safety which cannot be mitigated by the provision of
125 preventive services;

126 c. The child cannot safely remain at home, either because



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127 there are no preventive services that can ensure the health and
128 safety of the child or because, even with appropriate and
129 available services being provided, the health and safety of the
130 child cannot be ensured; or

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

134 6. That the department has made reasonable efforts to keep
135 siblings together if they are removed and placed in out-of-home
136 care unless such placement is not in the best interest of each
137 child. It is preferred that siblings be kept together in a
138 foster home, if available. Other reasonable efforts shall
139 include short-term placement in a group home with the ability to
140 accommodate sibling groups if such a placement is available. The
141 department shall report to the court its efforts to place
142 siblings together unless the court finds that such placement is
143 not in the best interest of a child or his or her sibling.

144 7. That the court notified the parents, relatives that are
145 providing out-of-home care for the child, or legal custodians of
146 the time, date, and location of the next dependency hearing and
147 of the importance of the active participation of the parents,
148 relatives that are providing out-of-home care for the child, or
149 legal custodians in all proceedings and hearings.

150 8. That the court notified the parents or legal custodians
151 of their right to counsel to represent them at the shelter
152 hearing and at each subsequent hearing or proceeding, and the
153 right of the parents to appointed counsel, pursuant to the
154 procedures set forth in s. 39.013.

155 9. That the court notified relatives who are providing out-



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156 of-home care for a child as a result of the shelter petition
157 being granted that they have the right to attend all subsequent
158 hearings, to submit reports to the court, and to speak to the
159 court regarding the child, if they so desire.

160 10. That the department has placement and care
161 responsibility for any child who is not placed in the care of a
162 parent at the conclusion of the shelter hearing.

163 Section 7. Subsection (3) and paragraphs (g), (h), and (i)
164 of subsection (6) of section 39.407, Florida Statutes, are
165 amended to read:

166 39.407 Medical, psychiatric, and psychological examination
167 and treatment of child; physical, mental, or substance abuse
168 examination of person with or requesting child custody.—

169 (3) (a) 1. Except as otherwise provided in subparagraph (b) 1.
170 or paragraph (e), before the department provides psychotropic
171 medications to a child in its custody, the prescribing physician
172 or the advanced practice registered nurse whose specialty is
173 psychiatric nursing, as defined in chapter 394, and who is given
174 prescribing authority pursuant to chapter 464 shall attempt to
175 obtain express and informed consent, as defined in s.

176 394.455(15) and as described in s. 394.459(3) (a), from the
177 child's parent or legal guardian. The department must take steps
178 necessary to facilitate the inclusion of the parent in the
179 child's consultation with the physician or advanced practice
180 registered nurse. However, if the parental rights of the parent
181 have been terminated, the parent's location or identity is
182 unknown or cannot reasonably be ascertained, or the parent
183 declines to give express and informed consent, the department
184 may, after consultation with the prescribing physician or



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185 advanced practice registered nurse, seek court authorization to
186 provide the psychotropic medications to the child. Unless
187 parental rights have been terminated and if it is possible to do
188 so, the department shall continue to involve the parent in the
189 decisionmaking process regarding the provision of psychotropic
190 medications. If, at any time, a parent whose parental rights
191 have not been terminated provides express and informed consent
192 to the provision of a psychotropic medication, the requirements
193 of this section that the department seek court authorization do
194 not apply to that medication until such time as the parent no
195 longer consents.

196 2. Any time the department seeks a medical evaluation to
197 determine the need to initiate or continue a psychotropic
198 medication for a child, the department must provide to the
199 evaluating physician or advanced practice registered nurse all
200 pertinent medical information known to the department concerning
201 that child.

202 (b)1. If a child who is removed from the home under s.
203 39.401 is receiving prescribed psychotropic medication at the
204 time of removal and parental authorization to continue providing
205 the medication cannot be obtained, the department may take
206 possession of the remaining medication and may continue to
207 provide the medication as prescribed until the shelter hearing,
208 if it is determined that the medication is a current
209 prescription for that child and the medication is in its
210 original container.

211 2. If the department continues to provide the psychotropic
212 medication to a child when parental authorization cannot be
213 obtained, the department shall notify the parent or legal



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214 guardian as soon as possible that the medication is being
215 provided to the child as provided in subparagraph 1. The child's
216 official departmental record must include the reason parental
217 authorization was not initially obtained and an explanation of
218 why the medication is necessary for the child's well-being.

219 3. If the department is advised by a physician licensed
220 under chapter 458 or chapter 459 or an advanced practice
221 registered nurse whose specialty is psychiatric nursing, as
222 defined in chapter 394, and who is given prescribing authority
223 pursuant to chapter 464 that the child should continue the
224 psychotropic medication and parental authorization has not been
225 obtained, the department shall request court authorization at
226 the shelter hearing to continue to provide the psychotropic
227 medication and shall provide to the court any information in its
228 possession in support of the request. Any authorization granted
229 at the shelter hearing may extend only until the arraignment
230 hearing on the petition for adjudication of dependency or 28
231 days following the date of removal, whichever occurs sooner.

