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.)

Prepared By: The Professional Staff of the Committee on Judiciary

BILL:	SB 7018
INTRODUCER:	Children, Families, and Elder Affairs Committee
SUBJECT:	Child Welfare
DATE:	November 30, 2015 REVISED: 12/02/15

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
	Preston	Hendon		**CF Submitted as Committee Bill**
1.	Davis	Cibula	JU	**Favorable**
2.			AHS	
3.			AP	

I. Summary:

SB 7018 revises the state's approach to out-of-home placement services for children living in foster care. Among the revisions, the bill:

- Provides a more consistent approach to the delivery of intervention services;
- Requires a two-pronged assessment process to determine the service and support needs as well as the appropriate placement for each child who enters the foster care system;
- Requires the Department of Children and Families to develop a continuum of care that provides appropriate services based on the level of care for both foster home and group home placements; and
- Requires data collection on every aspect of the assessment, placement, and service provision process for children in foster care.

The bill also requires community-based care lead agencies to have available a full array of services, including intervention services, to help keep children from coming into foster care and requires more accountability for the outcomes of services delivered. Once a child enters the child welfare system, however, the bill requires the child to be assessed through a standardized assessment process to determine the appropriate placement. Finally, the bill repeals a number of residential group home statutes that would become obsolete upon passage of the bill.

The bill is anticipated to have an insignificant fiscal impact on state government.

II. Present Situation:

State Trends in Child Welfare

Many states are moving in the direction of reducing the use of residential group homes for children in foster care. This shift reflects a growing consensus within the child-welfare field that

group home settings for foster children, while sometimes necessary, should be used sparingly and appropriately. To lower the number of group care placements, states have two main options: providing more preventive support for unsafe families and recruiting more people, including relatives and non-relatives with whom children have a strong emotional relationship, to serve as foster parents.

Placement instability is harmful to children in foster care. Research shows an association between frequent placement disruptions and outcomes that are adverse to the child, including poor academic performance and social or emotional adjustment difficulties such as aggression, withdrawal, and poor social interaction with peers and teachers. Despite this evidence, there has been limited intervention by child welfare systems to reduce placement instability as a mechanism for improving outcomes for children. According to some, a thorough assessment process to determine the appropriate placement is the most effective way to reduce multiple placements.

Placement Options for Children in Out-of-Home Care

Federal law has long supported the belief that all children should grow up in families. The Adoption Assistance and Child Welfare Act of 1980 codified the concept that children should be cared for in their own homes whenever it is possible to do so safely and in new permanent homes when it is not. To preserve the well-being of children who enter the system, out-of-home placements must be in the least restrictive setting possible that is most like a family.[1] Florida has likewise codified the concept of least restrictive setting.[2]

The Adoption and Safe Families Act of 1997 (ASFA) was considered the most significant piece of legislation addressing child welfare since the enactment of the Adoption Assistance and Child Welfare Act 17 years earlier. The legislation was enacted as a response to increasing concerns voiced around the nation that child welfare systems were not providing for the safety, well-being, and permanent placement of children in a timely and adequate manner. The new law sought to focus on child safety when making case decisions and make certain that children did not languish or grow up in foster care, but were instead connected with permanent families.[3] Florida was one of the first states to enact the provisions of ASFA.[4]

Placement with Relatives or Kinship Care

A substantial amount of research acknowledges the evidence that children in the care of relatives, or what is often referred to as "kinship care," are less likely to change placements and benefit from increased placement stability, as compared to children placed in general foster care. Most child welfare systems strive to place children in stable conditions without multiple living arrangement changes because it has consistently demonstrated a better result for all children living in out-of-home care. As opposed to children living in foster care, children living in kinship care are more likely to remain in their own neighborhoods, be placed with their siblings, and

[1] Adoption Assistance and Child Welfare Act of 1980, Pub. L. No. 96–272, 42 USC s. 675.
[2] See ss. 39.407, 39.6012 and 409.165, F.S.
[3] Olivia Golden and Jennifer Macomber, *Intentions and Results: A Look Back at the Adoption and Safe Families Act* (Dec. 11, 2009), *available at:* http://www.urban.org/research/publication/intentions-and-results-look-back-adoption-and-safe-families-act (last visited Nov. 23, 2015).
[4] Chapter 98-403, Laws of Fla.

