# Office of Adoption and Child Protection



Executive Office of the Governor

**2015 Annual Report** 

#### STATE OF FLORIDA



## Office of the Governor

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December 31, 2015

To the People, Governor, Members of the Legislature, and Executive Department Heads of the State of Florida:

We are pleased to present to you this annual report of the Office of Adoption and Child Protection (Office) within the Executive Office of the Governor. The purpose of the Office is to establish a comprehensive statewide approach for the promotion of adoption, support for adoptive families and prevention of child abuse, abandonment and neglect. In addition, the Office provides administrative support to the Florida Faith-Based and Community-Based Advisory Council and logistical support to members of the Florida Children and Youth Cabinet.

As directed by Florida Statutes, Section 39.001, this annual report provides an update of the activities of the Office, an update on the *Florida Child Abuse Prevention and Permanency Plan: July 2010 – 2015*, a summary of data pertaining to foster care adoption and child abuse and neglect, and recommendations by state agencies.

The Office, with limited resources and staffing, has employed creative strategies to complete tasks and worked to facilitate a coordinated statewide approach to providing comprehensive and holistic services to children and families. The information below provides a snapshot of information contained within this report:

- Identifies the Office's 1) participation and support of the Children Services Council of Broward County to be one of nine communities in the country selected to implement a Performance Partnership Pilot (P3) and 2) involvement in being selected as one of five entities to receive a technical assistance grant to refine, improve, and strengthen existing multi-system/agency collaboration.
- Performance towards state level targets identified in the *Child Abuse Prevention and Permanency Plan:* 2010 2015 have resulted in:
  - O The Child Maltreatment Rate has been reduced from a high of 13.23 per 1,000 children in SFY 2011-12 to 10.84 per 1,000 children in SFY 2014-15.
  - O The state continues to exceed the baseline percentage of children adopted within 12 months of becoming legally free for adoption. SFY 2014-2015 performance is 5.5% higher than the baseline percentage of 66.4% in SFY 2008-09.

While we have made some progress, there is still much more to be done. We are very grateful for the leadership of Governor Rick Scott, First Lady Ann Scott, and of Lieutenant Governor Carlos Lopez-Cantera for their vision and dedication to ensuring Florida is on the right track where children and families can thrive.

We hope that you will review this annual report and that the information will help you make decisions that will safeguard and improve outcomes for children and families across the state.

Sincerely,

Zackary Gibson'

Florida's Chief Child Advocate

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Director, Office of Adoption and Child Protection

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#### **Part 1 – SUMMARY OF ACTIVITIES**

#### Office of Adoption and Child Protection

On June 12, 2007, the bill creating the Office of Adoption and Child Protection (Office), within the Executive Office of the Governor, was signed into law. The duties and responsibilities of the Office are enshrined in Section 39.001, Florida Statutes (§39.001, F.S.). The Office was created for the purpose of establishing, implementing, and monitoring a cross-agency comprehensive statewide approach for the promotion of adoption, support of adoptive families and prevention of child abuse, abandonment and neglect. In addition, the Office provided administrative support to the Florida Faith-Based and Community-Based Advisory Council as outlined in Section 14.31, Florida Statutes (§14.31, F.S.). The Office provided administrative support to the Florida Children and Youth Cabinet through May 2015 and continues to provide logistical support to members of the Cabinet as outlined in Section 402.56, Florida Statutes (§402.56, F.S.).

The Office has worked diligently through a servant leadership approach to fulfill statutory responsibilities and advance efforts of state agencies, offices and entities. Since the middle of April 2015, the Office has a dedicated staff of one full-time employee: Zackary Gibson (Chief Child Advocate and Director) and one part-time employee: Frenchie Yon (Program Support). To assist with the many tasks of the Office, one student intern provided support throughout the spring semester of 2015. Together, this team has the passion and desire to work collaboratively with government and state agency leaders and staff, as well as faith and community organizations, to advance efforts that increase awareness and improve programs and services to achieve desired outcomes for children, youth, and families.

#### **Chief Child Advocate and Director**

On matters that relate to the prevention of child abuse, abandonment and neglect, the promotion of adoption, and the support of adoptive families as defined in §39.001(8)(b), F.S., the duties and responsibilities of the Chief Child Advocate and Director include acting as the Governor's liaison with state agencies, other state governments, and the public and private sectors; working to secure funding and other support, developing strategic programs and funding initiatives, assisting in rule development, and developing public awareness campaigns.



The Chief Child Advocate and Director serves on the following coordinating councils/committees:

- Child Abuse Prevention and Permanency Advisory Council
- Crossover Youth Workgroup
- Department of Education Faith-Based and Community Outreach Advisory Council
- Early Steps Continuous Improvement Stakeholder Group
- Florida AWARE State Management Team
- Florida Children and Youth Cabinet
- Help Me Grow Steering Committee
- Interstate Compact on Educational Opportunity for Military Children
- Office of Early Learning Child Care and Development Fund Plan Subcommittee
- Project LAUNCH State Council
- Public Health Recovery Workgroup
- Statewide Child Abuse Death Review Team
- Statewide Trauma Informed Care Workgroup

Throughout 2015, the Chief Child Advocate has worked to promote and support interagency collaboration and coordination, and the Governor's priorities towards improving education, economic development, job creation and maintaining affordable cost of living in Florida. These efforts included:

- Participating on scheduled conference calls with other state Child Advocates and Ombudsmen to share and seek information on topics, strategies, and approaches that Florida could consider to improve services and outcomes for children, youth, and families.
- Reviewing federal and foundation grant opportunities to support activities of the Office.
   Forwarded opportunities to state agency contacts and stakeholders for consideration to enhance their funding capacities. Proposed the creation of a direct support organization to fund and advance Office functions and activities.
- Collaborating with stakeholders at all levels for the development and implementation of public awareness campaigns. These campaigns focus on promoting foster care adoption, supporting adoptive families, and preventing incidents of child abuse



and neglect. Special emphasis is placed on the importance of healthy child development, the role everyone can play to support this, and where people, particularly parents, can go to get information and resources that can strengthen their internal protective capacities.

