



Healthy Families Subcommittee

Meeting Packet

Wednesday, March 12, 2014

9:00 AM – 12:00 PM

Reed Hall

Will Weatherford
Speaker

Gayle B. Harrell
Chair

Committee Meeting Notice

HOUSE OF REPRESENTATIVES

Healthy Families Subcommittee

Start Date and Time: Wednesday, March 12, 2014 09:00 am
End Date and Time: Wednesday, March 12, 2014 12:00 pm
Location: Reed Hall (102 HOB)
Duration: 3.00 hrs

Consideration of the following bill(s):

HB 1019 Pub. Rec./Location of Safe Houses by Spano

Consideration of the following proposed committee bill(s):

PCB HFS 14-02 -- Human Trafficking

Workshop on the following:

PCB HFS 14-03 -- Child Protection and Child Welfare Services


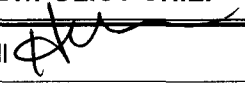
Pursuant to rule 7.12, the deadline for amendments to bills on the agenda by non-appointed members is 6:00 p.m., Tuesday, March 11, 2014.

By request of the chair, all committee members are asked to have amendments to bills on the agenda submitted to staff by 6:00 p.m., Tuesday, March 11, 2014.

NOTICE FINALIZED on 03/10/2014 16:16 by Villar.Melissa

HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: HB 1019 Pub. Rec./Location of Safe Houses
SPONSOR(S): Spano and others
TIED BILLS: HB 1017 IDEN./SIM. BILLS: SB 1436

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR or BUDGET/POLICY CHIEF
1) Healthy Families Subcommittee		Entress 	Brazzell 
2) Government Operations Subcommittee			
3) Health & Human Services Committee			

SUMMARY ANALYSIS

Human trafficking is a form of modern-day slavery, which involves the exploitation of persons for commercial sex or forced labor. HB 1017 addresses various criminal aspects of human trafficking. Safe homes and short-term safe houses provide services and residential care to victims of human trafficking.

This bill (HB 1019), which is linked to HB 1017, provides a public records exemption for information about the location of safe houses and other facilities housing victims of human trafficking, as defined in s. 787.06, F.S. Specifically, the bill provides that the information regarding the location of safe houses that is held by either the Department of Children and Families (DCF) or a unit of local government, including the following entities is confidential and exempt from s. 119.07(1), Florida Statutes, and s. 24(a), Article I of the State Constitution:

- Law enforcement agencies;
- Tax collectors;
- Clerks of courts; and
- Property appraisers.

The bill provides that the public records exemption is subject to the Open Government Sunset Review Act and stands repealed on October 2, 2019, unless reviewed and saved from repeal through reenactment by the Legislature. It also provides a statement of public necessity as required by the State Constitution.

The bill does not appear to have a fiscal impact on the state.

The bill will take effect on the same date that HB 1019 or similar legislation takes effect.

Article I, s. 24(c) of the State Constitution requires a two-thirds vote of the members present and voting for final passage of a newly created or expanded public records exemption. The bill creates a public records exemption; thus, it requires a two-thirds vote for final passage.

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. EFFECT OF PROPOSED CHANGES:

Public Records

Article I, s. 24(a) of the State Constitution sets forth the state's public policy regarding access to government records. This section guarantees every person a right to inspect or copy any public record of the legislative, executive, and judicial branches of government. The Legislature, however, may provide by general law for the exemption of records from the requirements of Article I, s. 24(a) of the State Constitution. The general law must state with specificity the public necessity justifying the exemption (public necessity statement) and must be no broader than necessary to accomplish its purpose.¹

Public policy regarding access to government records is addressed further in the Florida Statutes. Section 119.07(1), F.S., guarantees every person a right to inspect and copy any state, county, or municipal record. Furthermore, the Open Government Sunset Review Act² provides that a public record or public meeting exemption may be created or maintained only if it serves an identifiable public purpose. In addition, it may be no broader than is necessary to meet one of the following purposes:

- Allows the state or its political subdivisions to effectively and efficiently administer a governmental program, which administration would be significantly impaired without the exemption.
- Protects sensitive personal information that, if released, would be defamatory or would jeopardize an individual's safety; however, only the identity of an individual may be exempted under this provision.
- Protects trade or business secrets.

Human Trafficking

Florida law defines human trafficking as "soliciting, recruiting, harboring, providing, enticing, maintaining, or obtaining another person for the purpose of exploitation of that person."³ Human trafficking is a form of modern-day slavery, which involves the exploitation of persons for commercial sex or forced labor.⁴ Trafficking subjects victims to force, fraud, or coercion.⁵ Children experiencing this type of sexual exploitation often become bonded with their exploiters and do not see themselves as victims. These children experience trauma and are exposed to danger but are often unable to leave their exploiter to seek help.

Safe Houses

The Safe Harbor Act provided for "safe houses". Safe houses are homes for sexually exploited children who have been adjudicated dependent or delinquent and need to reside in a secure⁶ residential facility.⁷ Safe houses must provide a living environment that has set aside gender-specific, separate, and distinct living quarters for sexually exploited children and must have awake staff members on duty 24 hours a day. Safe houses must also hold a license as a family foster home or residential child-caring agency. Each facility must be appropriately licensed in this state as a residential child-caring agency as

¹ Section 24(c), Art. I of the State Constitution.

² See s. 119.15, F.S.

³ S. 787.06 (2)(d), F.S.

⁴ S. 787.06(1)(a), F.S.

⁵ Healthy Families Subcommittee Presentation by Professor Terry Coonan, FSU Human Rights Center, 1/14/14, s. 787.06(1)(a), F.S.

⁶ The term "secure" is defined as a facility providing services is supervised 24 hours a day by staff members who are awake while on duty.

⁷ S. 409.1678 (1)(b), F.S.

defined in s. 409.175, F.S., and must have applied for accreditation within 1 year after being licensed.⁸ A safe house serving children who have been sexually exploited must have available staff or contract personnel who have the clinical expertise, credentials, and training to provide:

- Security;
- Crisis intervention services;
- General counseling and victim-witness counseling;
- A comprehensive assessment;
- Residential care;
- Transportation;
- Access to behavioral health services;
- Recreational activities;
- Food;
- Clothing;
- Supplies;
- Infant care;
- Miscellaneous expenses associated with caring for these children;
- Provide necessary arrangement for or provision of educational services, including life skills services and planning services for the successful transition of residents back to the community; and
- Ensuring necessary and appropriate health care and dental care.⁹

The Department of Children and Families (DCF) or the local community-based care organization is required to assess sexually exploited dependent children for placement in a safe house if the child is older than six. The assessment is required to incorporate and address the following:

- Current and historical information from any law enforcement reports;
- Psychological testing or evaluation that has occurred;
- Current and historical information from the guardian ad litem, if one has been assigned;
- Current and historical information from any current therapist, teacher, or other professional who has knowledge of the child and has worked with the child; and
- Any other information concerning the availability and suitability of safe-house placement.

The child may be placed in a safe house if such placement is determined to be appropriate as a result of this assessment and if one is available, but placement is not required.¹⁰

There are currently two safe houses in Florida, with a total of 11 beds statewide. A third safe house is projected to open in 2014 with 7 beds.¹¹ If a trafficker learned the location of a safe house and went to the safe house, the safe house staff as well as the individuals residing in the safe house could be in danger of physical or emotional harm.

⁸ According to DCF, there are currently no entities that accredit safe houses and safe houses are not sure what type of accreditation they are required to have. No safe houses have applied for accreditation at this time.

⁹ S. 409.1671, F.S.

¹⁰ S. 39.524, F.S.

¹¹ E-mail Correspondence with the Florida Department of Children and Families, 12/20/13, on file with subcommittee staff.

Effect of Proposed Changes

Safe Houses

The bill provides a public record exemption for information about the location of safe houses and other facilities housing victims of human trafficking, as defined in s. 787.06, F.S. Specifically, the bill provides that the information regarding the location of safe houses that is held by either the Department of Children and Families (DCF) or a unit of local government, including the following entities, is confidential and exempt from s. 119.07(1), Florida Statutes, and s. 24(a), Article I of the State Constitution:

- Law enforcement agencies;
- Tax collectors;
- Clerks of courts; and
- Property appraisers.

The bill specifies that the public records exemption includes facilities operated by the Department of Children and Families (DCF) under 409.1678, F.S.¹²

The bill provides that the public records exemption is subject to the Open Sunset Review Act and stands repealed on October 2, 2019, unless reviewed and saved from repeal through reenactment by the Legislature.

The bill provides statements of public necessity as required by the State Constitution.¹³

The bill provides an effective date contingent upon the passage of HB 1017 or similar legislation.

B. SECTION DIRECTORY:

- Section 1:** Amends s. 119.0713, F.S., relating to local government agency exemptions from inspection or copying of public records.
- Section 2:** Amends s. 409.1678, F.S., relating to safe harbor for children who are victims of sexual exploitation.
- Section 3:** Creates an unnumbered section of law relating to a public necessity.
- Section 4:** Provides for an effective date.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:
None.
2. Expenditures:
None.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:
None.

¹² DCF does not operate safe houses under s. 409.1678. See part III of this analysis.

¹³ Section 24(c), Art. I of the State Constitution.

2. Expenditures:

None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

None.

D. FISCAL COMMENTS:

None.

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

Not applicable. The bill does not appear to require counties or municipalities to take an action requiring the expenditure of funds, reduce the authority that counties or municipalities have to raise revenue in the aggregate, nor reduce the percentage of state tax shared with counties or municipalities.

2. Other:

Vote Requirement

Article I, s. 24(c) of the State Constitution requires a two-thirds vote of the members present and voting for final passage of a newly created or expanded public records exemption. The bill creates a public records exemption; thus, it requires a two-thirds vote for final passage.

Public Necessity Statement

Article I, s. 24(c) of the State Constitution requires a public necessity statement for a newly-created or expanded public record or public meeting exemption. The bill expands current public record exemptions; thus, it includes a public necessity statement.

Breadth of Exemption

Article I, s. 24(c) of the State Constitution requires a newly created public record or public meeting exemption to be no broader than necessary to accomplish the stated purpose of the law. The bill creates a public record exemption for information relating to the identification and location of safe houses. The exemption does not appear to be in conflict with the constitutional requirement that the exemption must be no broader than necessary to accomplish its purpose.

B. RULE-MAKING AUTHORITY:

None.

C. DRAFTING ISSUES OR OTHER COMMENTS:

On lines 25-26, the bill states that the public records exemption applies to safe houses operated by the Department of Children and Families ; however, private providers operate safe houses. The bill should be amended to reflect this distinction.

IV. AMENDMENTS/ COMMITTEE SUBSTITUTE CHANGES

1 A bill to be entitled
 2 An act relating to public records; amending ss.
 3 119.0713 and 409.1678, F.S.; providing exemptions from
 4 public records requirements for information about the
 5 location of safe houses and such other facilities held
 6 by units of local government or the Department of
 7 Children and Families; providing for future
 8 legislative review and repeal of the exemptions;
 9 providing a statement of public necessity; providing a
 10 contingent effective date.

11
 12 Be It Enacted by the Legislature of the State of Florida:

13
 14 Section 1. Subsection (5) is added to section 119.0713,
 15 Florida Statutes, to read:

16 119.0713 Local government agency exemptions from
 17 inspection or copying of public records.—

18 (5) Information about the location of safe houses and
 19 other facilities housing victims of human trafficking, as those
 20 victims are defined in s. 787.06, held by a unit of local
 21 government including, but not limited to a law enforcement
 22 agency, tax collector, clerk of court, or property appraiser, is
 23 confidential and exempt from s. 119.07(1) and s. 24(a), Art. I
 24 of the State Constitution. Such facilities include facilities
 25 operated by the Department of Children and Families under s.
 26 409.1678. This subsection is subject to the Open Government

27 Sunset Review Act in accordance with s. 119.15 and shall stand
 28 repealed on October 2, 2019, unless reviewed and saved from
 29 repeal through reenactment by the Legislature.

30 Section 2. Subsection (5) is added to section 409.1678,
 31 Florida Statutes, to read:

32 409.1678 Safe harbor for children who are victims of
 33 sexual exploitation.—

34 (5) Information held by the department about the location
 35 of safe houses and short-term safe houses and facilities is
 36 confidential and exempt from s. 119.07(1) and s. 24(a), Art. I
 37 of the State Constitution. This subsection is subject to the
 38 Open Government Sunset Review Act in accordance with s. 119.15
 39 and shall stand repealed on October 2, 2019, unless reviewed and
 40 saved from repeal through reenactment by the Legislature.

41 Section 3. (1) The Legislature finds that it is a public
 42 necessity that information about the location of safe houses and
 43 short-term safe houses and facilities held by a unit of local
 44 government be made exempt from s. 119.07(1), Florida Statutes,
 45 and s. 24(a), Article I of the State Constitution. Safe houses
 46 and short-term safe houses are intended as refuges for sexually
 47 exploited victims from those who exploited them. If the
 48 individuals who victimized these people were able to learn the
 49 location of such safe houses, they may attempt to contact their
 50 victims, exploit their vulnerabilities, and return them to the
 51 situations in which they were victimized. Even without the
 52 return of these victims to their former situations, additional

53 | contact with those who victimized them would have the effect of
 54 | continuing their victimization and inhibit their recoveries.
 55 | Therefore, it is the finding of the Legislature that such
 56 | identifying information must be made confidential and exempt
 57 | from public disclosure.

58 | (2) The Legislature finds that it is a public necessity
 59 | that information about the location of safe houses and short-
 60 | term safe houses and facilities held by the Department of
 61 | Children and Families be made exempt from s. 119.07(1), Florida
 62 | Statutes, and s. 24(a), Article I of the State Constitution.
 63 | Safe houses and short-term safe houses are intended as refuges
 64 | for sexually exploited children from those who exploited them.
 65 | If the individuals who victimized such children were able to
 66 | learn the location of such safe houses, they may attempt to
 67 | contact their victims, exploit their vulnerabilities, and return
 68 | them to the situations in which they were victimized. Even
 69 | without the return of these child victims to their former
 70 | situations, additional contact with those who victimized them
 71 | would have the effect of continuing their victimization and
 72 | inhibit their recoveries. Therefore, it is the finding of the
 73 | Legislature that such identifying information must be made
 74 | confidential and exempt from public disclosure.

75 | Section 4. This act shall take effect on the same date
 76 | that HB 1017 or similar legislation relating to human
 77 | trafficking takes effect, if such legislation is adopted in the
 78 | same legislative session or an extension thereof and becomes a

HB 1019

2014

79 | law.



Amendment No.

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED _____ (Y/N)
 ADOPTED AS AMENDED _____ (Y/N)
 ADOPTED W/O OBJECTION _____ (Y/N)
 FAILED TO ADOPT _____ (Y/N)
 WITHDRAWN _____ (Y/N)
 OTHER _____

1 Committee/Subcommittee hearing bill: Healthy Families
 2 Subcommittee
 3 Representative Spano offered the following:
 4

Amendment (with title amendment)

6 Remove everything after the enacting clause and insert:
 7 Section 1. Subsection (5) is added to section 409.1678,
 8 Florida Statutes, to read:

9 409.1678 Safe harbor for children who are victims of
 10 sexual exploitation.—

11 (5) (a) Information held by an agency as defined in s.
 12 119.011 about the location of safe houses and safe foster homes
 13 is confidential and exempt from s. 119.07(1) and s. 24(a), Art.
 14 I of the State Constitution.

15 (b) Information about the location of safe houses and safe
 16 foster homes may be provided to an agency, as defined in s.
 17 119.011, as necessary to maintain health and safety standards



Amendment No.

18 and to address emergency situations in the safe house and safe
19 foster home.

20 (c) This subsection is subject to the Open Government
21 Sunset Review Act in accordance with s. 119.15 and shall stand
22 repealed on October 2, 2019, unless reviewed and saved from
23 repeal through reenactment by the Legislature.

24 Section 2. (1) The Legislature finds that it is a public
25 necessity that information about the location of safe houses and
26 safe foster homes held by an agency, as defined in s. 119.011,
27 Florida Statutes, be made confidential and exempt from s.
28 119.07(1), Florida Statutes, and s. 24(a), Article I of the
29 State Constitution. Safe houses and safe foster homes are
30 intended as refuges for sexually exploited victims from those
31 who exploited them. If the individuals who victimized these
32 people were able to learn the location of such safe houses, they
33 may attempt to contact their victims, exploit their
34 vulnerabilities, and return them to the situations in which they
35 were victimized. Even without the return of these victims to
36 their former situations, additional contact with those who
37 victimized them would have the effect of continuing their
38 victimization and inhibit their recoveries. Additionally,
39 knowledge about the location of safe houses and safe foster
40 homes could enable other individuals to locate and attempt to
41 victimize the residents. Therefore, it is the finding of the
42 Legislature that such information must be made confidential and
43 exempt from public disclosure.

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Amendment No.

44 Section 3. This act shall take effect on the same date
45 that HB 1017 or similar legislation relating to human
46 trafficking takes effect, if such legislation is adopted in the
47 same legislative session or an extension thereof and becomes a
48 law.

49
50
51

52 -----

53 **T I T L E A M E N D M E N T**

54 Remove everything before the enacting clause and insert:
55 An act relating to public records; amending s. 409.1678, F.S.;
56 providing exemptions from public records requirements for
57 information about the location of safe houses and safe foster
58 homes held by an agency; providing for future legislative review
59 and repeal of the exemptions; providing a statement of public
60 necessity; providing a contingent effective date.

PCB HFS 14-02
Changes from the Original Draft

Line Number on Draft Bill	Line Number on HFS 14-02 3/12/14 mtg.	Change	Explanation
All	All	Reorganized sections of the bill.	Ease of reading.
N/A	79-80	Added extent of substance abuse by the sexually exploited child as a consideration in making placement decisions.	Addresses issue of substance abuse, which is prevalent among sexually exploited children.
295-300	122-127	Included children's advocacy centers as an entity to be consulted on the development of the local plan to develop local capacity; deleted CBC and social services and local guardians ad litem as entities to consult.	Request of Rep. Perry to include children's advocacy centers; deleted guardians ad litem in error; CBC's are already required to make the plan.
313	140	Changed the title from DCF "circuit administrator" to "regional director".	Conforms to current DCF organization.
76-141	195-245	Reorganized the requirements for safe houses and safe foster homes.	Increases clarity and ease of reading, and ensures that safe foster homes and safe houses are subject to appropriate requirements.
97	208	Specifies that the requirement to have awake staff members on duty 24 hours a day applies only to safe houses.	Safe foster homes have foster parents, not staff, and thus cannot meet this requirement.
108	223	Required safe foster homes to also provide certain services and conduct comprehensive assessments of residents' service needs.	Makes requirements applicable to both safe houses and safe foster homes, so that residents' needs are met in both facilities.
131-132	248-249	Removed requirement that "DCF direct" CBC's to ensure safe foster home parents receive specialized training.	Deletes unnecessary provision.
138-139	251-252	Specified that DCF may establish additional criteria for certifying safe houses, not just safe foster homes.	Ensures that DCF can adopt rules necessary to administer the program.
153-154	272	Directed DCF to "facilitate the development of" a secure safe house rather than to "certify one secure safe house".	Clarifies that the secure facility receives certification as a safe house, rather than specialized certification as a <i>secure</i> safe house.

PCB HFS 14-02
Changes from the Original Draft

Line Number on Draft Bill	Line Number on HFS 14-02 3/12/14 mtg.	Change	Explanation
158; 162-165; 174; 177-179; 183; 188; 194; 197-198	270; 274-275; 291; 294-295; 298; 303; 308; 311; 313	Used "sexually exploited child" or "child" rather than "sexually exploited dependent child".	Allows the secure safe house to also serve children who are just entering the dependency system, not only those who have been in the system longer and are adjudicated dependent.
193	305	Replaced "or" with "and" to require the secure safe house to use all of the security features specified.	Increases security of the facility.
516	376-377	Added "if a safe house or safe foster home is unavailable" as a reason for placing a child in an alternate setting.	Since so few safe house beds are available at this time, addresses a likely scenario.
N/A	395-406	Added legislative findings.	Strengthens the legal basis for placement in the secure safe home.
360-361	434	Removed phrase "but not limited to" to limit behavior that may serve as evidence of likelihood of child endangering others to only that behavior cited in the law.	Limits discretion regarding who may be placed in the secure safe house to strengthen legal basis of placement.
366	440-441	Added "as determined by the department or community-based care lead agency" to describe who makes the determination whether less restrictive settings are likely to be effective for a specific child in lieu of secure safe house placement.	Assigns specific authority.
369	444-445	Removed "dependent" and added "who is the subject of an open investigation or under the supervision of the court".	Allows the secure safe house to serve children who are at the initial stage of entering the dependency system.
372	439	Deleted "shall" and added "may" to clarify that the secure safe house has the discretion whether or not to admit a child for evaluation.	Accommodates issue that some children may ultimately not be appropriate to be placed in the safe house for evaluation (for instance, due to severe drug addiction or mental illness) even if they are brought there.

PCB HFS 14-02
Changes from the Original Draft

Line Number on Draft Bill	Line Number on HFS 14-02 3/12/14 mtg.	Change	Explanation
378	446	Deleted "including but not limited to" to clarify that the secure safe house must provide information to only those persons listed in the bill (child's parent or guardian, foster parent, case manager, and guardian ad litem).	Preserves privacy of the child and removes discretion of the safe house.
381-382	N/A	Removed language permitting placement without judicial involvement if the child's parent consents.	Strengthens the legal protections for children.
N/A	448-449	Added requirement for the court to appoint a lawyer if the child does not have one.	Strengthens the legal protections for children.
385	452-453	Added language to clarify that the professional conducting the evaluation for placement in the secure safe house must have training in working with sexually exploited children.	Provides for evaluations based on knowledge of the population and its challenges.
383-425	450-492	Revised language regarding evaluation and determination of whether a child meets criteria for placement for treatment in the secure safe house.	Provides greater clarity and guidance regarding the assessment process for admission to the secure safe house.
435	501	Deleted "shall" and added "may" to clarify that DCF has the discretion whether or not to file a petition to admit a child to the secure safe house.	Accommodates instances where for some reason the child cannot or should not be admitted (such as if the secure safe house has no available beds).
441-442	508	Provided timeframes for hearings and court action.	Strengthens the legal protections for children.
376-449	459-544	Used the term "placement for evaluation" in lieu of "admittance" and "placement for treatment" in lieu of "placement", "extended placement", or "admission".	Emphasizes the therapeutic nature of the longer-term placement and avoids confusion with placement for evaluation.
452	519	Replaced the term "aftercare" with "care appropriate for the child".	Avoids confusion, since the term "aftercare" is defined elsewhere in Florida Statutes.
455-465	523-527	Required staff from the child's home school district to be involved with treatment and discharge planning.	Ensures consideration of child's educational needs.

PCB HFS 14-02
Changes from the Original Draft

Line Number on Draft Bill	Line Number on HFS 14-02 3/12/14 mtg.	Change	Explanation
466-481	532-547	Amended language to provide clarification on the reporting and review process; required reviews after the first 20, rather than the first 30, days; added parents or guardians to list of individuals who receive a report of the child's progress; provided court review of the child's treatment plan within 35 days, rather than 45 days.	Clarifies process. Also, ideally most stays will be short-term in nature, and thus a shorter review period would be appropriate to gauge progress and adjust accordingly.
491	557-560	Specified that after 9 months, there must be a court hearing to determine an appropriate setting and appropriate services for the child after 10 months.	Answers question about what happens if a child reaches maximum length of stay at the secure safe house.
556	576	Changed year in which the OPPAGA report is due from 2016 to 2017.	Provides additional time for safe houses and safe foster homes to be established and for OPPAGA to review them.

HOUSE HEALTHY FAMILIES SUBCOMMITTEE
PCB HFS 14-02
HUMAN TRAFFICKING PCB PROVISIONS
MARCH 12, 2014

Goal: To provide direction, structure, and accountability for public investment while facilitating enhanced coordination with and continued innovation and growth in provider and community efforts as new approaches are tested and best practices emerge.

#	Lines	Issue
1		Foster the wider implementation of key administrative practices to better identify and serve sexually exploited children.
1.1	66-69	Include community children as well as dependent children in the definition of sexually exploited children to allow them to be served in safe houses and safe foster homes.
1.2	235-268	Require DJJ, DCF, and CBC's to use statewide one or more initial screening and assessment instruments for identifying sexually exploited children and determining their service needs. <ul style="list-style-type: none"> • Must work with other entities interested in human trafficking in the development/adoption of any instruments. • DCF shall validate the instruments if possible. • Provides criteria for placement in safe houses and safe foster homes.
1.3	269-281	Require DCF and the CBC's to have specially trained child protective investigators and case managers, respectively, for children alleged, suspected, or known to be victims of sexual exploitation.
1.4	282-290	Require multidisciplinary staffings for children who are involved in multiple systems. <ul style="list-style-type: none"> • These include at a minimum the child's guardian ad litem, juvenile justice system staff, the school district staff, service providers, and victim advocates.
1.5	291-312	Require DCF and CBC's to have coordinated plans for developing capacity to serve sexually exploited children as well as specific protocols for responding to the needs of individual victims.
1.6	328-336	Require DCF, DJJ, and the CBC's to participate on any local human trafficking task forces to the extent possible. <ul style="list-style-type: none"> • DCF is directed to seek to develop them in circuits where none are active.

2		Clarify and strengthen current policies to increase the availability of services of consistent, acceptable levels of quality.
2.1	76-77; 142-151	Require DCF to certify safe houses and safe foster homes. <ul style="list-style-type: none"> • Requires inspection and renewal, and provides for revocation if necessary.

**HOUSE HEALTHY FAMILIES SUBCOMMITTEE
PCB HFS 14-02
HUMAN TRAFFICKING PCB PROVISIONS
MARCH 12, 2014**

2.2	84-128	<p>More clearly define the requirements for safe houses.</p> <ul style="list-style-type: none"> • Must be licensed residential child-caring facilities. • Require to serve human trafficking victims separately from any other children, in age appropriate, single-sex groups. • Mandate trauma-informed/strength-based care. • Require appropriate security features that must allow children to exit if they choose. • Amends list of services safe houses are required to provide if needed by children they serve.
2.3	129-141	<p>Establish “safe foster homes” and provide requirements.</p> <ul style="list-style-type: none"> • Similar to requirements for safe houses but do not require 24 hour awake staff. • Must be licensed foster homes. • Requires intensive training for foster parents.
2.4	77-83	<p>Clarify that only safe houses and safe foster homes certified by DCF can receive public money specifically allocated to serve sexually exploited children.</p>
2.5	512-516	<p>Provide that a sexually exploited child may be placed in a setting other than a safe house or safe foster home if the other setting is more appropriate to his or her needs and his or her behaviors can be managed in that setting so that they do not endanger other children being served in that setting, or if a safe house or safe foster home is not available.</p>
2.6	N/A	<p>Remove references to “short-term safe houses”.</p>


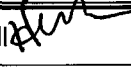
3		<p>Take steps to develop, test, and evaluate new service delivery models to determine their viability and effectiveness.</p>
3.1	152-213	<p>Authorize DCF to test a secure safe house on a pilot basis.</p> <ul style="list-style-type: none"> • Only dependent children could be placed in the facility. • Judicial determination and oversight required. • Provides for appointment of a guardian ad litem and lawyer. • Limited to those with the most intensive needs. • Maximum of 15 beds. • Envisioned to be short term (generally up to 60 days) but permits placement up to 10 months. • Security must require locked doors with facility staff assistance for any entrance into or exit from building. • DCF must approve all placements in consultation with the CBC’s. • Requires treatment and discharge plans. • Provides for a formal evaluation of the facility’s effectiveness in meeting the treatment and security needs of sexually exploited children and its cost-effectiveness, and requires recommendations regarding continued operation and any changes or enhancements.

**HOUSE HEALTHY FAMILIES SUBCOMMITTEE
PCB HFS 14-02
HUMAN TRAFFICKING PCB PROVISIONS
MARCH 12, 2014**

3.2	339-427; 430-491	<p>Provide for a placement process for the secure safe house.</p> <ul style="list-style-type: none"> • Criteria include repeatedly running away, having a strong bond with exploiter, and recruiting other children to commercial sex trade. • Child cannot be placed if a less restrictive environment will meet needs. • Child must have a guardian ad litem. • Department can place for assessment by psychiatrist, psychologist, licensed mental health counselor, or licensed clinical social worker. • If placement determined to meet child’s needs, DCF can petition court for extended placement (child remains in secure safe house pending decision). • Safe house must report on child’s progress, and courts must regularly review.
3.3	541-558	<p>Require an OPPAGA study of the extent of child sexual exploitation and effectiveness of safe houses in Florida.</p>

HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: PCB HFS 14-02 Human Trafficking
SPONSOR(S): Healthy Families Subcommittee
TIED BILLS: **IDEN./SIM. BILLS:**

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR or BUDGET/POLICY CHIEF
Orig. Comm.: Healthy Families Subcommittee		Entress 	Brazzell 

SUMMARY ANALYSIS

Sexual exploitation of a child is defined in s. 39.01(67)(g), F.S., which includes allowing, encouraging, or forcing a child to solicit for or engage in prostitution; engage in a sexual performance, as defined by chapter 827; or participate in the trade of sex trafficking as specified in s. 796.035, F.S. Children experiencing sexual exploitation often become bonded with their exploiters and do not see themselves as victims. These children experience trauma and are exposed to danger, but are often unable to leave their exploiter to seek help. Safe homes provide residential care and services to sexually exploited children.

S. 409.1678, F.S., governs safe homes. The bill changes statutory requirements for safe houses to establish standards for residential treatment of sexually exploited children and authorizes safe foster homes. The bill creates a certification program for safe houses and safe foster homes at the Department of Children and Families (DCF), and requires certification in order for these facilities to accept state funds specifically allocated to care for sexually exploited children. The bill allows DCF to operate one secure safe house as a pilot program, sets requirements for that safe house, provides for judicial oversight, and requires an evaluation of the pilot program.

The bill also makes administrative changes to the requirements for DCF and the community-based care agencies (CBCs) related to sexually exploited children. The bill requires DCF to create or adopt initial screening and assessment instruments for use in identifying and serving sexually exploited children, and allows a child to be placed in a safe house if the assessment instrument determines that is the most appropriate setting and a safe house is available. The bill also requires DCF, the CBCs, and the Department of Juvenile Justice (DJJ) to specially train certain employees to work with sexually exploited children. The bill requires DCF and the CBCs to hold multidisciplinary staffings to coordinate services for sexually exploited children.