232 4. Before filing the dependency petition, the department
233 shall ensure that the child is evaluated by a physician licensed
234 under chapter 458 or chapter 459 or an advanced practice
235 registered nurse whose specialty is psychiatric nursing, as
236 defined in chapter 394, and who is given prescribing authority
237 pursuant to chapter 464 to determine whether it is appropriate
238 to continue the psychotropic medication. If, as a result of the
239 evaluation, the department seeks court authorization to continue
240 the psychotropic medication, a motion for such continued
241 authorization shall be filed at the same time as the dependency
242 petition, within 21 days after the shelter hearing.



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243 (c) Except as provided in paragraphs (b) and (e), the
244 department must file a motion seeking the court's authorization
245 to initially provide or continue to provide psychotropic
246 medication to a child in its legal custody. The motion must be
247 supported by a written report prepared by the department which
248 describes the efforts made to enable the prescribing physician
249 or advanced practice registered nurse whose specialty is
250 psychiatric nursing, as defined in chapter 394, and who is given
251 prescribing authority pursuant to chapter 464 to obtain express
252 and informed consent for providing the medication to the child
253 and other treatments considered or recommended for the child. In
254 addition, the motion must be supported by the prescribing
255 physician's or advanced practice registered nurse's signed
256 medical report providing:

257 1. The name of the child, the name and range of the dosage
258 of the psychotropic medication, and that there is a need to
259 prescribe psychotropic medication to the child based upon a
260 diagnosed condition for which such medication is being
261 prescribed.

262 2. A statement indicating that the physician has reviewed
263 all medical information concerning the child which has been
264 provided.

265 3. A statement indicating that the psychotropic medication,
266 at its prescribed dosage, is appropriate for treating the
267 child's diagnosed medical condition, as well as the behaviors
268 and symptoms the medication, at its prescribed dosage, is
269 expected to address.

270 4. An explanation of the nature and purpose of the
271 treatment; the recognized side effects, risks, and



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272 contraindications of the medication; drug-interaction
273 precautions; the possible effects of stopping the medication;
274 and how the treatment will be monitored, followed by a statement
275 indicating that this explanation was provided to the child if
276 age appropriate and to the child's caregiver.

277 5. Documentation addressing whether the psychotropic
278 medication will replace or supplement any other currently
279 prescribed medications or treatments; the length of time the
280 child is expected to be taking the medication; and any
281 additional medical, mental health, behavioral, counseling, or
282 other services that the prescribing physician or advanced
283 practice registered nurse recommends.

284 (d)1. The department must notify all parties of the
285 proposed action taken under paragraph (c) in writing or by
286 whatever other method best ensures that all parties receive
287 notification of the proposed action within 48 hours after the
288 motion is filed. If any party objects to the department's
289 motion, that party shall file the objection within 2 working
290 days after being notified of the department's motion. If any
291 party files an objection to the authorization of the proposed
292 psychotropic medication, the court shall hold a hearing as soon
293 as possible before authorizing the department to initially
294 provide or to continue providing psychotropic medication to a
295 child in the legal custody of the department. At such hearing
296 and notwithstanding s. 90.803, the medical report described in
297 paragraph (c) is admissible in evidence. The prescribing
298 physician or advanced practice registered nurse whose specialty
299 is psychiatric nursing, as defined in chapter 394, and who is
300 given prescribing authority pursuant to chapter 464 need not



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301 attend the hearing or testify unless the court specifically
302 orders such attendance or testimony, or a party subpoenas the
303 physician or advanced practice registered nurse to attend the
304 hearing or provide testimony. If, after considering any
305 testimony received, the court finds that the department's motion
306 and the physician's or advanced practice registered nurse's
307 medical report meet the requirements of this subsection and that
308 it is in the child's best interests, the court may order that
309 the department provide or continue to provide the psychotropic
310 medication to the child without additional testimony or
311 evidence. At any hearing held under this paragraph, the court
312 shall further inquire of the department as to whether additional
313 medical, mental health, behavioral, counseling, or other
314 services are being provided to the child by the department which
315 the prescribing physician or advanced practice registered nurse
316 considers to be necessary or beneficial in treating the child's
317 medical condition and which the physician or advanced practice
318 registered nurse recommends or expects to provide to the child
319 in concert with the medication. The court may order additional
320 medical consultation, including consultation with the MedConsult
321 line at the University of Florida, if available, or require the
322 department to obtain a second opinion within a reasonable
323 timeframe as established by the court, not to exceed 21 calendar
324 days, after such order based upon consideration of the best
325 interests of the child. The department must make a referral for
326 an appointment for a second opinion with a physician within 1
327 working day. The court may not order the discontinuation of
328 prescribed psychotropic medication if such order is contrary to
329 the decision of the prescribing physician or advanced practice



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330 registered nurse unless the court first obtains an opinion from
331 a licensed psychiatrist, if available, or, if not available, a
332 physician licensed under chapter 458 or chapter 459, stating
333 that more likely than not, discontinuing the medication would
334 not cause significant harm to the child. If, however, the
335 prescribing psychiatrist specializes in mental health care for
336 children and adolescents, the court may not order the
337 discontinuation of prescribed psychotropic medication unless the
338 required opinion is also from a psychiatrist who specializes in
339 mental health care for children and adolescents. The court may
340 also order the discontinuation of prescribed psychotropic
341 medication if a child's treating physician, licensed under
342 chapter 458 or chapter 459, states that continuing the
343 prescribed psychotropic medication would cause significant harm
344 to the child due to a diagnosed nonpsychiatric medical
345 condition.