• Engaging federal agencies to provide administrative flexibilities and opportunities to blend/braid discretionary funding streams through the Performance Partnership Pilot (P3) initiative. This initiative is designed to improve outcomes for "disconnected youth". These are low-income young people, ages 14 – 24 years old, who are homeless, in foster care, involved in the justice system, or are not working or not enrolled in (or at-risk of dropping out of) an educational institution. The Chief Child Advocate worked closely with the Children Services Council (CSC) of Broward County to provide assistance with their grant application and connecting them with appropriate state agencies to obtain necessary letters of commitment and support. In October 2015, Broward County was identified as one of nine communities in the county to be selected for the P3 initiative and is currently awaiting federal approval to begin implementation of their project.













Coordinating the development and submission of a technical assistance grant application to the
Office of Juvenile Justice and Delinquency Prevention – Center for Coordinated Assistance to
States. Florida was selected as one of five entities nationally to receive the technical assistance



grant (no funding provided) and was the only state selected. Through this project, ongoing efforts are made to refine, improve and strengthen existing multi-system/agency collaboration, and align their efforts to the work of the Florida Children and Youth Cabinet.

Increasing awareness of the purpose and role of the Florida Faith-based and Community-based Advisory Council to enlist, equip, enable, empower, and the work of faith-based, volunteer and other community organizations to work cooperatively with government entities in order to deliver services more effectively. Enlisted the



support of state and local agencies and organizations to serve as exhibitors during Council meetings in order to facilitate connection between service providers and faith and community leaders. Engaged Circuit Task Force members to present information on issues and topics to increase awareness and engagement of the community.

Serving as the Chair of the planning committee for the 2015 National Faith Symposium. Worked to engage additional state agency partners to be part of the symposium and secured sponsorships to off-set agency costs. Coordinated the Champions of Hope award program and contacted all nominees from the Departments of Agriculture and Consumer Services, Children and Families, Health, and Juvenile Justice.





With leaders at the Department of Health's Pinwheels for Prevention event in Tallahassee, FL

To increase awareness of Office functions and to promote the statutory duties and responsibilities that support state initiatives, the Chief Child Advocate attended/presented at the following events:

#### 7<sup>th</sup> Annual Human Trafficking Awareness Day, Orlando, FL



At the invitation of founder Tomas Lares, the Chief Child Advocate participated in the largest anti-human trafficking event in Central Florida. Located at the Walt Disney Amphitheater at Lake Eola in downtown Orlando, the Chief Child Advocate read the Governor's proclamation for National Human Trafficking Awareness Month and presented the proclamation to Tomas for his

leadership and efforts to raise awareness of

modern day slavery and exploitation of children. Additionally, the Chief Child Advocate met and thanked several law enforcement officers and local elected officials for their involvement and support to end trafficking in Florida.



With Tyson Elliott, DJJ, and Kim Grabert. DCF, at the HT Awareness Day event

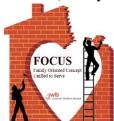
#### Faith-Based Champions for Children Annual Luncheon, St. Petersburg, FL



Participated in the annual luncheon hosted by Eckerd Community Alternatives to recognize individuals and faith-based organizations for their support and efforts to find foster and adoptive homes for all foster children in the Tampa Bay area. The initiative involves places of worship committing to help children find families and providing other

needed resources for children in foster care. Faith organizations receive a toolkit that includes a Heart Gallery portrait of a child available for adoption, the child's photo bio card to share with members of the faith organization, foster parent recruitment materials, and access to speakers. The Chief Child Advocate thanked all participants, shared information about the Florida FBCB Advisory Council, and encouraged participants to engage other faith organizations to become involved. The Chief Child Advocate also had the opportunity speak about the luncheon and Council on the Pete O'Shea radio show- WTIS AM 1110.

#### FOCUS (Family Oriented Concept Unified to Serve) Symposium – Largo, FL



The symposium was held at Pathways Community Church and brought together individuals and faith organizations to participate



in various breakout sessions on topics to include human trafficking, prison ministry, the Adopt-A-Block program, and efforts of the Florida Dream Center. The Chief Child Advocate spoke about the mission and purpose of the Florida FBCB Advisory Council, how the Council desires to support and facilitate connections to local initiatives, and opportunities to create greater awareness through presentations at the National Faith Symposium conference.

#### **Prayer Breakfasts – Multiple Locations**

To promote foster care adoption for children without an identified family and encourage members of the faith community to consider becoming foster parents and/or mentors to youth who have had involvement

with the juvenile justice system, the Chief Child Advocate attended various events to speak on the importance of healthy child development and opportunities to become involved in supporting the agencies and organizations that serve children. Events were held at the following locations to support the efforts of One Church One Child of Florida:



- St. James AME Church Palmetto, FL
- Bethel AME Church Tallahassee, FL

#### Florida Department of State - Division of Library and Information Services

Building on the relationship formed during the prior year, the Office worked to present ideas and topics to be part of monthly web-based conversations to engage and communicate with public libraries throughout the state. At the end of March 2015, the Office and Prevent Child Abuse Florida was able to present information on the Pinwheels for Prevention campaign and how library directors and stakeholders can become involved.



The Chief Child Advocate participated in the annual gathering of library directors from throughout the state to thank them for their service to their communities, and to share information on public awareness campaigns and initiatives to illicit their support and participation in future activities.

#### Florida Military Family and Community Covenant (FMFCC)

This organization continues to work to unite key areas within a community to create a comprehensive network that connects and coordinates agencies, organizations, resources and employers



at the local level to address the needs of service members, veterans and military families. In addition,

FMFCC served as the lead for coordinating the second annual "Our Community Salutes" event held for 37 counties from North Central Florida to Pensacola and over to Jacksonville. This event recognized graduating seniors from various school districts by being "the first to say thanks" for their commitment to enlist into a branch of the military. The Office assisted in the planning and implementation efforts where each young adult was recognized with their parent/guardian, received a commemorative coin signifying the event, and a personalized letter from Governor Scott congratulating them on their future careers.



#### **Office Activities**

The Office planned, staffed, and supported activities throughout 2015 to fulfill statutory requirements for Florida's Five Year Prevention and Permanency Plan, the Florida Faith-Based and Community-Based Advisory Council, and the Florida Children and Youth Cabinet. In addition, the Office participated on a various committees, workgroups and teams to advance the work of the state. Summarized below are Office efforts throughout 2015 for the Florida Faith-Based and Community-Based Advisory Council and the Florida Children and Youth Cabinet. Both groups are required in statute to submit an annual report to the Governor, Senate President, and Speaker of the House by January 31st. Additional information regarding their efforts can be found in their reports, located on the Governor's Office of Adoption and Child Protection's website at: www.flgov.com/child\_advocacy.