The bill requires DCF and the CBCs to plan and to have response protocols in place regarding serving sexually exploited children. The bill also requires DCF, the CBCs, and DJJ to participate on any local task forces related to this population.

The bill requires the Office of Program Policy Analysis and Government Accountability to conduct a study on commercial sexual exploitation of children in Florida and specifies topics for inclusion in the study.

The bill has an effective date of July 1, 2014.

The bill has a negative indeterminate fiscal impact to DCF.

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. EFFECT OF PROPOSED CHANGES:

Present Situation

Human Trafficking

Florida law defines human trafficking as “soliciting, recruiting, harboring, providing, enticing, maintaining, or obtaining another person for the purpose of exploitation of that person.”¹ Human trafficking is a form of modern-day slavery, which involves the exploitation of persons for commercial sex or forced labor.² Trafficking often subjects victims to force, fraud, and coercion.³

There are no definitive statistics on the extent of human trafficking. The U.S. Department of State estimates that as many as 27 million victims are being trafficked worldwide at any given time. They also estimate that there were approximately 40,000 victims being trafficked in the United States in 2012.⁴ Florida is estimated to have the third highest rate of human trafficking in the United States, following New York and California.⁵

Commercial Sex Trafficking of Minors

Human trafficking involving commercial sex is also known as commercial sexual exploitation or commercial sex trafficking. The United States Trafficking Victims Protection Act of 2000 defines sex trafficking as the recruitment, harboring, transportation, provision, or obtaining of a person for the purpose of a commercial sex act.⁶

In cases of commercial sex trafficking of minors, pimps often operate as the primary domestic sex traffickers and target particularly vulnerable youth, such as runaway and homeless youth.⁷ Pimps may engage in a “grooming” process where a child is showered with gifts, treats, and compliments in order to earn his or her trust.⁸ Often the children have low self-esteem and may come from broken families or have past childhood trauma which may include sexual or physical abuse.⁹ This makes the children easier targets because they are emotionally vulnerable, looking for someone to love and care for them. After the pimp earns the child’s trust the pimp may engage in physical, sexual, and/or emotional abuse of the child.¹⁰ The effect is to psychologically and emotionally break the child so that he or she becomes completely dependent on the pimp.¹¹ Psychologists and clinicians call this phenomenon “traumatic bonding.”¹² This occurs where a person has dysfunctional attachment that occurs in the presence of danger, shame, or exploitation. These situations often include seduction, deception or betrayal, and some form of danger or risk is always present.¹³ While this is a common way that commercial sexual

¹ S. 787.06(2)(d), F.S.

² S. 787.06(1)(a), F.S.

³ *Id.*

⁴ *Trafficking in Persons Report 2013*, U.S. Department of State, accessible at: <http://www.state.gov/j/tip/rls/tiprpt/2013/>, last accessed January 6, 2014.

⁵ Healthy Families Subcommittee Presentation by Professor Terry Coonan, FSU Human Rights Center, January 14, 2014.

⁶ Trafficking Victims Protection Act of 2000, 22 USC 7101.

⁷ Sex Trafficking of Children in the United States, The Polaris Project, accessible at: <http://www.polarisproject.org/what-we-do/policy-advocacy/prosecuting-traffickers/895-sex-trafficking-of-minors> (last accessed March 2, 2014).

⁸ *Id.*

⁹ *Id.*

¹⁰ *Id.*

¹¹ *Id.*

¹² *Id.*

¹³ *Id.*

exploitation occurs, some children are commercially sexually exploited by family members or organized networks.¹⁴

The Department of Homeland Security (DHS) reports that each year as many as 100,000-300,000 children in the United States are at risk of being trafficked for commercial sex in the United States.¹⁵

Commercial Sex Trafficking of Minors in Florida

The Department of Children and Families (DCF) verified 182 victims of commercial sex trafficking in FY 2012-13. Of these, nine victims were exploited by their caregiver, and 27 victims were removed from their caregivers. DCF also identified an additional 185 children who may be at risk of becoming commercial sexual exploitation victims.^{16, 17} According to DCF, there are likely many more victims in Florida than have been identified.

Safe Harbor Act

The Florida Safe Harbor Act of 2012 allows sexually exploited children to be treated as dependent children¹⁸ rather than delinquent children.¹⁹ The act amended Florida law to make child prostitution abuse of a child, rather than a criminal act by the child, and allows children who are victims of sexual exploitation to be adjudicated dependent.²⁰

Law enforcement officers are required to deliver a minor taken into custody to the DCF when there is probable cause to believe he or she has been sexually exploited.²¹ Safe houses and short-term safe houses were created by the Safe Harbor Act, and DCF is authorized to place sexually exploited children in these facilities.²²

Efforts by Department of Children and Families and the Department of Juvenile Justice

¹⁴ *Id.*

¹⁵ *Human Trafficking 101 for School Administrators and Staff*, Blue Campaign, The Department of Homeland Security, accessible at: <http://www.google.com/url?sa=t&rct=j&q=&esrc=s&frm=1&source=web&cd=1&cad=rja&ved=0CCoQFjAA&url=http%3A%2F%2Fwww.dhs.gov%2Fsites%2Fdefault%2Ffiles%2Fpublications%2Fblue-campaign%2FBlue%2520Campaign%2520-%2520Human%2520Trafficking%2520101%2520for%2520School%2520Administrators%2520and%2520Staff.pdf&ei=4DvMU6oO4vrkQeAsYDoBg&usq=AFQjCNGLUeAOhuEVFzRuCTYISWLOrgTQ7w&sig2=AskcWjhjSulLHF6D7LHrcg>, (last accessed January 7, 2014).

¹⁶ Florida Department of Children and Families Annual Human Trafficking Report 2012-13 Federal Fiscal Year.

¹⁷ To determine whether a child is at risk of becoming a commercial sexual exploitation victim, DCF looked at three additional data sets in their IT system for dependent children (FSFN). The three indicators in FSFN indicate that the child possibly has involvement in sexual exploitation, is possibly involved in prostitution, or were previously verified as a victim of human trafficking.

¹⁸ A child who is found to be dependent is a child who pursuant to ch. 39, F.S., is found by the court:

- (a) To have been abandoned, abused, or neglected by the child's parent or parents or legal custodians;
- (b) To have been surrendered to the department, the former Department of Health and Rehabilitative Services, or a licensed child-placing agency for purpose of adoption;
- (c) To have been voluntarily placed with a licensed child-caring agency, a licensed child-placing agency, an adult relative, the department, or the former Department of Health and Rehabilitative Services, after which placement, under the requirements of this chapter, a case plan has expired and the parent or parents or legal custodians have failed to substantially comply with the requirements of the plan;
- (d) To have been voluntarily placed with a licensed child-placing agency for the purposes of subsequent adoption, and a parent or parents have signed a consent pursuant to the Florida Rules of Juvenile Procedure;
- (e) To have no parent or legal custodians capable of providing supervision and care;
- (f) To be at substantial risk of imminent abuse, abandonment, or neglect by the parent or parents or legal custodians; or
- (g) To have been sexually exploited and to have no parent, legal custodian, or responsible adult relative currently known and capable of providing the necessary and appropriate supervision and care.

¹⁹ S. 39.001(4)(b)(2), F.S.

²⁰ S. 39.01(67), F.S.; however, child prostitution is not considered sexual abuse of a child if the child is under arrest or being prosecuted in a delinquency or criminal proceed for a violation in chapter 796 (offenses related to prostitution) or forcing a child to solicit for or engage in prostitution, engage in a sexual performance, as defined by chapter 827, or participate in the trade of sex trafficking as provided in s. 796.035.

²¹ S. 39.401(2)(b), F.S.

²² S. 409.1678, F.S.

The Department of Juvenile Justice (DJJ) conducted a tri-county pilot project implementing a screening tool for commercial sexual exploitation of children in 2012-2013. In total, there were 353 individual youth screened. Of the 353 screenings, 42 youth were verified as victims of commercial sexual exploitation. This means that 11.9% of the youth that had a history of running away (the prerequisite for a screening), and were screened, were ultimately verified by DCF as a sexual exploitation victim.²³

DCF primarily becomes aware of minors who are sexually exploited due to a call to the child abuse hotline or because the child is in the dependency system. As with any allegation of abuse, when allegations of commercial sexual exploitation of a child are reported to DCF's child abuse hotline and the hotline employee believes that the report meets the statutory definition of abuse, abandonment or neglect, an investigation by a child protective investigator is triggered.²⁴ If the allegation is verified and the child has no known parent, legal custodian, or responsible adult relative who is capable of providing the necessary and appropriate supervision and care, DCF may petition to have the child adjudicated dependent.²⁵

Community-based care lead agencies (CBCs) determine placements for children who have been adjudicated dependent.²⁶ According to DCF, CBCs may also provide services to victims of human trafficking who are not adjudicated dependent as a means of preventing future involvement in the child welfare system. DCF has taken steps to strengthen the infrastructure for serving victims of human trafficking, such as training its child protective investigators and participating in regional task forces.

DJJ has also been working to identify and provide services to human trafficking victims. In addition to the pilot project cited above, the agency secretary chairs the Florida Children and Youth Cabinet's Human Trafficking Workgroup.²⁷ The workgroup focuses on identifying ways in which Florida can end child sex trafficking. The workgroup has representation from the Governor's Office of Adoption and Child Protection, DCF, DJJ, the Florida State University Center for the Advancement of Human Rights and other stakeholders. Workgroup members have begun researching best practices throughout the nation as well as monitoring proposed legislation addressing child sex trafficking.²⁸

Human Trafficking Task Forces

Many programs for identifying and providing services for human trafficking victims have emerged through local efforts, which are unique to each community. Human trafficking task forces began as a way to raise awareness, coordinate responses, and share information regarding available services. There are nineteen regional task forces dedicated to fighting human trafficking developed throughout Florida.²⁹ The task forces consist of community members involved in human trafficking issues in that area of the state. This may include law enforcement, providers, schools, and faith based organizations. DCF is involved in the leadership in all task forces. The task forces meet at least monthly and operate according to the community's needs.

Services for Victims of Human Trafficking in Florida

Serving victims of human trafficking presents challenges for a variety of reasons.³⁰ These children often do not see themselves as exploited or victims and thus will not self-identify. Instead, they often develop a "trauma bond" with the traffickers, and see themselves as a companion to the trafficker.³¹ These

²³ Sexual Exploitation of Youth, Department of Juvenile Justice, January 23, 2014.

²⁴ S. 39.201(2)(a), F.S.

²⁵ S. 39.01(15)(g), F.S.

²⁶ E-mail correspondence with the Florida Department of Children and Families, December 20, 2013, on file with subcommittee staff.

²⁷ Florida Children and Youth Cabinet: Human Trafficking Workgroup, accessible at: <http://www.flgov.com/childrens-cabinet-human-trafficking-workgroup/> (last accessed February 2, 2014).

²⁸ *Id.*

²⁹ The task forces are in the following counties: Alachua, Bay, Broward, Collier, Duval, Escambia, Hernando, Lake, Leon, Manatee, Marion, Martin, Miami-Dade, Okaloosa, Orange, Palm Beach, Pinellas, Polk, and St. Johns.

³⁰ Testimony from the panel of providers for victims of human trafficking, Healthy Families Subcommittee, February 19, 2014.

³¹ Testimony from the Detective McBride, Healthy Families Subcommittee, February 15, 2014.

children often run away from their placements, including from safe houses.³² In a DJJ pilot program, DJJ found that of 64% of children who were confirmed victims of commercial exploitation had a history of over 5 instances of running away.³³ Victims may also try to recruit other children from their placements to go work for the pimp.³⁴

Services are not consistently available across the state.³⁵ Availability depends on the local response which has emerged to meet the challenge in that area.³⁶ Children's family situations also vary.³⁷ Some children come from the dependency system, but others have a family which wants to remain involved with them and to help.³⁸ There is also not a standardized assessment tool for identifying victims,³⁹ and due to inconsistent training, the level of awareness of the signs of victimization and appropriate responses varies among personnel.⁴⁰

Residential Services - Safe Houses

The Safe Harbor Act in 2012 provided for "safe houses". Safe houses are homes for sexually exploited children who have been adjudicated dependent or delinquent and need to reside in a secure⁴¹ residential facility.⁴² Safe houses must provide a living environment that has set aside gender-specific, separate, and distinct living quarters for sexually exploited children and must have awake staff members 24 hours a day. Safe houses must also hold a license as a family foster home or residential child-caring agency. Each facility must be appropriately licensed in this state as a family foster home or a residential child-caring agency as defined in s. 409.175, F.S., and must have applied for accreditation within 1 year after being licensed.⁴³ A safe house serving children who have been sexually exploited must have available staff or contract personnel who have the clinical expertise, credentials, and training to provide:

- Security;
- Crisis intervention services;
- General counseling and victim-witness counseling;
- A comprehensive assessment;
- Residential care;
- Transportation;
- Access to behavioral health services;
- Recreational activities;
- Food;
- Clothing;
- Supplies;
- Infant care;
- Miscellaneous expenses associated with caring for these children;
- Provide necessary arrangement for or provision of educational services, including life skills services and planning services for the successful transition of residents back to the community; and

³² Testimony from the panel of providers for victims of human trafficking, Healthy Families Subcommittee, February 19, 2014.

³³ Sexual Exploitation of Youth, Department of Juvenile Justice, January 23, 2014.

³⁴ Testimony from the panel of providers for victims of human trafficking, Healthy Families Subcommittee, February 19, 2014.

³⁵ Testimony from the Detective McBride, Healthy Families Subcommittee, February 15, 2014.

³⁶ *Id.*

³⁷ *Id.*

³⁸ *Id.*

³⁹ E-mail correspondence with the Department of Children and Families, December 23, 2013, on file with committee staff.

⁴⁰ Testimony from the Detective McBride, Healthy Families Subcommittee, February 15, 2014.

⁴¹ The term "secure" is defined as a facility which is supervised 24 hours a day by staff members who are awake while on duty.

⁴² S. 409.1678 (1)(b), F.S.

⁴³ According to DCF, there are currently no entities that accredit safe houses and safe houses are not sure what type of accreditation they are required to have. No safe houses have applied for accreditation at this time.

- Ensuring necessary and appropriate health care and dental care.⁴⁴

DCF is required to assess dependent children for placement in a safe house if the child is older than six. The assessment is required to incorporate and address the following:

- Current and historical information from any law enforcement reports;
- Psychological testing or evaluation that has occurred;
- Current and historical information from the guardian ad litem, if one has been assigned;
- Current and historical information from any current therapist, teacher, or other professional who has knowledge of the child and has worked with the child; and
- Any other information concerning the availability and suitability of safe-house placement.

The child may be placed in a safe house if such placement is determined to be appropriate as a result of this assessment and if one is available, but placement is not required.⁴⁵ There are currently two safe houses in Florida, with a total of 11 beds statewide. A third safe house is projected to open in 2014 with 7 beds.⁴⁶

Residential Services - Therapeutic Foster Homes

The Citrus Health Network developed the Citrus Helping Adolescents Negatively Impacted by Commercial Exploitation (CHANCE) Program in South Florida.⁴⁷ The program uses therapeutic foster care and a community response team for victims of commercial sexual exploitations.⁴⁸ The program places children in a therapeutic foster home, where only one child is placed.⁴⁹ The parents receive specialized training for this population. Foster parents are required to be available 24 hours per day, 7 days per week, to respond to crises or the need for special therapeutic interventions.⁵⁰ The foster homes are also required to have an advanced alarm system to alert the foster parents of intruders and allow the parents to be aware if the child is leaving the home.⁵¹ The CHANCE program also includes the following intensive clinical and support services:

- Assessment and evaluation of the child and the family;
- Individual therapy 2-5 times per week with a therapist trained in trauma focused-cognitive behavioral therapy and motivational interviewing;
- Family therapy available as necessary;
- Assignment of a life coach who is a survivor of commercial sexual exploitation for each child;
- Assignment of a peer mentor to provider peer support and encouragement;
- Clinical staff available 24/7 for crisis management or supportive intervention;
- Certified behavioral analyst services to address the behavioral needs of this population;
- Targeted case management to facilitate linkage to all appropriate support services;
- Regular monitoring by the treatment team to ensure all service and treatment plan goals are consistently pursued; and
- Group therapy with other survivors of commercial sex exploitation.

The University of South Florida is contracted to conduct an evaluation of the CHANCE program. The evaluation will be available in November 2014.⁵²

Residential Services - Specialized Group Placements

⁴⁴ S. 409.1671, F.S.

⁴⁵ S. 39.524, F.S.

⁴⁶ E-mail correspondence with the Florida Department of Children and Families, December 20, 2013, on file with subcommittee staff.

⁴⁷ Testimony from Human Trafficking Panel, Healthy Families Subcommittee Meeting, February 19, 2014.

⁴⁸ *Id.*

⁴⁹ *Id.*

⁵⁰ *Id.*

⁵¹ *Id.*

⁵² *Id.*

Specialized group placements are also available to serve commercially sexually exploited children. These group placements do not meet the statutory criteria to be safe houses, but have specialized programs serving sexually exploited children. These facilities may also serve children who have not experienced sexual exploitation. OASIS offers group placements for children served by DCF and DJJ as well as children not involved in either system.⁵³ To participate in its program for sex trafficking victims, the victims must be placed there by their caregivers. This program serves both boys and girls. The OASIS program was funded through a specific legislative line item.⁵⁴ Other providers with specialized programs that are not designated as safe houses include Chrysalis, Images of Glory, and Deveraux.⁵⁵

Other victims of human trafficking have been placed with parents or relatives, in mental health facilities, in substance abuse facilities, in therapeutic foster homes, in foster care, in DJJ detention centers, or remained in their current placement, after identification as a victim.⁵⁶

Non-Residential Services

The CHANCE program serves 17 children not placed in safe houses with wraparound services. These services include assessment and evaluation, treatment and service plan development, 24/7 on-call clinical staff, individualized and family therapy, life coaching, peer mentorship, case management, certified behavioral analyst services, substance abuse treatment, and psychiatric services.⁵⁷ Victims of human trafficking may be offered other services generally available to children in need through the existing service array, such as substance abuse services, mental health services, and educational services.⁵⁸

Residential Programs in Other States

Limited research has been completed nationwide regarding best practices to serve and treat victims of human trafficking. However, there are some residential programs in other states which serve victims of human trafficking.

Wellspring Living (Wellspring) is a residential facility in Georgia, which serves girls ages 12-17 who are victims of human trafficking.⁵⁹ This program is licensed as a “maximum watchful oversight” child care facility.⁶⁰ The facility has security features such as locked doors, unbreakable Plexiglas windows, and a fence surrounding the facility. While this program is a locked facility, it has alarmed doors that the children can open. If the alarmed door is pushed there is a delay for the door to open and alarms inform the program staff that somebody has tried to leave the facility. While Wellspring considers themselves a locked facility, exit can occur without the involvement of facility staff. At Wellspring, girls receive trauma-informed therapies, life skills classes, education,⁶¹ group therapies, family therapy, and other needed services.⁶² Following the program, most girls return to their families or to a foster-home or group home setting. The program is working to develop a study of its effectiveness.

In California, Children of the Night (COTN) is a private, non-profit program for children between the ages of 11 and 17 that receives referrals from across the country and only accepts those children whom it believes are willing to leave prostitution and participate in long-term, comprehensive treatment. COTN is a homelike environment with 24 beds.⁶³ The children follow a highly structured program that

⁵³ E-mail correspondence with the Department of Children and Families, February 24, 2014, on file with subcommittee staff.

⁵⁴ E-mail correspondence with the Department of Children and Families, January 14, 2014, on file with subcommittee staff.

⁵⁵ E-mail correspondence with the Department of Children and Families, February 24, 2014, on file with subcommittee staff.

⁵⁶ Florida Department of Children and Families Annual Human Trafficking Report 2012-13 Federal Fiscal Year.

⁵⁷ Testimony from Human Trafficking Panel, Healthy Families Subcommittee Meeting, February 19, 2014.

⁵⁸ *Id.*

⁵⁹ *Id.*

⁶⁰ *Provider Resource Results*, State of Georgia Out-of-Home Care, accessible at:

https://www.gascore.com/resourceguide/search_results.cfm.

⁶¹ Testimony from Human Trafficking Panel, Healthy Families Subcommittee Meeting, February 19, 2014.

⁶² *Wellspring Living for Girls*, Wellspring Living, accessible at: <https://wellspringliving.org/wellspring-living-for-girls/>.

⁶³ Children of the Night, accessible at: <https://www.childrenofthenight.org/index.html>, last accessed March 2, 2014.

includes attending an on-site school and a college placement program.⁶⁴ After children complete the comprehensive program of academic and life-skills education, caseworkers are available to provide ongoing case management to graduates.⁶⁵ COTN has existed since its inception through the sole support of private contributions from individuals, corporations, and foundations.⁶⁶

Treatment for Victims of Human Trafficking

Trauma-Focused Cognitive Behavioral Therapy

In the immediate as well as long-term aftermath of exposure to trauma, children are at risk of developing significant emotional and behavioral difficulties.⁶⁷ Trauma-focused cognitive behavioral therapy (TF-CBT) is an evidence-based treatment approach shown to help children, adolescents, and their caregivers overcome trauma-related difficulties.⁶⁸ It is designed to reduce negative emotional and behavioral responses following child sexual abuse, domestic violence, traumatic loss, and other traumatic events.⁶⁹ The treatment is based on learning and cognitive theories, and addresses distorted beliefs and attributions related to the abuse.⁷⁰ TF-CBT provides a supportive environment in which children are encouraged to talk about their traumatic experience.⁷¹ TF-CBT combines elements drawn from:

- Cognitive therapy, which aims to change behavior by addressing a person's thoughts or perceptions, particularly those thinking patterns that create distorted or unhelpful views;
- Behavioral therapy, which focuses on modifying habitual responses (e.g., anger, fear) to identified situations or stimuli; and
- Family therapy, which examines patterns of interactions among family members to identify and alleviate problems.⁷²

TF-CBT is a short-term treatment typically provided in 12 to 18 sessions of 50 to 90 minutes, depending on treatment needs.⁷³ The intervention is usually provided in outpatient mental health facilities, but it has been used in hospital, group home, school, community, residential, and in-home settings.⁷⁴

Recent research findings suggest that TF-CBT is more effective than nondirective or client centered treatment approaches for children who have a history of multiple traumas (e.g., sexual abuse, exposure to domestic violence, physical abuse, as well as other traumas).⁷⁵

Strengths-Based Approach

An individualized, strengths-based approach refers to policies, practice methods, and strategies that identify and draw upon the strengths of children, families, and communities.⁷⁶ Strengths-based practice involves a shift from a deficit approach, which emphasizes problems and pathology, to a positive partnership with the family.⁷⁷ The approach acknowledges each child and family's unique set of

⁶⁴ *Id.*

⁶⁵ *Id.*

⁶⁶ *Id.*

⁶⁷ Trauma-Focused Cognitive Behavioral Therapy for Children Affected by Sexual Abuse or Trauma, The Administration for Children and Families, U.S. Department of Health and Human Services, August 2012, *accessible at:* <https://www.childwelfare.gov/pubs/trauma/>.

⁶⁸ *Id.*

⁶⁹ *Id.*

⁷⁰ *Id.*

⁷¹ *Id.*

⁷² *Id.*

⁷³ *Id.*

⁷⁴ *Id.*

⁷⁵ *Id.*

⁷⁶ *An Individualized, Strengths-Based Approach in Public Child Welfare Driven Systems of Care*, Administration for Children and Families, US Department of Health and Human Services, *accessible at:*

<https://www.childwelfare.gov/pubs/acloserlook/strengthsbased/strengthsbased1.cfm> (last accessed February 25, 2014).

⁷⁷ *Id.*

strengths and challenges, and engages the family as a partner in developing and implementing the service plan.⁷⁸

Involuntary Examination and Commitment

Current law allows children who have not committed any crimes to be confined to receive treatment and keep those children safe. Under s. 394.463, also known as the Baker Act, children can be involuntarily confined in a hospital or crisis stabilization unit for mental health assessment.⁷⁹ In 2012 there were 25,286 involuntary exams of children between the ages of 4 and 17 in Florida.⁸⁰

The assessment is performed by an expert, a physician or clinical psychologist.⁸¹ If an involuntary examination finds that child needs involuntary inpatient placement (IPP) for treatment, he or she is either retained in the facility where the involuntary exam was performed or transferred to a mental health treatment facility.⁸² The court must hold a hearing within 5 days and find that the child needs IPP in order for the child to continue receiving services.⁸³ The court must review whether or not the child requires involuntary inpatient treatment every six months.⁸⁴

Section 39.407(6), F.S., allows DCF to place children involuntarily in mental health treatment facilities.⁸⁵ At the facility, the dependent children are examined by a psychiatrist or psychologist to determine whether treatment is necessary.⁸⁶ The treatment program must review the appropriateness and suitability of the placement every 30 days to determine whether the child is receiving benefit toward the treatment goals and whether the child could be treated in a less restrictive treatment program.⁸⁷ The court with jurisdiction over the child must also conduct a hearing to review the status of the child's residential treatment plan every 3 months after the child's admission to the residential treatment program.⁸⁸

Effect of Proposed Changes

Initial Screening and Assessment Instruments

The bill creates s. 409.1754, F.S., related to administrative requirements for serving sexually exploited children. The bill deletes the current assessment process to determine whether a child should be placed in a safe house and requires DCF to develop or adopt one or more initial screening and assessment instruments to identify, determine the needs of, plan services for, and identify an appropriate residential environment for sexually exploited children. The bill requires that the assessment instruments include the ability to determine whether placement in a safe house is appropriate. The bill requires that the initial screening and assessment instruments used to determine appropriate residential placement of a sexually exploited child consider:

- Risk of the sexually exploited child running away;
- Risk of the sexually exploited child recruiting other children into the commercial sex trade;
- Level of the sexually exploited child's attachment to his or her exploiter;
- Level and type of trauma that the sexually exploited child has endured;
- Nature of the child's interactions with law enforcement;

⁷⁸ *Id.*

⁷⁹ S. 394.463, F.S.

⁸⁰ *Baker Act Examinations for Youth in Calendar Year 2012*, Annette Christy, Associate Professor, University of South Florida, September 2013.

⁸¹ S. 394.463 (2)(f), F.S.

⁸² S. 394.467 (2), F.S.

⁸³ S. 394.467 (6), F.S.

⁸⁴ S. 394.467 (7)(d), F.S.

⁸⁵ S. 39.407(6), F.S.

⁸⁶ S. 39.407(6 (b)-(c), F.S.

⁸⁷ S. 39.407(6 (f), F.S.

⁸⁸ S. 39.407(6)(h), F.S.

- Length of time that the child was sexually exploited; and
- Extent of any substance abuse by the sexually exploited child.

The bill specifies that that if a safe house placement is determined to be the most appropriate setting using the assessment tool, the child may be placed in a safe house, as long as a placement is available. However, the bill specifies that a child may be placed in another setting if it is more appropriate to his or her needs and the child's behaviors can be managed in those settings in a manner that does not endanger other children, or if a safe house or safe foster home is not available.

The bill requires the initial screening and assessment instruments to be validated if possible and requires the instruments to be used by the DCF, juvenile assessment centers, CBCs, and providers serving sexually exploited children. The bill requires DCF to consult state and local agencies, organizations, and individuals involved in the identification and care of sexually exploited children to develop or adopt the initial screening and assessment instruments. The bill requires DCF to establish rules specifying the initial screening and assessment instruments to be used, the requirements for their use, and the reporting of data collected through them and specifies that entities are not precluded from using additional assessment instruments in the course of serving sexually exploited children.

DCF and CBC Requirements

The bill requires DCF and CBCs to assign cases where a child is alleged, suspected, or known to have been sexually exploited to child protective investigators (CPIs) and case managers who have received specialized intensive training in investigating cases involving a sexually exploited child. Similarly, the bill requires the Department of Juvenile Justice juvenile probation staff administering the detention risk assessment instrument to have specialized intensive training in identifying and serving sexually exploited children. The bill specifies CPIs and case managers must receive this training prior to accepting any case involving sexually exploited children.

The bill requires DCF and CBCs to conduct regular multidisciplinary staffings for sexually exploited children to ensure that all relevant information is known to all parties and that services are coordinated across systems. The bill requires DCF or the CBC to coordinate these staffings and invite individuals involved in the child's care. The bill specifies that this may include, but is not limited to, staff from the juvenile justice system, the school district, service providers, and victim advocates.

The bill requires each CBC and DCF region to jointly identify the service needs of sexually exploited children and plan for developing sufficient capacity to meet them.

The bill requires each CBC and DCF circuit to establish local protocols and procedures that are responsive to the varying circumstances that sexually exploited children are in. The bill requires the protocols and procedures to address the full continuum of needs of sexually exploited children to the extent of available funding. The bill requires that the protocols and procedures be used by CMs and CPIs when working with a sexually exploited child.

The bill requires the local DCF circuit administrator or his or her designee, the local circuit director of the Department of Juvenile Justice or his or her designee, and the CBC chief operating officer, or his or her designee to participate in any task force, committee, council, advisory group, coalition, or other entity active in the circuit for coordinating responses to address human trafficking or sexual exploitation of children. If no such entity exists, the bill specifies that the local DCF circuit administrator must work to initiate one.

The bill provides DCF rulemaking authority regarding the administrative requirements.

Safe Houses and Safe Foster Homes

The bill amends the definition of "safe house" as a "group residential placement certified by DCF to care for sexually exploited children," and creates and defines "safe foster home" as "a foster home certified by DCF to care for sexually exploited children."

The bill also amends the definition of a sexually exploited child to include those children who have not been adjudicated dependent, which permits them to be served by safe houses and safe foster homes.

The bill specifies that safe houses and safe foster homes are required to provide a safe, separate, and therapeutic environment tailored to the needs of sexually exploited children who have endured significant trauma. The bill requires DCF to certify safe homes and safe foster homes.

Certification Requirements

The bill amends the current requirements for safe houses, and creates requirements for safe foster homes, in order to be certified by DCF. The bill requires that safe houses and safe foster homes be licensed as residential child-caring agencies or licensed family foster homes, respectively, and that safe houses have awake staff on duty 24 hours a day.

The bill requires that safe houses and safe foster homes house a single sex, group children with similar chronological ages or levels of maturity together, and treat and care for these children in a manner that separates them from children with other needs. The bill specifies that safe houses and safe foster homes may care for other populations, as long as those populations do not interact with the sexually exploited children. The bill requires that safe houses and safe foster homes use trauma-informed and strength based approaches to care, to the extent possible and appropriate.

