The Florida Senate BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

INTRODUCER:	Appropriations Subcommittee on H		PCS/CS/SB 122 (603180)					
]	Appropriations Subcommittee on Health and Human Services; Children, Families, and Elder Affairs Committee; and Senators Rouson, Berman, Hooper, and Book							
SUBJECT:	Child Welfare							
DATE:	February 25, 2020 REVISED:							
ANALYS	ST STAFF DIRECTOR	REFERENCE	ACTION					
Preston	Hendon	CF	Fav/CS					
Sneed	Kidd	AHS	Recommend: Fav/CS					
		AP						

Please see Section IX. for Additional Information:

COMMITTEE SUBSTITUTE - Substantial Changes

I. Summary:

PCS/CS/SB 122 is titled "Jordan's Law" and makes a number of changes to the laws related to the child welfare system in an attempt to address issues that were identified in the case of Jordan Belliveau, a two-year old boy who was killed by his mother in Pinellas County.

The bill requires specified child welfare professionals and law enforcement officers to receive training developed by the Department of Health on the recognition of and response to head trauma and brain injury in children under six years old. The bill also requires Guardian ad Litem (GAL) program staff to receive training developed by the GAL training curriculum committee on the recognition of and responses to head trauma and brain injury in children under six years old.

The bill also:

- Requires the Department of Children and Families (DCF or department), in collaboration with the Florida Institute for Child Welfare (institute), to develop and implement a comprehensive uniform child welfare workforce framework based on a nationally recognized model and specifies issues to be addressed.
- Conforms education and training requirements to the new child welfare workforce framework.
- Allows credentialing entities that certify child welfare personnel to access certain records held by the department related to child abuse and neglect and provides additional duties for

the department and third party credentialing entities related to ethics and professional conduct violations.

- Authorizes a parent or legal guardian of a child removed from his or her home as a result of a medical evaluation performed by a Child Protection Team, to request a second, independent evaluation by a physician who has met the qualifications of s. 39.303(b), F.S., in order to determine whether the child has been the victim of abuse or neglect. Requires the court to consider the second evaluation when determining whether to remove a child from the home.
- Authorizes the DCF to pilot the effectiveness of case management services in CBCs serving up to three judicial circuits with high removal rates, significant budget deficits and high case management turnover, and have experienced significant increases in children entering out-of-home care.
- Revises the mission of the institute to include advancing the well-being of children and families who are involved with, or at risk of becoming involved with, the child welfare system by facilitating and supporting statewide partnerships to develop competency-based education, training, and support to prepare a diverse group of social work professionals for careers in child welfare.

The bill is expected to have an indeterminate fiscal impact on state expenditures. See Section V.

The bill takes effect July 1, 2020.

II. Present Situation:

Jordan Belliveau

Jordan Belliveau, Jr., was killed by his mother in September 2018 when he was two years old. At the time of his death, the family was under court-ordered protective supervision as Jordan, who had been removed from his parent's custody in October 2016, was reunified with his mother, 21-year old Charisee Stinson, in May 2018. In addition to the open service case, there was also an active child abuse investigation due to ongoing domestic violence between his mother and father, 22-year-old Jordan Belliveau, Sr.

Due to lack of communication to the court, lack of communication between the Pinellas County Sheriff's Office and the department, and lack of evidence provided by Directions for Living, the contracted case management organization for Eckerd Connects, the community-based care lead agency (CBC), regarding the parent's case plan compliance, ongoing family issues that created an unsafe home environment for Jordan were never addressed. Jordan was initially reported missing by his mother in September 2018 and a statewide Amber Alert was issued. His body was found by law enforcement four days after his death. His mother was charged with aggravated child abuse and first-degree murder. His mother admitted to killing Jordan by hitting him, which caused the back of his head to hit a wall in their home.

Special Review of the Case Involving Jordan Belliveau Jr.