346 2. The burden of proof at any hearing held under this
347 paragraph shall be by a preponderance of the evidence.

348 (e)1. If the child's prescribing physician or advanced
349 practice registered nurse whose specialty is psychiatric
350 nursing, as defined in chapter 394, and who is given prescribing
351 authority pursuant to chapter 464 certifies in the signed
352 medical report required in paragraph (c) that delay in providing
353 a prescribed psychotropic medication would more likely than not
354 cause significant harm to the child, the medication may be
355 provided in advance of the issuance of a court order. In such
356 event, the medical report must provide the specific reasons why
357 the child may experience significant harm and the nature and the
358 extent of the potential harm. The department must submit a



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359 motion seeking continuation of the medication and the
360 physician's medical report to the court, the child's guardian ad
361 litem, and all other parties within 3 working days after the
362 department commences providing the medication to the child. The
363 department shall seek the order at the next regularly scheduled
364 court hearing required under this chapter, or within 30 days
365 after the date of the prescription, whichever occurs sooner. If
366 any party objects to the department's motion, the court shall
367 hold a hearing within 7 days.

368 2. Psychotropic medications may be administered in advance
369 of a court order in hospitals, crisis stabilization units, and
370 in statewide inpatient psychiatric programs. Within 3 working
371 days after the medication is begun, the department must seek
372 court authorization as described in paragraph (c).

373 (f)1. The department shall fully inform the court of the
374 child's medical and behavioral status as part of the social
375 services report prepared for each judicial review hearing held
376 for a child for whom psychotropic medication has been prescribed
377 or provided under this subsection. As a part of the information
378 provided to the court, the department shall furnish copies of
379 all pertinent medical records concerning the child which have
380 been generated since the previous hearing. On its own motion or
381 on good cause shown by any party, including any guardian ad
382 litem, attorney, or attorney ad litem who has been appointed to
383 represent the child or the child's interests, the court may
384 review the status more frequently than required in this
385 subsection.

386 2. The court may, in the best interests of the child, order
387 the department to obtain a medical opinion addressing whether



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388 the continued use of the medication under the circumstances is
389 safe and medically appropriate.

390 (g) The department shall adopt rules to ensure that
391 children receive timely access to clinically appropriate
392 psychotropic medications. These rules must include, but need not
393 be limited to, the process for determining which adjunctive
394 services are needed, the uniform process for facilitating the
395 prescribing physician's or advanced practice registered nurse's
396 ability to obtain the express and informed consent of a child's
397 parent or guardian, the procedures for obtaining court
398 authorization for the provision of a psychotropic medication,
399 the frequency of medical monitoring and reporting on the status
400 of the child to the court, how the child's parents will be
401 involved in the treatment-planning process if their parental
402 rights have not been terminated, and how caretakers are to be
403 provided information contained in the physician's or advanced
404 practice registered nurse's signed medical report. The rules
405 must also include uniform forms to be used in requesting court
406 authorization for the use of a psychotropic medication and
407 provide for the integration of each child's treatment plan and
408 case plan. The department must begin the formal rulemaking
409 process within 90 days after the effective date of this act.

410 (6) Children who are in the legal custody of the department
411 may be placed by the department, without prior approval of the
412 court, in a residential treatment center licensed under s.
413 394.875 or a hospital licensed under chapter 395 for residential
414 mental health treatment only pursuant to this section or may be
415 placed by the court in accordance with an order of involuntary
416 examination or involuntary placement entered pursuant to s.



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417 394.463 or s. 394.467. All children placed in a residential
418 treatment program under this subsection must have a guardian ad
419 litem appointed.

420 (g)1. The department must submit, at the beginning of each
421 month, to the court having jurisdiction over the child, a
422 written report regarding the child's progress toward achieving
423 the goals specified in the individualized plan of treatment.

424 2. The court must conduct a hearing to review the status of
425 the child's residential treatment plan no later than 60 days ~~3~~
426 ~~months~~ after the child's admission to the residential treatment
427 program. An independent review of the child's progress toward
428 achieving the goals and objectives of the treatment plan must be
429 completed by a qualified evaluator and submitted to the court
430 before its 60-day ~~3-month~~ review.

431 3. For any child in residential treatment at the time a
432 judicial review is held pursuant to s. 39.701, the child's
433 continued placement in residential treatment must be a subject
434 of the judicial review.

435 4. If at any time the court determines that the child is
436 not suitable for continued residential treatment, the court
437 shall order the department to place the child in the least
438 restrictive setting that is best suited to meet his or her
439 needs.

440 (h) After the initial 60-day ~~3-month~~ review, the court must
441 conduct a review of the child's residential treatment plan every
442 90 days.