The bill requires that safe houses and safe foster homes provide appropriate security through facility design, hardware, technology, staffing, and siting, including but not limited to using external video monitoring or alarmed doors, or being situated in a remote location. The bill specifies that sexually exploited children must be allowed to exit the safe house or safe foster home if they choose.

Services

The bill requires safe houses and safe foster homes to provide services tailored to the needs of sexually exploited children and to determine these needs on a case-by-case basis. The bill specifies that in addition to the services required for traditional foster homes and child caring facilities, safe houses and safe foster homes also coordinate the following services:

- A comprehensive assessment of the service needs of each resident;
- Victim-witness counseling;
- Family counseling;
- Behavioral health services;
- Treatment and intervention for sexual assault;
- Life skills services;
- Mentoring by a survivor of sexual exploitation, if available and appropriate;
- Substance abuse screening, and where necessary, access to treatment;
- Planning services for the successful transition of residents back to the community;
- Activities for sexually exploited children residing in the safe house, scheduled in a manner that provides them with a full schedule; and
- Any additional services determined by DCF.

The bill requires foster parents of safe foster homes to complete intensive training regarding the needs of sexually exploited children, the effects of trauma and sexual exploitation, and how to address those needs using strength-based and trauma-informed approaches. The bill requires DCF to specify this training by rule. The bill also allows DCF to establish additional criteria in rule for the certification of safe houses and safe foster homes.

The bill requires that safe houses and safe foster homes reapply for certification and be inspected annually. The bill allows DCF to place a moratorium on referrals and revoke the certification of a safe house or safe foster home if it does not meet the requirements of certification.

The bill specifies that in order to accept state funds specifically allocated to provide services to sexually exploited children, the residential facility must be certified as a safe house or safe foster home.

Secure Safe House Pilot Program

The bill authorizes DCF to facilitate the development of one secure safe house on a pilot basis in order to evaluate the therapeutic benefits of a secure residential setting within the broader array of residential and community-based services available to meet the needs of sexually exploited children. The bill specifies that the secure safe house is intended for those sexually exploited children with the greatest needs and for whom no less restrictive placement has been or will be effective in addressing the effects of severe abuse, violence, trauma, or exploiter control endured by the child. The bill specifies that the setting is only available to sexually exploited children who have been, or are in the process of being, adjudicated dependent. The bill specifies that children can remain in the secure safe house from five days to up to 10 months.

The bill requires DCF to select the region where the secure safe house can be sited and to collaborate with the local CBC to design the pilot project. The bill specifies that the secure safe house must be a certified safe house, have no more than 15 beds, and have security features to prevent any entry into or exit from the facility or its grounds without the involvement of staff. The bill specifies that these features may include, but are not limited to, walls, fencing, gates, and locking doors.

The bill requires that the facility staff, the child, the child's parent or guardian, and the case manager develop a plan regarding how the child will be cared for at least thirty days prior to leaving the facility.

Placement in the Secure Safe House and Due Process

The bill specifies that sexually exploited dependent children may be placed in the secure safe house from any region of Florida and that DCF, in consultation with the CBCs serving the children, must approve all placements in the secure safe house. The bill also provides that a child may only be placed in the secure safe house if he or she has intensive needs, mental health issues, or other factors which prevent the child from being safely cared for in a less restrictive setting.

The bill specifies that in addition to the other criteria required to be used to determine whether safe house placement is appropriate for a child, a child's lack of willingness to participate in less intensive programs and lack of treatment progress in less restrictive placements must also be considered. The bill specifies that DCF may establish additional criteria for placement in the secure safe house.

The bill allows a dependent child to be taken to a secure safe house for evaluation of the appropriateness of placement for treatment if:

- There is probable cause that the child has been sexually exploited;
- The child meets the criteria to be placed in a safe house;
- The child recently engaged in behaviors that subject the child to victimization, violence, emotional harm, serious bodily harm, or health risks that endanger the child, posing a real and present threat of substantial harm to the child's well-being;
- There is a substantial likelihood that without care or treatment the child will endanger or cause serious bodily harm to others, as evidenced by previous behavior; and
- Less restrictive placement alternatives are unlikely to be effective in keeping the child from engaging in the behaviors specified above, as determined by a DCF or CBC employee.

The bill allows a DCF official to initiate an evaluation of a child if the child is the subject of an open investigation or under the supervision of the court, as long as the child meets the criteria for evaluation specified above. The bill allows a CPI, law enforcement officer, case manager, or other qualified individual to transport the child to the secure safe house for assessment and stabilization.

The bill allows the secure safe house to admit the child for assessment and stabilization pending the filing and adjudication of a petition by DCF alleging the need for a change in placement. The bill requires the secure safe house to provide notice regarding the child's admittance for assessment to the child's parent or guardian, foster parent, case manager, and guardian ad litem (GAL). The bill specifies that if the child does not have a GAL and a lawyer, the court must appoint them.

The bill requires a psychiatrist, clinical psychologist, licensed mental health counselor, or licensed clinical social worker at the secure safe house to evaluate the child. The bill specifies that this professional must have experience working with sexually exploited children. The bill requires the evaluation be conducted as soon as it is appropriate to do so, given the child's emotional, mental, and physical condition and that facility staff continue evaluating the child throughout the placement for evaluation in the secure safe house. The bill permits the staff to access and request relevant information, including, the child's case file, and allows the child's parent or guardian, foster parent, case manager, and GAL to provide any information they believe is relevant to the evaluation. The bill requires that the evaluation be based on whether the child meets criteria for admission to the secure safe house.

If the evaluator determines that a secure safe house would not best meet the child's needs, DCF must place the child in the least restrictive setting which is appropriate for the child's needs. If the evaluator determines that placement in the secure safe house would best meet the child's needs, DCF must petition the court within 24 hours for placement, and the secure safe house must admit the child for placement pending a judicial determination. If the evaluator determines that additional evaluation is required before a determination may be made, DCF must petition the court within 24 hours to extend the placement for evaluation purposes up to 30 days or until a determination may be made regarding the need for extended secure safe house placement for treatment, whichever comes first. The child shall remain in the secure safe house pending the court order.

The bill requires DCF to provide all evaluations to the child's parent or guardian, case manager, and GAL.

The bill specifies that if the evaluation results in a determination that placement for treatment in a secure safe house would best meet the child's needs, DCF may file a petition for placement in dependency court. The bill requires DCF to provide notice to the child's parents. The bill specifies that if the child's parents consent to the placement, the court must enter an order placing the child in the secure safe house for up to 45 days, pending review by the court. The bill also specifies that if the child's parents refuse or are unable to consent, within 24 hours of the filing of the petition, the court must hear all parties in person or by counsel, or both. The bill specifies that if the court concludes that the child meets the criteria for placement in the secure safe house, it must order that the child be placed in the secure safe house for a period of up to 45 days, pending review by the court.

The bill requires the secure safe house to review the child's progress toward the treatment goals and assess whether the child's needs can be met in a less restrictive treatment program. This review and assessment must be done every 20 days, commencing upon the beginning of treatment according to the treatment plan. The bill requires the secure safe house to submit a report of its findings to the child's parent or guardian, the GAL, the case manager, DCF, and the court. The bill specifies that DCF may not reimburse a secure safe house until the secure safe house has submitted every written report that is due.

The bill requires the court to conduct an initial review of the status of the child's treatment plan no later than 35 days after the child's placement in the secure safe house. The bill also requires the court to

review the child's treatment plan 20 days after the initial review and then every 60 days thereafter, until the child no longer requires placement in the secure safe house, or until the child has resided in the secure safe house for 10 months. The bill specifies that if the child has resided in the secure safe house for 9 months, a court hearing must be held to determine an appropriate setting and appropriate services for the child after 10 months.

The bill requires the child's continued placement in a secure safe house to be a subject of judicial review at any time that a judicial review is held pursuant to s. 39.701, F.S. The bill specifies that if, at any time, the court determines that the child has not been sexually exploited or that the placement in the safe house is no longer appropriate, the court must order DCF to place the child in the least restrictive setting that is best suited to meet the child's needs. The bill requires DCF to place the child in another setting when continued placement in the secure safe house is no longer appropriate.

Services in the Secure Safe Home

The bill requires the secure safe house to prepare an individualized treatment plan for the child within 10 days after placement for treatment. The bill requires the treatment plan to be approved by DCF and to address the preliminary residential treatment and comprehensive discharge, identifying care appropriate for the child upon completion of residential treatment.

The bill requires the child to be involved in the preparation of the plan to the maximum feasible extent, consistent with the child's ability to do so. The bill requires the GAL, child's parents, guardian, or foster parents, and staff from the child's home school district to be involved with the child's treatment and discharge planning needs. The bill authorizes other individuals to participate in plan development, as appropriate. The bill requires the secure safe house to provide a copy and an explanation of the plan to the child, the child's parent or guardian, the GAL, the case manager, and the court.

Pilot Program Evaluation

The bill requires DCF to contract for an evaluation of the secure safe house. The bill specifies that the evaluation must address the effectiveness in facilitating the rehabilitation of sexually exploited children. The bill specifies that the evaluation must describe the program model and facility design, assess the effectiveness of the facility in meeting the treatment and security needs of sexually exploited children, analyze its cost-effectiveness, and provide recommendations regarding the continued operation of the pilot program and any changes or enhancements. The bill specifies that the evaluation must be provided to the Governor, the President of the Senate, and the Speaker of the House of Representatives by February 1, 2018.

OPPAGA Study

The bill requires the Office of Program Policy Analysis and Government Accountability (OPPAGA) to conduct a study on commercial sexual exploitation of children in Florida. The bill requires the study to assess the extent of sexual exploitation of children in Florida, including the prevalence in various regions of the state, estimates of the number of youth who have been sexually exploited, and service gaps for treating this population. The bill requires the study to analyze the operation of safe houses in Florida and address the effectiveness of safe houses and safe foster homes in addressing the safety, therapeutic, health, and emotional needs of sexually exploited children, including the nature and appropriateness of subsequent placements, extent of sexual exploitation post-placement, and educational attainment.

The bill requires OPPAGA to report its findings to the Governor, the President of the Senate, and the Speaker of the House of Representatives by July 1, 2017.

The bill requires DCF to establish rules regarding the initial screening and assessment instruments and the training for staff of safe houses and foster parents in safe foster homes. The bill provides DCF rulemaking authority regarding additional criteria for certification of safe houses and safe foster homes.

B. SECTION DIRECTORY:

- Section 1:** Creates s. 409.1754, F.S., relating to sexually exploited children.
- Section 2:** Amends s. 409.1678, F.S., relating to specialized residential options for children who are victims of sexual exploitation.
- Section 3:** Amends s. 39.524, F.S., relating to safe-harbor residential placement.
- Section 4:** Creates s. 39.4072, F.S., relating to evaluation for secure safe house placement of a dependent sexually exploited child.
- Section 5:** Creates s. 39.4074, F.S., relating to placement in a secure safe house of a dependent sexually exploited child.
- Section 6:** Creates an unnumbered section of law relating to the Office of Program Policy Analysis and Government Accountability.
- Section 7:** Provides for an effective date.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

None.

2. Expenditures:

The bill has a negative indeterminate fiscal impact to the Department of Children and Families.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None.

2. Expenditures:

None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

None.

D. FISCAL COMMENTS:

None.

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

Not Applicable. This bill does not appear to affect county or municipal governments.

2. Other:

The due process clauses of the U.S. and Florida Constitutions prohibit a state from depriving any person, including a minor, of life, liberty or property without due process of law.⁸⁹ Secure placements affect the constitutionally-protected liberty interests of a minor. A minor must therefore be provided with due process before his or her liberty interests may be overridden. The U.S. Supreme Court has established three requirements which must be met before a state can override a minor's liberty interests.⁹⁰

- (1) An inquiry must be performed by a neutral fact-finder, which is not required to be in the form of a judicial inquiry;
- (2) The inquiry must probe the child's background using all available resources, including an interview with the minor; and
- (3) There must be periodic review by a neutral fact-finder.

The state bears the burden of establishing each of these requirements by clear and convincing evidence.⁹¹ The state must additionally establish that the secure placement serves a compelling state interest which is being accomplished through the least intrusive means possible.⁹²

The bill addresses these issues by:

- Establishing criteria that must be met to place a child for evaluation or treatment;
- Requiring an evaluation by a trained professional of whether the child meets criteria for placement in the safe house;
- Providing for the evaluator to access information about the child to inform the evaluation;
- Providing for court involvement in placing the child for evaluation and then for treatment; and
- Requiring ongoing review by the court of the child's progress and the appropriateness of the placement.

Additionally, the bill requires the appointment of both a guardian ad litem and a lawyer to represent the child during the process.

B. RULE-MAKING AUTHORITY:

The bill requires DCF to establish rules regarding the initial screening and assessment instruments and the training for staff of safe houses and foster parents in safe foster homes. The bill provides DCF rulemaking authority regarding additional criteria for certification of safe houses and safe foster homes.

C. DRAFTING ISSUES OR OTHER COMMENTS:

None.

IV. AMENDMENTS/ COMMITTEE SUBSTITUTE CHANGES

⁸⁹ U.S.C.A. Const. Amend. 14; Article 1, section 9, Florida Constitution. *M.W. v. Davis*, 756 So.2d 90, 97 (Fla. 2000). This includes rights to both substantive and procedural due process. Substantive due process protects the full panoply of individual rights from unwarranted encroachment by the government while procedural due process serves as a vehicle to ensure fair treatment through the proper administration of justice where substantive rights are at issue

⁹⁰ *Parham v. J.R.*, 442, U.S. 584, 99 S.Ct. 2493, 61 L.Ed.2d 101 (1979); these requirements were adopted in Florida in *M.W. v. Davis*, 756 So.2d 90, 97 (Fla. 2000).

⁹¹ *State v. Westerheide*, 831 So.2d 93 (Fla. 2002)

⁹² *Florida Dept. of Children and Families v. F.L.*, 880 So.2d 602 (Fla. 2004).

1 A bill to be entitled
 2 An act relating to human trafficking; creating s.
 3 409.1754; requiring the department to develop or adopt
 4 initial screening and assessment instruments;
 5 specifying the process for the department to develop
 6 or adopt initial screening and assessment instruments;
 7 providing criteria for placement in safe houses or
 8 safe foster homes; allowing entities to use additional
 9 initial screening and assessment instruments;
 10 requiring the department, community-based care lead
 11 agencies, and staff administering the detention risk
 12 assessment instrument to receive specified training;
 13 requiring the department and lead agencies to hold
 14 multidisciplinary staffings under certain conditions;
 15 requiring the department and lead agencies to develop
 16 specific plans and protocols; directing the
 17 department, the Department of Juvenile Justice, and
 18 lead agencies to participate in coalitions, task
 19 forces, or similar organizations to coordinate local
 20 responses to human trafficking; requiring the
 21 department to attempt to initiate a task force if none
 22 is active in a local area; amending s. 409.1678;
 23 providing definitions; authorizing the Department of
 24 Children and Families to certify safe houses and safe
 25 foster homes; providing requirements for certification
 26 as safe houses and safe foster homes; allowing the

27 department to certify a secure safe house to operate
 28 as a pilot program; providing requirements for the
 29 secure safe house pilot program; amending s. 39.524;
 30 providing for review of appropriateness of safe harbor
 31 placement in both safe houses and safe foster homes;
 32 amending criteria for placement; authorizing placement
 33 in settings other than safe houses and safe foster
 34 homes under certain conditions; requiring the Office
 35 of Program Policy Analysis and Government
 36 Accountability to conduct a study on commercial
 37 exploitation of children in Florida and related
 38 topics; creating s. 39.4072; providing for placement
 39 for evaluation in a secure safe house if certain
 40 criteria is met; specifying the process for evaluating
 41 whether a child meets criteria for placement for
 42 treatment in a secure safe house; creating s. 39.4074;
 43 authorizing the department to file a petition for
 44 placement in a secure safe house if the child is
 45 evaluated to meet criteria; providing for court
 46 determination; requiring reporting on a child's
 47 treatment progress in a secure safe house; providing
 48 for court review; providing an effective date.

49
 50 Be It Enacted by the Legislature of the State of Florida:
 51

52 Section 1. Section 409.1754, Florida Statutes, is created

53 to read:

54 409.1754 Sexually Exploited Children; Screening and
 55 Assessment; Training; Case Management; Task Forces.--

56 (1) SCREENING AND ASSESSMENT.--

57 (a) The department shall develop or adopt one or more
 58 initial screening and assessment instruments to identify,
 59 determine the needs of, plan services for, and identify
 60 appropriate placement for sexually exploited children. The
 61 department shall consult state and local agencies,
 62 organizations, and individuals involved in the identification
 63 and care of sexually exploited children in developing or
 64 adopting the initial screening and assessment instruments. The
 65 initial screening and assessment instruments shall include
 66 assessment of appropriate placement, including whether placement
 67 in a safe house or safe foster home is appropriate, and shall
 68 consider, at a minimum, the following factors:

- 69 1. Risk of the sexually exploited child running away.
- 70 2. Risk of the sexually exploited child recruiting other
 71 children into the commercial sex trade.
- 72 3. Level of the sexually exploited child's attachment to
 73 his or her exploiter.
- 74 4. Level and type of trauma that the sexually exploited
 75 child has endured.
- 76 5. Nature of the sexually exploited child's interactions
 77 with law enforcement.
- 78 6. Length of time that the child was sexually exploited.

79 7. Extent of any substance abuse by the sexually exploited
 80 child.

81 (b) The initial screening and assessment instruments shall
 82 be validated if possible and must be used by the department,
 83 juvenile assessment centers as provided in s. 985.135, and
 84 community-based care lead agencies.

85 (c) The department shall establish rules specifying the
 86 initial screening and assessment instruments to be used, the
 87 requirements for their use, and the reporting of data collected
 88 through them.

89 (d) The department, the Department of Juvenile Justice, and
 90 community-based care lead agencies are not precluded from using
 91 additional assessment instruments in the course of serving
 92 sexually exploited children.

93 (2) TRAINING; CASE MANAGEMENT; TASK FORCES.-

94 (a) 1. The department and community-based care lead
 95 agencies shall ensure that cases in which a child is alleged,
 96 suspected, or known to have been sexually exploited are assigned
 97 to child protective investigators and case managers who have
 98 specialized intensive training in handling cases involving a
 99 sexually exploited child. The department and lead agencies shall
 100 ensure that child protective investigators and case managers,
 101 respectively, receive this training prior to accepting any case
 102 involving a sexually exploited child.

103 2. The Department of Juvenile Justice shall ensure that
 104 juvenile probation staff or contractors administering the

105 detention risk assessment instrument receive specialized
 106 intensive training in identifying and serving sexually exploited
 107 children.

108 (b) The department and community-based care lead agencies
 109 shall conduct regular multidisciplinary staffings for sexually
 110 exploited children to ensure that all relevant information is
 111 known to all parties and that services are coordinated across
 112 systems. The department or community-based care lead agency, as
 113 appropriate, shall coordinate these staffings and invite
 114 individuals involved in the child's care. This may include, but
 115 is not limited to, the child's guardian ad litem, juvenile
 116 justice system staff, school district staff, service providers,
 117 and victim advocates.

118 (c)1. Each region of the department and each community-
 119 based care lead agency shall jointly assess local service
 120 capacity to meet the specialized service needs of sexually
 121 exploited children and establish a plan to develop capacity.
 122 Each plan shall be developed in consultation with local law
 123 enforcement officials, local school officials, runaway and
 124 homeless youth program providers, local probation departments,
 125 children's advocacy centers, public defenders, state attorney's
 126 offices, safe houses, and child advocates and services providers
 127 who work directly with sexually exploited children.

128 2. Each region of the department and each community-based
 129 care lead agency shall establish local protocols and procedures
 130 for working with sexually exploited children which are

131 responsive to the individual circumstances of each child. The
 132 protocols and procedures shall take into account the varying
 133 types and levels of trauma endured; whether the sexual
 134 exploitation is actively occurring, occurred in the past, or
 135 inactive but likely to reoccur; and the differing community
 136 resources and degrees of familial support that may be available.
 137 Child protective investigators and case managers must use the
 138 protocols and procedures when working with a sexually exploited
 139 child.

140 (3) (a) The local regional director may, to the extent that
 141 funds are available, provide training to local law enforcement
 142 officials who are likely to encounter sexually exploited
 143 children in the course of their law enforcement duties.
 144 Training shall address the provisions of this section and how to
 145 identify and obtain appropriate services for sexually exploited
 146 children. The local circuit administrator may contract with a
 147 not-for-profit agency having experience working with sexually
 148 exploited children to provide the training. Circuits may work
 149 cooperatively to provide training, which may be provided on a
 150 regional basis. The department shall assist circuits to obtain
 151 any available funds for the purposes of conducting law
 152 enforcement training from the Office of Juvenile Justice and
 153 Delinquency Prevention of the United States Department of
 154 Justice.

155 (b) Circuit administrators or their designees, chief
 156 probation officers of the Department of Juvenile Justice or

157 their designees, and the chief operating officers of community
 158 based care lead agencies or their designees shall participate in
 159 any task force, committee, council, advisory group, coalition,
 160 or other entity active in their service area for coordinating
 161 responses to address human trafficking or sexual exploitation of
 162 children. If no such entity exists, the circuit administrator
 163 for the department shall work to initiate one.

164 Section 2. Section 409.1678, Florida Statutes, is amended
 165 to read:

166 (Substantial rewording of section. See s. 409.1678, F.S.,
 167 for present text).

168 409.1678 Specialized residential options for children who
 169 are victims of sexual exploitation.--

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

171 (a) "Safe foster home" means a foster home certified by the
 172 department under this section to care for sexually exploited
 173 children.

174 (b) "Safe house" means a group residential placement
 175 certified by the department under this section to care for
 176 sexually exploited children.

177 (c) "Sexually exploited child" means a child who has
 178 suffered sexual exploitation as defined in s. 39.01(67)(g) and
 179 is ineligible for relief and benefits under the federal
 180 Trafficking Victims Protection Act, 22 U.S.C. ss. 7101 et seq.

181 (2) CERTIFICATION OF SAFE HOUSES AND SAFE FOSTER HOMES.--

182 (a) Safe houses and safe foster homes shall provide a safe,

183 separate, and therapeutic environment tailored to the needs of
 184 sexually exploited children who have endured significant trauma.
 185 Safe houses and safe foster homes shall use a model of treatment
 186 that includes strength-based and trauma-informed approaches.

187 (b) The department shall certify safe houses and safe
 188 foster homes. A residential facility accepting state funds
 189 appropriated to provide services to sexually exploited children
 190 or child victims of sex trafficking must be certified by the
 191 department as a safe house or a safe foster home. No entity may
 192 use the designation "safe house" or "safe foster home" and hold
 193 themselves out as serving sexually exploited children unless the
 194 entity is certified under this section.

195 (c) To be certified, a safe house must hold a license as a
 196 residential child-caring agency, and a safe foster home must
 197 hold a license as a family foster home, pursuant to s. 409.175.
 198 A safe house or safe foster home must also:

199 1. Use trauma-informed and strength-based approaches to
 200 care, to the extent possible and appropriate.

201 2. Serve exclusively one sex.

202 3. Group sexually exploited children by age or maturity
 203 level.

204 4. Care for sexually exploited children in a manner that
 205 separates these children from children with other needs. Safe
 206 houses and safe foster homes may care for other populations, if
 207 the children who have not experienced sexual exploitation do not
 208 interact with children who have experienced sexual exploitation.

209 5. Have awake staff members on duty 24 hours a day, if a
 210 safe house.

211 6. Provide appropriate security through facility design,
 212 hardware, technology, staffing, and siting, including but not
 213 limited to external video monitoring or alarmed doors, having a
 214 high staff-to-client ratio, or being situated in a remote
 215 location isolated from major transportation centers and common
 216 trafficking areas. However, such security must allow sexually
 217 exploited children to exit the safe house if they choose.

218 7. Meet other criteria established by the department in
 219 rule, which may include, but are not limited to, personnel
 220 qualifications, staffing ratios, and services content.

221 (d) Safe houses and safe foster homes shall provide
 222 services tailored to the needs of sexually exploited children
 223 and shall conduct a comprehensive assessment of the service
 224 needs of each resident. In addition to the services required to
 225 be provided by residential child caring agencies and family
 226 foster homes, safe houses and safe foster homes must provide,
 227 arrange for or coordinate, at a minimum, the following services:

- 228 1. Victim-witness counseling;
- 229 2. Family counseling;
- 230 3. Behavioral health care;
- 231 4. Treatment and intervention for sexual assault;
- 232 5. Education tailored to the child's individual needs,
 233 including remedial education if necessary;
- 234 6. Life skills training;

- 235 7. Mentoring by a survivor of sexual exploitation, if
- 236 available and appropriate for the child;
- 237 8. Substance abuse screening, and where necessary, access
- 238 to treatment;
- 239 9. Planning services for the successful transition of each
- 240 child back to the community; and
- 241 10. Activities, in a manner that provides sexually
- 242 exploited children with a full schedule.

243 (e) The community-based care lead agencies shall ensure

244 that foster parents of safe foster homes and staff of safe

245 houses complete intensive training regarding, at a minimum, the

246 needs of sexually exploited children, the effects of trauma and

247 sexual exploitation, and how to address those needs using

248 strength-based and trauma-informed approaches. The department

249 shall specify this training by rule and may develop or contract

250 for a standard curriculum. The department may establish in rule

251 additional criteria for the certification of safe houses and

252 safe foster homes. Criteria shall address the security,

253 therapeutic, social, health, and educational needs of sexually

254 exploited children.

255 (f) The department shall inspect safe houses and safe

256 foster homes prior to certification and annually to ensure

257 compliance with requirements of this section. The department may

258 place a moratorium on referrals and may revoke the certification

259 of a safe house or safe foster home which fails at any time to

260 meet the requirements of this section or rules adopted pursuant

261 to this section.

262 (g) The certification period for safe houses and safe
 263 foster homes shall run concurrently with the terms of their
 264 licenses.

265 (3) SECURE SAFE HOUSE PILOT PROGRAM.--

266 (a) The department may facilitate the development of one
 267 secure safe house on a pilot basis to evaluate the therapeutic
 268 benefits of a secure residential setting within the broader
 269 array of residential and community-based services available to
 270 meet the needs of sexually exploited children. The secure safe
 271 house is intended for those sexually exploited children with the
 272 greatest needs, for whom no less restrictive placement has been
 273 or will be effective in addressing the effects of severe abuse,
 274 violence, trauma, or exploiter control endured by the child. The
 275 setting is only available to a sexually exploited child:

276 1. Who is the subject of an open investigation due to an
 277 allegation of abuse, neglect, or exploitation, or has been
 278 adjudicated dependent;

279 2. Who has been placed in accordance with ss. 39.4072 and
 280 39.4074; and

281 3. Whose needs cannot be met in less restrictive
 282 placements.

283 (b) The secure safe house must be a certified safe house,
 284 and may have no more than 15 beds. The department shall select
 285 the region where the secure safe house shall be sited. The
 286 department shall collaborate with the local community-based care

287 lead agency to design the pilot project, including, but not
 288 limited to, selection of the location, selection of the
 289 provider, the facility's security features, referral processes,
 290 and services provided within the secure safe house.

291 (c) Children from any region of the state may be placed in
 292 the secure safe house pursuant to ss. 39.4072 and 39.4074. The
 293 department, in consultation with the community-based care lead
 294 agencies serving the children, shall approve all placements of
 295 children in the facility. In addition to the criteria in s.
 296 409.1754(1) and any other criteria determined by the department
 297 pursuant to that subsection, the following criteria at a minimum
 298 shall also be used to determine whether a child qualifies for
 299 placement in the secure safe house:

300 1. Lack of willingness to participate in less intensive
 301 programs; and

302 2. Lack of treatment progress in less restrictive
 303 placements, if the child has been placed elsewhere.

304 (d) The secure safe house shall include features which
 305 prevent any entry into or exit from the facility or its grounds
 306 without the involvement of staff, including, but not limited to,
 307 walls, fencing, gates, and locking doors.

308 (e) A child may be placed in the secure safe house for a
 309 minimum of 5 days and a maximum of 10 months. Pursuant to s.
 310 39.4074(4), the secure safe house shall regularly review and
 311 report on the child's progress, and during judicial reviews the
 312 court shall determine whether continued placement in the secure

313 safe house is appropriate. The department shall place the child
 314 in another setting when continued placement in the secure safe
 315 house is no longer appropriate.

316 (f) The department shall contract for an evaluation of the
 317 effectiveness of the secure safe house in facilitating the
 318 rehabilitation of sexually exploited children. The evaluation
 319 report shall be provided to the Governor, the President of the
 320 Senate, and the Speaker of the House of Representatives by
 321 February 1, 2018. The evaluation shall, at a minimum, describe
 322 the program model and facility design, assess the effectiveness
 323 of the facility in meeting the treatment and security needs of
 324 sexually exploited children, analyze its cost-effectiveness, and
 325 provide recommendations regarding the continued operation of the
 326 pilot program and any changes or enhancements.

327 (4) (a) This section does not prohibit any provider of
 328 services for sexually exploited children from appropriately
 329 billing Medicaid for services rendered, from contracting with a
 330 local school district for educational services, or from
 331 obtaining federal or local funding for services provided, as
 332 long as two or more funding sources do not pay for the same
 333 specific service that has been provided to a child.

334 (b) The lead agency shall ensure that all children residing
 335 in safe houses or safe foster homes have a case manager and a
 336 case plan, whether or not the child is a dependent child.

337 (5) The services specified in this section may, to the
 338 extent possible provided by law and with funding authorized, be

339 available to all sexually exploited children whether they are
 340 accessed voluntarily, as a condition of probation, through a
 341 diversion program, through a proceeding under chapter 39, or
 342 through a referral from a local community-based care or social
 343 service agency.