#### Florida Faith-Based and Community-Based Advisory Council

- Planned, staffed and supported four required Council meetings throughout the state.
- Implemented a targeted marketing strategy that increased participation at Council meetings by local faith and community leaders. Also engaged state and local service providers to serve as exhibitors during these meetings and created opportunities to facilitate connections between all participants.
- Worked with the Appointments Offices for the Governor, Senate President, and Speaker of the House to have prospective candidates appointed to the Council.
- Served as a support mechanism to the Department of Education's Faith and Community Based Advisory Council and to the Department of Juvenile Justice's Faith Network
- Supported the National Faith Symposium through participation as Chair of the planning committee and presented at the Faith Symposium.
- Supported the Council's leadership in the Champions of Hope Award.
- Worked to provide a visual framework of the referral process between Child Protective Investigators and Share Your Heart.

#### Florida Children and Youth Cabinet

- Proposed a Communications Workgroup to have Cabinet agencies and entities work together to raise awareness on topics and issues that impact their efforts.
- Provided orientation and suggested approaches to each staff member serving as the Executive Director for the Cabinet.
- Integrated the work of the Performance Partnership Pilots (P3) initiative, operated by the Children Services Council of Broward County, with the Cabinet's Collaborative Services Workgroup that seeks to identify opportunities for administrative flexibilities and blending/braiding of funding streams to improve services and outcomes.
- Assisted the Agency for Persons with Disabilities to implement the process mapping effort
  to reflect how children and families may enter and exit our state systems, and where
  intersections among agencies occur.
- Assisted the development and implementation of a public awareness campaign for the Cabinet's Bullying Prevention Workgroup.
- Continued to support multi-system efforts that result in agencies working together.
- Suggested topics and presentations for future Cabinet meetings that align to the Cabinet's workgroups and headline indicators.

### **Child Abuse Prevention Activities Child Abuse Prevention Month Planning Committee**

The Office worked with the Department of Children and Families to advocate for a statewide celebration event to recognize the importance of healthy child



development. With existing and emerging research on the negative impacts of Adverse



Childhood Experiences (ACEs) and how trauma and toxic stress can negatively impact brain development, it was decided to have a statewide event at the Glazer Children's Museum in Tampa, FL. The Chief Child Advocate read the Governor's proclamation in support of National Child Abuse Prevention Month.

#### **Child Abuse Prevention Month**

In an effort to further raise awareness and support for Child Abuse Prevention Month, the Office worked with Prevent Child Abuse Florida and the Department of Children and Families to:

- Send a letter through the Florida League of Cities to all 410 Mayors in Florida to encourage their participation in Child Abuse Prevention Month through:
  - o Developing a proclamation recognizing April as Child Abuse Prevention Month.
  - o Participating in Wear Blue Day on April 10th,
  - o Creating a public pinwheel display and/or participating in scheduled community events,
  - o Airing public service announcements to raise awareness of child abuse prevention, and
  - o Adding links to free resources and distributing family development and advocacy guides.
- Disseminate legislator cards to all members of the Florida Senate and House of Representatives with a pinwheel lapel pin to encourage their involvement and support of child abuse prevention activities and efforts.
- Coordinate the inaugural Wear Blue Day event at the Capitol that was attended by First Lady Ann Scott and other distinguished leaders who proudly displayed their support of Child Abuse Prevention Month through their blue attire.







Florida's Chief Child Advocate served as the keynote speaker at the Children's Healing Institute's Child Abuse Prevention Month Event in Boynton Beach, FL. The message focused on the importance of healthy child development and efforts taking place through the Florida Children and Youth Cabinet and Florida FBCB Advisory Council. Participants were challenged to share information from this event with their friends and colleagues so that they can consider how they can become involved in helping children grow and learn.

Participated in the following Child Abuse Prevention Month events within Florida:

- Osceola County Child Abuse Prevention Month, Kissimmee, FL
- Palm Beach County Unites Event, West Palm Beach, FL
- Partners in Blue Against Child Abuse Luncheon, Sarasota, FL
- Citrus County Family Fun Event, Crystal River, FL
- Pinwheels in the Park (Joker Marchant Stadium), Lakeland, FL
- Water Safety Press Conference, Orlando, FL
- Brevard County 19th Annual Child Abuse Prevention Awards Banquet, Melbourne, FL



Additionally, the Office coordinated and worked with Prevent Child Abuse (PCA) Florida and the Department of Children and Families to celebrate pinwheel gardens created by state agency partners to include the Agency for Health Care Administration, Departments of Agriculture and Consumer Services, Corrections, Education, Health and Management Services in support of healthy child development during National Child Abuse Prevention Month.



#### Adoption Promotion Activities Heart Galleries

Every Heart Gallery in Florida works with partnership agencies in their area to provide awareness to the general public of the needs of children available for adoption without an identified family – a population of children not generally in the spotlight, breaking down the old labels and stereotypes of children in foster care. Heart Galleries also bring in support through foster parents, respite, mentors, volunteers and adoptive families. By photographing these children in their best light, capturing their hope, their vulnerability, their pride, Heart Galleries bring the cause of adoption into the hearts of millions of caring citizens



each year. The Office has and will continue to work with Heart Galleries throughout Florida to identify opportunities to assist and support their efforts. Through the Office's partnership with Starbucks in the Tallahassee area to display Heart Gallery photos within their stores, additional opportunities have been created with store locations in Pensacola and in Gainesville hosting Heart Gallery portraits to raise awareness of children who are in need of permanent, loving families.



In the fall of 2015, the Office worked with the Florida Association of Heart Galleries to promote a Heart Gallery photo exhibit on the  $22^{nd}$  floor of the Capitol. With the encouragement and support from staff with the Heart Gallery of the Big Bend, an evening reception was held to invite state and legislative leaders to the  $22^{nd}$  floor Gallery to witness the photos and speak with advocates and practitioners on the importance of supporting adoption promotion and support for adoptive families.

Representative Mike Hill, Matthew Straeb, Bob Rooks and Representative Bobby DuBose at the FL Association of Heart Galleries Photo Exhibit Evening Reception.









