

By Senator Grimsley

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1 A bill to be entitled
2 An act relating to child welfare; amending s. 39.521,
3 F.S.; requiring a parent whose actions have caused
4 harm to a child who is adjudicated to be dependent to
5 submit to a substance abuse disorder assessment or
6 evaluation and to participate in and comply with
7 treatment and services; creating s. 39.6001, F.S.;
8 requiring the Department of Children and Families, in
9 partnership with the Department of Health, the Agency
10 for Health Care Administration, other state agencies,
11 and community partners, to develop a strategy for
12 certain coordinated services; providing for creation
13 of a safe care plan that addresses the health and
14 substance abuse disorder treatment needs of a newborn
15 and affected family or caregiver and provides for the
16 monitoring of services provided; amending s. 39.6012,
17 F.S.; requiring a parent whose actions have caused
18 harm to a child adjudicated to be dependent to submit
19 to a substance abuse disorder assessment or evaluation
20 and to participate in and comply with treatment and
21 services; creating s. 381.00515, F.S.; requiring the
22 Department of Health to establish a hormonal long-
23 acting reversible contraception (HLARC) program;
24 requiring the department to contract with family
25 planning and health care providers to implement the
26 program and provide HLARC services throughout the
27 state; requiring that such contracts include specified
28 provisions; providing for an annual appropriation;
29 requiring the department to seek grants for additional

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30 funding; requiring the department to submit an annual
31 report to the Governor and the Legislature by a
32 specified date; requiring the department to publish
33 the report on its website; specifying requirements for
34 the report; creating s. 409.16741, F.S.; providing
35 legislative findings and intent; requiring the
36 Department of Children and Families to develop or
37 adopt one or more initial screening assessment
38 instruments to identify and determine the needs of,
39 and plan services for, substance exposed newborns and
40 their families; requiring the department to conduct
41 certain staffings relating to services for substance
42 exposed newborns and their families; specifying that
43 certain local service capacity be assessed; providing
44 that child protective investigators receive
45 specialized training in working with substance exposed
46 newborns and their families before they accept such
47 cases; creating s. 409.16742, F.S.; providing
48 legislative findings and intent; establishing a shared
49 family care residential services pilot program for
50 substance exposed newborns; providing an appropriation
51 subject to certain requirements; providing a statement
52 of public necessity; providing an effective date.

53
54 Be It Enacted by the Legislature of the State of Florida:

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56 Section 1. Paragraph (b) of subsection (1) of section
57 39.521, Florida Statutes, is amended to read:

58 39.521 Disposition hearings; powers of disposition.—

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59 (1) A disposition hearing shall be conducted by the court,
60 if the court finds that the facts alleged in the petition for
61 dependency were proven in the adjudicatory hearing, or if the
62 parents or legal custodians have consented to the finding of
63 dependency or admitted the allegations in the petition, have
64 failed to appear for the arraignment hearing after proper
65 notice, or have not been located despite a diligent search
66 having been conducted.

67 (b) When any child is adjudicated by a court to be
68 dependent, the court having jurisdiction of the child has the
69 power by order to:

70 1. Require the parent and, when appropriate, the legal
71 custodian and the child to participate in treatment and services
72 identified as necessary. The court may require the person who
73 has custody or who is requesting custody of the child to submit
74 to a mental health or substance abuse disorder assessment or
75 evaluation. The order may be made only upon good cause shown and
76 pursuant to notice and procedural requirements provided under
77 the Florida Rules of Juvenile Procedure. The mental health
78 assessment or evaluation must be administered by a qualified
79 professional as defined in s. 39.01, and the substance abuse
80 assessment or evaluation must be administered by a qualified
81 professional as defined in s. 397.311. The court may also
82 require such person to participate in and comply with treatment
83 and services identified as necessary, including, when
84 appropriate and available, participation in and compliance with
85 a mental health court program established under chapter 394 or a
86 treatment-based drug court program established under s. 397.334.
87 Adjudication of a child as dependent based upon evidence of harm