344 Section 3. Section 39.524, Florida Statutes, is amended to
 345 read:

346 39.524 Safe-harbor placement.—

347 (1) Except as provided in s. 39.407 or s. 985.801, a
 348 dependent child 6 years of age or older who has been found to be
 349 a victim of sexual exploitation as defined in s. 39.01(67)(g)
 350 must be assessed for placement in a safe house or safe foster
 351 home as provided in s. 409.1678 using the initial screening and
 352 assessment instruments provided in s. 409.1754(1). ~~The~~
 353 ~~assessment shall be conducted by the department or its agent and~~
 354 ~~shall incorporate and address current and historical information~~
 355 ~~from any law enforcement reports; psychological testing or~~
 356 ~~evaluation that has occurred; current and historical information~~
 357 ~~from the guardian ad litem, if one has been assigned; current~~
 358 ~~and historical information from any current therapist, teacher,~~
 359 ~~or other professional who has knowledge of the child and has~~
 360 ~~worked with the child; and any other information concerning the~~
 361 ~~availability and suitability of safe-house placement.~~ If such
 362 placement is determined to be appropriate for the child as a
 363 result of this assessment, the child may be placed in a safe
 364 house or safe foster home, if one is available. However, the

365 child may be placed in another setting if it is more appropriate
 366 to his or her needs and his or her behaviors can be managed in
 367 those settings so that they do not endanger other children being
 368 served in those settings, or if a safe house or safe foster home
 369 in unavailable. As used in this section, the term "available" as
 370 it relates to a placement means a placement that is located
 371 within the circuit or otherwise reasonably accessible.

372 (2) The results of the assessment described in s.
 373 409.1754(1) subsection (1) and the actions taken as a result of
 374 the assessment must be included in the next judicial review of
 375 the child. At each subsequent judicial review, the court must be
 376 advised in writing of the status of the child's placement, with
 377 special reference regarding the stability of the placement and
 378 the permanency planning for the child.

379 (3)(a) By December 1 of each year, the department shall
 380 report to the Legislature on the placement of children in safe
 381 houses and safe foster homes during the year, including the
 382 criteria used to determine the placement of children, the number
 383 of children who were evaluated for placement, the number of
 384 children who were placed based upon the evaluation, and the
 385 number of children who were not placed.

386 (b) The department shall maintain data specifying the
 387 number of children who were referred to a safe house or safe
 388 foster home for whom placement was unavailable and the counties
 389 in which such placement was unavailable. The department shall
 390 include this data in its report under this subsection so that

391 the Legislature may consider this information in developing the
 392 General Appropriations Act.

393 Section 4. Section 39.4072, Florida Statutes, is created
 394 to read:

395 39.4072 Evaluation for secure safe house placement.-

396 (1) The Legislature finds that victims of child sexual
 397 exploitation as defined in s. 39.01(67)(g) often exhibit
 398 behaviors that place themselves and others in danger. The
 399 Legislature finds that when sexually exploited children
 400 repeatedly run away from their home or residential placement to
 401 unsafe placements, engage in commercial sexual activity as
 402 defined in s. 787.06(2)(b), F.S., or seek to maintain a
 403 relationship with their exploiters, these children and other
 404 children are in danger of being sexually exploited and
 405 physically abused, which can lead to grave emotional and
 406 physical harm.

407 (2) CRITERIA.-A child may be taken to a secure safe house
 408 for evaluation of the appropriateness of placement for treatment
 409 in a secure safe house as provided in this section if there is
 410 probable cause that the child has been sexually exploited as
 411 defined in s. 39.01(67)(g) and:

412 (a) The child meets the criteria in s. 409.1678(3) for safe
 413 house placement; and

414 (b) The child recently engaged in behaviors that subject
 415 the child to victimization, violence, emotional harm, serious
 416 bodily harm, or health risks that endanger the child, posing a

417 real and present threat of substantial harm to the child's well-
 418 being. Such behaviors include, but are not limited to,
 419 repeatedly running away from home or residential placement to an
 420 unsafe situation, engaging in commercial sexual activity as
 421 defined in s. 787.06(2)(b), and seeking to maintain a
 422 relationship with the child's trafficker despite others'
 423 attempts to separate the child from the trafficker;

424 (c) There is a substantial likelihood that without care or
 425 treatment the child will endanger or cause serious bodily harm
 426 to others, as evidenced by previous behavior including
 427 recruiting other children into the commercial sex trade or using
 428 coercion such as violence, illegal substances, or other means to
 429 compel their participation in such trade; and

430 (d) Less restrictive placement alternatives are unlikely to
 431 be effective in keeping the child from engaging in behaviors
 432 provided in paragraphs (b) and (c), as determined by a
 433 department or community-based care lead agency.

434 (3) EVALUATION.—

435 (a) An official of the department may initiate an
 436 evaluation of a child who is the subject of an open
 437 investigation or under the supervision of the court if the
 438 criteria in subsection (2) are met. A child protective
 439 investigator, a law enforcement officer, case manager, or other
 440 qualified individual may transport the child to the secure safe
 441 house, which may admit the child for assessment and
 442 stabilization pending the filing and adjudication of a petition

443 by the department as provided in s. 39.522(1) alleging a need
 444 for a change in placement. The secure safe house shall provide
 445 notice regarding the child's admittance for assessment for
 446 secure safe house placement, to the child's parent or guardian,
 447 foster parent, case manager, and guardian ad litem. If the child
 448 does not have a guardian ad litem and a lawyer, the court shall
 449 appoint them.

450 (b) A psychiatrist, clinical psychologist, licensed mental
 451 health counselor, or licensed clinical social worker at the
 452 secure safe house who has training in working with sexually
 453 exploited children shall conduct an initial evaluation of the
 454 child as soon as it is appropriate to do so given the child's
 455 emotional, mental, and physical condition. The child may be
 456 provided medical screening and treatment pursuant to s. 39.407.
 457 The secure safe house may initiate appropriate therapeutic
 458 services to stabilize and treat the child.

459 (c) Facility staff shall continue to evaluate the child
 460 throughout his or her placement for evaluation in the secure
 461 safe house and may access the child's case file and other
 462 relevant records and request information from other individuals
 463 involved in the child's life. The child's parent or guardian,
 464 foster parent, case manager, and guardian ad litem may provide
 465 any information they believe relevant to the evaluation. The
 466 evaluation of the child shall be based on whether the child
 467 meets the criteria established under s. 409.1678(3) for
 468 admission to the secure safe house, and the criteria in

469 paragraphs (1)(a) and (b).

470 (d) Within five days after the child's admittance to the
 471 secure safe house for evaluation, the psychiatrist, clinical
 472 psychologist, licensed mental health counselor, or licensed
 473 clinical social worker shall determine, based on the evaluation,
 474 whether the secure safe house would best meet the child's needs,
 475 or whether additional evaluation is required before a conclusion
 476 can be reached.

477 1. If the secure safe house would not best meet the
 478 child's needs, the department shall place the child in the least
 479 restrictive setting which is appropriate for the child's needs.

480 2. If placement in the secure safe house for treatment
 481 would best meet the child's needs, the department shall petition
 482 the court within 24 hours for placement under s. 39.4074, and
 483 the secure safe house shall admit the child pending a judicial
 484 determination.

485 3. If additional evaluation is required before a
 486 determination may be made about the child's need for secure safe
 487 house placement for treatment, the department shall petition the
 488 court within 24 hours to extend the placement of the child for
 489 evaluation purposes up to 30 days or until a determination may
 490 be made regarding the need for secure safe house placement for
 491 treatment, whichever comes first. The child shall remain in the
 492 secure safe house pending the court order.

493 (f) The department shall provide all evaluations to the
 494 child's parent or guardian, case manager, and guardian ad litem.

495 Section 5. Section 39.4074, Florida Statutes, is created
 496 to read:

497 39.4074 Placement in a secure safe house.—

498 (1) PETITION FOR PLACEMENT.—If an evaluation pursuant to s.
 499 39.4072(3) results in a determination that placement for
 500 treatment in a secure safe house would best meet the child’s
 501 needs, the department may file a petition for placement in
 502 dependency court. The department shall provide notice to the
 503 child’s parents as required under s. 39.502(1). If the child’s
 504 parents consent to such placement, the court shall enter an
 505 order placing the child in the secure safe house for up to 45
 506 days, pending review by the court as provided herein. If the
 507 child’s parents refuse or are unable to consent, the court
 508 within 24 hours of the filing of the petition shall hear all
 509 parties in person or by counsel, or both. If the court concludes
 510 that the child meets the criteria for placement in the secure
 511 safe house in s. 39.4072(1), it shall order that the child be
 512 placed in the secure safe house for a period of up to 45 days,
 513 pending review by the court.

514 (2) TREATMENT PLAN AND JUDICIAL REVIEW.

515 (a) Within 10 days after the placement of a child for
 516 treatment in a secure safe house, the secure safe house must
 517 prepare an individualized treatment plan which addresses both
 518 preliminary residential treatment and comprehensive discharge,
 519 identifying care appropriate for the child upon completion of
 520 residential treatment. The plan must be approved by the

521 department. The child must be involved in the preparation of the
 522 plan to the maximum feasible extent consistent with the child's
 523 ability to do so. The child's parents, guardian, or foster
 524 parents, guardian ad litem, and staff from the child's home
 525 school district must be involved with the child's treatment and
 526 discharge planning. Other individuals may also participate in
 527 plan development as appropriate. A secure safe house shall
 528 provide a copy and an explanation of the plan to the child, the
 529 child's parent or guardian, the guardian ad litem, and case
 530 manager. The department shall also provide the plan to the
 531 court.

532 (b) At 20-day intervals, commencing upon the beginning of
 533 treatment according to the treatment plan, the secure safe house
 534 must review the child's progress toward the treatment goals and
 535 assess whether the child's needs could be met in a less
 536 restrictive treatment program. The secure safe house must
 537 submit a report of its findings to the child's parents or
 538 guardian, guardian ad litem, case manager, the department and
 539 the court. The department may not reimburse a secure safe house
 540 until the secure safe house has submitted every written report
 541 that is due.

542 (c) The court shall conduct an initial review of the status
 543 of the child's treatment plan no later than 35 days after the
 544 child's placement for treatment in the secure safe house. For
 545 any child in a secure safe house at the time a judicial review
 546 is held pursuant to s. 39.701, the child's continued placement

547 in a secure safe house must be a subject of the judicial review.
 548 If, at any time, the court determines that the child has not
 549 been sexually exploited or that the child has been sexually
 550 exploited but is not appropriate for placement in a secure safe
 551 house, the court shall order the department to place the child
 552 in the least restrictive setting that is best suited to meet the
 553 child's needs.

554 (d) After the initial review, the court must review the
 555 child's treatment plan every 60 days until the child no longer
 556 requires placement in the secure safe house, or until the child
 557 has resided in the secure safe house for 10 months. If the child
 558 has resided in the secure safe house for 9 months, a court
 559 hearing shall be held to determine an appropriate setting and
 560 appropriate services for the child.

561 Section 6. The Office of Program Policy Analysis and
 562 Government Accountability (OPPAGA) shall conduct a study on
 563 commercial sexual exploitation of children in Florida. The study
 564 shall assess the extent of commercial sexual exploitation of
 565 children, including but not limited to its prevalence in various
 566 regions of the state. The study shall also identify specialized
 567 services needed by sexually exploited children and any gaps in
 568 the availability of such services by region, including but not
 569 limited to residential services and specialized therapies. The
 570 study shall analyze the effectiveness of safe houses, safe
 571 foster homes, and other residential options for serving sexually
 572 exploited children in addressing their safety, therapeutic,

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573 health, educational, and emotional needs, including but not
574 limited to, the nature and appropriateness of subsequent
575 placements, extent of sexual exploitation post-placement, and
576 educational attainment. By July 1, 2017, OPPAGA shall report its
577 findings to the Governor, the President of the Senate, and the
578 Speaker of the House of Representatives.

579 Section 7. This act shall take effect July 1, 2014.

HOUSE HEALTHY FAMILIES SUBCOMMITTEE
PCB HFS 14-03 DRAFT
CHILD PROTECTION AND CHILD WELFARE

The bill is intended to:

- Enhance the quality of the child protection workforce and its leadership.
 - Establishes an Assistant Secretary for Child Welfare at the Department of Children and Families (DCF).
 - Increases the education and training requirements for new child protective investigators and supervisors.
 - Provides for specialization in skillsets and in serving specific populations within the system through training and certification.
 - Provides for tuition reimbursement and loan forgiveness for child protective investigators and supervisors to facilitate meeting new educational requirements.
- Provide for increased transparency and expert review and consultation to improve DCF and the broader child welfare system's functioning
 - Requires basic information about child deaths reported to the child abuse hotline to be posted to a public website.
 - Creates a rapid response system for identifying root causes leading to child deaths and then determining process and policy improvements to address them.
 - Creates the Florida Institute for Child Welfare, a consortium of public and private universities offering degrees in social work, within a state university to work with all partners in the system to enhance the quality of the workforce and practice.
- Address gaps in law and procedure that put children at risk and deprive them of relationships with important people in their lives.
 - Strengthens requirements for keeping siblings together or at least maintaining relationships between them.
 - Addresses the "re-homing" of children (unlawful adoptions, sometimes to child abusers, often through the internet).
 - Creates statutory requirements for the use of safety plans to ensure they are used appropriately.
- Mandate a sensitive and informed response when parents of medically fragile children are accused of medical neglect or otherwise become involved in the child welfare system.
 - Establishes a procedure for investigation of medical neglect allegations which provides for expert consultation and the coordination of services for which the family is eligible to meet the child's needs.
- Update statutes relating to the community based care system to reflect the maturity of that system.
 - Facilitates community control of community-based care lead agencies through increased local involvement on governing boards.
 - Adds oversight of the child welfare system to the responsibilities of the existing community alliances, provides for DCF to establish direct support organizations to help them fundraise, and includes community alliances in the procurement process.
 - Strengthens the accountability system by collecting, maintaining, and analyzing reliable data on critical outcomes and then using it to drive system change.

**HOUSE HEALTHY FAMILIES SUBCOMMITTEE
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Section	Lines	Change
1	145-265	<ul style="list-style-type: none"> • Creates an assistant secretary for child welfare within DCF. • Amends duties and membership of the community alliances to include oversight of the child protective and child welfare system. • Includes an advocate for children in the child protection and child welfare system on the alliances.
2	266-384	<ul style="list-style-type: none"> • Amends the goals of the child welfare system to include preserving and strengthening families caring for medically complex children. • Requires DCF to maintain a program of family-centered services and supports for medically complex children.
3	385-434	<ul style="list-style-type: none"> • Defines “medical neglect”, “sibling”, and “safety plan”. • Changes the definition of “diligent efforts by the parent”.
4	435-507	<ul style="list-style-type: none"> • Creates critical incident rapid response teams to conduct immediate investigations of deaths or other serious incidents to identify the root causes and determine the need for policy changes. • Specifies requirements and duties of these teams.
5	508-533	Requires public disclosure of basic facts related to all deaths of children reported to the child abuse hotline on DCF’s website, such as the child’s age, gender, date of death, allegations of cause of death and verified cause of death, child’s placement, involvement of the CBC or other entities, and whether the child was the subject of verified abuse reports.
6	534-703	<ul style="list-style-type: none"> • Requires safety plans and provides standards for them. • Adds new limitations regarding offering services for voluntary acceptance to address situations where parents will be unable to make an informed decision or are unlikely to comply.
7	706-887	<ul style="list-style-type: none"> • Deletes outdated language. • Requires child protection teams to consult with physicians knowledgeable about the specific conditions of a medically complex child.
8	888-927	<ul style="list-style-type: none"> • Requires child protective investigators to be in prompt and close contact with medical experts on the child protection team when an investigation involves a medically complex child. • Requires a family-centered approach to serving medically complex children. • Requires staffings involving multiple agencies when cases involve a medically complex child.
9	928-1011	Requires DCF to make reasonable efforts to keep siblings together when removed from their home, or to arrange for visitation.
10	1012-1034	<ul style="list-style-type: none"> • Requires that a petition for dependency include information regarding whether a parent has complied with a safety plan. • Requires DCF to provide safety assessments and safety plans to the court.

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11	1035-1182	<ul style="list-style-type: none"> • Requires judicial review hearings for children to include information regarding sibling contact. • Requires review hearings for 17 year olds to include information regarding whether removal of the disability of nonage is in the best interest of the child.
12	1183-1190	Removes the specification that a DCF employee must sign a petition to terminate parental rights if DCF is the petitioner to allow contracted legal services providers (state attorney's or attorney general's offices) to conduct filings on DCF's behalf.
13	1192-1227	<ul style="list-style-type: none"> • Expands the child abuse death review to all child deaths reported to the abuse hotline (rather than only those deaths with verified abuse). • Changes the due date for the child abuse death review committee report from December 31 to October 1 of each year.
14	1228-1260	<ul style="list-style-type: none"> • Authorizes DCF to approve certification specializations for child protective investigators and other personnel in serving specific populations or certain skillsets relevant to child protection. • Updates outdated language.
15	1261-1320	<ul style="list-style-type: none"> • Defines the terms "human services related field" and "relevant coursework". • Requires newly hired child protective investigators to have either a degree in social work, a degree in a human services related field and 12 hours of relevant coursework, or a degree in a human services related field and to complete 12 hours of relevant coursework (which may be in a specialized area) within 3 years. • Requires all child protective investigators and supervisors to complete specialized training in serving specific populations or certain skillsets relevant to child protection. • Requires newly hired DCF attorneys to receive the same training the CPIs receive and to shadow a child protective investigator and a case manager.
16	1321-1344	<ul style="list-style-type: none"> • Establishes a tuition exemption program for child protective investigators working towards a degree in social work or completing additional relevant coursework. • Establishes standards for participation.
17	1345-1379	<ul style="list-style-type: none"> • Establishes a loan forgiveness program for child protective investigators and child protective investigators with a degree in social work. • Establishes standards for participation.
18	1380-1459	<ul style="list-style-type: none"> • Requires DCF to work with the Department of Health and the Agency for Health Care Administration for the care of medically complex children in the least restrictive environment. • Specifies that DCF is authorized to place a medically complex child with a person approved by DCF to serve as a medical foster home. • Allows funds to be used for out-of-home placement for medically complex child.

**HOUSE HEALTHY FAMILIES SUBCOMMITTEE
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19	1460-1519	Requires managed care plans serving children in DCF custody to maintain complete medical, dental, and behavioral health information, which AHCA and DCF shall use to determine plan compliance with standards and whether children are receiving necessary services.
20	1520-1523	Creates part V of Ch. 409 to be titled "Community-Based Child Welfare"
21	1524-1598	<ul style="list-style-type: none"> • Moves sections of current statutes related to community-based care organizations to a new section of law and updates outdated language. • Adds a child protection and child welfare outcome related to children developing capacity for independent living and competency as an adult. • Defines the terms "child," "dependent child," "care," and "related services."
22	1599-1646	<ul style="list-style-type: none"> • Moves sections of current statutes related to community-based care organizations to a new section of law and updates outdated language. • Requires that procurements initiated after July 1, 2014, require membership of the community-based care lead agency's board of directors to have at least 75% of members residing in Florida and at least 51% of members residing in the service area of the community-based care lead agency. • Requires that the board of the community-based care lead agency include representation from local government, law enforcement, a school district, a children's services council, and the United Way or other local funding organization. • Requires that DCF's procurement team for procuring a community-based care lead agency include individuals from the community and requires that procurement meetings are held in the area to be served by the contract.
23	1647-1733	<ul style="list-style-type: none"> • Moves sections of current statutes related to community-based care organizations to a new section of law and updates outdated language. • Requires greater accountability for community-based care lead agencies. • Requires service providers to use services that are supported by research.
24	1734-1866	<ul style="list-style-type: none"> • Moves sections of current statutes related to the fiscal requirements and operation of community-based care organizations to a new section of law. • Updates outdated language.
25	1867-1886	<ul style="list-style-type: none"> • Moves sections of current statutes related to allocation of funds for community-based care organizations to a new section of law. • Updates outdated language.
26	1887-1909	<ul style="list-style-type: none"> • Moves sections of current statutes related to lead agency expenditures to a new section of law. • Updates outdated language.
27	1910-2067	<ul style="list-style-type: none"> • Moves sections of current statutes related to subcontractor and lead agency liability to a new section of law and updates outdated language. • Removes language in current law related to automatic annual increases in conditional limitations on damages.

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CHILD PROTECTION AND CHILD WELFARE**

28	2068-2212	<ul style="list-style-type: none"> • Moves sections of current statutes related to receiverships to a new section of law. • Updates outdated language.
29	2213-2261	<ul style="list-style-type: none"> • Moves sections of current statutes related to contracts with lead agencies and DCF oversight to a new section of law. • Updates outdated language.
30	2262-2461	Requires DCF to develop a child welfare outcome-based accountability system and to provide an annual report on system performance to the Legislature and the Governor.
31	2462-2564	<ul style="list-style-type: none"> • Provides the following duties of the community alliances: <ul style="list-style-type: none"> ○ Conduct a needs assessment and establish community priorities; ○ Review the performance of DCF, sheriff's offices providing child protective services, and lead agencies; ○ Recommend a competitive procurement for the lead agency if performance is poor, and then to be involved in developing the procurement document; ○ Recommend a contract extension is performance is superior; ○ Work with the institute to improve child welfare and protection services; and ○ Promote community involvement. • Authorizes the alliance to create a direct-support organization to support community-based care in the community and sets requirements for the direct-support organization.
32	2565-2594	<ul style="list-style-type: none"> • Defines the terms "abandons," "abandonment," "care," "caregiver," "child," and "relative". • Specifies that a caregiver who abandons a child (such as by leaving him or her with a stranger found through the internet) has committed a 3rd degree felony. • Clarifies that a person who surrenders a newborn infant in compliance with s. 383.50, F.S., does not commit a crime.

**HOUSE HEALTHY FAMILIES SUBCOMMITTEE
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CHILD PROTECTION AND CHILD WELFARE**

33	2595-2701	<ul style="list-style-type: none"> • Creates the Florida Institute for Child Welfare and requires the institute to be housed in the Florida State University School of Social Work. • Requires DCF to contract with the institute and requires the institute to perform duties specified in the bill. • Requires the president of FSU to appoint a director of the institute who has specified credentials. • Requires the institute to: <ul style="list-style-type: none"> ○ Work with DCF, sheriff’s offices providing child protective services, community-based care lead agencies, provider organizations, the court system, the Department of Juvenile Justice, and others. ○ Report on its activity and findings. ○ Convene a task force to recommend improvements to the child welfare system.
34	2702-2716	Provides for a tuition and fee exemption for CPIs and CPI supervisors who are enrolled in a social work program and receive at least a “B” in the course.
35	2717	Provides an effective date of July 1, 2014.

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1 A bill to be entitled
 2 An act relating to child protection and child welfare
 3 services; amending s. 20.19, F.S.; requiring the
 4 secretary of the department to appoint an Assistant
 5 Secretary for Child Welfare; providing requirements
 6 for such position; revising the duties, appointment,
 7 and membership of community alliances; amending s.
 8 39.001, F.S.; revising the purposes of ch. 39, F.S.;
 9 providing for the provision of services for medically
 10 complex children; conforming cross-references;
 11 amending s. 39.01, F.S.; defining the terms "medical
 12 neglect", "safety plan"; and "sibling"; revising the
 13 definition of "diligent efforts by a parent";
 14 conforming cross-references; creating s. 39.2015,
 15 F.S.; requiring the Department of Children and
 16 Families to conduct specified investigations using
 17 critical incident rapid response teams; providing
 18 requirements for such investigations; providing
 19 requirements for the team; authorizing the team to
 20 access specified information; requiring the
 21 cooperation of specified agencies and organizations;
 22 providing for reimbursement of team members; requiring
 23 a report of the investigation; requiring the secretary
 24 to develop specified guidelines for investigations and
 25 provide training to team members; requiring the

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26 secretary to appoint an advisory committee; requiring
 27 a report from the advisory committee to the Secretary
 28 of Children and Families; requiring the secretary to
 29 submit such report to the Governor and the
 30 Legislature; amending s. 39.202, F.S.; authorizing
 31 access to specified records in the event of the death
 32 of a child which was reported to the department's
 33 child abuse hotline; creating s. 39.2022, F.S.;
 34 providing legislative intent; requiring the department
 35 to publish specified information on its website if the
 36 death of a child is reported to the child abuse
 37 hotline; prohibiting specified information from being
 38 released; providing requirements for the release of
 39 information in the child's records; prohibiting
 40 release of information that identifies the person who
 41 reports an incident to the child abuse hotline;
 42 amending 39.301, F.S.; authorizing the use of safety
 43 plans; providing requirements for use of safety plans;
 44 amending s. 39.303, F.S.; revising legislative intent;
 45 providing requirements for a child protection team
 46 that evaluates a report of medical neglect and
 47 assesses the health care needs of a medically complex
 48 child; creating s. 39.3068, F.S.; providing
 49 requirements for an investigation of medical neglect;
 50 amending s. 39.402, F.S.; requiring the department to

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51 make a reasonable effort to keep siblings together
 52 when they are placed in out-of-home care under certain
 53 circumstances; providing for sibling visitation under
 54 certain circumstances; amending s. 39.501, F.S.;
 55 requiring compliance with a safety plan to be
 56 considered when deciding a petition for dependency;
 57 amending s. 39.701, F.S.; requiring the court to
 58 consider contact among siblings in judicial reviews;
 59 authorizing the court to remove specified disabilities
 60 of nonage at judicial reviews; amending s. 39.802,
 61 F.S.; requiring a petition for the termination of
 62 parental rights to be signed under oath stating the
 63 petitioner's good faith in filing the petition;
 64 amending s. 383.402, F.S.; requiring the review of all
 65 deaths of children which occur in the state and are
 66 reported to the department's child abuse hotline;
 67 revising the due date for a report; providing a
 68 directive to the Division of Law Revision and
 69 Information; amending s. 402.40, F.S.; providing for a
 70 specialization through the certification process;
 71 creating s. 402.402, F.S.; providing education
 72 requirements for child protective investigators and
 73 child protective investigation supervisors; creating
 74 s. 402.403, F.S.; establishing a tuition exemption
 75 program for child protective investigators and

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76 supervisors; providing eligibility requirements;
 77 creating s. 402.404, F.S.; establishing a student loan
 78 forgiveness program for child protective investigators
 79 and supervisors; providing eligibility requirements;
 80 providing requirements for the program; amending s.
 81 409.165; enhancing provision of care to medically
 82 complex children; amending s. 409.967; revising
 83 standards for Medicaid managed care plan
 84 accountability in regard to services for dependent
 85 children; creating part V of ch. 409, F.S.; creating
 86 s. 409.986, F.S.; providing legislative findings and
 87 intent; providing child protection and child welfare
 88 outcome goals; defining terms; creating s. 409.987,
 89 F.S.; providing for the procurement of community-based
 90 care lead agencies; providing requirements for
 91 contracting as a lead agency; creating s. 409.988,
 92 F.S.; providing the duties of a community-based care
 93 lead agency; providing licensure requirements for a
 94 lead agency; creating s. 409.998; providing for
 95 community based care oversight by community alliances;
 96 authorizing the establishment of direct-support
 97 organizations; creating s. 409.990, F.S.; providing
 98 general funding provisions; providing for a matching
 99 grant program and the maximum amount of funds that may
 100 be awarded; requiring the department to develop and

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101 implement a community-based care risk pool initiative;
 102 providing requirements for the risk pool;
 103 transferring, renumbering, and amending s. 409.16713,
 104 F.S.; transferring provisions relating to the
 105 allocation of funds for community-based lead care
 106 agencies; conforming a cross-reference; creating s.
 107 409.992, F.S.; providing requirements for community-
 108 based care lead agency expenditures; creating s.
 109 409.993, F.S.; providing findings; providing for lead
 110 agency and subcontractor liability; providing
 111 limitations on damages; transferring, renumbering, and
 112 amending s. 409.1675, F.S.; transferring provisions
 113 relating to receivership from community-based
 114 providers to lead agencies; conforming cross-
 115 references and terminology; creating s. 409.996, F.S.;
 116 providing duties of the department relating to
 117 community-based care and lead agencies; creating s.
 118 409.997, F.S.; providing goals for the department and
 119 specified entities; requiring the department to
 120 maintain a comprehensive, results-oriented
 121 accountability system; providing requirements;
 122 requiring the department to establish a technical
 123 advisory panel; providing requirements for the panel;
 124 requiring the department to make the results of the
 125 system public; requiring a report to the Governor and

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126 the Legislature; creating s. 827.10, F.S.; defining
 127 terms; establishing the criminal offense of unlawful
 128 abandonment of a child; providing criminal penalties;
 129 providing exceptions; creating s. 1004.615, F.S.;
 130 establishing the Florida Institute for Child Welfare;
 131 providing the purpose of the institute; requiring the
 132 institute to contract and work with specified
 133 entities; providing duties and responsibilities of the
 134 institute; providing for the administration of the
 135 institute; requiring a report to the Governor and the
 136 Legislature by a specified date; providing for a task
 137 force and report; amending s. 1009.25, F.S.; exempting
 138 tuition and fees for specified child protective
 139 investigators and child protective investigation
 140 supervisors; amending s. 39.01, F.S.; conforming a
 141 cross-reference; providing an effective date.

142
 143 Be It Enacted by the Legislature of the State of Florida:

144
 145 Section 1. Present subsections (3) through (5) of section
 146 20.19, Florida Statutes, are redesignated as subsections (4)
 147 through (6), respectively, a new subsection (3) is added to that
 148 section, and subsections (2) and (4) of that section are
 149 amended, to read:

150 20.19 Department of Children and Families.—There is

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151 created a Department of Children and Families.

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

153 (a) The head of the department is the Secretary of
 154 Children and Families. The secretary is appointed by the
 155 Governor, subject to confirmation by the Senate. The secretary
 156 serves at the pleasure of the Governor.

157 (b) The secretary shall appoint a deputy secretary who
 158 shall act in the absence of the secretary. The deputy secretary
 159 is directly responsible to the secretary, performs such duties
 160 as are assigned by the secretary, and serves at the pleasure of
 161 the secretary.

162 (3) ASSISTANT SECRETARIES.—

163 (a) Child Welfare.—

164 1. The secretary shall appoint an Assistant Secretary for
 165 Child Welfare to lead the department in carrying out its duties
 166 and responsibilities for child protection and child welfare. The
 167 individual appointed to this position shall serve at the
 168 pleasure of the secretary.

169 2. The assistant secretary must have at least 7 years of
 170 experience working in organizations delivering child protective
 171 or child welfare services.

172 (b) Substance Abuse and Mental Health.—

173 ~~(e)~~1. The secretary shall appoint an Assistant Secretary
 174 for Substance Abuse and Mental Health. The assistant secretary
 175 shall serve at the pleasure of the secretary and must have

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176 expertise in both areas of responsibility.

177 2. The secretary shall appoint a Director for Substance
 178 Abuse and Mental Health who has the requisite expertise and
 179 experience to head the state's Substance Abuse and Mental Health
 180 Program Office.