have more consistent interactions with their birth parents than do children who are placed in foster care, all of which might contribute to less disruptive transitions into out-of-home care.[5]

Among the appropriate placement options for children who could not be reunified with their parents, ASFA included placement with relatives, legal guardians, or another planned permanent-living arrangement. Even though ASFA encouraged states to seek fit and willing relatives as permanent family options, it did not offer ongoing financial assistance for relatives who were foster parents caring for children as their guardians outside of foster care.[6] ASFA provided incentives to encourage the movement of children to adoptive families, but did not provide similar fiscal incentives that would help children leave care to live permanently with legal guardians or relatives who were not adopting them.[7] Additional provisions of ASFA created challenges for placing a child with a fit and willing relative. In particular, ASFA regulations require that foster homes of relatives be licensed in the same manner as foster homes for children in non-relative placements, with few case-specific exceptions.[8]

More recent federal legislation, the 2008 Fostering Connections to Success and Increasing Adoptions Act (Fostering Connections), makes this requirement a bit less restrictive by allowing states to waive non-safety related licensing standards for relative homes on a case-by-case basis. Fostering Connections also supports states in providing financial subsidies to kinship legal guardianship placement as long as certain conditions have been met. Florida has not implemented the provisions of Fostering Connections related to relative guardianship.[9]

Florida did, however, recognize the importance of relative placements by creating the Relative Caregiver Program in 1998 to provide financial assistance to eligible relatives caring for children who would otherwise be in the foster care system.[10] Nonetheless, this recognition provided benefits in an amount less than those provided to foster parents or adoptive parents. While the statewide average monthly rate for children judicially placed with relatives or nonrelatives who are not licensed as foster homes may not exceed 82 percent of the statewide average foster care rate,[11] currently, the monthly amount of the payment is far less than that:[12]

- Age zero through five years – $242
- Age six through 12 years – $249
- Age 13 to 18 years – $298

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[5] David Rubin and Kevin Downes, K., et al., *The Impact of Kinship Care on Behavioral Well-being for Children in Out-of-Home Care* (June 2, 2008), *available at:* http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2654276/.

[6] MaryLee Allen and Beth Davis-Pratt *The Impact of ASFA on Family Connections for Children* (Dec. 11, 2009), *available at:* http://www.urban.org/research/publication/intentions-and-results-look-back-adoption-and-safe-families-act.

[7] While some relatives want to adopt, grandparents are often hesitant to do so. This is because it is necessary to first terminate their own children's parental rights and because of their hope that their adult sons or daughters will one day be able to resume parenting.

[8] *Supra* at 6.

[9] P.L. 110-351.

[10] Section 39.5085, F.S. In 2014 the program was expanded to include specified nonrelative caregivers. Chapter 2014-224, Laws of Fla.

[11] *Id*.

[12] 65C-28.008, F.A.C.

In addition, children living with relatives are often not eligible for other benefits provided to children living in licensed foster care.[13] According to the department, as of September 30, 2015, Florida had 12,343 children receiving in-home services, 12,341 children who are in kinship foster care placements, and 10,029 children who are in licensed foster care placements.[14]

Family Foster Homes

Family foster homes offer the next least restrictive environment following kinship care for children who need out-of-home placements. Florida does not have enough family foster homes and does not have an adequate array of homes necessary to meet the variety of needs of children in out-of-home placements. It is a problem that has existed for at least 15 years. In 2001, it was reported that "Florida's foster care system was overwhelmed with many problems during the past several years as evidenced by law suits, grand jury investigations, and special investigations such as the District 7 Child Safety Strike Force."[15]

The Justification Review of the Child Protection Program in the Department of Children and Families, February, 2001 by the Office of Program Policy Analysis and Government Accountability (OPPAGA),[16] reported the following problems with Florida's foster care system:

- The number of children admitted to foster care increased by 28.8 percent between June 1996 and June 2000.
- The department increased its foster home capacity by only 5 percent between FY 1997-98 and 1998-99 even after receiving 70 new FTEs from the 1999 Legislature solely for the purpose of recruiting new foster families.
- The number of children needing care outpaced the number of foster homes leaving many foster homes overcrowded.