Case Summary

Given the circumstances of the case, former interim secretary of the department, Rebecca Kapusta, immediately initiated a special review to evaluate the circumstances surrounding

Jordan's death and to assess the services provided during the 17 months he remained removed from the home through his reunification with his mother in May 2018. The multidisciplinary team was not only comprised of individuals who specialize in child welfare, but also those with mental health, and domestic violence expertise (both from a treatment and law enforcement perspective) to address the reunification decision and actions that occurred when subsequent concerns were identified.¹

Jordan's family first came in contact with the DCF in October 2016 when a report was made to the hotline alleging Jordan was in an unsafe home environment that included gang violence. Jordan was placed in foster care after his mother was unable to obtain alternative housing. He was subsequently adjudicated dependent on November 1, 2016, and placed in foster care. His parents were offered a case plan with tasks including finding stable housing and receiving mental health services and counseling.

Throughout Jordan's case, his mother and father were either non-compliant or only partially compliant with their case plans. Nevertheless, due to lack of communication to the court and lack of evidence provided by the case management organization, Directions for Living, regarding compliance, Jordan was eventually reunified with his mother and father. After reunification and while still under judicial supervision, domestic violence continued between the parents, with Jordan's father being arrested for domestic violence against Jordan's mother in July 2018. However, the incident was not immediately reported to the hotline upon his arrest, and thus the incident was not reported to the court at a hearing the next day regarding Jordan's reunification.

When the incident was reported to the hotline three weeks later, a child protective investigation was conducted by the Pinellas County Sheriff's Office. However, the investigator determined that Jordan was not currently in danger, and therefore, found there was no need to remove him from the home. Given the ongoing and escalating level of violence between the parents, the inability to control the situation in the home, and the risk of harm posed to Jordan should his parents engage in further altercations, an unsafe home environment should have been identified.

However, with no concerns for Jordan's safety raised after the investigation or during subsequent hearings, there was no consideration for an emergency modification of his placement and Jordan was reunited with his father. On August 31, 2018, a case manager visited Jordan's parents to discuss several issues regarding lack of cooperation with the Guardian ad Litem and case plan tasks. The case manager emphasized the continued need for Jordan's parents to participate in services or risk losing custody of Jordan. Less than 24 hours after the visit, Jordan was reported missing by his mother. Four days later, law enforcement found his body. Jordan's mother admitted to killing him by hitting him in a "moment of frustration" which "in turn caused the back of his head to strike an interior wall of her home."²

¹ Department of Children and Families, *Special Review of the Case Involving Jordan Belliveau, Jr.* (Jan. 11, 2019), available at <u>http://www.dcf.state.fl.us/newsroom/docs/Belliveau%20Special%20Review%202018-632408.pdf</u>. (Last visited November 15, 2019).

Findings in the Report

- The decision to reunify Jordan was driven primarily by the parents' perceived compliance with case plan tasks and not behavioral change. There was a noted inability by all parties involved to recognize and address additional concerns that became evident throughout the life of the case. Instead, case decisions were solely focused on mitigating the environmental reasons Jordan came into care and failed to address the overall family conditions.
- Following reunification, policies and procedures to ensure child safety and wellbeing were not followed. In addition, Directions for Living case management staff did not take action on the mother's lack of compliance and her failure to participate with the reunification program prior to and following reunification.
- When the new child abuse report was received in August 2018, alleging increased volatility between the parents, the present danger was not appropriately assessed and identified. The assessment by the Pinellas County Sheriff's child protective investigator (CPI) was based solely on the fact that the incident wasn't reported to the hotline when it initially occurred. The CPI failed to identify the active danger threats occurring within the household that were significant, immediate, and clearly observable. Given the circumstances, a modification of Jordan's placement should have been considered.
- Despite the benefit of co-location, there was a noted lack of communication and collaboration between the Pinellas County Sheriff's Office CPI unit and Directions for Living case management staff in shared cases involving Jordan and his family, especially regarding the August 2018 child abuse investigation.
- In addition to the lack of communication and collaboration between frontline investigations and case management staff noted above, there was an absence of shared ownership between all entities involved throughout the life of Jordan's case, which demonstrates a divided system of care. In addition, the lack of multidisciplinary team approach resulted in an inability to adequately address the identified concerns independent of one another.
- The biopsychosocial assessments failed to consider the history and information provided by the parents and resulted in treatment plans that were ineffective to address behavioral change. Moreover, there was an over-reliance on the findings of the biopsychosocial assessments as to whether focused evaluations were warranted (e.g., substance abuse, mental health, domestic violence, etc.), despite the abundance of information to support such evaluations were necessary.³

Conclusion

The report's findings and conclusion do not indicate that Jordan's death was the result of any shortcomings or loopholes in the law or lack of training related to the identification of brain injury, but rather due to the multiple failures of individuals working with children in the child welfare system to communicate, coordinate and cooperate:

Complex child welfare cases are difficult enough when high caseloads and continual staff turnover plague an agency. However, it is further impacted when those involved in the case (protective investigations, case management, clinical providers, legal, Guardians ad Litem, and the judiciary) fail to work together to ensure the best decisions are being made on behalf of the child and their family.