181 ~~(5)~~~~(4)~~ COMMUNITY ALLIANCES.—

182 (a) The department shall, in consultation with local
 183 communities, establish a community alliance or similar group of
 184 the stakeholders, community leaders, client representatives and
 185 funders of human services in each county to provide a focal
 186 point for community participation and governance of community-
 187 based services. An alliance may cover more than one county when
 188 such arrangement is determined to provide for more effective
 189 representation. The community alliance shall represent the
 190 diversity of the community.

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

193 1. Providing independent, community-focused, oversight of
 194 child protection and child welfare services and the local system
 195 of community-based care, as described in s. 409.998.

196 ~~2.1.~~ Joint planning for resource utilization in the
 197 community, including resources appropriated to the department
 198 and any funds that local funding sources choose to provide.

199 ~~3.2.~~ Needs assessment and establishment of community
 200 priorities for service delivery.

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201 ~~4.3.~~ Determining community outcome goals to supplement
202 state-required outcomes.

203 ~~5.4.~~ Serving as a catalyst for community resource
204 development.

205 ~~6.5.~~ Providing for community education and advocacy on
206 issues related to delivery of services.

207 ~~7.6.~~ Promoting prevention and early intervention services.

208 (c) The department shall ensure, to the greatest extent
209 possible, that the formation of each community alliance builds
210 on the strengths of the existing community human services
211 infrastructure.

212 (d) The initial membership of the community alliance in a
213 county shall be composed of the following, who shall be
214 appointed by the entities they represent:

215 ~~1.~~ A representative from the department.

216 ~~1.2.~~ A representative from county government.

217 ~~2.3.~~ A representative from the school district.

218 ~~3.4.~~ A representative from the county United Way.

219 ~~4.5.~~ A representative from the county sheriff's office,
220 unless the county sheriff's office is providing child protective
221 services.

222 ~~5.6.~~ A representative from the circuit court corresponding
223 to the county.

224 ~~6.7.~~ A representative from the county children's board, if
225 one exists.

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226 7. An advocate for persons receiving child protection and
 227 child welfare services chosen by the secretary.

228 (e) At any time after the initial meeting of the community
 229 alliance, the community alliance shall adopt bylaws and may
 230 increase the membership of the alliance to include the state
 231 attorney for the judicial circuit in which the community
 232 alliance is located, or his or her designee, the public defender
 233 for the judicial circuit in which the community alliance is
 234 located, or his or her designee, and other individuals and
 235 organizations who represent funding organizations, are community
 236 leaders, have knowledge of community-based service issues, or
 237 otherwise represent perspectives that will enable them to
 238 accomplish the duties listed in paragraph (b), if, in the
 239 judgment of the alliance, such change is necessary to adequately
 240 represent the diversity of the population within the community
 241 alliance service circuits.

242 (f) A member of the community alliance, other than a
 243 member specified in paragraph (d), may not receive payment for
 244 contractual services from the department or a community-based
 245 care lead agency.

246 (g) Members of the community alliances shall serve without
 247 compensation, but are entitled to receive reimbursement for per
 248 diem and travel expenses, as provided in s. 112.061. Payment may
 249 also be authorized for preapproved child care expenses or lost
 250 wages for members who are consumers of the department's services

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251 and for preapproved child care expenses for other members who
 252 demonstrate hardship.

253 (h) Members of a community alliance are subject to the
 254 provisions of part III of chapter 112, the Code of Ethics for
 255 Public Officers and Employees.

256 (i) Actions taken by a community alliance must be
 257 consistent with department policy and state and federal laws,
 258 rules, and regulations.

259 (j) Alliance members shall annually submit a disclosure
 260 statement of services interests to the department's inspector
 261 general. Any member who has an interest in a matter under
 262 consideration by the alliance must abstain from voting on that
 263 matter.

264 (k) All alliance meetings are open to the public pursuant
 265 to s. 286.011 and the public records provision of s. 119.07(1).

266 Section 2. Paragraph (o) is added to subsection (1) of
 267 section 39.001, Florida Statutes, and paragraph (k) of that
 268 subsection is amended, present paragraphs (f) through (h) of
 269 subsection (3) of that section are redesignated as paragraphs
 270 (g) through (i), respectively, and a new paragraph (f) is added
 271 to that subsection, and present subsections (4) through (11) of
 272 that section are redesignated as subsections (5) through (12),
 273 respectively, a new subsection (4) is added to that section, and
 274 paragraph (c) of present subsection (8) and paragraph (b) of
 275 present subsection (10) of that section are amended, to read:

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276 39.001 Purposes and intent; personnel standards and
 277 screening.-

278 (1) PURPOSES OF CHAPTER.-The purposes of this chapter are:

279 (k) To make every possible effort, ~~if when~~ two or more
 280 children who are in the care or under the supervision of the
 281 department are siblings, to place the siblings in the same home;
 282 and in the event of permanent placement of the siblings, to
 283 place them in the same adoptive home or, if the siblings are
 284 separated while under the care or supervision of the department
 285 or in a permanent placement, to keep them in contact with each
 286 other.

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

289 (3) GENERAL PROTECTIONS FOR CHILDREN.-It is a purpose of
 290 the Legislature that the children of this state be provided with
 291 the following protections:

292 (f) Access to sufficient home and community-based support
 293 for medically complex children to allow them to remain in the
 294 least restrictive and most nurturing environment, which includes
 295 sufficient home and community-based services in an amount and
 296 scope comparable to those the child would receive in out-of-home
 297 care placement.

298 (4) SERVICES FOR MEDICALLY COMPLEX CHILDREN.-The
 299 department shall maintain a program of family-centered services
 300 and supports for medically complex children. The purpose of the

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301 program is to prevent abuse and neglect of medically complex
 302 children while enhancing the capacity of families to provide for
 303 their children's needs. Program services must include outreach,
 304 early intervention, and provision of home and community-based
 305 services such as care coordination, respite care, and direct
 306 home care. The department shall work with the Agency for Health
 307 Care Administration and the Department of Health to provide
 308 needed services.

309 (9)~~(8)~~ OFFICE OF ADOPTION AND CHILD PROTECTION.—

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

311 1. Oversee the preparation and implementation of the state
 312 plan established under subsection (10)~~(9)~~ and revise and update
 313 the state plan as necessary.

314 2. Provide for or make available continuing professional
 315 education and training in the prevention of child abuse and
 316 neglect.

317 3. Work to secure funding in the form of appropriations,
 318 gifts, and grants from the state, the Federal Government, and
 319 other public and private sources in order to ensure that
 320 sufficient funds are available for the promotion of adoption,
 321 support of adoptive families, and child abuse prevention
 322 efforts.

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

325 a. Programs and services for the promotion of adoption,

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326 support of adoptive families, and prevention of child abuse and
 327 neglect.
 328 b. Training programs for the prevention of child abuse and
 329 neglect.
 330 c. Multidisciplinary and discipline-specific training
 331 programs for professionals with responsibilities affecting
 332 children, young adults, and families.
 333 d. Efforts to promote adoption.
 334 e. Postadoptive services to support adoptive families.
 335 5. Monitor, evaluate, and review the development and
 336 quality of local and statewide services and programs for the
 337 promotion of adoption, support of adoptive families, and
 338 prevention of child abuse and neglect and shall publish and
 339 distribute an annual report of its findings on or before January
 340 1 of each year to the Governor, the Speaker of the House of
 341 Representatives, the President of the Senate, the head of each
 342 state agency affected by the report, and the appropriate
 343 substantive committees of the Legislature. The report shall
 344 include:
 345 a. A summary of the activities of the office.
 346 b. A summary of the adoption data collected and reported
 347 to the federal Adoption and Foster Care Analysis and Reporting
 348 System (AFCARS) and the federal Administration for Children and
 349 Families.
 350 c. A summary of the child abuse prevention data collected

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351 and reported to the National Child Abuse and Neglect Data System
 352 (NCANDS) and the federal Administration for Children and
 353 Families.

354 d. A summary detailing the timeliness of the adoption
 355 process for children adopted from within the child welfare
 356 system.

357 e. Recommendations, by state agency, for the further
 358 development and improvement of services and programs for the
 359 promotion of adoption, support of adoptive families, and
 360 prevention of child abuse and neglect.

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

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

365 (11)~~(10)~~ FUNDING AND SUBSEQUENT PLANS.—

366 (b) The office and the other agencies and organizations
 367 listed in paragraph (10)(a) ~~(9)(a)~~ shall readdress the state
 368 plan and make necessary revisions every 5 years, at a minimum.
 369 Such revisions shall be submitted to the Speaker of the House of
 370 Representatives and the President of the Senate no later than
 371 June 30 of each year divisible by 5. At least biennially, the
 372 office shall review the state plan and make any necessary
 373 revisions based on changing needs and program evaluation
 374 results. An annual progress report shall be submitted to update
 375 the state plan in the years between the 5-year intervals. In

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376 order to avoid duplication of effort, these required plans may
 377 be made a part of or merged with other plans required by either
 378 the state or Federal Government, so long as the portions of the
 379 other state or Federal Government plan that constitute the state
 380 plan for the promotion of adoption, support of adoptive
 381 families, and prevention of child abuse, abandonment, and
 382 neglect are clearly identified as such and are provided to the
 383 Speaker of the House of Representatives and the President of the
 384 Senate as required above.

385 Section 3. Present subsections (42) through (76) of section
 386 39.01, Florida Statutes, are redesignated as subsections (43)
 387 through (79), respectively, new subsections (42), (67) and (71)
 388 are added to that section, and subsections (10), (22), and (33)
 389 are amended, to read:

390 39.01 Definitions.—When used in this chapter, unless the
 391 context otherwise requires:

392 (10) "Caregiver" means the parent, legal custodian,
 393 permanent guardian, adult household member, or other person
 394 responsible for a child's welfare as defined in subsection (48)
 395 ~~(47)~~.

396 (22) "Diligent efforts by a parent" means a course of
 397 conduct which results in a meaningful change in the behavior of
 398 a parent which a reduction reduces in risk to the child in the
 399 child's home to the extent that ~~would allow~~ the child may ~~to~~ be
 400 safely placed permanently back in the home as set forth in the

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401 case plan.

402 (33) "Institutional child abuse or neglect" means
 403 situations of known or suspected child abuse or neglect in which
 404 the person allegedly perpetrating the child abuse or neglect is
 405 an employee of a private school, public or private day care
 406 center, residential home, institution, facility, or agency or
 407 any other person at such institution responsible for the child's
 408 care as defined in subsection (48) ~~(47)~~.

409 (43) "Medical neglect" means the failure to provide or the
 410 failure to allow needed care as recommended by a health care
 411 practitioner for a physical injury, illness, medical condition,
 412 or impairment, or the failure to seek timely and appropriate
 413 medical care for a serious health problem that a reasonable
 414 person would have recognized as requiring professional medical
 415 attention. Medical neglect does not occur if the parent or legal
 416 custodian of the child has made reasonable attempts to obtain
 417 necessary health care services or the immediate health condition
 418 giving rise to the allegation of neglect is a known and expected
 419 complication of the child's diagnosis or treatment and:

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

423 (b) The parent received conflicting medical recommendations
 424 for treatment from multiple practitioners and did not follow all
 425 recommendations.

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426 (66) "Safety plan" means a plan created to control present
 427 or impending danger using the least intrusive means appropriate
 428 to protect a child when a parent, caregiver, or legal custodian
 429 is unavailable, unwilling, or unable to do so.

430 (71) "Sibling" means:

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

433 (b) Children who have lived together in a family and
 434 identify themselves as siblings.

435 Section 4. Section 39.2015, Florida Statutes, is created to
 436 read:

437 39.2015 Critical incident rapid response team.-

438 (1) The department shall conduct an immediate
 439 investigation of deaths or other serious incidents involving
 440 children using critical incident rapid response teams as
 441 provided in subsection (2). The purpose of such investigation is
 442 to identify root causes and rapidly determine the need to change
 443 policies and practices related to child protection and child
 444 welfare.

445 (2) An immediate onsite investigation conducted by a
 446 critical incident rapid response team is required for all child
 447 deaths reported to the department if the child or another child
 448 in his or her family was the subject of a verified report of
 449 suspected abuse or neglect in the previous 12 months. The
 450 secretary may direct an immediate investigation for other cases

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451 involving serious injury to a child.

452 (3) Each investigation shall be conducted by a team of at
 453 least five professionals with expertise in child protection,
 454 child welfare, and organizational management. The team may be
 455 selected from employees of the department, community-based care
 456 lead agencies, other provider organizations, faculty from the
 457 institute consisting of public and private universities offering
 458 degrees in social work established pursuant to s. 1004.615, or
 459 any other persons with the required expertise. The majority of
 460 the team must reside in judicial circuits outside the location
 461 of the incident. The secretary shall appoint a team leader for
 462 each group assigned to an investigation.

463 (4) An investigation shall be initiated as soon as
 464 possible, but not later than 2 business days after the case is
 465 reported to the department. A preliminary report on each case
 466 shall be provided to the secretary no later than 30 days after
 467 the investigation begins.

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

470 (6) All employees of the department or other state
 471 agencies and all personnel from contracted provider
 472 organizations are required to cooperate with the investigation
 473 by participating in interviews and timely responding to any
 474 requests for information.

475 (7) The secretary shall develop cooperative agreements

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476 with other entities and organizations as necessary to facilitate
 477 the work of the team.

478 (8) The members of the team may be reimbursed by the
 479 department for per diem, mileage, and other reasonable expenses
 480 as provided in s. 112.061. The department may also reimburse the
 481 team member's employer for the associated salary and benefits
 482 during the time the team member is fulfilling the duties
 483 required under this section.

484 (9) Upon completion of the investigation, a final report
 485 shall be made available to community-based care lead agencies,
 486 to other organizations involved in the child welfare system, and
 487 to the public through the department's website.

488 (10) The secretary, in conjunction with the institute
 489 established pursuant to s. 1004.615, shall develop guidelines
 490 for investigations conducted by critical incident rapid response
 491 teams and provide training to team members. Such guidelines must
 492 direct the teams in the conduct of a root-cause analysis that
 493 identifies, classifies, and attributes responsibility for both
 494 direct and latent causes for the death or other incident,
 495 including organizational factors, preconditions, and specific
 496 acts or omissions resulting from either error or a violation of
 497 procedures.

498 (11) The secretary shall appoint an advisory committee
 499 made up of experts in child protection and child welfare to make
 500 an independent review of investigative reports from the critical

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501 incident rapid response teams and make recommendations to
 502 improve policies and practices related to child protection and
 503 child welfare services. By October 1 of each year, the advisory
 504 committee shall make an annual report to the secretary,
 505 including findings and recommendations. The secretary shall
 506 submit the report to the Governor, the President of the Senate,
 507 and the Speaker of the House of Representatives.

508 Section 5. Section 39.2022, Florida Statutes, is created to
 509 read:

510 39.2022 Public disclosure of child deaths reported to the
 511 child abuse hotline.-

512 (1) It is the intent of the Legislature to provide prompt
 513 disclosure of the basic facts of all deaths of children from
 514 birth through 18 years of age which occur in this state and
 515 which are reported to the department's child abuse hotline.
 516 Disclosure shall be posted on the department's public website.
 517 This section does not limit the public access to records under
 518 any other provision of law.

519 (2) If a child death is reported to the child abuse
 520 hotline, the department shall post on its website all of the
 521 following:

- 522 (a) Age, race, and gender of the child.
- 523 (b) Date of the child's death.
- 524 (c) Allegations of the cause of death or the preliminary
 525 cause of death, until verified, at which time the verified cause

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526 of death will also be posted.

527 (d) County and placement of the child at the time of the
 528 incident leading to the child's death, if applicable.

529 (e) Name of the community-based care lead agency, case
 530 management agency, or out-of-home licensing agency involved with
 531 the child, family, or licensed caregiver, if applicable.(f)
 532 Whether the child has been the subject of any prior verified
 533 reports to the department's child abuse hotline.

534 Section 6. Paragraph (a) of subsection (9) of section
 535 39.301, Florida Statutes, is amended to read:

536 39.301 Initiation of protective investigations.—

537 (9) (a) For each report received from the central abuse
 538 hotline and accepted for investigation, the department or the
 539 sheriff providing child protective investigative services under
 540 s. 39.3065, shall perform the following child protective
 541 investigation activities to determine child safety:

542 1. Conduct a review of all relevant, available information
 543 specific to the child and family and alleged maltreatment;
 544 family child welfare history; local, state, and federal criminal
 545 records checks; and requests for law enforcement assistance
 546 provided by the abuse hotline. Based on a review of available
 547 information, including the allegations in the current report, a
 548 determination shall be made as to whether immediate consultation
 549 should occur with law enforcement, the child protection team, a
 550 domestic violence shelter or advocate, or a substance abuse or

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551 mental health professional. Such consultations should include
 552 discussion as to whether a joint response is necessary and
 553 feasible. A determination shall be made as to whether the person
 554 making the report should be contacted before the face-to-face
 555 interviews with the child and family members.

556 2. Conduct face-to-face interviews with the child; other
 557 siblings, if any; and the parents, legal custodians, or
 558 caregivers.

559 3. Assess the child's residence, including a determination
 560 of the composition of the family and household, including the
 561 name, address, date of birth, social security number, sex, and
 562 race of each child named in the report; any siblings or other
 563 children in the same household or in the care of the same
 564 adults; the parents, legal custodians, or caregivers; and any
 565 other adults in the same household.

566 4. Determine whether there is any indication that any
 567 child in the family or household has been abused, abandoned, or
 568 neglected; the nature and extent of present or prior injuries,
 569 abuse, or neglect, and any evidence thereof; and a determination
 570 as to the person or persons apparently responsible for the
 571 abuse, abandonment, or neglect, including the name, address,
 572 date of birth, social security number, sex, and race of each
 573 such person.

574 5. Complete assessment of immediate child safety for each
 575 child based on available records, interviews, and observations

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576 with all persons named in subparagraph 2. and appropriate
 577 collateral contacts, which may include other professionals. The
 578 department's child protection investigators are hereby
 579 designated a criminal justice agency for the purpose of
 580 accessing criminal justice information to be used for enforcing
 581 this state's laws concerning the crimes of child abuse,
 582 abandonment, and neglect. This information shall be used solely
 583 for purposes supporting the detection, apprehension,
 584 prosecution, pretrial release, posttrial release, or
 585 rehabilitation of criminal offenders or persons accused of the
 586 crimes of child abuse, abandonment, or neglect and may not be
 587 further disseminated or used for any other purpose.

588 6. Document the present and impending dangers to each
 589 child based on the identification of inadequate protective
 590 capacity through utilization of a standardized safety assessment
 591 instrument. If present or impending danger is identified, the
 592 child protective investigator must implement a safety plan that
 593 is specific, sufficient, feasible, and sustainable in response
 594 to the realities of the present or impending danger. A safety
 595 plan may be exclusively an in-home plan, an out of home plan, or
 596 a combination of both. A safety plan may not rely on promissory
 597 commitments by the parent, caregiver, or legal custodian who is
 598 currently not able to protect the child or on services that will
 599 not result in safety. A safety plan may not be implemented if
 600 for any reason the parents, guardian, or legal custodian lacks

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601 the capacity or ability to comply, or if a plan is not able to
 602 be developed that is sufficient, feasible, and sustainable. The
 603 plan must include, at a minimum, the specific tasks or services,
 604 their frequency and duration, the persons responsible for each,
 605 and how implementation will be monitored, as well as parental
 606 responsibility for financial support of the child and for any
 607 services contained in the plan. The plan shall provide that
 608 individuals from outside the home shall observe the children for
 609 some period of time every day, which may be fulfilled through
 610 methods including, but not limited to, daily attendance at
 611 school or child care. A safety plan shall remain in effect as
 612 long as a parent or the parents, guardian, or legal custodian
 613 does not have the protective capacity necessary to protect the
 614 child from identified danger threats. The plan must be signed by
 615 all parties as an acknowledgement that they are in agreement
 616 with the plan, though signing the plan does not constitute an
 617 admission to any allegation of abuse, abandonment, or neglect
 618 and does not constitute consent to a finding of dependency or
 619 termination of parental rights. The child protective
 620 investigator shall transfer the case to the community based care
 621 lead agency for on-going safety management and on-going services
 622 prior to closure of the investigation.

623 *a) If present danger is identified, the child protective
 624 investigator shall create and implement the plan before leaving
 625 the home or the location where there is present danger.

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626 ~~(b) Upon completion of the immediate safety assessment, the~~
 627 ~~department shall determine the additional activities necessary~~
 628 ~~to assess impending dangers, if any, and close the~~
 629 ~~investigation. If impending danger is identified, the child~~
 630 ~~protective investigator shall work with the lead agency~~
 631 ~~community-based care case manager to create and implement a~~
 632 ~~safety plan in response to the impending danger.~~

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

- 635 ~~1-~~ medical or other health care; or
- 636 ~~2-~~ homemaker care, day care, protective supervision, or
- 637 other services to stabilize the home environment, including
- 638 intensive family preservation services through the Intensive
- 639 Crisis Counseling Program,

640
 641 such services shall first be offered for voluntary acceptance
 642 unless:

- 643 1. There are high-risk factors that may impact the ability
 644 of the parents or legal custodians to exercise judgment. Such
 645 factors may include the parents' or legal custodians' young age
 646 or history of substance abuse, mental illness, or domestic
 647 violence; or

- 648 2. There is a high likelihood of lack of compliance with
 649 voluntary services, and such noncompliance would result in the
 650 child being unsafe.

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651 (b) The parents or legal custodians shall be informed of
 652 the right to refuse services, as well as the responsibility of
 653 the department to protect the child regardless of the acceptance
 654 or refusal of services. If the services are refused, a
 655 collateral contact shall include a relative, if the protective
 656 investigator has knowledge of and the ability to contact a
 657 relative. If the services are refused and the department deems
 658 that the child's need for protection ~~se~~ requires services, the
 659 department shall take the child into protective custody or
 660 petition the court as provided in this chapter. At any time
 661 after the commencement of a protective investigation, a relative
 662 may submit in writing to the protective investigator or case
 663 manager a request to receive notification of all proceedings and
 664 hearings in accordance with s. 39.502. The request shall include
 665 the relative's name, address, and phone number and the
 666 relative's relationship to the child. The protective
 667 investigator or case manager shall forward such request to the
 668 attorney for the department. The failure to provide notice to
 669 either a relative who requests it pursuant to this subsection or
 670 to a relative who is providing out-of-home care for a child may
 671 not result in any previous action of the court at any stage or
 672 proceeding in dependency or termination of parental rights under
 673 any part of this chapter being set aside, reversed, modified, or
 674 in any way changed absent a finding by the court that a change
 675 is required in the child's best interests.

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

678 1. Criteria that are factors requiring that the department
 679 take the child into custody, petition the court as provided in
 680 this chapter, or, if the child is not taken into custody or a
 681 petition is not filed with the court, conduct an administrative
 682 review. Such factors must include, but are not limited to,
 683 noncompliance with a safety plan or the case plan developed by
 684 the department, or its agent, and the family under this chapter,
 685 and prior abuse reports with findings that involve the child, a
 686 sibling, or caregiver.

687 2. Requirements that if after an administrative review the
 688 department determines not to take the child into custody or
 689 petition the court, the department shall document the reason for
 690 its decision in writing and include it in the investigative
 691 file. For all cases that were accepted by the local law
 692 enforcement agency for criminal investigation pursuant to
 693 subsection (2), the department must include in the file written
 694 documentation that the administrative review included input from
 695 law enforcement. In addition, for all cases that must be
 696 referred to child protection teams pursuant to s. 39.303(2) and
 697 (3), the file must include written documentation that the
 698 administrative review included the results of the team's
 699 evaluation. ~~Factors that must be included in the development of~~
 700 ~~the rule include noncompliance with the case plan developed by~~

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701 ~~the department, or its agent, and the family under this chapter~~
 702 ~~and prior abuse reports with findings that involve the child or~~
 703 ~~caregiver.~~

704 Section 7. Section 39.303, Florida Statutes, is amended to
 705 read:

706 39.303 Child protection teams; services; eligible cases.—
 707 The Children's Medical Services Program in the Department of
 708 Health shall develop, maintain, and coordinate the services of
 709 one or more multidisciplinary child protection teams in each of
 710 the service districts of the Department of Children and Family
 711 Services. Such teams may be composed of appropriate
 712 representatives of school districts and appropriate health,
 713 mental health, social service, legal service, and law
 714 enforcement agencies. ~~The Legislature finds that optimal~~
 715 ~~coordination of child protection teams and sexual abuse~~
 716 ~~treatment programs requires collaboration between~~ The Department
 717 of Health and the Department of Children and Families ~~Family~~
 718 ~~Services.~~ The two departments shall maintain an interagency
 719 agreement that establishes protocols for oversight and
 720 operations of child protection teams and sexual abuse treatment
 721 programs. The State Surgeon General and the Deputy Secretary for
 722 Children's Medical Services, in consultation with the Secretary
 723 of Children and Family Services, shall maintain the
 724 responsibility for the screening, employment, and, if necessary,
 725 the termination of child protection team medical directors, at

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726 headquarters and in the 15 districts. Child protection team
 727 medical directors shall be responsible for oversight of the
 728 teams in the districts.

729 (1) The Department of Health shall use ~~utilize~~ and convene
 730 the teams to supplement the assessment and protective
 731 supervision activities of the family safety and preservation
 732 program of the Department of Children and Families ~~Family~~
 733 ~~Services~~. ~~Nothing in~~ This section does not ~~shall be construed to~~
 734 remove or reduce the duty and responsibility of any person to
 735 report pursuant to this chapter all suspected or actual cases of
 736 child abuse, abandonment, or neglect or sexual abuse of a child.
 737 The role of the teams shall be to support activities of the
 738 program and to provide services deemed by the teams to be
 739 necessary and appropriate to abused, abandoned, and neglected
 740 children upon referral. The specialized diagnostic assessment,
 741 evaluation, coordination, consultation, and other supportive
 742 services that a child protection team shall be capable of
 743 providing include, but are not limited to, the following:

744 (a) Medical diagnosis and evaluation services, including
 745 provision or interpretation of X rays and laboratory tests, and
 746 related services, as needed, and documentation of related
 747 findings ~~relative thereto~~.

748 (b) Telephone consultation services in emergencies and in
 749 other situations.

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

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751 neglect, as defined by policy or rule of the Department of
752 Health.

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

758 (e) Expert medical, psychological, and related
759 professional testimony in court cases.

760 (f) Case staffings to develop treatment plans for children
761 whose cases have been referred to the team. A child protection
762 team may provide consultation with respect to a child who is
763 alleged or is shown to be abused, abandoned, or neglected, which
764 consultation shall be provided at the request of a
765 representative of the family safety and preservation program or
766 at the request of any other professional involved with a child
767 or the child's parent or parents, legal custodian or custodians,
768 or other caregivers. In every such child protection team case
769 staffing, consultation, or staff activity involving a child, a
770 family safety and preservation program representative shall
771 attend and participate.

772 (g) Case service coordination and assistance, including
773 the location of services available from other public and private
774 agencies in the community.

775 (h) Such training services for program and other employees

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776 of the Department of Children and Families ~~Family Services~~,
 777 employees of the Department of Health, and other medical
 778 professionals as is deemed appropriate to enable them to develop
 779 and maintain their professional skills and abilities in handling
 780 child abuse, abandonment, and neglect cases.

781 (i) Educational and community awareness campaigns on child
 782 abuse, abandonment, and neglect in an effort to enable citizens
 783 more successfully to prevent, identify, and treat child abuse,
 784 abandonment, and neglect in the community.

785 (j) Child protection team assessments that include, as
 786 appropriate, medical evaluations, medical consultations, family
 787 psychosocial interviews, specialized clinical interviews, or
 788 forensic interviews.

789
 790 All medical personnel participating on a child protection team
 791 must successfully complete the required child protection team
 792 training curriculum as set forth in protocols determined by the
 793 Deputy Secretary for Children's Medical Services and the
 794 Statewide Medical Director for Child Protection. A child
 795 protection team that is evaluating a report of medical neglect
 796 and assessing the health care needs of a medically complex child
 797 shall consult with a physician who has experience in treating
 798 children with the same condition.

799 (2) The child abuse, abandonment, and neglect reports that
 800 must be referred by the department to child protection teams of

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801 | the Department of Health for an assessment and other appropriate
 802 | available support services as set forth in subsection (1) must
 803 | include cases involving:

804 | (a) Injuries to the head, bruises to the neck or head,
 805 | burns, or fractures in a child of any age.

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

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

808 | (d) Any sexually transmitted disease in a prepubescent
 809 | child.

810 | (e) Reported malnutrition of a child and failure of a
 811 | child to thrive.

812 | (f) Reported medical neglect of a child.

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

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

820 | (3) All abuse and neglect cases transmitted for
 821 | investigation to a district by the hotline must be
 822 | simultaneously transmitted to the Department of Health child
 823 | protection team for review. For the purpose of determining
 824 | whether face-to-face medical evaluation by a child protection
 825 | team is necessary, all cases transmitted to the child protection

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826 team which meet the criteria in subsection (2) must be timely
827 reviewed by:

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

831 (b) A physician licensed under chapter 458 or chapter 459
832 who holds board certification in a specialty other than
833 pediatrics, who may complete the review only when working under
834 the direction of a physician licensed under chapter 458 or
835 chapter 459 who holds board certification in pediatrics and is a
836 member of a child protection team;

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

840 (d) A physician assistant licensed under chapter 458 or
841 chapter 459, who may complete the review only when working under
842 the supervision of a physician licensed under chapter 458 or
843 chapter 459 who holds board certification in pediatrics and is a
844 member of a child protection team; or

845 (e) A registered nurse licensed under chapter 464, who may
846 complete the review only when working under the direct
847 supervision of a physician licensed under chapter 458 or chapter
848 459 who holds certification in pediatrics and is a member of a
849 child protection team.

850 (4) A face-to-face medical evaluation by a child

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851 protection team is not necessary when:

852 (a) The child was examined for the alleged abuse or
 853 neglect by a physician who is not a member of the child
 854 protection team, and a consultation between the child protection
 855 team board-certified pediatrician, advanced registered nurse
 856 practitioner, physician assistant working under the supervision
 857 of a child protection team board-certified pediatrician, or
 858 registered nurse working under the direct supervision of a child
 859 protection team board-certified pediatrician, and the examining
 860 physician concludes that a further medical evaluation is
 861 unnecessary;

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

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

869
 870 Notwithstanding paragraphs (a), (b), and (c), a child protection
 871 team pediatrician, as authorized in subsection (3), may
 872 determine that a face-to-face medical evaluation is necessary.