Lawsuits also alleged numerous problems associated with the foster care system, including failure on the part of the state to develop an array of foster care settings to ensure a safe and secure placement for each foster child, particularly in respect to foster homes for teenagers.[17]

Florida responded to the lack of foster homes by enacting legislation in 2001 and 2002 to increase the utilization of residential group home placements until additional foster homes could be recruited.[18] In addition to requiring that any dependent child 11 years of age or older who has been in licensed family foster care for 6 months or longer, who is then moved more than once and who is a child with extraordinary needs must be assessed for placement in licensed

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[13] See s. 409.1451, F.S.
[14] Florida Department of Children and Families, DCF Quick Facts, *available at:* http://www.dcf.state.fl.us/general-information/quick-facts/cw/ (last visited Nov. 23, 2015).
[15] Information contained in this portion of this bill analysis is from the analysis for CS/CS/SB 1214 by the Senate Committee on Children and Families (March 29, 2001) *available at:* http://archive.flsenate.gov/session/index.cfm?Mode=Bills&SubMenu=1&BI_Mode=ViewBillInfo&BillNum=1214&Year=2001&Chamber=Senate#Analysis.
[16] Office of Program Policy Analysis and Government Accountability, *Justification Review of the Child Protection Program in the Department of Children and Family Services*. Report Number 01-14 (February, 2001) *available at*: http://www.oppaga.state.fl.us/MonitorDocs/Reports/pdf/0114rpt.pdf.
[17] See, for example, *31 Foster Children v. Bush*, 329 F.3d 1255 (11th Cir. 2003) and *Ward. v. Feaver, et al*, 2000 WL34025227 U.S. District Court S.D. Florida.
[18] See ss. 39.523, 409.1676, 409.1677 and 409.1679, F.S.

residential group care, funds were also authorized to be used for one-time startup funding for residential group care purposes that include, but are not limited to, remodeling or renovation of existing facilities, construction costs, leasing costs, purchase of equipment and furniture, site development, and other necessary and reasonable costs associated with the startup of facilities or programs.[19]

At the same time, the department expressed concerns that the provisions of the proposed legislation were contrary to the literature, contrary to guidance from the federal government, and contrary to the fact that movement over the past decade was away from group home care.[20]

Residential Group Care

Residential group care as a placement option for children in the child welfare system who are in out-of-home care has many forms and functions, including serving as a child placement option and as a treatment component of the children's mental health system of care. The multiple roles of group care make an analysis of its effectiveness difficult and complex.[21]

Some people working in child welfare contend that all residential group care has the potential to be harmful and should be eliminated. Others support the position that those placements can be beneficial for some children under certain circumstances. Other professionals support the wholesale use of residential group care as an alternative to the limited supply of family placements or dependence on family placements that could expose children to additional risks. However, both favorable and unfavorable claims about the effectiveness of residential group care and other options are often made without adequate supporting evidence.[22]

There appears to be a growing consensus within the child-welfare community that residential group home settings for children in out-of-home care are sometimes necessary but should be used sparingly and only for the length of time necessary to place the child in a less restrictive environment. While some states have been more successful than others, many states have tried to decrease reliance on group home care.[23]

KVC Health Systems is a private company employed to provide child-welfare services in eastern Kansas. It has been very successful in reducing the number of children in residential group care. KVC reports that only three percent of the 3,100 children it is responsible for are in group settings, primarily for short-term psychiatric treatment, while almost all of the others are placed

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[19] Section 39.523, F.S.

[20] Testimony from committee meetings: Senate Children and Families Committee, SB 623, January 30, 2002; Senate Children and Families Committee, SB 1214, March 14, 2001; House Child and Family Security Committee, HB 1145, March 15, 2001; House Child and Family Security Committee, HB 755, February 7, 2002.