This case highlights the fractured system of care in Circuit 6, Pinellas County, with each of the various parts of the system operating independently of one another, without regard or respect as to the role their part plays in the overall child welfare system. Until the pieces of the local child welfare system are made whole, decision-making will continue to be fragmented and based on isolated views of a multi-faceted situation.⁴

Training on Head Trauma and Brain Injury in Abused and Neglected Children

Head Trauma and Brain Injury in Children

Abusive head trauma is a leading cause of child abuse deaths in children under five in the United States.⁵ Head trauma and injuries can be mild, like a bump or bruise, or they can be more severe, like a concussion or a fractured skull bone, and may include internal bleeding and damage to the brain. A number of actions can cause head trauma and brain injury in children. The most commonly known physical abuse that results in a brain injury is shaken-baby syndrome⁶; however, head trauma and other forms of physical abuse, like hitting or striking a child, can cause brain injuries. Caregiver neglect can also cause brain injuries through inadequate supervision or by providing an unsafe home environment.

Additionally, other forms of abuse that do not involve physical abuse to the head, such as choking or strangling, can damage the brain. Disruption in oxygen to the brain, called hypoxia, can cause long-term disabilities and damage to a child's brain.⁷

Current Brain Injury Training Requirements

Currently, all case managers, Guardian ad Litem staff and volunteers, dependency court judges, child protective investigators and supervisors, Children's Legal Services' attorneys, and law enforcement officers are required to complete required training for their position. Typically, this is done as preservice and continuing education training. None of the required training includes the recognition of and response to head trauma and brain injury in a child under age six.⁸

Education and Training Requirements for Child Welfare Staff

Training and Certification

In 1986, the Legislature required the Department of Health and Rehabilitative Services (HRS) to establish, maintain and oversee the operation of child welfare training academies in the state for the expressed purpose of enabling the state to provide a systematic approach to staff development and training for dependency program staff. The Legislature further intended that

⁴ *Id*.

⁵ Spies, EL, Ph.D. and Klevens, J., MD, Ph.D., *Fatal Abusive Head Trauma among Children Aged <5 Years – United States, 1999-2014* (May 27, 2016).

⁶ Tina Joyce, Martin Huecker, *Pediatric Abusive Head Trauma (Shaken Baby Syndrome)*, available at: <u>https://www.ncbi.nlm.nih.gov/books/NBK499836/</u> (last visited February 24, 2020).

⁷ James E. Lewis, Ph.D., *Neuropsychological Evaluations of Children and Adults in Child Welfare Cases*, available at: <u>http://centervideo.forest.usf.edu/clsneuropsych/start.html</u> (last visited February 24, 2020).

⁸ For specific training requirements, see ss. 25.385, 39.8296, 402.402, 409.988, 943.13 and 943.135, F.S.

this approach to training would aid in the reduction of poor staff morale and of staff turnover, positively impact the quality of decisions made regarding children and families and afford a better quality of care for children placed in out-of-home care.⁹ The HRS established a number of training academies statewide that were widely recognized as a national model for child welfare workforce training.

In 2000, the Legislature authorized the department to create certification programs for its employees and service providers to ensure that only qualified employees and service providers provide client services. The department was authorized to develop rules that included qualifications for certification, including training and testing requirements, continuing education requirements for ongoing certification, and decertification procedures to be used to determine when an individual no longer meets the qualifications for certification and to implement the decertification of an employee or agent.¹⁰ The department subsequently developed 11 types of certification designations for child protection professionals.