873 (5) In all instances in which a child protection team is
 874 providing certain services to abused, abandoned, or neglected
 875 children, other offices and units of the Department of Health,

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876 and offices and units of the Department of Children and Families
 877 ~~Family Services~~, shall avoid duplicating the provision of those
 878 services.

879 (6) The Department of Health child protection team quality
 880 assurance program and the Department of Children and Families
 881 ~~Family Services'~~ Family Safety Program Office quality assurance
 882 program shall collaborate to ensure referrals and responses to
 883 child abuse, abandonment, and neglect reports are appropriate.
 884 Each quality assurance program shall include a review of records
 885 in which there are no findings of abuse, abandonment, or
 886 neglect, and the findings of these reviews shall be included in
 887 each department's quality assurance reports.

888 Section 8. Section 39.3068, Florida Statutes, is created to
 889 read:

890 39.3068 Reports of Medical Neglect.--

891 (1) Upon receiving a report alleging medical neglect as
 892 defined in s. 39.01, the department or sheriff's office shall
 893 assign the case to a child protective investigator who has
 894 specialized training in addressing medical neglect or working
 895 with medically complex children.

896 (2) The child protective investigator who has interacted
 897 with the child and the child's family shall promptly contact and
 898 provide information to the child protection team. The child
 899 protection team shall assist the child protective investigator
 900 in identifying immediate responses to address the medical needs

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901 of the child with the priority of maintaining the child in the
 902 home if the parents will be able to meet the needs of the child
 903 with additional services. The child protective investigator and
 904 the child protection team must use a family-centered approach to
 905 assess the capacity of the family to meet those needs. A
 906 family-centered approach is intended to increase independence on
 907 the part of the family, accessibility to programs and services
 908 within the community, and collaboration between families and
 909 their service providers. The ethnic, cultural, economic, racial,
 910 social, and religious diversity of families must be respected
 911 and considered in the development and provision of services.

912 (3) The child shall be evaluated by the child protection
 913 team as soon as practicable. After receipt of the report from
 914 the child protection team, the department shall have a case
 915 staffing which shall be attended, at a minimum, by the child
 916 protective investigator, department legal staff, and
 917 representatives from the child protection team which evaluated
 918 the child, Children's Medical Services, the Agency for Health
 919 Care Administration, the community-based care lead agency, and
 920 any providers of services to the child. However, the Agency for
 921 Health Care Administration is not required to attend the
 922 staffing if the child is not Medicaid eligible. The staffing
 923 shall, at a minimum, consider which services are available given
 924 the family's eligibility for services, and effective in
 925 addressing issues leading to medical neglect allegations that

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926 | would enable the child to safely remain at home. If such
927 | services are available and effective, they shall be provided.

928 | Section 9. Paragraph (h) of subsection (8) and subsection
929 | (9) of section 39.402, Florida Statutes, are amended to read:

930 | 39.402 Placement in a shelter.-

931 | (8)

932 | (h) The order for placement of a child in shelter care
933 | must identify the parties present at the hearing and must
934 | contain written findings:

935 | 1. That placement in shelter care is necessary based on
936 | the criteria in subsections (1) and (2).

937 | 2. That placement in shelter care is in the best interest
938 | of the child.

939 | 3. That continuation of the child in the home is contrary
940 | to the welfare of the child because the home situation presents
941 | a substantial and immediate danger to the child's physical,
942 | mental, or emotional health or safety which cannot be mitigated
943 | by the provision of preventive services.

944 | 4. That based upon the allegations of the petition for
945 | placement in shelter care, there is probable cause to believe
946 | that the child is dependent or that the court needs additional
947 | time, which may not exceed 72 hours, in which to obtain and
948 | review documents pertaining to the family in order to
949 | appropriately determine the risk to the child.

950 | 5. That the department has made reasonable efforts to

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951 prevent or eliminate the need for removal of the child from the
 952 home. A finding of reasonable effort by the department to
 953 prevent or eliminate the need for removal may be made and the
 954 department is deemed to have made reasonable efforts to prevent
 955 or eliminate the need for removal if:

956 a. The first contact of the department with the family
 957 occurs during an emergency;

958 b. The appraisal of the home situation by the department
 959 indicates that the home situation presents a substantial and
 960 immediate danger to the child's physical, mental, or emotional
 961 health or safety which cannot be mitigated by the provision of
 962 preventive services;

963 c. The child cannot safely remain at home, either because
 964 there are no preventive services that can ensure the health and
 965 safety of the child or because, even with appropriate and
 966 available services being provided, the health and safety of the
 967 child cannot be ensured; or

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

971 6. That the department has made reasonable efforts to keep
 972 siblings together if they are removed and placed in out-of-home
 973 care unless such a placement is not in the best interest of each
 974 child. The department shall report to the court its efforts to
 975 place siblings together unless the court finds that such

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976 placement is not in the best interest of a child or his or her
 977 sibling.

978 ~~7.6.~~ That the court notified the parents, relatives that
 979 are providing out-of-home care for the child, or legal
 980 custodians of the time, date, and location of the next
 981 dependency hearing and of the importance of the active
 982 participation of the parents, relatives that are providing out-
 983 of-home care for the child, or legal custodians in all
 984 proceedings and hearings.

985 ~~8.7.~~ That the court notified the parents or legal
 986 custodians of their right to counsel to represent them at the
 987 shelter hearing and at each subsequent hearing or proceeding,
 988 and the right of the parents to appointed counsel, pursuant to
 989 the procedures set forth in s. 39.013.

990 ~~9.8.~~ That the court notified relatives who are providing
 991 out-of-home care for a child as a result of the shelter petition
 992 being granted that they have the right to attend all subsequent
 993 hearings, to submit reports to the court, and to speak to the
 994 court regarding the child, if they so desire.

995 (9) (a) At any shelter hearing, the department shall
 996 provide to the court a recommendation for scheduled contact
 997 between the child and parents, if appropriate. The court shall
 998 determine visitation rights absent a clear and convincing
 999 showing that visitation is not in the best interest of the
 1000 child. Any order for visitation or other contact must conform to

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1001 ~~the provisions of~~ s. 39.0139. If visitation is ordered but will
 1002 not commence within 72 hours of the shelter hearing, the
 1003 department shall provide justification to the court.

1004 (b) If siblings who are removed from the home cannot be
 1005 placed together, the department shall provide to the court a
 1006 recommendation for frequent visitation or other ongoing
 1007 interaction between the siblings unless this interaction would
 1008 be contrary to a sibling's safety or well-being. If visitation
 1009 among siblings is ordered but will not commence within 72 hours
 1010 of the shelter hearing, the department shall provide
 1011 justification to the court for the delay.

1012 Section 10. Paragraph (d) of subsection (3) of section
 1013 39.501, Florida Statutes, is amended to read:

1014 39.501 Petition for dependency.—

1015 (3)

1016 (d) The petitioner must state in the petition, if known,
 1017 whether:

1018 1. A parent or legal custodian named in the petition has
 1019 previously unsuccessfully participated in voluntary services
 1020 offered by the department;

1021 2. A parent or legal custodian named in the petition has
 1022 participated in mediation and whether a mediation agreement
 1023 exists;

1024 3. A parent or legal custodian has rejected the voluntary
 1025 services offered by the department;

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1026 4. A parent or legal custodian named in the petition has
 1027 not fully complied with a safety plan; or

1028 5. ~~4.~~ The department has determined that voluntary services
 1029 are not appropriate for the parent or legal custodian and the
 1030 reasons for such determination.

1031

1032 If the petitioner is the department, it shall provide all safety
 1033 assessments and safety plans involving the parent or legal
 1034 custodian to the court.

1035 Section 11. Paragraph (c) of subsection (2) and
 1036 paragraph (a) of subsection (3) of section 39.701, Florida
 1037 Statutes, is amended to read:

1038 39.701 Judicial review.—

1039 (2) REVIEW HEARINGS FOR CHILDREN YOUNGER THAN 18 YEARS OF
 1040 AGE.—

1041 (c) Review determinations.—The court and any citizen
 1042 review panel shall take into consideration the information
 1043 contained in the social services study and investigation and all
 1044 medical, psychological, and educational records that support the
 1045 terms of the case plan; testimony by the social services agency,
 1046 the parent, the foster parent or legal custodian, the guardian
 1047 ad litem or surrogate parent for educational decisionmaking if
 1048 one has been appointed for the child, and any other person
 1049 deemed appropriate; and any relevant and material evidence
 1050 submitted to the court, including written and oral reports to

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1051 the extent of their probative value. These reports and evidence
 1052 may be received by the court in its effort to determine the
 1053 action to be taken with regard to the child and may be relied
 1054 upon to the extent of their probative value, even though not
 1055 competent in an adjudicatory hearing. In its deliberations, the
 1056 court and any citizen review panel shall seek to determine:

1057 1. If the parent was advised of the right to receive
 1058 assistance from any person or social service agency in the
 1059 preparation of the case plan.

1060 2. If the parent has been advised of the right to have
 1061 counsel present at the judicial review or citizen review
 1062 hearings. If not so advised, the court or citizen review panel
 1063 shall advise the parent of such right.

1064 3. If a guardian ad litem needs to be appointed for the
 1065 child in a case in which a guardian ad litem has not previously
 1066 been appointed or if there is a need to continue a guardian ad
 1067 litem in a case in which a guardian ad litem has been appointed.

1068 4. Who holds the rights to make educational decisions for
 1069 the child. If appropriate, the court may refer the child to the
 1070 district school superintendent for appointment of a surrogate
 1071 parent or may itself appoint a surrogate parent under the
 1072 Individuals with Disabilities Education Act and s. 39.0016.

1073 5. The compliance or lack of compliance of all parties
 1074 with applicable items of the case plan, including the parents'
 1075 compliance with child support orders.

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1076 | 6. The compliance or lack of compliance with a visitation
 1077 | contract between the parent and the social service agency for
 1078 | contact with the child, including the frequency, duration, and
 1079 | results of the parent-child visitation and the reason for any
 1080 | noncompliance.

1081 | 7. The frequency, kind, and duration of sibling contacts
 1082 | among siblings who have been separated during placement, as well
 1083 | as any efforts undertaken to reunite separated siblings if doing
 1084 | so is in the best interest of the child.

1085 | 8.7. The compliance or lack of compliance of the parent in
 1086 | meeting specified financial obligations pertaining to the care
 1087 | of the child, including the reason for failure to comply, if
 1088 | applicable such is the case.

1089 | 9.8- Whether the child is receiving safe and proper care
 1090 | according to s. 39.6012, including, but not limited to, the
 1091 | appropriateness of the child's current placement, including
 1092 | whether the child is in a setting that is as family-like and as
 1093 | close to the parent's home as possible, consistent with the
 1094 | child's best interests and special needs, and including
 1095 | maintaining stability in the child's educational placement, as
 1096 | documented by assurances from the community-based care provider
 1097 | that:

1098 | a. The placement of the child takes into account the
 1099 | appropriateness of the current educational setting and the
 1100 | proximity to the school in which the child is enrolled at the

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1101 time of placement.

1102 b. The community-based care agency has coordinated with
 1103 appropriate local educational agencies to ensure that the child
 1104 remains in the school in which the child is enrolled at the time
 1105 of placement.

1106 9. A projected date likely for the child's return home or
 1107 other permanent placement.

1108 ~~11.10.~~ When appropriate, the basis for the unwillingness
 1109 or inability of the parent to become a party to a case plan. The
 1110 court and the citizen review panel shall determine if the
 1111 efforts of the social service agency to secure party
 1112 participation in a case plan were sufficient.

1113 ~~12.11.~~ For a child who has reached 13 years of age but is
 1114 not yet 18 years of age, the adequacy of the child's preparation
 1115 for adulthood and independent living.

1116 ~~13.12.~~ If amendments to the case plan are required.
 1117 Amendments to the case plan must be made under s. 39.6013.

1118 (3) REVIEW HEARINGS FOR CHILDREN 17 YEARS OF AGE.—

1119 (a) In addition to the review and report required under
 1120 paragraphs (1)(a) and (2)(a), respectively, the court shall hold
 1121 a judicial review hearing within 90 days after a child's 17th
 1122 birthday. The court shall also issue an order, separate from the
 1123 order on judicial review, that the disability of nonage of the
 1124 child has been removed pursuant to ss. 743.044, 743.045, and
 1125 743.046, and for any of these disabilities that the court finds

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1126 is in the child's best interest to remove. The court s. 743.045
 1127 ~~and~~ shall continue to hold timely judicial review hearings. If
 1128 necessary, the court may review the status of the child more
 1129 frequently during the year before the child's 18th birthday. At
 1130 each review hearing held under this subsection, in addition to
 1131 any information or report provided to the court by the foster
 1132 parent, legal custodian, or guardian ad litem, the child shall
 1133 be given the opportunity to address the court with any
 1134 information relevant to the child's best interest, particularly
 1135 in relation to independent living transition services. The
 1136 department shall include in the social study report for judicial
 1137 review written verification that the child has:

- 1138 1. A current Medicaid card and all necessary information
 1139 concerning the Medicaid program sufficient to prepare the child
 1140 to apply for coverage upon reaching the age of 18, if such
 1141 application is appropriate.
- 1142 2. A certified copy of the child's birth certificate and,
 1143 if the child does not have a valid driver license, a Florida
 1144 identification card issued under s. 322.051.
- 1145 3. A social security card and information relating to
 1146 social security insurance benefits if the child is eligible for
 1147 those benefits. If the child has received such benefits and they
 1148 are being held in trust for the child, a full accounting of
 1149 these funds must be provided and the child must be informed as
 1150 to how to access those funds.

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1151 4. All relevant information related to the Road-to-
 1152 Independence Program, including, but not limited to, eligibility
 1153 requirements, information on participation, and assistance in
 1154 gaining admission to the program. If the child is eligible for
 1155 the Road-to-Independence Program, he or she must be advised that
 1156 he or she may continue to reside with the licensed family home
 1157 or group care provider with whom the child was residing at the
 1158 time the child attained his or her 18th birthday, in another
 1159 licensed family home, or with a group care provider arranged by
 1160 the department.

1161 5. An open bank account or the identification necessary to
 1162 open a bank account and to acquire essential banking and
 1163 budgeting skills.

1164 6. Information on public assistance and how to apply for
 1165 public assistance.

1166 7. A clear understanding of where he or she will be living
 1167 on his or her 18th birthday, how living expenses will be paid,
 1168 and the educational program or school in which he or she will be
 1169 enrolled.

1170 8. Information related to the ability of the child to
 1171 remain in care until he or she reaches 21 years of age under s.
 1172 39.013.

1173 9. A letter providing the dates that the child is under
 1174 the jurisdiction of the court.

1175 10. A letter stating that the child is in compliance with

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1176 financial aid documentation requirements.
 1177 11. The child's educational records.
 1178 12. The child's entire health and mental health records.
 1179 13. The process for accessing his or her case file.
 1180 14. A statement encouraging the child to attend all
 1181 judicial review hearings occurring after the child's 17th
 1182 birthday.
 1183 Section 12. Subsection (2) of section 39.802, Florida
 1184 Statutes, is amended to read:
 1185 39.802 Petition for termination of parental rights;
 1186 filing; elements.-
 1187 (2) The form of the petition is governed by the Florida
 1188 Rules of Juvenile Procedure. The petition must be in writing and
 1189 signed by the petitioner ~~or, if the department is the~~
 1190 ~~petitioner, by an employee of the department,~~ under oath stating
 1191 the petitioner's good faith in filing the petition.
 1192 Section 13. Subsection (1) and paragraph (c) of subsection
 1193 (3) of section 383.402, Florida Statutes, are amended to read:
 1194 383.402 Child abuse death review; State Child Abuse Death
 1195 Review Committee; local child abuse death review committees.-
 1196 (1) It is the intent of the Legislature to establish a
 1197 statewide multidisciplinary, multiagency child abuse death
 1198 assessment and prevention system that consists of state and
 1199 local review committees. The state and local review committees
 1200 shall review the facts and circumstances of all deaths of

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1201 children from birth through age 18 which occur in this state and
 1202 are reported to the child abuse hotline of the Department of
 1203 Children and Families ~~as the result of verified child abuse or~~
 1204 ~~neglect~~. The purpose of the review shall be to:

1205 (a) Achieve a greater understanding of the causes and
 1206 contributing factors of deaths resulting from child abuse.

1207 (b) Whenever possible, develop a communitywide approach to
 1208 address such cases and contributing factors.

1209 (c) Identify any gaps, deficiencies, or problems in the
 1210 delivery of services to children and their families by public
 1211 and private agencies which may be related to deaths that are the
 1212 result of child abuse.

1213 (d) Make and implement recommendations for changes in law,
 1214 rules, and policies, as well as develop practice standards that
 1215 support the safe and healthy development of children and reduce
 1216 preventable child abuse deaths.

1217 (3) The State Child Abuse Death Review Committee shall:

1218 (c) Prepare an annual statistical report on the incidence
 1219 and causes of death resulting from reported child abuse in the
 1220 state during the prior calendar year. The state committee shall
 1221 submit a copy of the report by October 1 ~~December 31~~ of each
 1222 year to the Governor, the President of the Senate, and the
 1223 Speaker of the House of Representatives. The report must include
 1224 recommendations for state and local action, including specific
 1225 policy, procedural, regulatory, or statutory changes, and any

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1226 other recommended preventive action.

1227 Section 14. Subsection (5) of section 402.40, Florida
1228 Statutes, is amended to read:

1229 402.40 Child welfare training and certification.—

1230 (5) CORE COMPETENCIES AND SPECIALIZATIONS.—

1231 (a) The Department of Children and Families ~~Family~~
1232 ~~Services~~ shall approve the core competencies and related
1233 preservice curricula that ensures that each person delivering
1234 child welfare services obtains the knowledge, skills, and
1235 abilities to competently carry out his or her work
1236 responsibilities.

1237 (b) The identification of these core competencies and
1238 development of preservice curricula shall be a collaborative
1239 effort that includes professionals who have expertise in child
1240 welfare services, department-approved third-party credentialing
1241 entities, and providers that will be affected by the curriculum,
1242 including, but not limited to, representatives from the
1243 community-based care lead agencies, sheriffs' offices conducting
1244 child protection investigations, and child welfare legal
1245 services providers.

1246 (c) Community-based care agencies, sheriffs' offices, and
1247 the department may contract for the delivery of preservice and
1248 any additional training for persons delivering child welfare
1249 services if the curriculum satisfies the department-approved
1250 core competencies.

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1251 (d) The department may also approve specializations in
 1252 serving specific populations or in skills relevant to child
 1253 protection for which individuals may be certified.

1254 (e) ~~(d)~~ Department-approved credentialing entities shall,
 1255 for a period of at least 12 months after implementation of the
 1256 third-party child welfare certification programs, grant
 1257 reciprocity and award a child welfare certification to
 1258 individuals who hold current department-issued child welfare
 1259 certification in good standing, at no cost to the department or
 1260 the certificateholder.

1261 Section 15. Section 402.402, Florida Statutes, is created
 1262 to read:

1263 402.402 Child protective investigators; child protection
 1264 investigation supervisors; department attorneys handling child
 1265 welfare cases.-

1266 (1) As used in this section, the term:

1267 (a) "Human services related field" means social work,
 1268 psychology, sociology, counseling, special education, human
 1269 development, child development, family development, marriage and
 1270 family therapy, and nursing.

1271 (b) "Relevant coursework" means coursework that imparts
 1272 knowledge and leads to the development of skills with direct
 1273 application to the child protection and child welfare field from
 1274 a college or university social work program accredited by the
 1275 Council on Social Work Education.

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1276 (2) CHILD PROTECTIVE INVESTIGATION STAFF REQUIREMENTS.—
 1277 (a) Child protective investigators and child protective
 1278 investigation supervisors hired on or after July 1, 2014, by the
 1279 department or a sheriff's office must have one of the following:
 1280 1. A bachelor's or a master's degree in social work from a
 1281 college or university social work program accredited by the
 1282 Council on Social Work Education. The individual shall have had
 1283 at least 12 credit hours of relevant coursework.
 1284 2. A bachelor's degree or a master's degree in a human-
 1285 services related field and at least 12 credit hours of relevant
 1286 coursework.
 1287 3. A bachelor's degree or a master's degree in a human-
 1288 services related field. Within three years of hire, such
 1289 individuals shall complete 12 credit hours of relevant
 1290 coursework. The sequence of courses may be designed to provide
 1291 in-depth knowledge in serving a specific subpopulation or
 1292 developing a specific set of skills relevant to child
 1293 protection. The department shall consult with the institute
 1294 authorized in s. 1004.615 to identify courses available through
 1295 the consortium of public and private universities in the state
 1296 offering degrees in social work that fulfill this requirement.
 1297 (b) All child protective investigators and child
 1298 protective investigation supervisors shall complete specialized
 1299 training either focused in serving a specific population,
 1300 including but not limited to medically fragile children,

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1301 sexually exploited children, children under the age of three, or
 1302 families with issues of domestic violence, mental illness, or
 1303 substance abuse, or in performing certain aspects of child
 1304 protection practice, such as investigation techniques and
 1305 analysis of family dynamics. The specialized training may be
 1306 used to fulfill continuing education requirements pursuant to
 1307 402.40(2)(e). Individuals hired before July 1, 2014, shall
 1308 complete the specialized training by June 30, 2016, and those
 1309 hired on or after July 1, 2014, shall complete the specialized
 1310 training within two years of hire. An individual may receive
 1311 specialized training in multiple areas.

1312 (2) ATTORNEYS FOR THE DEPARTMENT HANDLING CHILD WELFARE
 1313 CASES.—

1314 (a) Attorneys for the department handling child welfare
 1315 cases hired on or after July 1, 2014, shall:

1316 1. Receive, at a minimum, the same pre-service training
 1317 provided to child protective investigators.

1318 2. Within 60 days of hiring, shadow an experienced child
 1319 protective investigator and an experienced case manager for at
 1320 least 8 hours each.

1321 Section 16. Section 402.403, Florida Statutes, is created
 1322 to read:

1323 402.403 Child Protective Investigator and Supervisor
 1324 Tuition Exemption Program.—

1325 (1) There is established within the department the Child

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1326 Protective Investigator and Supervisor Tuition Exemption Program
 1327 for the purpose of recruiting and retaining high-performing
 1328 individuals who are employed as child protective investigators
 1329 or child protective investigation supervisors with the
 1330 department or a sheriff's office and who do not have a
 1331 bachelor's degree or master's degree in social work. The
 1332 department or sheriff's office may approve the exemption from
 1333 tuition and fees for a state university for an employee who:

1334 (a) Has been employed as a child protective investigator
 1335 or child protective investigation supervisor by the department
 1336 or sheriff's office for at least two years and who is determined
 1337 by the department or sheriff's office to have a high level of
 1338 performance; and

1339 (b) Is accepted in an upper-division undergraduate or
 1340 graduate level college or university social work program
 1341 accredited by the Council on Social Work Education which leads
 1342 to either a bachelor's degree or a master's degree in social
 1343 work, or is completing 12 credit hours of relevant coursework as
 1344 required under s. 402.403(2)(a)3.

1345 Section 17. Section 402.404, Florida Statutes, is created
 1346 to read:

1347 402.404 Child Protective Investigator and Supervisor
 1348 Student Loan Forgiveness Program.—

1349 (1) There is established within the department the Florida
 1350 Child Protective Investigator and Supervisor Student Loan

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1351 Forgiveness Program. The purpose of the program is to increase
 1352 employment and retention of high-performing individuals who have
 1353 either a bachelor's degree or a master's degree in social work
 1354 as child protective investigators or child protective
 1355 investigation supervisors with the department or sheriff's
 1356 office by making payments toward loans received by students from
 1357 federal or state programs or commercial lending institutions for
 1358 the support of prior postsecondary study in accredited social
 1359 work programs.

1360 (2) In order to be eligible for the program, a candidate
 1361 must be employed as a child protective investigator or child
 1362 protective investigation supervisor by the department or a
 1363 sheriff's office for at least two years, must be determined by
 1364 the department or sheriff's office to have a high level of
 1365 performance, and must have graduated from an accredited social
 1366 work program with either a bachelor's degree or a master's
 1367 degree in social work.

1368 (3) Only loans to pay the costs of tuition, books, fees,
 1369 and living expenses shall be covered.

1370 (4) The department may make loan payments of up to \$3,000
 1371 each year for up to 4 years on behalf of selected graduates of
 1372 an accredited social work program from the funds appropriated
 1373 for this purpose. All payments are contingent upon continued
 1374 proof of employment as a child protective investigator or a
 1375 child protective investigation supervisor with the department or

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1376 sheriff's office and made directly to the holder of the loan.

1377 (5) A student who receives a tuition exemption pursuant to
 1378 s. 402.403 is not eligible to participate in the Child
 1379 Protective Investigator Student Loan Forgiveness Program.

1380 Section 18. Section 409.165, Florida Statutes, is amended
 1381 to read:

1382 409.165 Alternate care for children.—

1383 (1) Within funds appropriated, the department shall
 1384 establish and supervise a program of emergency shelters, runaway
 1385 shelters, foster homes, group homes, agency-operated group
 1386 treatment homes, nonpsychiatric residential group care
 1387 facilities, psychiatric residential treatment facilities, and
 1388 other appropriate facilities to provide shelter and care for
 1389 dependent children who must be placed away from their families.
 1390 The department, in accordance with outcome established goals
 1391 established in s. 409.986, shall contract for the provision of
 1392 such shelter and care by counties, municipalities, nonprofit
 1393 corporations, and other entities capable of providing needed
 1394 services if:

1395 (a) The services so provided comply with all department
 1396 standards, policies, and procedures ~~are available;~~

1397 (b) The services can be ~~so~~ provided at a reasonable cost
 1398 ~~are more cost-effective than those provided by the department;~~
 1399 and

1400 (c) Unless otherwise provided by law, such providers of

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1401 shelter and care are licensed by the department.

1402

1403 ~~It is the legislative intent that the~~

1404 (2) Funds appropriated for the alternate care of children
 1405 as described in this section may be used to meet the needs of
 1406 children in their own homes or those of relatives if the
 1407 children can be safely served in such settings ~~their own homes,~~
 1408 ~~or the homes of relatives,~~ and the expenditure of funds in such
 1409 manner is equal to or less than the cost of out-of-home
 1410 placement ~~calculated by the department to be an eventual cost~~
 1411 ~~savings over placement of children.~~

1412 (3) ~~(2)~~ The department shall ~~may~~ cooperate with all child
 1413 service institutions or agencies within the state which meet the
 1414 department's standards in order to maintain a comprehensive,
 1415 coordinated, and inclusive system for promoting and protecting
 1416 the well-being of children, consistent with the goals
 1417 established in s. 409.986 rules for proper care and supervision
 1418 ~~prescribed by the department for the well-being of children.~~

1419 (a) The department shall work with the Department of
 1420 Health in the development, utilization, and monitoring of
 1421 medical foster homes for medically complex children.

1422 (b) The department shall work with the Agency for Health
 1423 Care Administration to provide such home and community-based
 1424 services as may be necessary to maintain medically complex
 1425 children in the least restrictive and most nurturing

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1426 environment.
 1427 ~~(4)(3)~~ With the written consent of parents, custodians, or
 1428 guardians, or in accordance with those provisions in chapter 39
 1429 that relate to dependent children, the department, under rules
 1430 properly adopted, may place a child:
 1431 (a) With a relative;
 1432 (b) With an adult nonrelative approved by the court for
 1433 long-term custody;
 1434 (c) With a person who is considering the adoption of a
 1435 child in the manner provided for by law;
 1436 (d) When limited, except as provided in paragraph (b), to
 1437 temporary emergency situations, with a responsible adult
 1438 approved by the court;
 1439 (e) With a person or family approved by the department to
 1440 serve as a medical foster home;
 1441 ~~(f)(e)~~ With a person or agency licensed by the department
 1442 in accordance with s. 409.175; or
 1443 ~~(g)(f)~~ In a subsidized independent living situation,
 1444 subject to the provisions of s. 409.1451(4)(c),
 1445
 1446 under such conditions as are determined to be for the best
 1447 interests or the welfare of the child. Any child placed in an
 1448 institution or in a family home by the department or its agency
 1449 may be removed by the department or its agency, and such other
 1450 disposition may be made as is for the best interest of the

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1451 child, including transfer of the child to another institution,
 1452 another home, or the home of the child. Expenditure of funds
 1453 appropriated for out-of-home care can be used to meet the needs
 1454 of a child in the child's own home or the home of a relative if
 1455 the child can be safely served in the child's own home or that
 1456 of a relative if placement can be avoided by the expenditure of
 1457 such funds, and if the expenditure of such funds in this manner
 1458 is equal to or less than the cost of out-of-home placement
 1459 ~~calculated by the department to be a potential cost savings.~~

1460 Section 19. Paragraph (c) of subsection (2) of section
 1461 409.967, Florida Statutes, is amended to read:

1462 409.967 Managed care plan accountability.—

1463 (2) The agency shall establish such contract requirements
 1464 as are necessary for the operation of the statewide managed care
 1465 program. In addition to any other provisions the agency may deem
 1466 necessary, the contract must require:

1467 (c) Access.—

1468 1. The agency shall establish specific standards for the
 1469 number, type, and regional distribution of providers in managed
 1470 care plan networks to ensure access to care for both adults and
 1471 children. Each plan must maintain a regionwide network of
 1472 providers in sufficient numbers to meet the access standards for
 1473 specific medical services for all recipients enrolled in the
 1474 plan. The exclusive use of mail-order pharmacies may not be
 1475 sufficient to meet network access standards. Consistent with the

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1476 standards established by the agency, provider networks may
 1477 include providers located outside the region. A plan may
 1478 contract with a new hospital facility before the date the
 1479 hospital becomes operational if the hospital has commenced
 1480 construction, will be licensed and operational by January 1,
 1481 2013, and a final order has issued in any civil or
 1482 administrative challenge. Each plan shall establish and maintain
 1483 an accurate and complete electronic database of contracted
 1484 providers, including information about licensure or
 1485 registration, locations and hours of operation, specialty
 1486 credentials and other certifications, specific performance
 1487 indicators, and such other information as the agency deems
 1488 necessary. The database must be available online to both the
 1489 agency and the public and have the capability to compare the
 1490 availability of providers to network adequacy standards and to
 1491 accept and display feedback from each provider's patients. Each
 1492 plan shall submit quarterly reports to the agency identifying
 1493 the number of enrollees assigned to each primary care provider.