[21] Richard Barth, *Institutions vs. Foster Homes: The Empirical Base for the Second Century of Debate*. Chapel Hill, NC: University of North Carolina, School of Social Work, Jordan Institute for Families (June 17, 2002), *available at*: http://www.researchgate.net/publication/237273744_vs._Foster_Homes_The_Empirical_Base_for_a_Century_of_Action.

[22] Child Welfare League of America, *Residential Transitions Project Phase One Final Report* (April 2008), *available at*: http://rbsreform.org/materials/Residential%20Transitions%20Project%20-%204%2030%2008%20_2_.pdf.

[23] *Id*. Also see California Health and Human Services Agency. California's Child Welfare Continuum of Care Reform, January 2015, *Children's Rights, What Works in Child Welfare Reform: Reducing Reliance on Congregate Care in Tennessee*, July 2011, and The Annie E. Casey Foundation, *Rightsizing Congregate Care, A Powerful First Step in Transforming Child Welfare System*, 2010.

with foster families. That is a noticeable and dramatic change from 1997, when 30 percent of the children KVC was responsible for were in group care placements.[24]

A number of child welfare organizations are supporting an overhaul of the federal funding system for child welfare. Their goal is to shift funding from residential group home settings to alternative placements such as family-based care. The Annie E. Casey Foundation and one of its partners, the Jim Casey Youth Opportunities Initiative, supports the proposal that federal reimbursement should be eliminated for shelters and group care for children under 13 years of age but should be allowed for older children's group care but only for short periods of time when psychiatric treatment or other specialized care is needed.[25]

U.S. Sen. Orrin Hatch, chair of the U.S. Senate Finance Committee, recently held two hearings related to reducing reliance on residential group care placements. The written statement submitted for the May 19, 2015 hearing by Dr. Jeremy Kohomban, President and CEO of The Children's Village in New York,[26] stated:

> In fact, the time has come for private providers to make a change in how we do business, and more providers than you might think are rising to this challenge. Just as public agencies must change, so must private agencies. Our business models must move away from mostly residential care and toward community-and family-based care that is targeted, effective and short-term—including, of course, short-term effective residential care as needed for emergency interventions. You may hear complaints from private providers in your district. They may say this kind of change is hard. Or that the needs of children and families cannot be met using these new models of care. But the evidence is not on their side . . . .

Nationally, according to the Adoption and Foster Care Analysis and Reporting System (AFCARS) data, in 2014, 46 percent of all children in foster care lived in the foster family homes of non-relatives. Twenty-nine percent lived in family foster homes with relatives, or kinship care. Six percent lived in group homes, eight percent lived in institutions, four percent lived in pre-adoptive families, and the remainder lived in other types of facilities.[27] These statistics do not differ substantially from the distributions at the beginning of the decade, although there has been a small decrease of foster children living in group homes and institutions, and a corresponding increase of foster children in home care.[28] In Florida during the 2013-14 fiscal year, 11 percent of children in foster care were in residential group care and 83

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[24] David Crary, *Foster care: U.S. Moves to Phase Out Group Care for Foster Kids*, Christian Science Monitor (May 17, 2014), *available at*: http://www.csmonitor.com/The-Culture/Family/2014/0517/Foster-care-US-moves-to-phase-out-group-care-for-foster-kids.

[25] *Id*.

[26] *No Place to Grow Up: How to Safely Reduce Reliance on Foster Care Group Homes*, Before the S. Comm. on Finance, 114th Cong. (2015) (statement of Jeremy Kohomban, PhD., President and CEO of The Children's Village and President of Harlem Dowling Westside Center).

[27] U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. The AFCARS Report (Sept. 18, 2015), *available at*: http://www.acf.hhs.gov/programs/cb/resource/afcars-report-22.