In 2011, at the urging of the CBCs, the Legislature eliminated the department's child welfare training program and removed the department's ability to create certification programs.¹¹

Education

The college degrees most tailored to and associated with child welfare are the bachelor's and master's degrees in social work. During the first half of the 20th century, the federal government, in cooperation with universities and local agencies, established a child welfare system staffed by individuals with professional social work educations. Child welfare came to be viewed as a prestigious specialty within the social work profession.

In the 1990's, an increased recognition of child abuse led to enactment of state child abuse and neglect reporting laws and toll-free numbers to report abuse. This resulted in a large increase of child abuse reports, and resources for the preparation and support of additional staff needed to respond to the reports became inadequate. States moved quickly to hire additional employees to investigate abuse. One way to expand the workforce was to reduce staff qualifications. In response to having a varied workforce without similar expertise and training, agencies began to structure child welfare work to reduce its complexity and make it possible for people with fewer qualifications to adequately perform required tasks.

Several studies have found evidence that social work education, at either the bachelors of social work (BSW) or masters of social work (MSW) level, positively correlates with performance. A study conducted in Maryland public child welfare agencies found an MSW to be the best predictor of overall performance as measured by supervisory ratings and employee reports of work related competencies. A national study that measured competencies related to 32 job-

⁹ Chapter 86-220, L.O.F. The first training academy was required to be operational by June 30, 1987 and be located at Tallahassee Community College.

¹⁰ HB 2125, Chapter 2000-139. L.O.F.

¹¹ HB 279, Chapter 2011-163, L.O.F.

related duties found that both MSW and BSW staff were better prepared for child welfare work than their colleagues without social work education.¹²

Research conducted with staff in Kentucky's public child welfare agency also revealed that staff with social work degrees scored significantly better on state merit examinations, received somewhat higher ratings from their supervisors, and had higher levels of work commitment than other staff. A Nevada study showed that caseworkers who had a social work degree were significantly more likely to create a permanent plan for children in their caseloads within three years than their colleagues without social work education.¹³

In 2014, the Legislature required the department to set a goal of having at least half of all child protective investigators and supervisor's with a bachelor's degree or a master's degree in social work from a college or university social work program accredited by the Council on Social Work Education. Despite numerous studies and reports supporting the value of a formal social work education in child welfare, Florida has made little if any progress towards re-professionalizing the workforce. In fact, the state has seen a decline since 2016.

Percentage of Child Protective Investigative Positions With Social Work Degree					
	BSW	MSW	Either		
2014			9.5%		
2016	12%	3%			
2019	11%	2%			

The Florida Institute for Child Welfare

In 2014, the Legislature established the Florida Institute for Child Welfare (FICW) at the Florida State University College of Social Work. The purpose of the FICW is to advance the well-being of children and families by improving the performance of child protection and child welfare services through research, policy analysis, evaluation, and leadership development.¹⁴ The institute is required to:

- Maintain a program of research which contributes to scientific knowledge and informs both policy and practice.
- Advise the department and other organizations participating in the child protection and child welfare system regarding scientific evidence.
- Provide advice regarding management practices and administrative processes used by DCF and other organizations participating in the child protection and child welfare system and recommend improvements.
- Assess the performance of child protection and child welfare services based on specific outcome measures.

¹² The Florida Senate, Bill Analysis and Fiscal Impact Statement, SB 1666, March 12, 2014, available at:

http://www.flsenate.gov/Session/Bill/2014/1666/Analyses/2014s1666.cf.PDF (Last visited November 30, 2019). ¹³ Id.

¹⁴ Section 1004.615, F.S.

- Evaluate the scope and effectiveness of preservice and inservice training for child protection and child welfare employees and advise and assist the department in efforts to improve such training.
- Assess the readiness of social work graduates to assume job responsibilities in the child protection and child welfare system and identify gaps in education, which can be addressed through the modification of curricula or the establishment of industry certifications.
- Develop and maintain a program of professional support including training courses and consulting services that assist both individuals and organizations in implementing adaptive and resilient responses to workplace stress.
- Participate in the department's critical incident response team, assist in the preparation of reports about such incidents, and support the committee review of reports and development of recommendations.
- Identify effective policies and promising practices, including, but not limited to, innovations in coordination between entities participating in the child protection and child welfare system, data analytics, working with the local community, and management of human service organizations, and communicate these findings to the department and other organizations participating in the child protection and child welfare system.
- Develop a definition of a child or family at high risk of abuse or neglect. Such a definition must consider characteristics associated with a greater probability of abuse and neglect.¹⁵

III. Effect of Proposed Changes:

Section 1 provides a short title. The bill is titled "Jordan's Law" after Jordan Belliveau, a twoyear old child in Florida's child welfare dependency system, who was killed by his mother in September 2018.