443 (i) The department must adopt rules for implementing
444 timeframes for the completion of suitability assessments by
445 qualified evaluators and a procedure that includes timeframes



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446 for completing the 60-day ~~3-month~~ independent review by the
447 qualified evaluators of the child's progress toward achieving
448 the goals and objectives of the treatment plan which review must
449 be submitted to the court. The Agency for Health Care
450 Administration must adopt rules for the registration of
451 qualified evaluators, the procedure for selecting the evaluators
452 to conduct the reviews required under this section, and a
453 reasonable, cost-efficient fee schedule for qualified
454 evaluators.

455 Section 8. Present paragraphs (a) through (h) of subsection
456 (2) of section 39.5085, Florida Statutes, are redesignated as
457 paragraphs (b) through (i), respectively, paragraph (a) of
458 subsection (1) is amended, and a new paragraph (a) is added to
459 subsection (2) of that section, to read:

460 39.5085 Relative Caregiver Program.—

461 (1) It is the intent of the Legislature in enacting this
462 section to:

463 (a) Provide for the establishment of procedures and
464 protocols that serve to advance the continued safety of children
465 by acknowledging the valued resource uniquely available through
466 grandparents, relatives of children, and specified nonrelatives
467 of children pursuant to subparagraph (2)(b)3. ~~(2)(a)3.~~

468 (2)

469 (a) Relatives or nonrelatives who are caring for a child and do
470 not meet the eligibility requirements for level I licensure
471 under s. 409.175 may apply for the Relative Caregiver Program.

472 Section 9. Paragraph (a) of subsection (1) of section
473 39.5086, Florida Statutes, is amended to read:

474 39.5086 Kinship navigator programs.—



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475 (1) DEFINITIONS.—As used in this section, the term:
476 ~~(a) "Fictive kin" has the same meaning as provided in s.~~
477 ~~39.4015(2)(d).~~
478 Section 10. Subsections (1), (2), (6), and (10) of section
479 39.6225, Florida Statutes, are amended to read:
480 39.6225 Guardianship Assistance Program.—
481 (1) The department shall establish and operate the
482 Guardianship Assistance Program to provide guardianship
483 assistance payments to relatives, as defined in this subsection,
484 ~~next of kin, and fictive kin~~ who meet the eligibility
485 requirements established in this section. For purposes of
486 administering the program, the term:
487 (a) "Child" means an individual who has not attained 21
488 years of age.
489 (b) "Young adult" means an individual who has attained 18
490 years of age but who has not attained 21 years of age.
491 (c) "Relative" means fictive kin, a relative as defined in
492 s. 39.01(73), or next of kin.
493 (2) To approve an application for the program, the
494 department shall determine that all of the following
495 requirements have been met:
496 (a) The child's placement with the guardian has been
497 approved by the court.
498 (b) The court has granted legal custody to the guardian
499 pursuant to s. 39.6221 ~~39.521~~ or s. 39.522.
500 (c) The guardian has been licensed to care for the child as
501 provided in s. 409.175.
502 (d) The child was eligible for foster care room and board
503 payments pursuant to s. 409.145 for at least 6 consecutive



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504 months while the child resided in the home of the guardian and
505 the guardian was licensed as a foster parent.

506 (6) Guardianship assistance benefits shall be terminated
507 if:

508 (a) The child has attained the age of 18, or such greater
509 age as the department may elect;

510 (b) The child has not attained the age of 18 and the
511 relative guardians are no longer legally responsible for the
512 support of the child; or

513 (c) The child is no longer receiving support from the
514 guardian

515 ~~(a) The child is absent from the home of the guardian for a~~
516 ~~period of at least 60 consecutive calendar days, unless the~~
517 ~~child:~~

518 ~~1. Is absent due to medical care, school attendance,~~
519 ~~runaway status, or detention in a Department of Juvenile Justice~~
520 ~~facility; and~~

521 ~~2. Continues to be under the care and custody of the~~
522 ~~guardian.~~

523 ~~(b) The court modifies the placement of the child and the~~
524 ~~guardian is no longer eligible to receive guardianship~~
525 ~~assistance benefits.~~

526 (10) The case plan must describe the following for each
527 child with a permanency goal of permanent guardianship in which
528 the guardian is pursuing ~~in receipt of~~ guardianship assistance
529 ~~payments:~~

530 (a) The manner in which the child meets program eligibility
531 requirements.

532 (b) The manner in which the department determined that



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533 reunification or adoption is not appropriate.

534 (c) Efforts to discuss adoption with the child's permanent
535 guardian.

536 (d) Efforts to discuss guardianship assistance with the
537 child's parent or the reasons why efforts were not made.

538 (e) The reasons why a permanent placement with the
539 prospective guardian is in the best interest of the child.

540 (f) The reasons why the child is separated from his or her
541 siblings during placement, if applicable.

542 (g) Efforts to consult the child, if the child is 14 years
543 of age or older, regarding the permanent guardianship
544 arrangement.