#### **National Adoption Month**

Throughout November, the Governor's Office of Adoption and Child Protection, the Department of Children and Families, Community Based Care Lead Agencies, and community partners celebrated National Adoption Month throughout the state with celebrations, awareness runs, parties, finalizations, and more. The Chief Child Advocate attended and participated in several finalization events to show the support of the Governor's Office.





Governor Scott and the Florida Cabinet issued a resolution announcing November 2015 as Florida Adoption Month and National Adoption Day on Saturday, November 21, 2015. The Office worked with the Cabinet Affairs office to receive extra copies of the Cabinet resolution and shared the copies with DCF Circuit Administrators throughout the state to read and/or present to deserving individuals or organizations who have helped advance efforts to promote foster care adoptions in Florida.

On Friday, November 6, 2015, the Chief Child Advocate participated in the National Adoption Day reception hosted by the Big Bend Community Based Care by reading the Cabinet resolution and presenting it to CEO Mike Watkins.





On Friday, November 20, 2015, Florida celebrated National Adoption Month with a statewide finalization and celebration at the Miami Children's Museum in Miami, Florida. In addition to Florida's Chief Child Advocate, the Southern Regional Managing Director and the Adoption Policy Manager of the Department of Children and Families, the Chief Executive Officer and members of the Board at Our Kids of Miami-Dade and Monroe Counties, local Case Managing Organizations, and many others came together to celebrate the wonderful occasion.



On Florida Adoption Day (Saturday), November 21, 2015, the Chief Child Advocate traveled to the Broward County Courthouse to participate in the National Adoption Day event hosted by ChildNet.



After reading the Cabinet resolution, it was presented to Monica King, Executive Director of ChildNet Broward. A Cabinet resolution was also presented to Gia Tutolo-Mote, Founder and Chief Executive Officer of Forever Family, for her ongoing commitment and support to promote foster care adoption in Florida.

Throughout the courthouse, adoption finalizations took place and a reception was held in the courthouse cafeteria that included music and fun activities for everyone.







#### 30 Days of Amazing Children: Explore Adoption!



The Office worked with adoption case workers and managers throughout the state to prepare for the 30 Days of Amazing Children: Explore Adoption! Campaign. Each day in November, the website featured children to include sibling groups, children with medical needs, and older children available for adoption without an identified family

in pictures and videos. Throughout the month, over 80 children were highlighted on the website. During the month of December, the website continued to feature children available for adoption without an identified family through the same photos and videos. Special thanks and appreciation goes out to the DCF Web Services staff for their ongoing assistance to feature children on the website throughout the year.

#### **Post Adoption Survey**

The Governor's Office of Adoption and Child Protection continued to work with the Department of Children and Families by receiving survey responses from current Florida residents who have adopted children currently under 18 years old from the state's foster care system. The purpose of the survey was to identify adoptive families' thoughts and needs regarding services. The Department of Children and Families

and Community Based Care Lead Agencies sent the survey out to families in the fall of 2014. The Governor's Office of Adoption and Child Protection has been providing support through data entry of survey responses returned through mail. It is anticipated that the information gleaned from this survey will be presented at adoption training and/or conferences next year.

FLORIDA'S 2014 POST ADOPTION SERVICES SURVEY

epartment of Children and Fa ice of Adoption and Child Pr ith Florida's Post Adoption 3

#### **Post Adoption Services Survey**

In order to assess the quality and quantity of our post adoption services programs, we need to hear from our adoptive parents who are the true customers of post adoption services. Post adoption services include all services and staff available to you as an adoptive parent and your adopted child until the child turns age 18. Please help us by taking a little time to answer the guestions below. We very much want to hear from you and appreciate your input. Please call 1-800-96ADOPT if you have auestions.

Next

Powered by SurveyMonkey Check out our sample surveys ar



- ics about you and your family.
- ft groups we parent conferences and educational trainings

to complete the survey on-line please visit: https://



#### **Constituent Support and Assistance**

The Governor's Office of Adoption and Child Protection has established rapport with Floridians and is recognized as a resource to those seeking help and assistance. The Office worked with the Governor's Office of Citizen Services and the Department of Children and Families to address the challenges and concerns expressed by citizens about the Florida child welfare system. The three offices worked collaboratively to coordinate their resources and collective knowledge bases.

#### **Intern Support**

During the spring semester of 2015, the Office was fortunate to have an undergraduate student intern to provide the following support:

#### **Spring Intern Responsibilities**

- Answered telephone, directed callers to obtain needed assistance, and left messages when appropriate.
- Attended and staffed meetings of the Florida Children and Youth Cabinet and Florida
  Faith-Based and Community-Based Advisory Council. Recorded summary
  information from each respective meeting.
- Represented the Office at various events including *Wear Blue Day* with First Lady Ann Scott, the City of Tallahassee's Early Learning Workshop with Mayor Andrew Gillum, the Florida Youth Commission's *Teens Only Town Hall*, and the Florida Coalition for Children's *Rally in Tally* advocacy training event.
- Reviewed annual reports from the Office, Florida Children and Youth Cabinet and Florida Faith-based and Community-based Advisory Council and provided comments and suggestion to refine, improve and strengthen information presented.
- Assisted the Office and the Department of Children and Families input post-adoption surveys electronically to enable results to be quantified and presented.
- Reviewed youth profiles for accuracy on the Explore Adoption website.
- Assisted in updating the Florida Faith-Based and Community-Based Advisory Council's website.
- Ensured all documents posted to the Office's website were compliant with the American Disabilities Act.
- Reviewed Circuit Task Force plans and developed charts and tables to visualize data within respective plans.

#### Florida Child Abuse Prevention and Permanency Plan: July 2010 – June 2015

The central focus of the *Florida Child Abuse Prevention and Permanency Plan: July 2010 – June 2015* is to build resilience in all of Florida's families and communities in order to equip them to better care for and nurture their children. In accordance with the state law (§39.001, F.S.), the five-year prevention and permanency plan provides for the prevention of child abuse, abandonment and neglect; promotion of adoption; and for the support of adoptive families. Below are Florida's desired population-level results after the five-year plan has been completed. Florida is using the data outlined above and governed in Florida Statutes to benchmark the success.