Section 2 amends s. 39.202, F.S., related to confidentiality of reports and records in cases of child abuse and neglect, to allow credentialing entities that certify child welfare personnel to access certain specified records held by the department related to child abuse and neglect. This will allow the credentialing entity to suspend or revoke the certification of child welfare personnel who work on cases involving children who are abused, neglected or abandoned.

Section 3 amends s. 39.303, F.S., relating to Child Protection Teams, to require the teams to add information on the recognition of and response to head trauma and brain injury in children under six years old to currently mandated trainings developed for program and other employees of the department, employees of the Department of Health, and other medical professionals.

Section 4 amends s. 39.401, F.S., relating to taking a child alleged to be dependent into custody, to authorize a parent or legal guardian of a child who is removed as a result of a determination by a medical evaluation performed by a Child Protection Team to request a second, independent evaluation be performed by a physician who has met the relevant qualifications of s. 39.303(b), F.S., in order to determine whether the child has been the victim of abuse or neglect. The bill requires the court to consider the evaluation when determining whether to remove a child from the home.

Section 5 amends s. 39.820, F.S., relating to definitions, to revise the terms "guardian ad litem" and "guardian advocate."

Section 6 amends s. 39.8296, F.S., relating to the statewide Office of Guardian ad Litem, to require that training for a guardian ad litem include information on the recognition of and responses to head trauma and brain injury in children under six years old. The bill requires the training curriculum committee, rather than the statewide Guardian Ad Litem office, to develop guardian ad litem training programs, including the development of training on the recognition of and responses to head trauma and brain injury in children under six years old.

Section 7 amends s. 402.40, F,S, relating to child welfare training and certification, to:

Child Welfare Workforce Development Framework and Education Requirements

- Require the department, in collaboration with the institute, to develop and implement a comprehensive uniform child welfare workforce framework based on a nationally recognized model and specifies the following components that must be addressed: recruitment and hiring; education and professional preparation; professional training and development; supervision; retention; caseload and workload; workforce well-being and support; work-life balance and flexible scheduling; agency culture and climate.
- Require the department to develop a protocol for screening candidates for child protective positions and give preference to certain candidates that have specific experience or educational training
- Require by January 1, 2021, the CBCs to submit to the department a plan and timeline for recruiting and hiring child welfare staff, which meet the same educational requirements for child protective staff. The plan and timeline must include the same recruiting and hiring requirements for child welfare staff employed by subcontractors.

Workforce Training

- Require the department to establish a comprehensive system to provide preservice and inservice competency-based training program curricula that all child welfare, including staff employed by a CBC and its subcontractor, are required to participate in and successfully complete.
- Require that the training program include information on the recognition of and responses to head trauma and brain injury in children under six years old.
- Allow the CBCs to develop supplemental training, if needed, but such training cannot not take the place of or conflict with required standardized statewide training.

Workforce Certification

- Require the department approved third-party credentialing entities to require that persons holding a child welfare certification to comply with the new training requirements as a condition of renewal or initial certification. Require the third-party credentialing entity to track and report compliance with this section.
- Require that all certified child welfare professionals follow the third-party credentialing entities code of ethical and professional conduct and disciplinary procedures:

- Require that the department, CBCs, sheriff's offices, and their contracted providers to report all allegations of suspected or known violations of ethical or professional misconduct standards to the department approved third-party credentialing entity.
- Require the third-party credentialing entity to review all case records involving the death of a child or other critical incident to ensure compliance with the entities code of ethical and professional conduct and disciplinary procedures.
- Require the department to provide the third-part credentialing entity with all reports necessary to conduct an investigation on all certified child welfare providers involved with the case.
- Require the department or a subcontracted employer of the certified staff to remove the individual from their duties that require certification as a condition of employment until an initial review is complete and the third-party credentialing entity determines whether an ethics case is warranted.
- Authorize the department to review the decisions of the third-party credentialing entity to deny, revoke, or suspend a certification of an individual.
- Allows a person that receives an adverse determination from a third-party credentialing entity to request an administrative hearing pursuant to ss. 120.569 and 120.57(1), F.S.
- Requires the third-party credentialing entity to track and monitor compliance with the entities code of ethical and professional conduct and disciplinary procedures.