[28] Child Trends Data Bank, Foster Care (Dec. 2014), *available at*: http://www.childtrends.org/?indicators=foster-care.

percent of the children in group care were 11 years of age and older, compared to 17 percent of children in family care settings.[29]

Residential group homes are one of the most expensive placement options for children in the child welfare system. The costs associated with institutional care far exceed the costs for foster care or treatment foster care. The difference in monthly costs are often six to 10 times higher than foster care and between two and three times higher than for treatment foster care. Because there is essentially no evidence that these additional costs yield better outcomes for foster children, according to at least one researcher, there is no justification for the cost benefit for group care, when other placement options are available.[30]

In Florida, unlike rates for foster parents and relative caregivers, which are set in statute and in rule, community-based care lead agencies annually negotiate rates for residential group home placements with providers. According to a 2014 OPPAGA study, in the 2013-2014 fiscal year, the per diem rate for the shift-care group home model averaged $124, and costs ranged from $52 to $283. The per diem rate for a family group home model averaged $97, and costs ranged from $17 to $175. Family foster home care pays an average daily rate of $15.[31] The cost of group home care in Florida for the 2013-14 fiscal year was $81.7 million.[32]

III. Effect of Proposed Changes:

Section 1 amends s. 39.01, F.S., relating to definitions, to create a definition of the term "conditions for return" which applies when consideration is being given to the department returning a child.

Section 2 amends s. 39.013, F.S., relating to procedures, jurisdiction, and right to counsel, to continue court jurisdiction until the age of 22 for young adults having a disability who choose to remain in extended foster care. This is consistent with the provisions of s. 39.6251, F.S.

Section 3 amends s. 39.402, F.S., relating to placement in a shelter, to require that the court order for placement of a child in shelter contain a written finding that the placement proposed by the department is in the least restrictive and most family-like setting that meets the needs of the child, unless that type of placement is unavailable.

Section 4 amends s. 39.521, F.S., relating to disposition hearings, to require that the court order for disposition contain a written finding that the placement of the child is in the least restrictive and most family-like setting that meets the needs of the child, as determined by the required assessments.

Section 5 amends s. 39.522, F.S., relating to postdisposition change of custody, to change the standard for the court to return a child to the home from "substantially complied with the terms

[29] Office of Program Policy and Government Accountability, Research Memorandum, *Florida's Residential Group Care Program for Children in the Child Welfare System* (Dec. 22, 2014) (on file with the Senate Committee on Judiciary).
[30] *Supra* at 21.
[31] *Supra* at 29.
[32] *Id*.

of the case plan" to whether the "circumstances that caused the out-of-home placement have been remedied" with an in-home safety plan in place.

Section 6 amends s. 39.6011, F.S., relating to the development of case plans, to rearrange and restructure the section. The section now states the purpose of a case plan and requires documentation that a preplacement assessment of the service needs of the child and family, and preplacement preventive services, if appropriate, have been provided and that reasonable efforts to prevent out-of-home placement have been made. Procedures for involving the child in the case planning process are revised and put in a separate subsection.

Section 7 amends s. 39.6012, F.S., relating to case plan requirements for services and tasks for parents and safety, permanency and well-being for children, to rearrange and restructure the section. The bill requires documentation in the case plan that the required placement assessments have been completed; that the child has been placed in the least restrictive, most family-like setting or if not, the reason for the alternative placement; and that if the child has been placed in a residential group care setting, regular reviews and updates to the case plan must be completed.

The bill also requires that provisions in the case plan relating to visitation and contact of the child with his or her parents and/or siblings also apply to extended family members and fictive kin. The term "fictive kin" is defined as individuals that are unrelated to the child by either birth or marriage, but have an emotionally significant relationship with the child that would take on the characteristics of a family relationship.

Section 8 amends s. 39.6035, F.S., relating to the transition plan, to clarify that the transition plan must be approved by the court before the child's 18th birthday.

Section 9 amends s. 39.621, F.S., relating to permanency determinations by the court, to add provisions relating to maintaining and strengthening the placement. These provisions are current law in s. 39.6011, F.S., and they are being relocated to s. 39.621, F.S.

Section 10 amends s. 39.701, F.S., relating to judicial review, to add a requirement to the social study report for judicial review to include documentation that the placement of the child is in the least restrictive, most family-like setting that meets the needs of the child as determined through assessment. The section also requires the court to order the department and the community-based care lead agency to file a written notification before a child changes placements if possible. If the notification before changing placements is not possible, the notification shall be filed immediately following a change. This flexibility would accommodate those cases when a child must be moved on short notice or after work hours.