1494 2. Each managed care plan must publish any prescribed drug
 1495 formulary or preferred drug list on the plan's website in a
 1496 manner that is accessible to and searchable by enrollees and
 1497 providers. The plan must update the list within 24 hours after
 1498 making a change. Each plan must ensure that the prior
 1499 authorization process for prescribed drugs is readily accessible
 1500 to health care providers, including posting appropriate contact

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1501 information on its website and providing timely responses to
 1502 providers. For Medicaid recipients diagnosed with hemophilia who
 1503 have been prescribed anti-hemophilic-factor replacement
 1504 products, the agency shall provide for those products and
 1505 hemophilia overlay services through the agency's hemophilia
 1506 disease management program.

1507 3. Managed care plans, and their fiscal agents or
 1508 intermediaries, must accept prior authorization requests for any
 1509 service electronically.

1510 4. Managed care plans serving children in the care and
 1511 custody of the Department of Children and Families must maintain
 1512 complete medical, dental, and behavioral health information and
 1513 provide such information to the department for inclusion in the
 1514 state's child welfare data system. Using such documentation, the
 1515 agency and the department shall determine the plan's compliance
 1516 with standards for access to medical, dental, and behavioral
 1517 health services, the use of psychotropic medications, and
 1518 followup on all medically necessary services recommended as a
 1519 result of early and periodic screening diagnosis and treatment.

1520 Section 20. The Division of Law Revision and Information is
 1521 directed to create part V of chapter 409, Florida Statutes,
 1522 consisting of ss. 409.986-409.998, Florida Statutes, to be
 1523 titled "Community-Based Child Welfare."

1524 Section 21. Section 409.986, Florida Statutes, is created
 1525 to read:

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1526 409.986 Legislative findings, intent, and definitions.-
1527 (1) LEGISLATIVE FINDINGS AND INTENT.-
1528 (a) It is the intent of the Legislature that the
1529 Department of Children and Families provide child protection and
1530 child welfare services to children through contracting with
1531 community-based care lead agencies. It is further the
1532 Legislature's intent that communities and other stakeholders in
1533 the well-being of children participate in assuring safety,
1534 permanence, and well-being for all children in the state.
1535 (b) The Legislature finds that, when private entities
1536 assume responsibility for the care of children in the child
1537 protection and child welfare system, adequate oversight of the
1538 programmatic, administrative, and fiscal operation of those
1539 entities is essential. The Legislature finds that, ultimately,
1540 the appropriate care of children is the responsibility of the
1541 state and outsourcing the provision of such care does not
1542 relieve the state of its responsibility to ensure that
1543 appropriate care is provided.
1544 (2) CHILD PROTECTION AND CHILD WELFARE OUTCOMES.-It is the
1545 goal of the department to achieve the following outcomes in
1546 conjunction with the community-based care lead agency,
1547 community-based subcontractors, and the community-based care
1548 alliance:
1549 (a) Children are first and foremost protected from abuse
1550 and neglect.

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- 1551 (b) Children are safely maintained in their homes if
 1552 possible and appropriate.
- 1553 (c) Services are provided to protect children and prevent
 1554 removal from the home.
- 1555 (d) Children have permanency and stability in their living
 1556 arrangements.
- 1557 (e) Family relationships and connections are preserved for
 1558 children.
- 1559 (f) Families have enhanced capacity to provide for their
 1560 children's needs.
- 1561 (g) Children receive appropriate services to meet their
 1562 educational needs.
- 1563 (h) Children receive adequate services to meet their
 1564 physical and mental health needs.
- 1565 (i) Children develop capacity for independent living and
 1566 competence as an adult.
- 1567 (3) DEFINITIONS.—As used in this part, except as otherwise
 1568 specially provided, the term:
- 1569 (a) "Child" or "children" means has the same meaning as
 1570 the term "child" as defined in s. 39.01.
- 1571 (b) "Dependent child" means a child who has been
 1572 determined by the court to be in need of care due to allegations
 1573 of abuse, neglect, or abandonment.
- 1574 (c) "Care" means services of any kind which are designed
 1575 to facilitate a child remaining safely in his or her own home,

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1576 returning safely to his or her own home if he or she is removed,
 1577 or obtaining an alternative permanent home if he or she cannot
 1578 remain home or be returned home.

1579 (d) "Community-based care lead agency" or "lead agency"
 1580 means a single entity with which the department has a contract
 1581 for the provision of care for children in the child protection
 1582 and child welfare system in a community that is no smaller than
 1583 a county and no larger than two contiguous judicial circuits.
 1584 The secretary of the department may authorize more than one
 1585 eligible lead agency within a single county if doing so will
 1586 result in more effective delivery of services to children.

1587 (e) "Community-based care alliance" or "alliance" means
 1588 the group of stakeholders, community leaders, client
 1589 representatives, and funders of human services established to
 1590 provide a focal point for community participation and oversight
 1591 of community-based services.

1592 (f) "Related services" includes, but is not limited to,
 1593 family preservation, independent living, emergency shelter,
 1594 residential group care, foster care, therapeutic foster care,
 1595 intensive residential treatment, foster care supervision, case
 1596 management, coordination of mental health services,
 1597 postplacement supervision, permanent foster care, and family
 1598 reunification.

1599 Section 22. Section 409.987, Florida Statutes, is created
 1600 to read:

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1601 409.987 Lead agency procurement.-
 1602 (1) Community-based care lead agencies shall be procured
 1603 by the department through a competitive process as required by
 1604 chapter 287.
 1605 (2) The department shall produce a schedule for the
 1606 procurement of community-based care lead agencies and provide
 1607 the schedule to the community-based care alliances established
 1608 pursuant to s. 409.998.
 1609 (3) Notwithstanding s. 287.057, the department shall use
 1610 5-year contracts with lead agencies.
 1611 (4) In order to serve as a lead agency, an entity must:
 1612 (a) Be organized as a Florida corporation or a
 1613 governmental entity.
 1614 (b) Be governed by a board of directors. The membership
 1615 of the board of directors must be described in the bylaws or
 1616 articles of incorporation of each lead agency, which must
 1617 provide that at least 75 percent of the membership of the board
 1618 of directors must be composed of persons residing in this state,
 1619 and at least 51 percent of the state residents on the board of
 1620 directors must reside within the service area of the lead
 1621 agency. However, for procurements of lead agency contracts
 1622 initiated on or after July 1, 2014:
 1623 1. At least 75 percent of the membership of the board of
 1624 directors must be persons residing in this state, and at least
 1625 51 percent of the membership of the board of directors must be

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1626 persons residing within the service area of the lead agency.

1627 2. The board of directors' powers must include hiring the
 1628 lead agency's executive director, approving the lead agency's
 1629 budget, and setting the lead agency's operational policy and
 1630 procedures.

1631 3. The membership of the board of directors must be
 1632 described in the bylaws or articles of incorporation of each
 1633 lead agency and require representation from throughout the
 1634 service area of the lead agency and, at a minimum, from local
 1635 government, law enforcement, a school district, a children's
 1636 services council if one operates in the service area, and the
 1637 United Way or other local funding organization.

1638 (c) Demonstrate financial responsibility through an
 1639 organized plan for regular fiscal audits and the posting of a
 1640 performance bond.

1641 (5) The department's procurement team procuring any lead
 1642 agencies' contracts must include individuals from the community
 1643 alliance in the area to be served under the contract. All
 1644 meetings at which vendors make presentations to or negotiate
 1645 with the procurement team shall be held in the area to be served
 1646 by the contract.

1647 Section 23. Section 409.988, Florida Statutes, is created
 1648 to read:

1649 409.988 Lead agency duties; general provisions.-

1650 (1) DUTIES.-A lead agency:

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1651 (a) Shall serve all children referred as a result of a
 1652 report of abuse, neglect, or abandonment to the department's
 1653 child abuse hotline regardless of the level of funding allocated
 1654 to the lead agency by the state if all related funding is
 1655 transferred.

1656 (b) Shall provide accurate and timely information
 1657 necessary for oversight by the department pursuant to the child
 1658 welfare results-oriented accountability system required by s.
 1659 409.997.

1660 (c) Shall follow the financial guidelines developed by the
 1661 department and provide for a regular independent auditing of its
 1662 financial activities. Such financial information shall be
 1663 provided to the community-based care alliance established under
 1664 s. 409.998.

1665 (d) Shall prepare all judicial reviews, case plans, and
 1666 other reports necessary for court hearings for dependent
 1667 children, except those related to the investigation of a
 1668 referral from the department's child abuse hotline, and shall
 1669 provide testimony as required for dependency court proceedings.
 1670 This duty does not include the preparation of legal pleadings or
 1671 other legal documents, which remain the responsibility of the
 1672 department.

1673 (e) Shall ensure that all individuals providing care for
 1674 dependent children receive appropriate training and meet the
 1675 minimum employment standards established by the department.

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1676 (f) Shall maintain eligibility to receive all available
 1677 federal child welfare funds.

1678 (g) Shall maintain written agreements with Healthy
 1679 Families Florida lead entities in its service area pursuant to
 1680 s. 409.153 to promote cooperative planning for the provision of
 1681 prevention and intervention services.

1682 (h) Shall comply with federal and state statutory
 1683 requirements and agency rules in the provision of contractual
 1684 services.

1685 (i) May subcontract for the provision of services required
 1686 by the contract with the lead agency and the department;
 1687 however, the subcontracts must specify how the provider will
 1688 contribute to the lead agency meeting the performance standards
 1689 established pursuant to the child welfare results-oriented
 1690 accountability system required by s. 409.997.

1691 (2) LICENSURE.

1692 (a) A lead agency must be licensed as a child-caring or
 1693 child-placing agency by the department under this chapter.

1694 (b) Each foster home, therapeutic foster home, emergency
 1695 shelter, or other placement facility operated by the lead agency
 1696 must be licensed by the department under chapter 402 or this
 1697 chapter.

1698 (c) Substitute care providers who are licensed under s.
 1699 409.175 and who have contracted with a lead agency are also
 1700 authorized to provide registered or licensed family day care

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1701 under s. 402.313 if such care is consistent with federal law and
 1702 if the home has met the requirements of s. 402.313.

1703 (d) In order to eliminate or reduce the number of
 1704 duplicate inspections by various program offices, the department
 1705 shall coordinate inspections required for licensure of agencies
 1706 under this subsection.

1707 (e) The department may adopt rules to administer this
 1708 subsection.

1709 (3) SERVICES.—A lead agency must serve dependent children
 1710 through services that are supported by research or are best
 1711 child welfare practices. The agency may also provide innovative
 1712 services such as family-centered, cognitive-behavioral
 1713 interventions designed to mitigate out-of-home placements.

1714 (4) LEAD AGENCY ACTING AS GUARDIAN.—

1715 (a) If a lead agency or other provider has accepted case
 1716 management responsibilities for a child who is sheltered or
 1717 found to be dependent and who is assigned to the care of the
 1718 lead agency or other provider, the agency or provider may act as
 1719 the child's guardian for the purpose of registering the child in
 1720 school if a parent or guardian of the child is unavailable and
 1721 his or her whereabouts cannot reasonably be ascertained.

1722 (b) The lead agency or other provider may also seek
 1723 emergency medical attention for the child, but only if a parent
 1724 or guardian of the child is unavailable, the parent's
 1725 whereabouts cannot reasonably be ascertained, and a court order

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1726 for such emergency medical services cannot be obtained because
 1727 of the severity of the emergency or because it is after normal
 1728 working hours.

1729 (c) A lead agency or other provider may not consent to
 1730 sterilization, abortion, or termination of life support.

1731 (d) If a child's parents' rights have been terminated, the
 1732 lead agency shall act as guardian of the child in all
 1733 circumstances.

1734 Section 24. Section 409.990, Florida Statutes, is created
 1735 to read:

1736 409.990 Funding for lead agencies.—A contract established
 1737 between the department and a lead agency must be funded by a
 1738 grant of general revenue, other applicable state funds, or
 1739 applicable federal funding sources.

1740 (1) The method of payment for a fixed-price contract with
 1741 a lead agency must provide for a 2-month advance payment at the
 1742 beginning of each fiscal year and equal monthly payments
 1743 thereafter.

1744 (2) Notwithstanding s. 215.425, all documented federal
 1745 funds earned for the current fiscal year by the department and
 1746 lead agencies which exceed the amount appropriated by the
 1747 Legislature shall be distributed to all entities that
 1748 contributed to the excess earnings based on a schedule and
 1749 methodology developed by the department and approved by the
 1750 Executive Office of the Governor.

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1751 (a) Distribution shall be pro rata based on total earnings
 1752 and shall be made only to those entities that contributed to
 1753 excess earnings.

1754 (b) Excess earnings of lead agencies shall be used only in
 1755 the service district in which they were earned.

1756 (c) Additional state funds appropriated by the Legislature
 1757 for lead agencies or made available pursuant to the budgetary
 1758 amendment process described in s. 216.177 shall be transferred
 1759 to the lead agencies.

1760 (d) The department shall amend a lead agency's contract to
 1761 permit expenditure of the funds.

1762 (3) Notwithstanding other provisions in this section, the
 1763 amount of the annual contract for a lead agency may be increased
 1764 by excess federal funds earned in accordance with s.
 1765 216.181(11).

1766 (4) Each contract with a lead agency shall provide for the
 1767 payment by the department to the lead agency of a reasonable
 1768 administrative cost in addition to funding for the provision of
 1769 services.

1770 (5) A lead agency may carry forward documented unexpended
 1771 state funds from one fiscal year to the next; however, the
 1772 cumulative amount carried forward may not exceed 8 percent of
 1773 the total contract. Any unexpended state funds in excess of that
 1774 percentage must be returned to the department.

1775 (a) The funds carried forward may not be used in any way

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1776 that would create increased recurring future obligations, and
 1777 such funds may not be used for any type of program or service
 1778 that is not currently authorized by the existing contract with
 1779 the department.

1780 (b) Expenditures of funds carried forward must be
 1781 separately reported to the department.

1782 (c) Any unexpended funds that remain at the end of the
 1783 contract period shall be returned to the department.

1784 (d) Funds carried forward may be retained through any
 1785 contract renewals and any new procurements as long as the same
 1786 lead agency is retained by the department.

1787 (6) It is the intent of the Legislature to improve
 1788 services and local participation in community-based care
 1789 initiatives by fostering community support and providing
 1790 enhanced prevention and in-home services, thereby reducing the
 1791 risk otherwise faced by lead agencies. There is established a
 1792 community partnership matching grant program to be operated by
 1793 the department for the purpose of encouraging local
 1794 participation in community-based care for child welfare. A
 1795 community-based care alliance direct-support organization, a
 1796 children's services council, or another local entity that makes
 1797 a financial commitment to a community-based care lead agency may
 1798 be eligible for a matching grant. The total amount of the local
 1799 contribution may be matched on a one-to-one basis up to a
 1800 maximum annual amount of \$500,000 per lead agency. Awarded

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1801 matching grant funds may be used for any prevention or in-home
 1802 services that can be reasonably expected to reduce the number of
 1803 children entering the child welfare system. Funding available
 1804 for the matching grant program is subject to legislative
 1805 appropriation of nonrecurring funds provided for this purpose.

1806 (7)(a) The department, in consultation with the Florida
 1807 Coalition for Children, Inc., shall develop and implement a
 1808 community-based care risk pool initiative to mitigate the
 1809 financial risk to eligible lead agencies. This initiative must
 1810 include:

1811 1. A risk pool application and protocol developed by the
 1812 department which outlines submission criteria, including, but
 1813 not limited to, financial and program management, descriptive
 1814 data requirements, and timeframes for submission of
 1815 applications. Requests for funding from risk pool applicants
 1816 shall be based on relevant and verifiable service trends and
 1817 changes that have occurred during the current fiscal year. The
 1818 application shall confirm that expenditure of approved risk pool
 1819 funds by the lead agency shall be completed within the current
 1820 fiscal year.

1821 2. A risk pool peer review committee, appointed by the
 1822 secretary and consisting of department staff and representatives
 1823 from at least three nonapplicant lead agencies, which reviews
 1824 and assesses all risk pool applications. Upon completion of each
 1825 application review, the peer review committee shall report its

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1826 findings and recommendations to the secretary providing, at a
 1827 minimum, the following information:
 1828 a. Justification for the specific funding amount required
 1829 by the risk pool applicant based on current year service trend
 1830 data, including validation that the applicant's financial need
 1831 was caused by circumstances beyond the control of the lead
 1832 agency management;
 1833 b. Verification that the proposed use of risk pool funds
 1834 meets at least one of the criteria in paragraph (c); and
 1835 c. Evidence of technical assistance provided in an effort
 1836 to avoid the need to access the risk pool and recommendations
 1837 for technical assistance to the lead agency to ensure that risk
 1838 pool funds are expended effectively and that the agency's need
 1839 for future risk pool funding is diminished.
 1840 (b) Upon approval by the secretary of a risk pool
 1841 application, the department may request funds from the risk pool
 1842 in accordance with s. 216.181(6)(a).
 1843 (c) The purposes for which the community-based care risk
 1844 pool shall be used include:
 1845 1. Significant changes in the number or composition of
 1846 clients eligible to receive services.
 1847 2. Significant changes in the services that are eligible
 1848 for reimbursement.
 1849 3. Continuity of care in the event of failure,
 1850 discontinuance of service, or financial misconduct by a lead

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1851 | agency.

1852 | 4. Significant changes in the mix of available funds.

1853 | (d) The department may also request in its annual

1854 | legislative budget request, and the Governor may recommend, that

1855 | the funding necessary to carry out paragraph (c) be appropriated

1856 | to the department. In addition, the department may request the

1857 | allocation of funds from the community-based care risk pool in

1858 | accordance with s. 216.181(6)(a). Funds from the pool may be

1859 | used to match available federal dollars.

1860 | 1. Such funds shall constitute partial security for

1861 | contract performance by lead agencies and shall be used to

1862 | offset the need for a performance bond.

1863 | 2. The department may separately require a bond to

1864 | mitigate the financial consequences of potential acts of

1865 | malfeasance or misfeasance or criminal violations by the

1866 | provider.

1867 | Section 25. Section 409.16713, Florida Statutes, is

1868 | transferred, renumbered as section 409.991, Florida Statutes,

1869 | and paragraph (a) of subsection (1) of that section is amended,

1870 | to read:

1871 | 409.991 ~~409.16713~~ Allocation of funds for community-based

1872 | care lead agencies.—

1873 | (1) As used in this section, the term:

1874 | (a) "Core services funding" means all funds allocated to

1875 | community-based care lead agencies operating under contract with

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1876 the department pursuant to s. 409.987 ~~s. 409.1671~~, with the
 1877 following exceptions:

- 1878 1. Funds appropriated for independent living;
- 1879 2. Funds appropriated for maintenance adoption subsidies;
- 1880 3. Funds allocated by the department for protective
- 1881 investigations training;
- 1882 4. Nonrecurring funds;
- 1883 5. Designated mental health wrap-around services funds;
- 1884 and
- 1885 6. Funds for special projects for a designated community-
- 1886 based care lead agency.

1887 Section 26. Section 409.992, Florida Statutes, is created
 1888 to read:

1889 409.992 Lead agency expenditures.-

1890 (1) The procurement of commodities or contractual services
 1891 by lead agencies shall be governed by the financial guidelines
 1892 developed by the department which comply with applicable state
 1893 and federal law and follow good business practices. Pursuant to
 1894 s. 11.45, the Auditor General may provide technical advice in
 1895 the development of the financial guidelines.

1896 (2) Notwithstanding any other provision of law, a
 1897 community-based care lead agency may make expenditures for staff
 1898 cellular telephone allowances, contracts requiring deferred
 1899 payments and maintenance agreements, security deposits for
 1900 office leases, related agency professional membership dues other

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1901 than personal professional membership dues, promotional
 1902 materials, and grant writing services. Expenditures for food and
 1903 refreshments, other than those provided to clients in the care
 1904 of the agency or to foster parents, adoptive parents, and
 1905 caseworkers during training sessions, are not allowable.

1906 (3) A lead community-based care agency and its
 1907 subcontractors are exempt from state travel policies as provided
 1908 in s. 112.061(3)(a) for their travel expenses incurred in order
 1909 to comply with the requirements of this section.

1910 Section 27. Section 409.993, Florida Statutes, is created
 1911 to read:

1912 409.993 Lead agencies and subcontractor liability.-

1913 (1) FINDINGS.-

1914 (a) The Legislature finds that the state has traditionally
 1915 provided foster care services to children who have been the
 1916 responsibility of the state. As such, foster children have not
 1917 had the right to recover for injuries beyond the limitations
 1918 specified in s. 768.28. The Legislature has determined that
 1919 foster care and related services need to be outsourced pursuant
 1920 to this section and that the provision of such services is of
 1921 paramount importance to the state. The purpose for such
 1922 outsourcing is to increase the level of safety, security, and
 1923 stability of children who are or become the responsibility of
 1924 the state. One of the components necessary to secure a safe and
 1925 stable environment for such children is that private providers

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1926 maintain liability insurance. As such, insurance needs to be
 1927 available and remain available to nongovernmental foster care
 1928 and related services providers without the resources of such
 1929 providers being significantly reduced by the cost of maintaining
 1930 such insurance.

1931 (b) The Legislature further finds that, by requiring the
 1932 following minimum levels of insurance, children in outsourced
 1933 foster care and related services will gain increased protection
 1934 and rights of recovery in the event of injury than provided for
 1935 in s. 768.28.

1936 (2) LEAD AGENCY LIABILITY.-

1937 (a) Other than an entity to which s. 768.28 applies, an
 1938 eligible community-based care lead agency, or its employees or
 1939 officers, except as otherwise provided in paragraph (b), must,
 1940 as a part of its contract, obtain a minimum of \$1 million per
 1941 claim/\$3 million per incident in general liability insurance
 1942 coverage. The eligible community-based care lead agency must
 1943 also require that staff who transport client children and
 1944 families in their personal automobiles in order to carry out
 1945 their job responsibilities obtain minimum bodily injury
 1946 liability insurance in the amount of \$100,000 per claim,
 1947 \$300,000 per incident, on their personal automobiles. In lieu of
 1948 personal motor vehicle insurance, the lead agency's casualty,
 1949 liability, or motor vehicle insurance carrier may provide
 1950 nonowned automobile liability coverage. Such insurance provides

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1951 liability insurance for automobiles that the provider uses in
 1952 connection with the agency's business but does not own, lease,
 1953 rent, or borrow. Such coverage includes automobiles owned by the
 1954 employees of the lead agency or a member of the employee's
 1955 household but only while the automobiles are used in connection
 1956 with the agency's business. The nonowned automobile coverage for
 1957 the lead agency applies as excess coverage over any other
 1958 collectible insurance. The personal automobile policy for the
 1959 employee of the lead agency must be primary insurance, and the
 1960 nonowned automobile coverage of the agency acts as excess
 1961 insurance to the primary insurance. The lead agency shall
 1962 provide a minimum limit of \$1 million in nonowned automobile
 1963 coverage. In a tort action brought against such an eligible
 1964 community-based care lead agency or employee, net economic
 1965 damages shall be limited to \$1 million per liability claim and
 1966 \$100,000 per automobile claim, including, but not limited to,
 1967 past and future medical expenses, wage loss, and loss of earning
 1968 capacity, offset by any collateral source payment paid or
 1969 payable. In any tort action brought against such an eligible
 1970 community-based care lead agency, noneconomic damages shall be
 1971 limited to \$200,000 per claim. A claims bill may be brought on
 1972 behalf of a claimant pursuant to s. 768.28 for any amount
 1973 exceeding the limits specified in this paragraph. Any offset of
 1974 collateral source payments made as of the date of the settlement
 1975 or judgment shall be in accordance with s. 768.76. The

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1976 community-based care lead agency is not liable in tort for the
 1977 acts or omissions of its subcontractors or the officers, agents,
 1978 or employees of its subcontractors.
 1979 (b) The liability of an eligible community-based care lead
 1980 agency described in this section shall be exclusive and in place
 1981 of all other liability of such lead agency. The same immunities
 1982 from liability enjoyed by such lead agencies shall extend as
 1983 well to each employee of the lead agency when such employee is
 1984 acting in furtherance of the agency's business, including the
 1985 transportation of clients served, as described in this
 1986 subsection, in privately owned vehicles. Such immunities are not
 1987 applicable to a lead agency or an employee who acts in a
 1988 culpably negligent manner or with willful and wanton disregard
 1989 or unprovoked physical aggression if such acts result in injury
 1990 or death or such acts proximately cause such injury or death.
 1991 Such immunities are not applicable to employees of the same lead
 1992 agency when each is operating in the furtherance of the agency's
 1993 business, but they are assigned primarily to unrelated work
 1994 within private or public employment. The same immunity
 1995 provisions enjoyed by a lead agency also apply to any sole
 1996 proprietor, partner, corporate officer or director, supervisor,
 1997 or other person who in the course and scope of his or her duties
 1998 acts in a managerial or policymaking capacity and the conduct
 1999 that caused the alleged injury arose within the course and scope
 2000 of those managerial or policymaking duties. As used in this

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2001 | subsection and subsection (3), the term "culpable negligence"
2002 | means reckless indifference or grossly careless disregard of
2003 | human life.
2004 | (3) SUBCONTRACTOR LIABILITY.-
2005 | (a) A subcontractor of an eligible community-based care
2006 | lead agency which is a direct provider of foster care and
2007 | related services to children and families, and its employees or
2008 | officers, except as otherwise provided in paragraph (b), must,
2009 | as a part of its contract, obtain a minimum of \$1 million per
2010 | claim/\$3 million per incident in general liability insurance
2011 | coverage. The subcontractor of an eligible community-based care
2012 | lead agency must also require that staff who transport client
2013 | children and families in their personal automobiles in order to
2014 | carry out their job responsibilities obtain minimum bodily
2015 | injury liability insurance in the amount of \$100,000 per claim,
2016 | \$300,000 per incident, on their personal automobiles. In lieu of
2017 | personal motor vehicle insurance, the subcontractor's casualty,
2018 | liability, or motor vehicle insurance carrier may provide
2019 | nonowned automobile liability coverage. Such insurance provides
2020 | liability insurance for automobiles that the subcontractor uses
2021 | in connection with the subcontractor's business but does not
2022 | own, lease, rent, or borrow. Such coverage includes automobiles
2023 | owned by the employees of the subcontractor or a member of the
2024 | employee's household but only while the automobiles are used in
2025 | connection with the subcontractor's business. The nonowned

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2026 automobile coverage for the subcontractor applies as excess
 2027 coverage over any other collectible insurance. The personal
 2028 automobile policy for the employee of the subcontractor shall be
 2029 primary insurance, and the nonowned automobile coverage of the
 2030 subcontractor acts as excess insurance to the primary insurance.
 2031 The subcontractor shall provide a minimum limit of \$1 million in
 2032 nonowned automobile coverage. In a tort action brought against
 2033 such subcontractor or employee, net economic damages shall be
 2034 limited to \$1 million per liability claim and \$100,000 per
 2035 automobile claim, including, but not limited to, past and future
 2036 medical expenses, wage loss, and loss of earning capacity,
 2037 offset by any collateral source payment paid or payable. In a
 2038 tort action brought against such subcontractor, noneconomic
 2039 damages shall be limited to \$200,000 per claim. A claims bill
 2040 may be brought on behalf of a claimant pursuant to s. 768.28 for
 2041 any amount exceeding the limits specified in this paragraph. Any
 2042 offset of collateral source payments made as of the date of the
 2043 settlement or judgment shall be in accordance with s. 768.76.

2044 (b) The liability of a subcontractor of an eligible
 2045 community-based care lead agency that is a direct provider of
 2046 foster care and related services as described in this section
 2047 shall be exclusive and in place of all other liability of such
 2048 lead agency. The same immunities from liability enjoyed by such
 2049 subcontractor provider shall extend as well to each employee of
 2050 the subcontractor when such employee is acting in furtherance of

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2051 the subcontractor's business, including the transportation of
 2052 clients served, as described in this subsection, in privately
 2053 owned vehicles. Such immunities are not applicable to a
 2054 subcontractor or an employee who acts in a culpably negligent
 2055 manner or with willful and wanton disregard or unprovoked
 2056 physical aggression when such acts result in injury or death or
 2057 such acts proximately cause such injury or death. Such
 2058 immunities are not applicable to employees of the same
 2059 subcontractor when each is operating in the furtherance of the
 2060 subcontractor's business, but they are assigned primarily to
 2061 unrelated works within private or public employment. The same
 2062 immunity provisions enjoyed by a subcontractor also apply to any
 2063 sole proprietor, partner, corporate officer or director,
 2064 supervisor, or other person who in the course and scope of his
 2065 or her duties acts in a managerial or policymaking capacity and
 2066 the conduct that caused the alleged injury arose within the
 2067 course and scope of those managerial or policymaking duties.

2068 Section 28. Section 409.1675, Florida Statutes, is
 2069 transferred and renumbered as section 409.994, Florida Statutes,
 2070 and amended to read:

2071 409.994 409.1675 ~~Lead~~ Community-based care lead agencies
 2072 providers; receivership.-

2073 (1) The Department of Children and Families ~~Family~~
 2074 ~~Services~~ may petition a court of competent jurisdiction for the
 2075 appointment of a receiver for a ~~lead~~ community-based care lead

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2076 agency provider established pursuant to s. 409.987 if ~~s.~~
 2077 ~~409.1671~~ when any of the following conditions exist:

2078 (a) The lead agency ~~community-based provider~~ is operating
 2079 without a license as a child-placing agency.

2080 (b) The lead agency ~~community-based provider~~ has given
 2081 less than 120 days' notice of its intent to cease operations,
 2082 and arrangements have not been made for another lead agency
 2083 ~~community-based provider~~ or for the department to continue the
 2084 uninterrupted provision of services.

2085 (c) The department determines that conditions exist in the
 2086 lead agency ~~community-based provider~~ which present an imminent
 2087 danger to the health, safety, or welfare of the dependent
 2088 children under that agency's ~~provider's~~ care or supervision.
 2089 Whenever possible, the department shall make a reasonable effort
 2090 to facilitate the continued operation of the program.