545 Section 11. Subsections (2) and (3), paragraph (a) of
546 subsection (4), and subsection (6) of section 39.6251, Florida
547 Statutes, are amended, and subsection (10) is added to that
548 section, to read:

549 39.6251 Continuing care for young adults.—

550 (2) The primary goal for a child in care is permanency. A
551 child who is living in licensed care on his or her 18th birthday
552 and who has not achieved permanency under s. 39.621 is eligible
553 to remain in licensed care under the jurisdiction of the court
554 and in the care of the department. A child is eligible to remain
555 in licensed care if he or she is:

556 (a) Completing secondary education or a program leading to
557 an equivalent credential;

558 (b) Enrolled in an institution that provides postsecondary
559 or vocational education;

560 (c) Participating in a program or activity designed to
561 promote or eliminate barriers to employment;



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562 (d) Employed for at least 80 hours per month; or
563 (e) Unable to participate in programs or activities listed
564 in paragraphs (a)-(d) full time due to a physical, intellectual,
565 emotional, or psychiatric condition that limits participation.
566 Any such barrier to participation must be supported by
567 documentation in the child's case file or school or medical
568 records of a physical, intellectual, or psychiatric condition
569 that impairs the child's ability to perform one or more life
570 activities.

571
572 The young adult must furnish documentation to the department or
573 lead agency of his or her participation in one of the programs
574 or activities listed in paragraphs (a)-(d), or his or her
575 inability to participate in one of the programs or activities as
576 provided in paragraph (e), or authorize the release of his or
577 her records to the department or lead agency.

578 (3) The permanency goal for a young adult who chooses to
579 remain in care past his or her 18th birthday is to transition to
580 independence from licensed care to independent living.

581 (4) (a) The young adult must reside in a supervised living
582 environment that is approved by the department or a community-
583 based care lead agency. The young adult shall live
584 independently, but in an environment in which he or she is
585 provided supervision, case management, and supportive services
586 by the department or lead agency. Such an environment must offer
587 developmentally appropriate freedom and responsibility to
588 prepare the young adult for adulthood. For the purposes of this
589 subsection, a supervised living arrangement may include a
590 licensed foster home, licensed group home, college dormitory,



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591 shared housing, apartment, or another housing arrangement if the
592 arrangement is approved by the community-based care lead agency
593 and is acceptable to the young adult, ~~with first choice being a~~
594 ~~licensed foster home~~. A young adult may continue to reside with
595 the same licensed foster family or group care provider with whom
596 he or she was residing at the time he or she reached the age of
597 18 years.

598 (6) A young adult who is between the ages of 18 and 21 and
599 who has left care may return to care by applying to the
600 community-based care lead agency for readmission through the
601 execution of a voluntary placement agreement. The community-
602 based care lead agency shall readmit the young adult if he or
603 she continues to meet the eligibility requirements in this
604 section.

605 (a) The department shall develop a standard procedure and
606 application packet for readmission to care to be used by all
607 community-based care lead agencies.

608 (b) Within 30 days after the young adult has been
609 readmitted to care, the community-based care lead agency shall
610 assign a case manager to update the case plan and the transition
611 plan and to arrange for the required services. Updates to the
612 case plan and the transition plan and arrangements for the
613 required services shall be undertaken in consultation with the
614 young adult. The department shall petition the court to
615 reinstate jurisdiction over the young adult. Notwithstanding s.
616 39.013(2), the court shall resume jurisdiction over the young
617 adult if the department establishes that he or she continues to
618 meet the eligibility requirements in this section.

619 (10) The department shall adopt rules to administer this



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620 section.

621 Section 12. Paragraph (d) of subsection (2) of section
622 39.701, Florida Statutes, is amended, and paragraphs (f) and (g)
623 are added to subsection (4) of that section, to read:

624 39.701 Judicial review.—

625 (2) REVIEW HEARINGS FOR CHILDREN YOUNGER THAN 18 YEARS OF
626 AGE.—

627 (d) *Orders.*—

628 1. Based upon the criteria set forth in paragraph (c) and
629 the recommended order of the citizen review panel, if any, the
630 court shall determine whether ~~or not~~ the social service agency
631 shall initiate proceedings to have a child declared a dependent
632 child, return the child to the parent, continue the child in
633 out-of-home care for a specified period of time, or initiate
634 termination of parental rights proceedings for subsequent
635 placement in an adoptive home. Amendments to the case plan must
636 be prepared as provided ~~prescribed~~ in s. 39.6013. If the court
637 finds that the prevention or reunification efforts of the
638 department will allow the child to remain safely at home or be
639 safely returned to the home, the court shall allow the child to
640 remain in or return to the home after making a specific finding
641 of fact that the reasons for the creation of the case plan have
642 been remedied to the extent that the child's safety, well-being,
643 and physical, mental, and emotional health will not be
644 endangered.

645 2. The court shall return the child to the custody of his
646 or her ~~the~~ parents at any time it determines that the
647 circumstances which caused the out-of-home placement, and issues
648 subsequently identified, have been remedied to the extent that



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649 return of the child to the home with an in-home safety plan
650 prepared or approved by the department ~~that they have~~
651 ~~substantially complied with the case plan, if the court is~~
652 ~~satisfied that reunification~~ will not be detrimental to the
653 child's safety, well-being, and physical, mental, and emotional
654 health.