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88 as defined in s. 39.01(30)(g) demonstrates good cause, and the
89 court shall require the parent whose actions caused the harm to
90 submit to a substance abuse disorder assessment or evaluation
91 and to participate in and comply with treatment and services
92 identified as necessary. In addition to supervision by the
93 department, the court, including the mental health court program
94 or the treatment-based drug court program, may oversee the
95 progress and compliance with treatment by a person who has
96 custody or is requesting custody of the child. The court may
97 impose appropriate available sanctions for noncompliance upon a
98 person who has custody or is requesting custody of the child or
99 make a finding of noncompliance for consideration in determining
100 whether an alternative placement of the child is in the child's
101 best interests. Any order entered under this subparagraph may be
102 made only upon good cause shown. This subparagraph does not
103 authorize placement of a child with a person seeking custody of
104 the child, other than the child's parent or legal custodian, who
105 requires mental health or substance abuse disorder treatment.

106 2. Require, if the court deems necessary, the parties to
107 participate in dependency mediation.

108 3. Require placement of the child either under the
109 protective supervision of an authorized agent of the department
110 in the home of one or both of the child's parents or in the home
111 of a relative of the child or another adult approved by the
112 court, or in the custody of the department. Protective
113 supervision continues until the court terminates it or until the
114 child reaches the age of 18, whichever date is first. Protective
115 supervision shall be terminated by the court whenever the court
116 determines that permanency has been achieved for the child,

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117 whether with a parent, another relative, or a legal custodian,
118 and that protective supervision is no longer needed. The
119 termination of supervision may be with or without retaining
120 jurisdiction, at the court's discretion, and shall in either
121 case be considered a permanency option for the child. The order
122 terminating supervision by the department must set forth the
123 powers of the custodian of the child and include the powers
124 ordinarily granted to a guardian of the person of a minor unless
125 otherwise specified. Upon the court's termination of supervision
126 by the department, further judicial reviews are not required if
127 permanency has been established for the child.

128 Section 2. Section 39.6001, Florida Statutes, is created to
129 read:

130 39.6001 Safe care plans for substance exposed newborns.—The
131 department, in partnership with the Department of Health, the
132 Agency for Health Care Administration, other state agencies, and
133 community partners, shall develop a strategy for coordinated
134 services to ensure the safety and well-being of newborns with
135 prenatal substance exposure by creating, implementing, and
136 monitoring safe care plans. A safe care plan is a written plan
137 for a newborn with prenatal substance abuse exposure following
138 the newborn's release from the care of a health care provider.
139 The plan must address the health and substance abuse disorder
140 treatment needs of the newborn through infancy and the affected
141 family or caregiver. The department shall monitor such plans to
142 ensure appropriate referrals are made and services are delivered
143 to the newborn and the affected family or caregiver.

144 Section 3. Subsection (1) of section 39.6012, Florida
145 Statutes, is amended to read:

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146 39.6012 Case plan tasks; services.—

147 (1) The services to be provided to the parent and the tasks
148 that must be completed are subject to the following:

149 (a) The services described in the case plan must be
150 designed to improve the conditions in the home and aid in
151 maintaining the child in the home, facilitate the child's safe
152 return to the home, ensure proper care of the child, or
153 facilitate the child's permanent placement. The services offered
154 must be the least intrusive possible into the life of the parent
155 and child, must focus on clearly defined objectives, and must
156 provide the most efficient path to quick reunification or
157 permanent placement given the circumstances of the case and the
158 child's need for safe and proper care.

159 (b) The case plan must describe each of the tasks with
160 which the parent must comply and the services to be provided to
161 the parent, specifically addressing the identified problem,
162 including:

163 1. The type of services or treatment.

164 2. The date the department will provide each service or
165 referral for the service if the service is being provided by the
166 department or its agent.

167 3. The date by which the parent must complete each task.

168 4. The frequency of services or treatment provided. The
169 frequency of the delivery of services or treatment provided
170 shall be determined by the professionals providing the services
171 or treatment on a case-by-case basis and adjusted according to
172 their best professional judgment.