The plan was developed following collaboration with 166 planning partners representing 107 organizations and agencies, the 33 member Child Abuse Prevention and Permanency Advisory Council and Local Tas kforces for each of 20 Florida's 20 judicial circuits. The vision, mission, overarching goal are:

#### Vision

Florida's highest priority is that children are raised in healthy, safe, stable, and nurturing families.

#### Mission

To serve as a blueprint that will be implemented to provide for the care, safety, and protection of **all** of Florida's children in an environment that fosters healthy social, emotional, intellectual, and physical development.

#### **Overarching Goal**

All families and communities ensure that children are safe and nurtured and live in stable environments that promote well-being.



#### **Protective Factors**

Research conducted by the Center for the Study of Social Policy found that there are *Protective Factors* that make a difference for families. When families experience the stressors that are highly correlated with child maltreatment, some families maltreat their children and others do not. The Center found that in the homes that do not maltreat their children, although they are experiencing the same stressors, the difference in these homes is the presence of *Protective Factors*. These *Protective Factors* reduce the incidence of child abuse and neglect by providing parents with what they need in order to parent effectively, even under stress. By building relationships with families, programs can recognize signs of stress and build families' protective factors with timely, effective help.

Strengthening Families – the intentional incorporation of the *Protective Factors* to prevent child maltreatment – has widespread support from social science researchers, state child welfare officials, early childhood practitioners, and policy experts. Currently, the Strengthening Families approach is being applied in 36 states, including Florida. This strategy for dealing with child abuse and neglect shows great promise because the *Protective Factors* have been demonstrated to work and are informed by extensive, rigorous research. Activities that build the *Protective Factors* can be incorporated into existing programs and systems, such as early childhood education and child welfare, at little cost.

Florida Child Abuse Prevention and Permanency Plan: July 2010 – June 2015

#### **Desired Population-Level Results of Plan Implementation**

- 1. *Child Maltreatment Prevention* By June 30, 2015, the verified rate of child abuse will be reduced from the State Fiscal Year 2008 2009 statewide rate of 10.94 per 1,000 children.
- **2.** *Promotion of Adoption* By June 30, 2015, the percent of children adopted within 12 months of becoming legally free for adoption will increase from the State Fiscal Year 2008 2009 rate of 66.4 percent.
- **3.** *Promotion of Adoption* By June 30, 2015, the percent of children legally free for adoption who have been waiting for adoption since the date of termination of parental rights (TPR) for more than 12 months will be reduced from the State Fiscal Year 2008 2009 rate of 53.19 percent.
- **4.** Support of Adoptive Families By June 30, 2015, the annual number of adopted children who are returned to foster care (regardless of when the adoption was finalized) will be reduced from the State Fiscal Year 2008 2009 number of 98.

#### Summary of the Current Five-Year Prevention and Permanency Plan

The primary intent of the five-year plan is to build resilience in all of Florida's families and communities to equip them to better care for and nurture their children and to later develop into a more stable and effective workforce. In accordance with the state law (§39.001, F.S.), the five-year prevention and permanency plan provides for the prevention of child abuse, abandonment and neglect; promotion of adoption; and for the support of adoptive families.

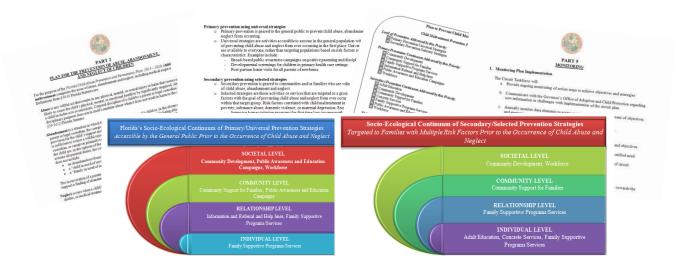
Through the implementation of 12 strategies with 40 objectives, the five-year plan is the most ambitious and comprehensive low cost/no cost effort in the country crafted specifically to strengthen families and empower communities where children are raised in safe, nurturing homes that support well-being. It is comprehensive and cross-agency focused in all aspects of the prevention of child abuse, abandonment and neglect; the promotion of adoption; and the support of adoptive families. The prevention plan seeks to reduce the rate of verified child abuse findings. This plan also includes the two cooperative child abuse prevention plans: one for education and one for law enforcement. The promotion of adoption plan seeks to reduce the amount of time children wait for permanent and stable homes. The support of adoptive families plan seeks to reduce the number of adopted children who are returned to foster care.

As of December 2015, the inaugural five-year plan has ended and information pertaining to the status towards achievement of desired population-level results is included within this report. Each state objective lead as well as Circuit Task Force (formerly known as Local Planning Teams) were requested to submit an annual progress report providing a status update on their five-year plan. Completed progress reports will be posted to <a href="https://www.flgov.com/child\_advocacy">www.flgov.com/child\_advocacy</a>.

#### Next Five-Year Prevention and Permanency Plan

The Governor's Office of Adoption and Child Protection has worked diligently throughout 2015 to provide support to the Circuit Task Forces. The Office worked diligently to create a report template that captures consistent data and information for each county within each judicial circuit. In February, Circuit Task Forces provided their first draft of their Child Abuse Prevention and Permanency (CAPP) Plan for review and feedback. The Office continues to review information and follows up individually with Circuit Task Force chairs and conveners to refine, improve and strengthen information and measures included within the plans.

The Office is also awaiting approval to hire a Special Projects Manager who will assist Circuit Task Forces with their CAPP Plans and coordinate efforts to convene members of the Child Abuse Prevention and Permanency Advisory Council.



# PART 2 – STATUS OF CHILD MALTREATMENT AND ADOPTION IN FLORIDA

Part 2 of this annual report is governed by Subsections 39.001(9)(c)(5) b-d, Florida Statutes (§39. 001(9)(c)(5) b-d, F.S.) which call for:

- b. A summary of the adoption data collected and reported to the federal Adoption and Foster Care Analysis and Reporting System (AFCARS) and the federal Administration for Children and Families.
- c. A summary of the child abuse prevention data collected and reported to the National Child Abuse and Neglect Data System (NCANDS) and the federal Administration for Children and Families.
- d. A summary detailing the timeliness of the adoption process for children adopted from within the child welfare system.

The Department of Children and Families is the reporting agency for AFCARS and NCANDS and provided data and available information included in Part 2 of this report.