655 3. If, in the opinion of the court, the social service
656 agency has not complied with its obligations as specified in the
657 written case plan, the court may find the social service agency
658 in contempt, shall order the social service agency to submit its
659 plans for compliance with the agreement, and shall require the
660 social service agency to show why the child could not safely be
661 returned to the home of the parents.

662 4. If, at any judicial review, the court finds that the
663 parents have failed to substantially comply with the case plan
664 to the degree that further reunification efforts are without
665 merit and not in the best interest of the child, on its own
666 motion, the court may order the filing of a petition for
667 termination of parental rights, regardless of ~~or not~~ the
668 time period as contained in the case plan for substantial
669 compliance has expired.

670 5. Within 6 months after the date that the child was placed
671 in shelter care, the court shall conduct a judicial review
672 hearing to review the child's permanency goal as identified in
673 the case plan. At the hearing the court shall make findings
674 regarding the likelihood of the child's reunification with the
675 parent or legal custodian. In making such findings, the court
676 shall consider the level of the parent or legal custodian's
677 compliance with the case plan and demonstrated change in



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678 protective capacities compared to that necessary to achieve
679 timely reunification within 12 months after the removal of the
680 child from the home. The court shall also consider the
681 frequency, duration, manner, and level of engagement of the
682 parent or legal custodian's visitation with the child in
683 compliance with the case plan. If the court makes a written
684 finding that it is not likely that the child will be reunified
685 with the parent or legal custodian within 12 months after the
686 child was removed from the home, the department must file with
687 the court, and serve on all parties, a motion to amend the case
688 plan under s. 39.6013 and declare that it will use concurrent
689 planning for the case plan. The department must file the motion
690 within 10 business days after receiving the written finding of
691 the court. The department must attach the proposed amended case
692 plan to the motion. If concurrent planning is already being
693 used, the case plan must document the efforts the department is
694 taking to complete the concurrent goal.

695 6. The court may issue a protective order in assistance, or
696 as a condition, of any other order made under this part. In
697 addition to the requirements included in the case plan, the
698 protective order may set forth requirements relating to
699 reasonable conditions of behavior to be observed for a specified
700 period of time by a person or agency who is before the court,¹⁷
701 and the order may require any person or agency to make periodic
702 reports to the court containing such information as the court in
703 its discretion may prescribe.

704 7. If, at any judicial review, the court determines that
705 the child shall remain in out-of-home care in a placement other
706 than with a parent, the court shall order that the department



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707 has placement and care responsibility for the child.

708 (4) REVIEW HEARINGS FOR YOUNG ADULTS IN FOSTER CARE.—During
709 each period of time that a young adult remains in foster care,
710 the court shall review the status of the young adult at least
711 every 6 months and must hold a permanency review hearing at
712 least annually.

713 (f) If the young adult elects to voluntarily leave extended
714 foster care for the sole purpose of ending a removal episode and
715 immediately thereafter executes a voluntary placement agreement
716 with the department to reenroll in extended foster care, the
717 court shall enter an order finding that the prior removal
718 episode has ended. Under these circumstances, the court
719 maintains jurisdiction and a petition to reinstate jurisdiction
720 as provided in s. 39.6251(6) (b) is not required.

721 (g)1. When a young adult enters extended foster care by
722 executing a voluntary placement agreement, the court shall enter
723 an order within 180 days after execution of the agreement which
724 determines whether the placement is in the best interest of the
725 young adult. For purposes of this paragraph, a placement may
726 include a licensed foster home, licensed group home, college
727 dormitory, shared housing, apartment, or another housing
728 arrangement, if the arrangement is approved by the community-
729 based care lead agency and is acceptable to the young adult.

730 2. When a young adult is in extended foster care, each
731 judicial review order shall provide that the department has
732 placement and care responsibility for the young adult.

733 3. When a young adult is in extended foster care, the court
734 shall enter an order at least every 12 months that includes a
735 finding of whether the department has made reasonable efforts to



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736 finalize the permanency plan currently in effect.

737 Section 13. Paragraph (a) of subsection (4) of section
738 402.56, Florida Statutes, is amended to read:

739 402.56 Children's cabinet; organization; responsibilities;
740 annual report.—

741 (4) MEMBERS.—The cabinet shall consist of 16 members
742 including the Governor and the following persons:

743 (a)1. The Secretary of Children and Families;

744 2. The Secretary of Juvenile Justice;

745 3. The director of the Agency for Persons with
746 Disabilities;

747 4. The director of the Office of Early Learning;

748 5. The State Surgeon General;

749 6. The Secretary of Health Care Administration;

750 7. The Commissioner of Education;

751 8. The director of the Statewide Guardian Ad Litem Office;

752 9. A representative ~~The director~~ of the Office of Adoption
753 and Child Protection;

754 10. A superintendent of schools, appointed by the Governor;
755 and

756 11. Five members who represent children and youth advocacy
757 organizations and who are not service providers, appointed by
758 the Governor.