Section 11 creates s. 409.142, F.S., relating to intervention services for unsafe children, to provide legislative findings that intervention services and supports are designed to strengthen and support families in order to keep them safely together and to prevent children from entering foster care. The bill also states legislative intent for the department to identify evidence-based intervention programs that remedy child abuse and neglect, reduce the likelihood of foster care placement by supporting parents and relative or nonrelative caregivers, increase family reunification with parents or other relatives, and promote placement stability for children living with relatives or nonrelative caregivers. The section defines the term "intervention services and

supports," provides the types of intervention services that must be available for eligible individuals, provides eligibility for intervention services, and requires each community-based care lead agency to submit a monitoring plan to the department by October 1, 2016. Each community-based care lead agency must also submit an annual report to the department detailing specified collected data as part of the Results Oriented Accountability Program under s. 409.997, F.S. The department is also given rulemaking authority to adopt rules to administer this section.

Section 12 creates s. 409.143, F.S., relating to assessment and determination of appropriate placements for children in care, and provides state legislative findings and intent relating to the assessment of children in order to determine the most appropriate placement for each child in out-of-home care. The bill defines the terms "child functioning level," "comprehensive behavioral health assessment," and "level of care." The bill requires an initial placement assessment whenever a child has been determined to need an out-of-home placement and requires the department to document these initial assessments in the Florida Safe Families Network (FSFN) and update the case plan.

The bill requires procedures in s. 39.407, F.S., to be followed whenever a child is being placed in a residential treatment facility and prohibits placement decisions from being made by an individual or entity that has a conflict of interest with an agency being considered for placement.

The bill also requires a follow-up comprehensive behavioral health assessment to be completed for each child placed in out-of-home care; requires certain information to be included in the assessment; requires that the assessment be completed within 30 calendar days after the child enters out-of-home care; and requires the department to use the results of the comprehensive assessment to determine the child's functioning level and the level of care needed by the child.

The bill requires the establishment of permanency teams by the department or the community-based care lead agencies to regularly convene a multi-disciplinary staffing every 180 days to review the appropriateness of the child's placement and provides what is to be included in the review. An annual report must be submitted to the Governor, the President of the Senate, and the Speaker of the House of Representatives by October 1 of each year that includes specified data on child placements and services.

Section 13 creates s. 409.144, F.S., relating to continuum of care. The section provides legislative findings and intent pertaining to the safety, permanency, and well-being of children in out-of-home care. The section defines the terms "continuum of care," "family foster care," "level of care," "out-of-home care," and "residential group care."

The bill requires the department, in collaboration with the Florida Institute for Child Welfare, the Quality Parenting Initiative, and the Florida Coalition for Children to develop a continuum of care for the placement of children in out-of-home care that includes both family foster care and residential group care by December 31, 2017. To implement the continuum the department must:

- Establish levels of care that are clearly defined with the qualifying criteria for placement at each level identified;
- Revise licensure standards and rules to reflect the services and supports provided by a placement at each level of care and include the quality standards that must be met by licensed providers;

- Develop policies and procedures to ensure that placements are appropriate for each child as determined by the required assessments and staffings and last only long enough to resolve the issue that required the placement;
- Develop a plan to recruit, train, and retain specialized foster homes for pregnant and parenting teens that are designed to provide an out-of-home placement option that will enable them to live in the same foster family home while caring for the child and working towards independent care of the child; and
- Work with the Department of Juvenile Justice to develop specialized placements for children who are involved with both the dependency and the juvenile justice systems.

The bill requires an annual report by the department to the Governor, the President of the Senate, and the Speaker of the House of Representatives and specifies what the report must contain.

Section 14 amends s. 409.1451, F.S., relating to the Road-to-Independence Program, to create a process for making federal education and training vouchers available to a child or young adult in out-of-home care if he or she meets certain eligibility requirements. The section provides that the department may adopt rules to implement the program which must include an appeals process.

Section 15 amends s. 409.988, F.S., relating to the duties of community-based care lead agencies. The section requires lead agencies to ensure the availability of a full array of services necessary to meet the needs of all individuals within their local system of care. The section also requires the department to report annually to the Governor, the President of the Senate, and the Speaker of the House of Representatives on the adequacy of the available service array by lead agency.