#### **Summary of Child Maltreatment Data**

Child maltreatment is an all-inclusive term for child abuse, abandonment and neglect. Data was provided by the Department of Children and Families to the Executive Office of the Governor in November 2015 for State Fiscal Year (SFY) 2014 through 2015 (July 1, 2014 – June 30, 2015). These data and information have been aggregated in order to describe the status of child maltreatment in Florida. The data are based on the official published per capita rate for Florida to provide for more in-depth reporting and analysis. Therefore the numbers may differ slightly because when querying a live data system, used for both case management and reporting, the time lag between different run dates allows for additional data entry and correction.

#### **Status of Child Maltreatment in Florida**

State Plan Desired Result 1 – Child Maltreatment Prevention. By June 30, 2015, the verified rate of child abuse will be reduced from the State Fiscal Year 2008 - 2009 statewide rate of 10.94 per 1,000 children between the ages of birth – 17.

#### The Story Behind the Baseline

Based upon a strategy developed by Mark Friedman (2005), a child abuse and neglect workgroup was convened by the Children and Youth Cabinet of Florida. The workgroup included 13 members representing 10 organizations and departments across Florida. The workgroup developed a story behind the baseline data reviewed, identifying events or issues that would correlate with the changes in the numbers, either up or down.

Interaction effects among these and other potential contributing factors may drive performance in directions that, if the factors were changing in isolation, might seem counter-intuitive. External influences that may contribute to a change since the baseline include:

- A tightening of definitions in the allegation matrix.
- Screening hotline calls to divert those that do not meet statutory criteria for investigation toward other Departmental services, increasing the proportion of those that will result in verified findings among those hotline calls that are accepted for investigation.
- Effectiveness of the primary and secondary prevention programs in place (e.g., Florida's public awareness campaigns, Healthy Families Florida, programs funded by the Children's Services Councils, Healthy Start, etc.).

#### • Foreseeable stressors:

- o Changes in family living arrangements.
- Economic losses / unemployment.
- o Increase in adoptions without sufficient post adoption supports.
- Teen pregnancies and births.
- o Natural and environmental disasters (e.g., oil spill, hurricanes, etc.).

The incidence of child maltreatment is the *estimated number* of maltreated children in Florida, regardless of the number of children reported as abused. It would be expected that reporting and investigation rates would be low, conservative estimates of the actual abuse incident rates in Florida. According to the Centers for Disease Control and Prevention (CDC), child protective services reports may underestimate the true occurrence of abuse and neglect. It is estimated that 1 in 4 children (25%) experience some form of child maltreatment in their lifetimes<sup>1</sup>.

#### Verified Maltreatment

The rate of children with verified maltreatment during SFY 2014 – 2015 was 10.84. Florida has achieved its State Plan Desired Result 1 for Child Maltreatment Prevention. This represents a reduction of 0.68 per 1,000 children since SFY 2013-14, and a reduction of 2.39 per 1,000 children since SFY 2011-12, the highest verified maltreatment rate during the Florida Child Abuse Prevention and Permanency Plan: July 2010-June 2015 period.

On the table below, the state rates of verified maltreatment per 1,000 children are presented since SFY 2008-2009 as provided by the Department of Children and Families. On the following pages, rates of verified maltreatment per 1,000 children are presented with infographs at both the regional and judicial circuit levels. Shifting from a broad to a more specific focus may help communities identify which efforts are most effective to address each community's unique needs. It is important to consider many factors when reflecting on how to best use this data—data which indicates an overall downward trend of child maltreatment since SFY 2011-2012.

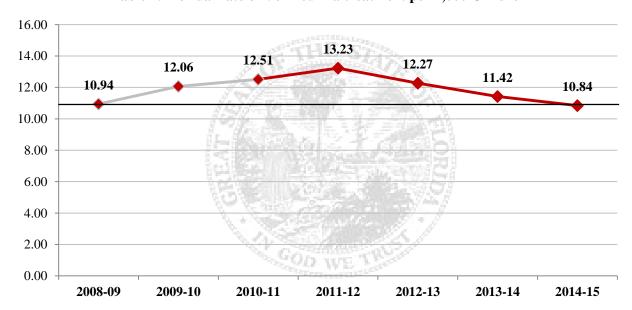


Table 1. Florida Rate of Verified Maltreatment per 1,000 Children

Note: The Florida Child Abuse Prevention and Permanency Plan began on July 1, 2010

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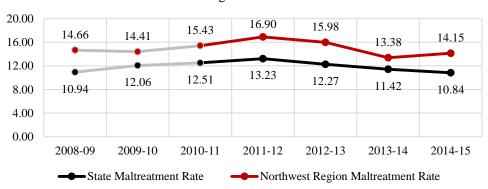
<sup>&</sup>lt;sup>1</sup> CDC - http://www.cdc.gov/violenceprevention/childmaltreatment/index.html

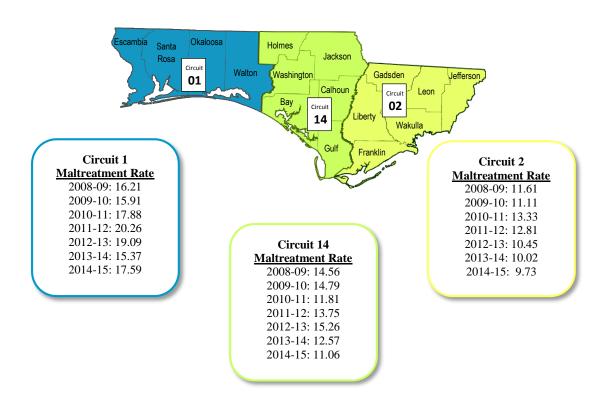
Infograph 1. Rate of Verified Maltreatment per 1,000 Children by Region and Circuit

#### Northwest Region - Circuits 1, 14, and 2



#### Northwest Region Maltreatment Rate



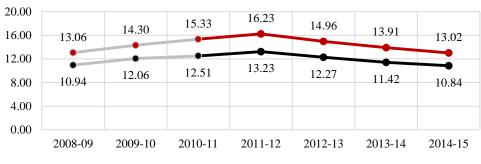


Infograph 2. Rate of Verified Maltreatment per 1,000 Children by Region and Circuit