Section 8 amends s. 409.988, F.S., relating to duties of the CBCs, to require that training for all individuals providing care for dependent children include information on the recognition of and responses to head trauma and brain injury in children under six years old that is developed by the Child Protection Team program. The bill also requires lead agencies to ensure the participation and completion of training relevant to the individual's area of responsibly, rather than the receipt of general training.

The bill expands the type of services that the CBCs must provide to dependent children to include intensive family reunification services that combine child welfare and mental health services for families with dependent children under six years old.

Section 9 creates s. 943.17298, F.S., relating to law enforcement training, to require that training for law enforcement officers include information on the recognition of and responses to head trauma and brain injury in children under six years old that is developed by the Child Protection Team program. Such training may either be a part of basic recruit training or continuing education or training.

Section 10 amends s. 1004.615, F.S., relating to the Florida Institute for Child Welfare (institute), to revise the mission of the institute to include advancing the well-being of children and families who are involved with, or at risk of becoming involved with, the child welfare system by facilitating and supporting statewide partnerships to develop competency-based education, training, and support to prepare a diverse group of social work professionals for careers in child welfare. The bill removes a requirement that the department contract with the institute and instead requires the department to collaborate with the institute for the following:

- Design and dissemination of continuum of social work education and training;
- Identification of methods to promote continuing professional development and systems of workplace support for existing child welfare staff;

- Development of a best practice model for providing feedback on curriculum to social work programs;
- Creation of a Title IV-E program designed to provide professional education and monetary support to undergraduate and graduate social work students who intend to pursue or continue a career in child welfare.
- Evaluation and dissemination of evidence-based and promising practices in child welfare and the development of high-quality evaluation into new program models and pilots; and
- Provide consultation on the creation of the Office of Well-Being and Support within the department.

Section 11 repeals s. 402.402, F.S., relating to child protection and child welfare personnel and attorneys employed by the department, to consolidate and eliminate requirements related to education and training which would be encompassed into or become unnecessary as a result of development of a new framework.

Section 12 amends s. 409.996, F.S., relating to duties of the department, to allow the DCF, in collaboration with select CBCs, to establish a program to improve case management services for dependent children under six years old by:

- Limiting caseloads for case managers comprised solely of children under six years old to no more than 15 children per case manager.
- Including case managers in the program who are trained specifically in:
 - Critical child development for children under six years old.
 - Specific practices of child care for children under six years old.
 - The scope of community resources available to children under six years of age.
 - Working with a parent or caregiver and assisting him or her in developing the skills necessary to care for a child under six years old.
- Allowing dependent siblings served by the program to be assigned to the same case manager.
- Requiring the DCF to evaluate the permanency, safety, and well-being of children served through the program and submit a report to the Governor and Legislature by October 1, 2025.

The bill requires the DCF to choose CBCs in circuits with high removal rates, significant budget deficits, significant case management turnover, and the highest numbers of children in out-of-home care or a significant increase in the number of children in out-of-home care over the last three fiscal years. If the DCF chooses to establish such a program, the bill requires the department to select up to three CBCs to develop and implement the program.

Section 13 amends s. 1009.25, F.S. relating to postsecondary fee exemptions, to delete a cross reference.

Section 14 provides an effective date of July 1, 2020.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

D. State Tax or Fee Increases:

None.

E. Other Constitutional Issues:

None identified.

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

The CBCs will be required to ensure that individuals providing care for dependent children receive training on recognition of and response to head trauma and brain injury in children under six years old. However, the CBCs may be able to use or adapt training developed by the Department of Health (DOH) into the CBC's existing training curriculum at minimal or no cost.

C. Government Sector Impact:

The DOH may incur expenses related to developing additional training on brain injuries in children for the Child Protection Teams that investigate child abuse cases. The expenses are likely insignificant and can be absorbed within existing department resources.