759 Section 14. Present subsections (9) and (10) of section
760 409.1451, Florida Statutes, are redesignated as subsections (10)
761 and (11), respectively, paragraph (b) of subsection (2) is
762 amended, and a new subsection (9) is added to that section, to
763 read:

764 409.1451 The Road-to-Independence Program.—



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765 (2) POSTSECONDARY EDUCATION SERVICES AND SUPPORT.—
766 (b) The amount of the financial assistance shall be as
767 follows:
768 1. For a young adult who does not remain in foster care and
769 is attending a postsecondary school as provided in s. 1009.533,
770 the amount is \$1,256 monthly.
771 2. For a young adult who remains in foster care, is
772 attending a postsecondary school, as provided in s. 1009.533,
773 and continues to reside in a licensed foster home, the amount is
774 the established room and board rate for foster parents. This
775 takes the place of the payment provided for in s. 409.145(4).
776 3. For a young adult who remains in foster care, but
777 temporarily resides away from a licensed foster home for
778 purposes of attending a postsecondary school as provided in s.
779 1009.533, the amount is \$1,256 monthly. This takes the place of
780 the payment provided for in s. 409.145(4).
781 4. For a young adult who remains in foster care, is
782 attending a postsecondary school as provided in s. 1009.533, and
783 continues to reside in a licensed group home, the amount is
784 negotiated between the community-based care lead agency and the
785 licensed group home provider.
786 5. For a young adult who remains in foster care, but
787 temporarily resides away from a licensed group home for purposes
788 of attending a postsecondary school as provided in s. 1009.533,
789 the amount is \$1,256 monthly. This takes the place of a
790 negotiated room and board rate.
791 ~~6. The amount of the award may be disregarded for purposes~~
792 ~~of determining the eligibility for, or the amount of, any other~~
793 ~~federal or federally supported assistance.~~



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794 ~~6.7.~~ A young adult is eligible to receive financial
795 assistance during the months when he or she is enrolled in a
796 postsecondary educational institution.

797 (9) FINANCIAL ASSISTANCE FOR YOUNG ADULTS RECEIVING
798 SERVICES.—Financial awards to young adults receiving services
799 under subsections (2) and (3) and s. 39.6251 may be disregarded
800 for purposes of determining the eligibility for, or the amount
801 of, any other federal or federally supported assistance for
802 which the department is required to determine eligibility for to
803 administer the program.

804 Section 15. Paragraphs (e), (j), and (m) of subsection (2),
805 paragraph (b) of subsection (5), paragraphs (b) and (c) of
806 subsection (6), subsection (7), paragraph (b) of subsection (9),
807 paragraphs (b) and (c) of subsection (12), and paragraphs (b)
808 and (d) of subsection (14) of section 409.175, Florida Statutes,
809 are amended to read:

810 409.175 Licensure of family foster homes, residential
811 child-caring agencies, and child-placing agencies; public
812 records exemption.—

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

814 (e) "Family foster home" means a ~~private~~ residence licensed
815 by the department in which children who are unattended by a
816 parent or legal guardian are provided 24-hour care. The term
817 does not include an adoptive home that has been approved by the
818 department or approved by a licensed child-placing agency for
819 children placed for adoption.

820 (j) "Personnel" means all owners, operators, employees, and
821 volunteers working in a child-placing agency, ~~family foster~~
822 ~~home,~~ or residential child-caring agency who may be employed by



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823 or do volunteer work for a person, corporation, or agency that
824 holds a license as a child-placing agency or a residential
825 child-caring agency, but the term does not include those who do
826 not work on the premises where child care is furnished and have
827 no direct contact with a child or have no contact with a child
828 outside of the presence of the child's parent or guardian. For
829 purposes of screening, the term includes any member, over the
830 age of 12 years, of the family of the owner or operator or any
831 person other than a client, over the age of 12 years, residing
832 with the owner or operator if the agency ~~or family foster home~~
833 is located in or adjacent to the home of the owner or operator
834 or if the family member of, or person residing with, the owner
835 or operator has any direct contact with the children. Members of
836 the family of the owner or operator, or persons residing with
837 the owner or operator, who are between the ages of 12 years and
838 18 years are not required to be fingerprinted, but must be
839 screened for delinquency records. For purposes of screening, the
840 term also includes owners, operators, employees, and volunteers
841 working in summer day camps, or summer 24-hour camps providing
842 care for children. A volunteer who assists on an intermittent
843 basis for less than 10 hours per month shall not be included in
844 the term "personnel" for the purposes of screening if a person
845 who meets the screening requirement of this section is always
846 present and has the volunteer in his or her line of sight.

847 (m) "Screening" means the act of assessing the background
848 of personnel or level II through level V family foster homes and
849 includes, but is not limited to, employment history checks as
850 provided in chapter 435, using the level 2 standards for
851 screening set forth in that chapter.



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852 (5) The department shall adopt and amend rules for the
853 levels of licensed care associated with the licensure of family
854 foster homes, residential child-caring agencies, and child-
855 placing agencies. The rules may include criteria to approve
856 waivers to licensing requirements when applying for a child-
857 specific license.

858 (b) The requirements for licensure and operation of family
859 foster homes, residential child-caring agencies, and child-
860 placing agencies shall include:

861 1. The operation, conduct, and maintenance of these homes
862 and agencies and the responsibility which they assume for
863 children served and the evidence of need for that service.