#### Northeast Region - Circuits 3, 4, 7 and 8



#### Northeast Region Maltreatment Rate



State Maltreatment Rate

2013-14: 17.23

2014-15: 15.32

Northeast Region Maltreatment Rate

#### Circuit 3 Circuit 4 **Maltreatment Rate Maltreatment Rate** 2008-09: 14.49 Nassau 2008-09: 11.52 Hamilton 2009-10: 19.34 2009-10: 12.63 Madison 2010-11: 19.15 2010-11: 13.35 Circuit 2011-12: 20.63 Baker 2011-12: 14.09 Suwannee 04 03 2012-13: 16.83 Taylor 2012-13: 13.83 2013-14: 19.90 Union 2013-14: 13.84 St. Lafayette Bradford 2014-15: 18.87 2014-15: 12.06 Johns Gilchrist Alachua Putnam Dixie Circuit Flagler 08 Circuit Levy 07 Volusia Circuit 8 **Maltreatment Rate** 2008-09: 23.99 Circuit 7 **Maltreatment Rate** 2009-10: 21.54 2008-09: 10.49 2010-11: 22.78 2009-10: 12.62 2011-12: 22.28 2010-11: 14.32 2012-13: 21.68

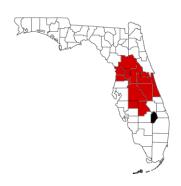
2011-12: 15.97

2012-13: 13.45

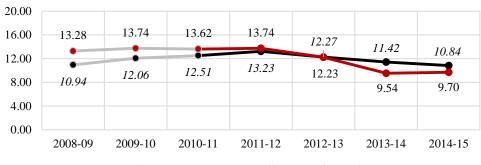
2013-14: 11.25 2014-15: 12.22

Infograph 3. Rate of Verified Maltreatment per 1,000 Children by Region and Circuit

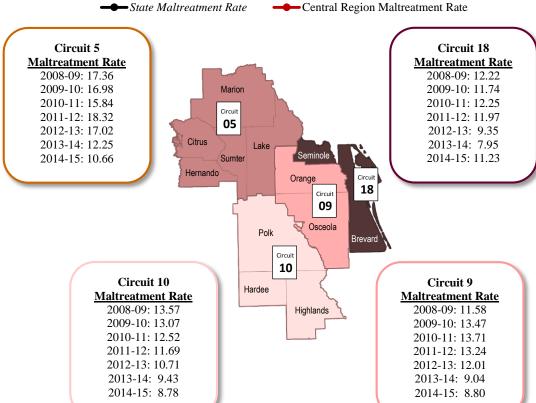
#### Central Region - Circuits 5, 9, 10 and 18



#### Central Region Maltreatment Rate



**──**State Maltreatment Rate

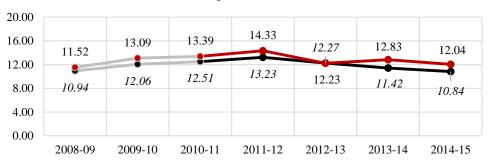


Infograph 4. Rate of Verified Maltreatment per 1,000 Children by Region and Circuit

#### Suncoast Region - Circuits 6, 12, 13 and 20

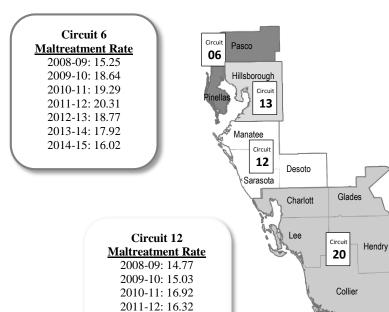


#### Suncoast Region Maltreatment Rate



**──**State Maltreatment Rate

Suncoast Region Maltreatment Rate



2012-13: 14.10

2013-14: 13.70

2014-15: 15.11

Circuit 13
Maltreatment Rate

2008-09: 9.83 2009-10: 10.58 2010-11: 10.12 2011-12: 10.86 2012-13: 10.49 2013-14: 10.03

2014-15: 9.83

Circuit 20
Maltreatment Rate
2008-09: 7.61

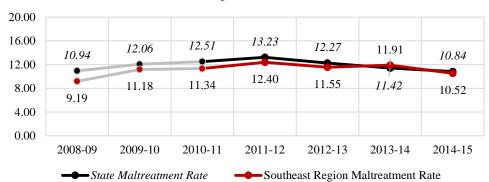
2009-10: 8.92 2010-11: 8.86 2011-12: 10.80 2012-13: 10.26 2013-14: 10.29 2014-15: 8.70

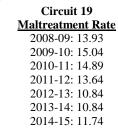
Infograph 5. Rate of Verified Maltreatment per 1,000 Children by Region and Circuit

#### Southeast Region - Circuits 15, 17 and 19



#### Southeast Region Maltreatment Rate







# Circuit 15 Maltreatment Rate 2008-09: 9.13 2009-10: 10.71 2010-11: 10.02 2011-12: 10.31 2012-13: 9.84 2013-14: 11.50 2014-15: 7.07

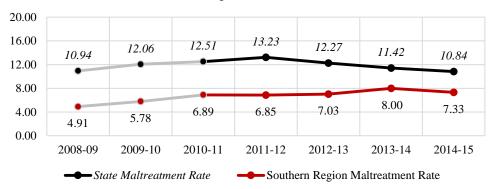
# Circuit 17 Maltreatment Rate 2008-09: 7.83 2009-10: 10.36 2010-11: 11.18 2011-12: 13.45 2012-13: 12.97 2013-14: 12.53 2014-15: 12.54

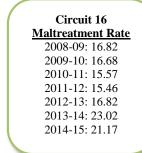
Infograph 6. Rate of Verified Maltreatment per 1,000 Children by Region and Circuit

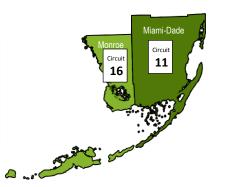
#### Southern Region - Circuits 11 and 16



#### Southern Region Maltreatment Rate







Circuit 11	,
<b>Maltreatment Rate</b>	
2008-09: 4.64	
2009-10: 5.54	
2010-11: 6.70	
2011-12: 6.68	
2012-13: 6.83	
2013-14: 7.71	
2014-15: 7.06	

#### **Age Ranges with Verified Maltreatment**

As shown in Chart 3 and Table 2 below, and in Table 3 on the next page, the younger the child, the more vulnerable the child is to be maltreated (highlighted in orange on Table 2).