173 5. The location of the delivery of the services.

174 6. The staff of the department or service provider

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175 accountable for the services or treatment.

176 7. A description of the measurable objectives, including
177 the timeframes specified for achieving the objectives of the
178 case plan and addressing the identified problem.

179 (c) If there is evidence of harm as defined in s.
180 39.01(30)(g), the case plan must require the parent whose
181 actions caused the harm to submit to a substance abuse disorder
182 assessment or evaluation and to participate in and comply with
183 treatment and services identified as necessary.

184 Section 4. Section 381.00515, Florida Statutes, is created
185 to read:

186 381.00515 Hormonal long-acting reversible contraception
187 (HLARC) program.—

188 (1) The Department of Health shall establish a hormonal
189 long-acting reversible contraception (HLARC) program for the
190 purpose of preventing unwanted pregnancies and improving
191 statewide access to family planning services. The department
192 shall contract with eligible family planning and health care
193 providers to implement the program throughout the state. A
194 contract to provide HLARC services must include all of the
195 following:

196 (a) Provision of intrauterine devices and implants to
197 participants.

198 (b) Training for providers and staff regarding the
199 provision of HLARC devices, counseling strategies, and the
200 management of side effects.

201 (c) Technical assistance regarding such issues as coding,
202 billing, pharmacy rules, and clinic management necessitated by
203 the increased use of HLARC devices.

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204 (d) General support to expand the capacity of family
205 planning clinics in response to the demand for HLARC program
206 services added.

207 (e) Marketing and outreach regarding the availability of
208 HLARC services in comparison to other currently available
209 contraceptive services.

210 (f) Other services the department considers necessary to
211 ensure the health and safety of participants who receive HLARC
212 devices.

213 (2) (a) The Legislature shall annually appropriate funds
214 from the General Revenue Fund to the department to provide HLARC
215 services.

216 (b) Funds appropriated pursuant to this subsection may not
217 supplant or reduce any other appropriation of state funds to
218 family planning providers or to the department for family
219 planning services.

220 (3) The department shall seek grants from federal agencies
221 and other sources to supplement state funds provided for the
222 HLARC program.

223 (4) By January 1, 2019, and annually thereafter, the
224 department shall submit a report to the Governor, the President
225 of the Senate, and the Speaker of the House of Representatives
226 on the effectiveness of the HLARC program. The department shall
227 publish the report on its website. The report must include, but
228 need not be limited to:

229 (a) An assessment of the operation of the program,
230 including any progress made in reducing the number of abortions,
231 especially among teenagers.

232 (b) An assessment of the effectiveness of the program in

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233 increasing the availability of HLARC services.

234 (c) The number and location of family planning providers
235 that participated in the program.

236 (d) The number of clients served by participating family
237 planning providers.

238 (e) The number of times HLARC services were provided by
239 participating family planning providers.

240 (f) The average cost per client served.

241 (g) The demographic characteristics of clients served.

242 (h) The sources and amounts of funding used for the
243 program.

244 (i) A description of federal and other grants the
245 department applied for in order to provide HLARC services,
246 including the outcomes of the grant applications.

247 (j) An analysis of the return on investment for the
248 provision of HLARC services with regard to tax dollars saved on
249 health and social services.

250 (k) A description and analysis of marketing and outreach
251 activities conducted to promote the availability of HLARC
252 services.

253 (l) Recommendations for improving the program.

254 Section 5. Section 409.16741, Florida Statutes, is created
255 to read:

256 409.16741 Substance exposed newborns; legislative findings
257 and intent; screening and assessment; case management;
258 training.-

259 (1) LEGISLATIVE FINDINGS AND INTENT.-

260 (a) The Legislature finds that children, their families,
261 and child welfare agencies have been affected by multiple

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262 substance abuse epidemics over the past several decades, and
263 parental substance abuse is again becoming a growing reason for
264 removing children from their homes and placing them in foster
265 care.