864 2. The provision of food, clothing, educational
865 opportunities, services, equipment, and individual supplies to
866 assure the healthy physical, emotional, and mental development
867 of the children served.

868 3. The appropriateness, safety, cleanliness, and general
869 adequacy of the premises, including fire prevention and health
870 standards, to provide for the physical comfort, care, and well-
871 being of the children served.

872 4. The ratio of staff to children required to provide
873 adequate care and supervision of the children served and, in the
874 case of family foster homes, the maximum number of children in
875 the home.

876 5. The good moral character based upon screening,
877 education, training, and experience requirements for personnel
878 and family foster homes.

879 6. The department may grant exemptions from
880 disqualification from working with children or the



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881 developmentally disabled as provided in s. 435.07.

882 7. The provision of preservice and inservice training for
883 all foster parents and agency staff.

884 8. Satisfactory evidence of financial ability to provide
885 care for the children in compliance with licensing requirements.

886 9. The maintenance by the agency of records pertaining to
887 admission, progress, health, and discharge of children served,
888 including written case plans and reports to the department.

889 10. The provision for parental involvement to encourage
890 preservation and strengthening of a child's relationship with
891 the family.

892 11. The transportation safety of children served.

893 12. The provisions for safeguarding the cultural,
894 religious, and ethnic values of a child.

895 13. Provisions to safeguard the legal rights of children
896 served.

897 (6)

898 (b) Upon application, the department shall conduct a
899 licensing study based on its licensing rules; shall inspect the
900 home or the agency and the records, including financial records,
901 of the agency; and shall interview the applicant. The department
902 may authorize a licensed child-placing agency to conduct the
903 licensing study of a family foster home to be used exclusively
904 by that agency and to verify to the department that the home
905 meets the licensing requirements established by the department.
906 The department shall post on its website a list of the agencies
907 authorized to conduct such studies. Upon certification by a
908 licensed child-placing agency that a family foster home meets
909 the licensing requirements and upon receipt of a letter from a



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910 community-based care lead agency in the service area where the
911 home will be licensed which indicates that the family foster
912 home meets the criteria established by the lead agency, the
913 department shall issue the license. A letter from the lead
914 agency is not required if the lead agency where the proposed
915 home is located is directly supervising foster homes in the same
916 service area.

917
918 ===== T I T L E A M E N D M E N T =====

919 And the title is amended as follows:

920 Delete lines 2 - 36

921 and insert:

922 An act relating to child welfare; creating s. 39.0012,
923 F.S.; requiring the Department of Children and
924 Families to establish a direct-support organization to
925 assist the Children and Youth Cabinet with carrying
926 out certain purposes and responsibilities; providing
927 purposes and duties of the direct-support
928 organization; providing for a board of directors;
929 providing membership requirements; delineating
930 contract and other governance requirements; providing
931 for the future repeal of the direct-support
932 organization; amending s. 39.01, F.S.; revising
933 definitions; amending s. 39.201, F.S.; requiring the
934 central abuse hotline to accept certain reports or
935 calls for investigation for children who do not live
936 in this state; requiring the Department of Children
937 and Families to initiate an investigation when a
938 report is received from an emergency room physician;



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939 amending s. 39.303, F.S.; expanding the types of
940 reports that the department must refer to Child
941 Protection Teams; amending s. 39.4015, F.S.; revising
942 definitions; amending s. 39.402, F.S.; requiring that
943 the order for placement of a child in shelter care
944 contain a written finding specifying that the
945 Department of Children and Families has placement and
946 care responsibility for certain children; amending s.
947 39.407, F.S.; authorizing certain advanced practice
948 registered nurses to prescribe psychotropic
949 medications to certain children; revising the time
950 period within which a court must review a child's
951 residential treatment plan; amending s. 39.5085, F.S.;
952 revising eligibility for the Relative Caregiver
953 Program; amending s. 39.5086, F.S.; deleting the term
954 "fictive kin"; amending s. 39.6225, F.S.; revising who
955 the department must provide guardianship assistance
956 payments to; defining the term "relative"; revising
957 the requirements that must be met for approval of an
958 application for the Guardianship Assistance Program;
959 revising when guardianship assistance benefits must be
960 terminated; conforming provisions to changes made by
961 the act; amending s. 39.6251, F.S.; requiring a young
962 adult in extended foster care to provide certain
963 documentation or authorize release of certain records;
964 revising permanency goals for young adults in extended
965 foster care; requiring execution of a voluntary
966 placement agreement under certain circumstances;
967 requiring the department to adopt rules; amending s.



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968 39.701, F.S.; revising when a court must return a
969 child to the custody of his or her parents after
970 making certain determinations; requiring the court to
971 enter certain orders if a young adult enters extended
972 foster care; amending s. 402.56, F.S.; revising
973 membership of the Children and Youth Cabinet; amending
974 s. 409.1451, F.S.; authorizing certain financial
975 awards to be disregarded when a young adult is
976 applying for other federal assistance; amending s.
977 409.175, F.S.; revising definitions; revising
978 provisions related to the licensure of family foster
979 homes and certain child-caring and child-placing
980 agencies; requiring the department to post certain
981 information on its website; deleting