PCS/CS/SB 122 also requires specified child welfare professionals, guardians ad litem, and law enforcement officers to receive training on the recognition of and response to head trauma and brain injury in children under six years old. The Department of Children and Families (DCF), Guardian ad Litem program, and the Department of Law Enforcement will likely be able to incorporate the necessary changes to their training curricula within existing resources.

Additionally, the bill is expected to have an indeterminate fiscal impact on the DCF to establish a program to provide a comprehensive system to provide both preservice and inservice child welfare competency-based training curricula for all child welfare staff, including all staff providing care for dependent children employed by a CBC or a subcontractor. Currently, the CBCs are required to provide training statewide. According

to the DCF, the fiscal impact to the department could be offset if the funding currently provided to the sheriff's offices and the CBCs for this purpose is transferred to the department.¹⁶

VI. Technical Deficiencies:

Subsection (4) is unclear as to whether the department is to develop and implement a training program or only develop a course of instruction.

VII. Related Issues:

The funding of preservice and inservice training currently is allocated to the DCF, sheriffs' offices, and CBCs. The department will have to identify the funds and move the funding from the sheriffs' offices and CBCs to the department. In addition, it may be challenging for the department to develop a training curriculum without additional funds.

VIII. Statutes Affected:

The bill substantially amends the following sections of the Florida Statutes: 39.202, 39.303, 39.401, 39.820, 39.8296, 402.40, 409.988, 409.996, 1004.615, and 1009.25.

This bill creates 943.17298 of the Florida Statutes.

This bill repeals 402.402 of the Florida Statutes.

IX. Additional Information:

A. Committee Substitute – Statement of Changes: (Summarizing differences between the Committee Substitute and the prior version of the bill.)

Recommended CS/CS by Appropriations Subcommittee on Health and Human Services on February 25, 2020:

The committee substitute:

- Removes the requirement that the DCF create an Office of Well-Being and Support and a helpline for child welfare workers to address work related stress.
- Corrects a drafting error that removed a reference to the third party credentialing entity.
- Clarifies the terms "guardian ad litem" and "guardian advocate."
- Adds the requirement for the DCF to establish a comprehensive preservice and inservice training program curricula that all child welfare staff, including staff employed by a CBC and its subcontractor, are required to participate in and successfully complete.

¹⁶ The Department of Children and Families Agency Analysis, CS for SB 122, January 28, 2020. On file with the Senate Appropriations Subcommittee on Health and Human Services. The department states that "Title IV-E funding for preservice and inservice training is currently divided between the CBCs and the Department. The CBCs are currently appropriated \$7,377,261 in training funding for preservice and inservice training. In addition, the funding currently used for the training of CPIs and sheriffs' staff responsible for conducting child protective investigations total \$13,323,377. According to the department, the revenues will need to be retained by the department to cover the cost of preservice and inservice training."

- Allows the DCF to establish a pilot program for CBCs in three circuits with high removal rates, significant budget deficits and case management turnover, and high numbers of children in out-of-home care to improve case management services for dependent children under six years old by:
 - Limiting caseloads for certain case managers to no more than 15 children per case manager.
 - Including case managers who are trained in:
 - Critical child development for children under six years old.
 - Specific practices of child care for children under six years old.
 - The scope of community resources available to children under six years of age.
 - Working with a parent or caregiver and assisting him or her in developing the skills necessary to care for a child under six years old.
 - Requiring the DCF to submit a report that evaluates the permanency, safety, and well-being of children served through the program.

Children, Families, and Elder Affairs on January 21, 2020:

The bill does the following:

- Allows the CBCs to develop supplemental training if needed but it cannot not take the place of or conflict with required standardized statewide training.
- Allows credentialing entities to access certain specified records held by the department related to child abuse and neglect and provides additional responsibilities for the department and the credentialing entities related to ethics violations.
- Authorizes a parent or legal guardian of a child who is removed as a result of a determination by a medical evaluation performed by a Child Protection Team to request a second, independent evaluation be performed by a physician who has met the relevant qualifications of s. 39.303(b), F.S., in order to determine whether the child has been the victim of abuse or neglect. Requires the court to consider the evaluation when determining whether to remove a child from the home.
- B. Amendments:

None.

This Senate Bill Analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.