266 (b) The Legislature also finds that infants are the largest
267 age group of children entering foster care and that parental
268 substance abuse disorders are having a major impact not only on
269 increasing child removals, but also on preventing or delaying
270 reunification of families and increasing termination of parental
271 rights.

272 (c) The Legislature further finds that two aspects of
273 parental substance abuse affect the child welfare system:
274 prenatal exposure when it is determined that there are immediate
275 safety factors that necessitate the newborn being placed in
276 protective custody; and postnatal use that affects the ability
277 of the parent to safely care for the child.

278 (d) Therefore, it is the intent of the Legislature that the
279 department will establish and monitor a coordinated approach to
280 working with children and their families affected by substance
281 abuse and dependence.

282 (2) SCREENING AND ASSESSMENT.—The department shall develop
283 or adopt one or more initial screening and assessment
284 instruments to identify, determine the needs of, and plan
285 services for substance exposed newborns and their families. In
286 addition to conditions of the infant, conditions or behaviors of
287 the mother or father which may indicate a risk of harm to the
288 child shall be considered during any assessment.

289 (3) CASE MANAGEMENT.—

290 (a) The department shall conduct regular multidisciplinary

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291 staffings relating to services provided for substance exposed
292 newborns and their families to ensure that all parties possess
293 relevant information and that services are coordinated across
294 systems identified in this chapter. The department or community-
295 based care lead agency, as appropriate, shall coordinate these
296 staffings and include individuals involved in the child's care.

297 (b) Each region of the department and each community-based
298 care lead agency shall jointly assess local service capacity to
299 meet the specialized service needs of substance exposed newborns
300 and their families and establish a plan to develop the necessary
301 capacity. Each plan shall be developed in consultation with
302 entities and agencies involved in the individuals' care.

303 (4) TRAINING.—The department and community-based care lead
304 agencies shall ensure that cases in which there is a substance
305 exposed newborn are assigned to child protective investigators
306 and case managers who have specialized training in working with
307 substance exposed newborns and their families. The department
308 and lead agencies shall ensure that child protective
309 investigators and case managers receive this training before
310 accepting a case.

311 Section 6. Section 409.16742, Florida Statutes, is created
312 to read:

313 409.16742 Shared family care residential services program
314 for substance exposed newborns.—

315 (1) LEGISLATIVE FINDINGS AND INTENT.—The Legislature finds
316 that there is evidence that, with appropriate support and
317 training, some families can remain safely together without court
318 involvement or traumatic separations. Therefore, it is the
319 intent of the Legislature that alternative types of placement

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320 options be available which provide both safety for substance
321 exposed newborns and an opportunity for parents recovering from
322 substance abuse disorders to achieve independence while living
323 together in a protective, nurturing family environment.

324 (2) ESTABLISHMENT OF PILOT PROGRAM.—The department shall
325 establish a shared family care residential services program to
326 serve substance exposed newborns and their families in the
327 Fourth Judicial Circuit through a contract with the designated
328 lead agency established in accordance with s. 409.987 or with a
329 private entity capable of providing residential care that
330 satisfies the requirements of this section. The private entity
331 or lead agency is responsible for all programmatic functions
332 necessary to carry out the intent of this section. As used in
333 this section, the term "shared family care" means out-of-home
334 care in which an entire family in need is temporarily placed in
335 the home of a family who is trained to mentor and support the
336 biological parents as they develop caring skills and supports
337 necessary for independent living.

338 (3) SERVICES.—The department shall specify services that
339 should be made available to newborns and their families through
340 the pilot program.

341 Section 7. For the 2017-2018 fiscal year, the sum of
342 \$750,000 in recurring funds is appropriated from the General
343 Revenue Fund to the Department of Health for the purpose of
344 implementing the HLARC program. These funds do not supplant or
345 reduce any other appropriation of state funds to family planning
346 providers or to the department for family planning services.

347 Section 8. The Legislature finds that this act is necessary
348 to protect the public health, safety, and welfare.

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Section 9. This act shall take effect July 1, 2017.