Section 16 amends s. 39.202, F.S., relating to the confidentiality of records and reports in cases of child abuse or neglect, to revise the designation of an agency.

Section 17 amends s. 39.302, F.S., relating to protective investigations of institutional child abuse, abandonment, or neglect, to correct a cross reference.

Section 18 amends s. 39.524, F.S., relating to safe-harbor placement, to correct a cross reference.

Section 19 amends s. 39.6013, F.S., relating to case plan amendments, to correct a cross reference.

Section 20 amends s. 394.495, F.S., relating to child adolescent mental health system of care, to correct a cross reference.

Section 21 amends s. 409.1678, F.S., relating to specialized residential options for children who are victims of sexual exploitation, to correct a cross reference.

Section 22 amends s. 960.065, F.S., relating to eligibility for awards, to correct a cross reference.

Section 23 amends s. 1002.3305, F.S., relating to the College-Preparatory Boarding Academy Pilot Program for at-risk students, to correct a cross reference.

Section 24 repeals s. 39.523, F.S., relating to placement in residential group care.

Section 25 repeals s. 409.141, F.S., relating to equitable reimbursement methodology for residential group home care.

Section 26 repeals s. 409.1676, F.S., relating to comprehensive residential group care services to children who have extraordinary needs.

Section 27 repeals s. 409.1677, F.S., relating to model comprehensive residential services programs.

Section 28 repeals, s. 409.1679, F.S., relating to additional requirements and reimbursement methodology for residential group care.

Section 29 provides an effective date of July 1, 2016.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

Most community based care lead agencies make the determination to place a child in foster care. In some areas of the state however, private, non-profit agencies under contract with the community based care lead agency determine placements of foster children. The bill prohibits an agency under contract with the community based care lead agency from providing placement services and operating group homes. The bill does this to ensure there is no conflict of interest for the placement agency in recommending placements in group homes operated by that same agency. Under the requirements of this bill some providers may have to choose between providing placement services and operating group homes.

C. Government Sector Impact:

To the extent the bill reduces the number of children in group home care and increases the number of children in foster homes, the bill would have a positive fiscal impact on the state. The average cost of group care with shift care workers is $124 per day per child, the average cost of group care with house parents is $97 per day per child, and the average cost of foster homes is $15 per day per child.[33] The amount of such an impact is indeterminate.

The bill revises current practices in assessment and placement of children in foster care. To the extent that these new procedures are more costly than current practices, the bill would have a negative fiscal impact on the state. The amount of such an impact is indeterminate.

The bill revises current court procedures in the case planning and placement of children in foster care. To the extent that these new procedures are more costly than current practices, the bill would have a negative fiscal impact on the state. The amount of such an impact is indeterminate.

Finally, the bill authorizes education and training vouchers for certain children in foster care under certain circumstances. The fiscal impact of this change is indeterminate.

The Office of the State Courts Administrator states that the bill will increase judicial workloads, but it cannot accurately determine the fiscal impact because the data needed to quantify the increase in judicial time and workload is not available.[34] However, the increased costs result from requirements for courts to consider additional evidence at shelter hearings and additional information from the Department of Children and Families at disposition hearings and requirements for courts to make additional findings.

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Statutes Affected:

This bill substantially amends the following sections of the Florida Statutes: 39.01, 39.013, 39.202, 39.302, 39.402, 39.521, 39.522, 39.524, 39.6011, 39.6012, 39.6013, 39.6035, 39.621, 39.701, 394.495, 409.1451, 409.1678, 409.988, 960.065, and 1002.3305.

This bill creates the following sections of the Florida Statutes: 409.142, 409.143, and 409.144

[33] *Supra* at 29.
[34] Office of the State Courts Administrator, *2016 Judicial Impact Statement for SB 7018* (Dec. 1, 2015) (on file with the Senate Committee on Judiciary).

This bill repeals the following sections of the Florida Statutes: 39.523, 409.141, 409.1676, 409.1677, and 409.1679.

IX. Additional Information:

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

None.

B. Amendments:

None.