2091 (d) The lead agency ~~community-based provider~~ cannot meet
 2092 its current financial obligations to its employees, contractors,
 2093 or foster parents. Issuance of bad checks or the existence of
 2094 delinquent obligations for payment of salaries, utilities, or
 2095 invoices for essential services or commodities shall constitute
 2096 prima facie evidence that the lead agency ~~community-based~~
 2097 ~~provider~~ lacks the financial ability to meet its financial
 2098 obligations.

2099 (2)(a) The petition for receivership shall take precedence
 2100 over other court business unless the court determines that some

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2101 other pending proceeding, having statutory precedence, has
 2102 priority.

2103 (b) A hearing shall be conducted within 5 days after the
 2104 filing of the petition, at which time interested parties shall
 2105 have the opportunity to present evidence as to whether a
 2106 receiver should be appointed. The department shall give
 2107 reasonable notice of the hearing on the petition to the lead
 2108 agency ~~community-based provider~~.

2109 (c) The court shall grant the petition upon finding that
 2110 one or more of the conditions in subsection (1) exists and the
 2111 continued existence of the condition or conditions jeopardizes
 2112 the health, safety, or welfare of dependent children. A receiver
 2113 may be appointed ex parte when the court determines that one or
 2114 more of the conditions in subsection (1) exists. After such
 2115 finding, the court may appoint any person, including an employee
 2116 of the department who is qualified by education, training, or
 2117 experience to carry out the duties of the receiver pursuant to
 2118 this section, except that the court may ~~shall~~ not appoint any
 2119 member of the governing board or any officer of the lead agency
 2120 ~~community-based provider~~. The receiver may be selected from a
 2121 list of persons qualified to act as receivers which is developed
 2122 by the department and presented to the court with each petition
 2123 of receivership.

2124 (d) A receiver may be appointed for up to 90 days, and the
 2125 department may petition the court for additional 30-day

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2126 | extensions. Sixty days after appointment of a receiver and every
 2127 | 30 days thereafter until the receivership is terminated, the
 2128 | department shall submit to the court an assessment of the lead
 2129 | agency's ~~community-based provider's~~ ability to ensure the
 2130 | health, safety, and welfare of the dependent children under its
 2131 | supervision.

2132 | (3) The receiver shall take such steps as are reasonably
 2133 | necessary to ensure the continued health, safety, and welfare of
 2134 | the dependent children under the supervision of the lead agency
 2135 | ~~community-based provider~~ and shall exercise those powers and
 2136 | perform those duties set out by the court, including, but not
 2137 | limited to:

2138 | (a) Taking such action as is reasonably necessary to
 2139 | protect or conserve the assets or property of the lead agency
 2140 | ~~community-based provider~~. The receiver may use the assets and
 2141 | property and any proceeds from any transfer thereof only in the
 2142 | performance of the powers and duties provided ~~set forth~~ in this
 2143 | section and by order of the court.

2144 | (b) Using the assets of the lead agency ~~community-based~~
 2145 | ~~provider~~ in the provision of care and services to dependent
 2146 | children.

2147 | (c) Entering into contracts and hiring agents and
 2148 | employees to carry out the powers and duties of the receiver
 2149 | under this section.

2150 | (d) Having full power to direct, manage, hire, and

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2151 discharge employees of the lead agency ~~community-based provider~~.
 2152 The receiver shall hire and pay new employees at the rate of
 2153 compensation, including benefits, approved by the court.

2154 (e) Honoring all leases, mortgages, and contractual
 2155 obligations of the lead agency ~~community-based provider~~, but
 2156 only to the extent of payments that become due during the period
 2157 of the receivership.

2158 (4) (a) The receiver shall deposit funds received in a
 2159 separate account and shall use this account for all
 2160 disbursements.

2161 (b) A payment to the receiver of any sum owing to the lead
 2162 agency ~~community-based provider~~ shall discharge any obligation
 2163 to the provider to the extent of the payment.

2164 (5) A receiver may petition the court for temporary relief
 2165 from obligations entered into by the lead agency ~~community-based~~
 2166 ~~provider~~ if the rent, price, or rate of interest required to be
 2167 paid under the agreement was substantially in excess of a
 2168 reasonable rent, price, or rate of interest at the time the
 2169 contract was entered into, or if any material provision of the
 2170 agreement was unreasonable when compared to contracts negotiated
 2171 under similar conditions. Any relief in this form provided by
 2172 the court shall be limited to the life of the receivership,
 2173 unless otherwise determined by the court.

2174 (6) The court shall set the compensation of the receiver,
 2175 which shall be considered a necessary expense of a receivership

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2176 and may grant to the receiver such other authority necessary to
 2177 ensure the health, safety, and welfare of the children served.

2178 (7) A receiver may be held liable in a personal capacity
 2179 only for the receiver's own gross negligence, intentional acts,
 2180 or breaches of fiduciary duty. This section may ~~shall~~ not be
 2181 interpreted to be a waiver of sovereign immunity should the
 2182 department be appointed receiver.

2183 (8) If the receiver is not the department, the court may
 2184 require a receiver to post a bond to ensure the faithful
 2185 performance of these duties.

2186 (9) The court may terminate a receivership when:

2187 (a) The court determines that the receivership is no
 2188 longer necessary because the conditions that gave rise to the
 2189 receivership no longer exist; or

2190 (b) The department has entered into a contract with a new
 2191 lead agency ~~community-based provider~~ pursuant to s. 409.987 s.
 2192 409.1671, and that contractor is ready and able to assume the
 2193 duties of the previous lead agency ~~provider~~.

2194 (10) Within 30 days after the termination, unless this
 2195 time period is extended by the court, the receiver shall give
 2196 the court a complete accounting of all property of which the
 2197 receiver has taken possession, of all funds collected and
 2198 disbursed, and of the expenses of the receivership.

2199 (11) ~~Nothing in~~ This section does not ~~shall be construed~~
 2200 ~~to~~ relieve any employee of the lead agency ~~community-based~~

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2201 ~~provider~~ placed in receivership of any civil or criminal
 2202 liability incurred, or any duty imposed by law, by reason of
 2203 acts or omissions of the employee before ~~prior to~~ the
 2204 appointment of a receiver, and; ~~nor shall anything contained in~~
 2205 this section does not ~~be construed to~~ suspend during the
 2206 receivership any obligation of the employee for payment of taxes
 2207 or other operating or maintenance expenses of the lead agency
 2208 ~~community-based provider~~ or for the payment of mortgages or
 2209 liens. The lead agency ~~community-based provider~~ shall retain the
 2210 right to sell or mortgage any facility under receivership,
 2211 subject to the prior approval of the court that ordered the
 2212 receivership.

2213 Section 29. Section 409.996, Florida Statutes, is created
 2214 to read:

2215 409.996 Duties of the Department of Children and
 2216 Families.—The department shall contract for the delivery,
 2217 administration, or management of care for children in the child
 2218 protection and child welfare system. In doing so, the department
 2219 retains responsibility for the quality of contracted services
 2220 and programs and shall ensure that services are delivered in
 2221 accordance with applicable federal and state statutes and
 2222 regulations.

2223 (1) The department shall enter into contracts with lead
 2224 agencies to perform the duties of a lead agency pursuant to s.
 2225 409.988. At a minimum, the contracts must:

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2226 (a) Provide for the services needed to accomplish the
 2227 duties established in s. 409.988 and provide information to the
 2228 department which is necessary to meet the requirements for a
 2229 quality assurance program pursuant to subsection (18) and the
 2230 child welfare results-oriented accountability system pursuant to
 2231 s. 409.997.

2232 (b) Provide for graduated penalties for failure to comply
 2233 with contract terms. Such penalties may include financial
 2234 penalties, enhanced monitoring and reporting, corrective action
 2235 plans, and early termination of contracts or other appropriate
 2236 action to ensure contract compliance.

2237 (c) Ensure that the lead agency shall furnish current and
 2238 accurate information on its activities in all cases in client
 2239 case records in the state's statewide automated child welfare
 2240 information system.

2241 (d) Specify the procedures to be used by the parties to
 2242 resolve differences in interpreting the contract or to resolve
 2243 disputes as to the adequacy of the parties' compliance with
 2244 their respective obligations under the contract.

2245 (2) The department must adopt written policies and
 2246 procedures for monitoring the contract for delivery of services
 2247 by lead agencies. These policies and procedures must, at a
 2248 minimum, address the evaluation of fiscal accountability and
 2249 program operations, including provider achievement of
 2250 performance standards, provider monitoring of subcontractors,

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2251 and timely follow up of corrective actions for significant
 2252 monitoring findings related to providers and subcontractors.
 2253 These policies and procedures must also include provisions for
 2254 reducing the duplication of the department's program monitoring
 2255 activities both internally and with other agencies, to the
 2256 extent possible. The department's written procedures must ensure
 2257 that the written findings, conclusions, and recommendations from
 2258 monitoring the contract for services of lead agencies are
 2259 communicated to the director of the provider agency and the
 2260 community-based care alliance as expeditiously as possible.

2261 (3) The department shall receive federal and state funds
 2262 as appropriated for the operation of the child welfare system
 2263 and shall transmit these funds to the lead agencies as agreed.
 2264 The department retains responsibility for the appropriate
 2265 spending of these funds. The department shall monitor lead
 2266 agencies to assess compliance with the financial guidelines
 2267 established pursuant to s. 409.992 and other applicable state
 2268 and federal laws.

2269 (4) The department shall provide technical assistance and
 2270 consultation to lead agencies in the provision of care to
 2271 children in the child protection and child welfare system.

2272 (5) The department retains the responsibility for the
 2273 review, approval or denial, and issuances of all foster home
 2274 licenses.

2275 (6) The department shall process all applications

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2276 submitted by lead agencies for the Interstate Compact for
 2277 Placement of Children and the Interstate Compact for Adoption
 2278 and Medical Assistance.

2279 (7) The department shall assist lead agencies with access
 2280 to and coordination with other service programs within the
 2281 department.

2282 (8) The department shall determine Medicaid eligibility
 2283 for all referred children and will coordinate services with the
 2284 Agency for Health Care Administration.

2285 (9) The department shall develop, in cooperation with the
 2286 lead agencies, a standardized competency-based curriculum for
 2287 certification training and for administering the certification
 2288 testing program for child protection staff.

2289 (10) The department shall maintain the statewide adoptions
 2290 website and provide information and training to the lead
 2291 agencies relating to the website.

2292 (11) The department shall provide training and assistance
 2293 to lead agencies regarding the responsibility of lead agencies
 2294 relating to children receiving supplemental security income,
 2295 social security, railroad retirement, or veterans' benefits.

2296 (12) With the assistance of a lead agency, the department
 2297 shall develop and implement statewide and local interagency
 2298 agreements needed to coordinate services for children and
 2299 parents involved in the child welfare system who are also
 2300 involved with the Agency for Persons with Disabilities, the

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2301 Department of Juvenile Justice, the Department of Education, the
 2302 Department of Health, and other governmental organizations that
 2303 share responsibilities for children or parents in the child
 2304 welfare system.

2305 (13) With the assistance of a lead agency, the department
 2306 shall develop and implement a working agreement between the lead
 2307 agency and the substance abuse and mental health managing entity
 2308 to integrate services and supports for children and parents
 2309 serviced in the child welfare system.

2310 (14) The department shall work with the Agency for Health
 2311 Care Administration to provide each child the services of the
 2312 Medicaid early and periodic screening, diagnosis, and treatment
 2313 entitlement including 72-hour screening, periodic child health
 2314 checkups, and prescribed follow up for ordered services,
 2315 including medical, dental, and vision care.

2316 (15) The department shall assist lead agencies in
 2317 developing an array of services in compliance with the Title IV-
 2318 E Waiver and shall monitor the provision of those services.

2319 (16) The department shall provide a mechanism to allow
 2320 lead agencies to request a waiver of department policies and
 2321 procedures that create inefficiencies or inhibit the performance
 2322 of the lead agency duties.

2323 (17) The department shall directly or through contract
 2324 provide attorneys to prepare and present cases in dependency
 2325 court and shall ensure that the court is provided with adequate

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2326 information for informed decisionmaking in dependency cases,
 2327 including a fact sheet for each case which lists the names and
 2328 contact information for any child protective investigator, child
 2329 protective investigation supervisor, case manager, case manager
 2330 supervisor, and the regional department official responsible for
 2331 the lead agency contract. For the Sixth Judicial Circuit, the
 2332 department shall contract with the state attorney for the
 2333 provision of these services.

2334 (18) The department, in consultation with lead agencies,
 2335 shall establish a quality assurance program for contracted
 2336 services to dependent children. The quality assurance program
 2337 shall be based on standards established by federal and state law
 2338 and national accrediting organizations.

2339 (a) The department must evaluate each lead agency under
 2340 contract at least annually. These evaluations shall cover the
 2341 programmatic, operational, and fiscal operations of the lead
 2342 agency and be consistent with the child welfare results-oriented
 2343 accountability system pursuant to s. 409.997. The department
 2344 must consult with the chief judge on the performance of the lead
 2345 agency.

2346 (b) The department shall, to the extent possible, use
 2347 independent financial audits provided by the lead agency to
 2348 eliminate or reduce the ongoing contract and administrative
 2349 reviews conducted by the department. If the department
 2350 determines that such independent financial audits are

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CODING: Words ~~stricken~~ are deletions; words underlined are additions.

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2351 inadequate, other audits, as necessary, may be conducted by the
 2352 department. This paragraph does not abrogate the requirements of
 2353 s. 215.97.

2354 (c) The department may suggest additional items to be
 2355 included in such independent financial audits to meet the
 2356 department's needs.

2357 (d) The department may outsource programmatic,
 2358 administrative, or fiscal monitoring oversight of lead agencies.

2359 (e) A lead agency must assure that all subcontractors are
 2360 subject to the same quality assurance activities as the lead
 2361 agency.

2362 Section 30. Section 409.997, Florida Statutes, is created
 2363 to read:

2364 409.997 Child welfare results-oriented accountability
 2365 system.—

2366 (1) The department and its contract providers, including
 2367 lead agencies, community-based care providers, and other
 2368 community partners participating in the state's child protection
 2369 and child welfare system, share the responsibility for achieving
 2370 the outcome goals specified in s. 409.986(2).

2371 (2) In order to assess the achievement of the goals
 2372 specified in s. 409.986(2), the department shall maintain a
 2373 comprehensive, results-oriented accountability system that
 2374 monitors the use of resources, the quality and amount of
 2375 services provided, and child and family outcomes through data

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2376 analysis, research review, evaluation, and quality improvement.
 2377 The system shall provide information about individual entities'
 2378 performance as well as the performance of groups of entities
 2379 working together as an integrated system of care on a local,
 2380 regional, and statewide basis. In maintaining the
 2381 accountability system, the department shall:

2382 (a) Identify valid and reliable outcome measures for each
 2383 of the goals specified in this subsection. The outcome data set
 2384 must consist of a limited number of understandable measures
 2385 using available data to quantify outcomes as children move
 2386 through the system of care. Such measures may aggregate multiple
 2387 variables that affect the overall achievement of the outcome
 2388 goal. Valid and reliable measures must be based on adequate
 2389 sample sizes, be gathered over suitable time periods, reflect
 2390 authentic rather than spurious results, and may not be
 2391 susceptible to manipulation.

2392 (b) Implement a monitoring system to track the identified
 2393 outcome measures on a statewide, regional, and provider-specific
 2394 basis. The monitoring system must identify trends and chart
 2395 progress toward achievement of the goals specified in this
 2396 section. The requirements of the monitoring system may be
 2397 incorporated into the quality assurance system required under s.
 2398 409.996(18).

2399 (c) Develop and maintain an analytical system that builds
 2400 on the outcomes monitoring system to assess the statistical

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2401 validity of observed associations between child welfare
 2402 interventions and the measured outcomes. The analysis must use
 2403 quantitative methods to adjust for variations in demographic or
 2404 other conditions. The analysis must include longitudinal studies
 2405 to evaluate longer term outcomes such as continued safety,
 2406 family permanence, and transition to self-sufficiency. The
 2407 analysis may also include qualitative research methods to
 2408 provide insight into statistical patterns.

2409 (d) Develop and maintain a program of research review to
 2410 identify interventions that are supported by evidence as
 2411 causally linked to improved outcomes.

2412 (e) Support an ongoing process of evaluation to determine
 2413 the efficacy and effectiveness of various interventions.
 2414 Efficacy evaluation is intended to determine the validity of a
 2415 causal relationship between an intervention and an outcome.
 2416 Effectiveness evaluation is intended to determine the extent to
 2417 which the results can be generalized.

2418 (f) Develop and maintain an inclusive, interactive, and
 2419 evidence-supported program of quality improvement which promotes
 2420 individual skill building as well as organizational learning.

2421 (g) Develop and implement a method for making the results
 2422 of the accountability system transparent for all parties
 2423 involved in the child welfare system as well as policymakers and
 2424 the public. The presentation shall provide a comprehensible,
 2425 visual report card for the state and each community-based care

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2426 region, indicating the current status relative to each goal and
 2427 trends in that status over time. The presentation shall
 2428 identify and report outcome measures which assess the
 2429 performance of the department, community-based care lead agency,
 2430 and its subcontractors working together as an integrated system
 2431 of care.

2432 (3) The department shall establish a technical advisory
 2433 panel consisting of representatives from the Florida Institute
 2434 for Child Welfare established pursuant to s. 1004.615, lead
 2435 agencies, community-based care providers, other contract
 2436 providers, community-based care alliances, and family
 2437 representatives. The President of the Senate and the Speaker of
 2438 the House of Representatives shall each appoint a member to
 2439 serve as a legislative liaison to the panel. The technical
 2440 advisory panel shall advise the department on meeting the
 2441 requirements of this section.

2442 (4) The accountability system may not rank or compare
 2443 performance among community-based care regions unless adequate
 2444 and specific adjustments are adopted which account for the
 2445 diversity in regions' demographics, resources, and other
 2446 relevant characteristics.

2447 (5) The results of the accountability system must provide
 2448 the basis for performance incentives if funds for such payments
 2449 are made available through the General Appropriations Act.

2450 (6) At least quarterly, the department shall make the

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2451 results of the accountability system available to the public
 2452 through publication on its website. The website must allow for
 2453 custom searches of the performance data.

2454 (7) The department shall report by October 1 of each year
 2455 the statewide and individual community-based care lead agency
 2456 results for child protection and child welfare systems. The
 2457 department shall use the accountability system and consult with
 2458 the community-based care alliance and the chief judge or judges
 2459 in the community-based care service area to prepare the report
 2460 to the Governor, the President of the Senate, and the Speaker of
 2461 the House of Representatives.

2462 Section 31. Section 409.998, Florida Statutes, is created
 2463 to read:

2464 409.998 Community-based care oversight by community
 2465 alliances.-

2466 (1) To provide independent, community-focused oversight of
 2467 child protection and child welfare services and the local system
 2468 of community-based care, community alliances created in s.
 2469 20.19(5), shall, with the assistance of the department, perform
 2470 the following duties:

2471 (a) Conduct a needs assessment and establishment of
 2472 community priorities for child protection and child welfare
 2473 services.

2474 (b) Review the performance of the department, sheriff's
 2475 office if the office provides child protective services, and

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2476 lead agency individually and as an integrated system of care,
 2477 and advise the department, sheriff's office if applicable, and
 2478 lead agency regarding concerns and suggested areas of
 2479 improvement.

2480 (c) Recommend a competitive procurement for the lead
 2481 agency if programmatic or financial performance is poor. The
 2482 community alliance shall make recommendations on the development
 2483 of the procurement document for such competitive procurement and
 2484 may suggest specific requirements relating to local needs and
 2485 services.

2486 (d) Recommend a contract extension for the lead agency if
 2487 programmatic or financial performance is superior.

2488 (e)

2489 (f) In partnership with the Florida Institute for Child
 2490 Welfare established under s. 1004.615, develop recommendations
 2491 to the department and the community-based care lead agency to
 2492 improve child protection and child welfare policies and
 2493 practices.

2494 (g) Promote greater community involvement in community-
 2495 based care through participation in community-based care lead
 2496 agency services and activities, solicitation of local financial
 2497 and in-kind resources, recruitment and retention of community
 2498 volunteers, and public awareness efforts.

2499 (9) (a) Authority to create a direct-support organization.-
 2500 The alliance is authorized to create a direct-support

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2501 organization.

2502 1. The direct-support organization must be a Florida

2503 corporation, not for profit, incorporated under the provisions

2504 of chapter 617. The direct-support organization shall be exempt

2505 from paying fees under s. 617.0122.

2506 2. The direct-support organization shall be organized and

2507 operated to conduct programs and activities; raise funds;

2508 request and receive grants, gifts, and bequests of moneys;

2509 acquire, receive, hold, invest, and administer, in its own name,

2510 securities, funds, objects of value, or other property, real or

2511 personal; and make expenditures to or for the direct or indirect

2512 benefit of the lead agency.

2513 3. The department is not authorized to provide support in

2514 the form of funding or staff time for the direct-support

2515 organizations created pursuant to this subsection.

2516 3. If the Secretary of Children and Families determines

2517 that the direct-support organization is operating in a manner

2518 that is inconsistent with the goals and purposes of community-

2519 based care or not acting in the best interest of the community,

2520 the secretary may terminate the contract and thereafter the

2521 organization may not use the name of the community-based care

2522 alliance.

2523 (b) Contract.-The direct-support organization shall

2524 operate under a written contract with the department. The

2525 written contract must, at a minimum, provide for:

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2526 1. Approval of the articles of incorporation and bylaws of
 2527 the direct-support organization by the secretary.

2528 2. Submission of an annual budget for the approval by the
 2529 secretary or his or her designee.

2530 3. The reversion without penalty to the department of all
 2531 moneys and property held in trust by the direct-support
 2532 organization for the community-based care alliance if the
 2533 direct-support organization ceases to exist or if the contract
 2534 is terminated.

2535 4. The fiscal year of the direct-support organization,
 2536 which must begin July 1 of each year and end June 30 of the
 2537 following year.

2538 5. The disclosure of material provisions of the contract
 2539 and the distinction between the community-based care alliance
 2540 and the direct-support organization to donors of gifts,
 2541 contributions, or bequests, as well as on all promotional and
 2542 fundraising publications.

2543 (c) Board of directors.—The secretary or his or her
 2544 designee shall appoint a board of directors for the direct-
 2545 support organization. The secretary or his or her designee may
 2546 designate members of the alliance and the lead agency to serve
 2547 on the board of directors. An employee of the department may not
 2548 serve on the board of directors. Members of the board shall
 2549 serve at the pleasure of the secretary or his or her designee.

2550

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2551 (e) Moneys.—Moneys of the direct-support organization may
 2552 be held in a separate depository account in the name of the
 2553 direct-support organization and subject to the provisions of the
 2554 contract with the department.

2555 (f) Annual audit.—The direct-support organization shall
 2556 provide for an annual financial audit in accordance with s.
 2557 215.981.

2558 (g) Limits on the direct-support organization.—The direct-
 2559 support organization may not exercise any power under s.
 2560 617.0302(12) or (16). (h) Repeal.—The authority to create a
 2561 direct-support organization expires October 1, 2019, unless
 2562 saved from repeal by reenactment by the Legislature.

2563 (10) All alliance meetings are open to the public pursuant
 2564 to s. 286.011 and the public records provision of s. 119.07(1).

2565 Section 32. Section 827.10, Florida Statutes, is created to
 2566 read:

2567 827.10 Unlawful abandonment of a child.—

2568 (1) As used in this section, the term:

2569 (a) "Abandons" or "abandonment" means to leave a child in
 2570 a place or with a person other than a relative with the intent
 2571 not to return to the child and with the intent not to provide
 2572 for the care of the child.

2573 (b) "Care" means support and services necessary to
 2574 maintain the child's physical and mental health, including, but
 2575 not limited to, food, nutrition, clothing, shelter, supervision,

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2576 medicine, and medical services that a prudent person would
 2577 consider essential for the well-being of the child.

2578 (c) "Caregiver" has the same meaning as provided in s.
 2579 39.01(10).

2580 (d) "Child" means a child for whose care the caregiver is
 2581 legally responsible.

2582 (e) "Relative" has the same meaning as provided in s.
 2583 39.01(64).

2584 (2) A caregiver who abandons a child under circumstances
 2585 in which the caregiver knew or should have known that the
 2586 abandonment exposes the child to unreasonable risk of harm
 2587 commits a felony of the third degree, punishable as provided in
 2588 s. 775.082, s. 775.083, or s. 775.084.

2589 (3) This section does not apply to a person who surrenders
 2590 a newborn infant in compliance with s. 383.50.

2591 (4) This section does not preclude prosecution for a
 2592 criminal act under any other law, including, but not limited to,
 2593 prosecution of child abuse or neglect of a child under s.
 2594 827.03.

2595 Section 33. Section 1004.615, Florida Statutes, is created
 2596 to read:

2597 1004.615 Florida Institute for Child Welfare.--

2598 (1) There is established the Florida Institute for Child
 2599 Safety in the Department of Children and Families. The purpose
 2600 of the institute is to advance the well-being of children and

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2601 families by improving the performance of child protection and
 2602 child welfare services through research, policy analysis,
 2603 evaluation, and leadership development. The institute shall
 2604 consist of a consortium of public and private universities
 2605 offering degrees in social work and shall be housed within the
 2606 College of Social Work of the Florida State University.

2607 (2) Using such resources as authorized in the General
 2608 Appropriations Act, the Department of Children and Families
 2609 shall contract with the institute for performance of the duties
 2610 described in subsection (4).

2611 (3) The institute shall work with the department, sheriffs
 2612 providing child protective investigative services, community-
 2613 based care lead agencies, community-based care provider
 2614 organizations, the court system, the Department of Juvenile
 2615 Justice, and other partners who contribute to and participate in
 2616 providing child protection and child welfare services.

2617 (4) The duties and responsibilities of the institute
 2618 include the following:

2619 (a) Maintain a program of research that contributes to
 2620 scientific knowledge and informs both policy and practice
 2621 related to child safety, permanency, and child and family well-
 2622 being.

2623 (b) Advise the department and other organizations
 2624 participating in the child protection and child welfare system
 2625 regarding scientific evidence on policy and practice related to

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2626 child safety, permanency, and child and family well-being.
 2627 (c) Advising about the management practices and
 2628 administrative processes used by the department and other
 2629 organizations participating in the child protection and child
 2630 welfare system and recommend improvements that reduce
 2631 burdensome, ineffective requirements for frontline staff and
 2632 their supervisors while enhancing their ability to effectively
 2633 investigate, analyze, problem-solve, and supervise.
 2634 (d) Assess the performance of child protection and child
 2635 welfare services based on specific outcome measures.
 2636 (e) Evaluate the scope and effectiveness of preservice and
 2637 inservice training for child protection and child welfare
 2638 workers and advise and assist the department in efforts to
 2639 improve these trainings.
 2640 (f) Assess the readiness of social work graduates to
 2641 assume job responsibilities in the child protection and child
 2642 welfare system and identify gaps in education that can be
 2643 addressed through the modification of curricula or the
 2644 establishment of industry certifications.
 2645 (g) Develop and maintain a program of professional support
 2646 including training courses and consulting services that assist
 2647 both individuals and organizations in implementing adaptive and
 2648 resilient responses to workplace stress.
 2649 (h) Participate in the department's critical incident
 2650 response team, assist in the preparation of reports about such

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2651 incidents, and support the committee review of reports and
 2652 development of recommendations.

2653 (i) Identify effective policies and promising practices,
 2654 including but not limited to innovations in coordination between
 2655 entities participating in the child protection and child welfare
 2656 system, data analytics, working with the local community, and
 2657 management of human service organizations and communicate these
 2658 findings to the department and other organizations participating
 2659 in the child protection and child welfare system.

2660 (5) The President of the Florida State University shall
 2661 appoint a director to the institute. The director must be a
 2662 child welfare professional with a doctoral degree in social work
 2663 and hold a faculty appointment in the Florida State University
 2664 College of Social Work. The institute shall be administered by
 2665 the director, and the director's office shall be located at the
 2666 Florida State University. The director is responsible for
 2667 overall management of the institute and for developing and
 2668 executing the work of the institute consistent with the
 2669 responsibilities in subsection (4). The director shall engage
 2670 individuals in other state universities with accredited colleges
 2671 of social work to participate in the institute. The universities
 2672 involved in the institute shall provide facilities, staff, and
 2673 other resources to the institute to establish statewide access
 2674 to institute programs and services.

2675 (6) By October 1 of each year, the institute shall provide

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2676 a written report to the Governor, the President of the Senate,
 2677 and the Speaker of the House of Representatives which outlines
 2678 its activities in the preceding year, reports significant
 2679 research findings as well as results of other programs, and
 2680 provides specific recommendations for improving child protection
 2681 and child welfare services.

2682 (7) The institute or the Florida State University School
 2683 of Social Work shall convene a task force to make
 2684 recommendations for improving the state's child welfare system.
 2685 The task force shall include but not be limited to
 2686 representatives of the department, the Department of Juvenile
 2687 Justice, community-based care lead agencies, child welfare
 2688 services providers, including case management providers, the
 2689 court system, and advocates. The task force shall include
 2690 individuals working directly with children and families,
 2691 administrators, and experts. Individual members of the task
 2692 force shall be responsible for their own travel expenses. The
 2693 task force may meet in person, telephonically, through web-based
 2694 technology, or any combination thereof. The task force shall
 2695 establish a workgroup which may include additional members with
 2696 directly relevant experience and expertise to make specific
 2697 recommendations on reducing paperwork and increasing the
 2698 retention of case managers. The institute or university shall
 2699 submit an interim report by February 1, 2015, and a final report
 2700 by November 1, 2015, to the Governor, the President of the

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CODING: Words ~~stricken~~ are deletions; words underlined are additions.

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2701 Senate, and the Speaker of the House of Representatives.

2702 Section 34. Paragraph (h) is added to subsection (1) of
 2703 section 1009.25, Florida Statutes, to read:

2704 1009.25 Fee exemptions.—

2705 (1) The following students are exempt from the payment of
 2706 tuition and fees, including lab fees, at a school district that
 2707 provides workforce education programs, Florida College System
 2708 institution, or state university:

2709 (h) Pursuant to s. 402.403, a child protective
 2710 investigator or a child protective investigation supervisor
 2711 employed by the Department of Children and Families or a
 2712 sheriff's office who is enrolled in an accredited bachelor's
 2713 degree or master's degree in social work program or completing
 2714 coursework required pursuant to s. 402.402(2)(a)2., provided
 2715 that the student attains at least a grade of "B" in all courses
 2716 for which tuition and fees are exempted.

2717 Section 35. This act shall take effect July 1, 2014.