- The highest percentage of children with verified maltreatment during SFY 2014 2015 was in the birth to four year old range.
- This was followed by elementary school aged children (5 10 years).
- These two age groups make up 34,140 of 44,528 verifications, over 75% of total verifications.
- It should be noted that there is a very small percentage difference between middle school children and high school children with verified maltreatment during SFY 2014 2015 (11.12% vs. 12.07%).

Chart 3. Unduplicated Counts of Children with Most Serious Finding of Verified Abuse by Age Range, July 2014 – June 2015 Statewide

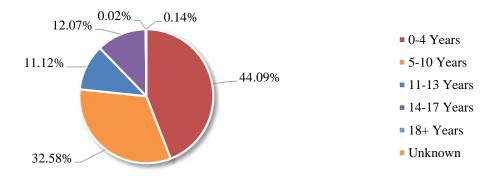
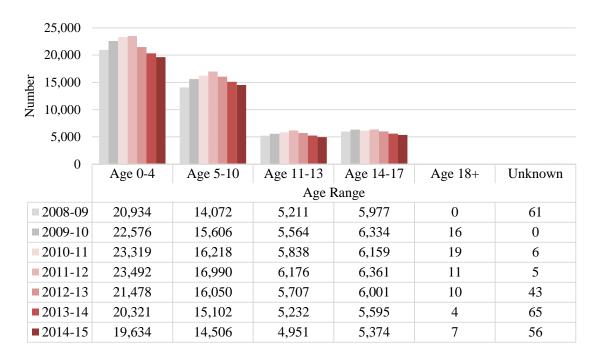


Table 2. Unduplicated Counts of Children with Most Serious Finding of Verified Abuse by Age Range, July 2014 – June 2015 by Circuit

G!!4	Age of Child						
Circuit	0-4 Years	5-10 Years	11-13 Years	14-17 Years	18+ Years	Unknown	Totals
1	1,169	991	309	320	-	2	2,791
2	333	253	90	100	=	1	777
3	347	254	91	96	=	ı	788
4	1,560	1,041	315	343	1	4	3,264
5	899	646	222	244	-	-	2,011
6	1,986	1,334	451	496	1	3	4,271
7	1,027	693	263	255	-	3	2,241
8	511	346	110	121	-	1	1,089
9	1,409	1,011	390	436	1	4	3,251
10	674	480	179	212	-	2	1,547
11	1,681	1,332	447	527	1	11	3,999
12	835	698	266	269	-	2	2,070
13	1,377	991	331	315	1	1	3,016
14	285	228	76	94	-	1	684
15	853	644	253	230	1	3	1,984
16	91	68	33	37	-	_	229
17	2,191	1,601	467	524	1	12	4,796
18	957	765	247	307		_	2,276
19	599	484	185	199		_	1,467
20	850	646	226	249	-	6	1,977
Statewide	19,634	14,506	4,951	5,374	7	56	44,528
Percentage	44.09%	32.58%	11.12%	12.07%	0.02%	0.14%	100%

Table 3. Age Ranges for Children with Most Serious Finding of Verified Abuse (Unduplicated) by State Fiscal Year



#### **Allegations and Investigations of Child Maltreatment**

This pattern continues when looking at allegations of child maltreatment. As shown in Chart 4 below and Tables 4 and 5 on the next page, the largest ranges of allegations is for children between the ages of birth and four years old and those between five and 10 years old (highlighted in orange). The middle school (11-13) and high school (14-17) ranges are also similar.

• The 0-4 and 5-10 age groups include 157,324 children who were alleged victims of maltreatment, or 69.8% of all children who were alleged victims.

Chart 4. Age Ranges for Children who were Alleged Victims of Maltreatment (Unduplicated), July 2014 – June 2015 Statewide

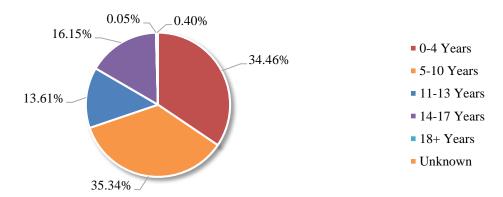
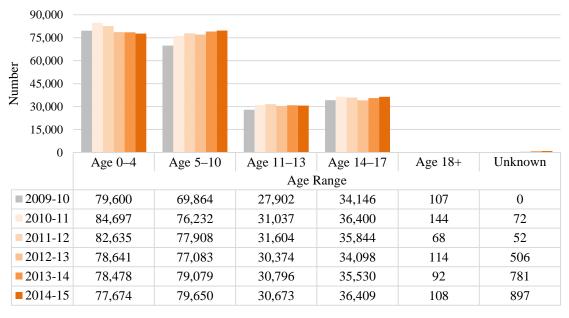


Table 4. Age Ranges for Children who were Alleged Victims of Maltreatment (Unduplicated) for July 2014 – June 2015 by Circuit

G:	Age of Child						
Circuit	0-4 Years	5-10 Years	11-13 Years	14-17 Years	18+ Years	Unknown	Total
1	4,402	4,374	1,589	1,803	3	112	12,283
2	1,855	1,755	710	851	1	21	5,193
3	1,145	1,165	491	528	2	4	3,335
4	6,144	6,071	2,314	2,638	12	88	17,267
5	4,766	4,871	1,920	2,143	9	42	13,751
6	6,205	5,965	2,230	2,741	6	64	17,211
7	4,089	4,031	1,614	1,962	5	41	11,742
8	2,021	1,923	672	812	1	10	5,439
9	6,669	7,468	2,791	3,350	12	81	20,371
10	4,308	4,328	1,703	1,905	3	37	12,284
11	5,496	5,721	2,287	2,970	16	79	16,569
12	2,975	3,151	1,257	1,407	3	41	8,834
13	5,075	5,360	2,068	2,354	6	35	14,898
14	1,752	1,753	609	769	1	24	4,908
15	4,388	4,569	1,771	1,978	3	24	12,733
16	237	264	105	125	-	1	732
17	5,860	5,742	2,162	2,756	12	91	16,623
18	4,133	4,311	1,765	2,084	6	18	12,317
19	2,176	2,401	918	1,186	-	26	6,707
20	3,978	4,427	1,697	2,047	7	58	12,214
Statewide	77,674	79,650	30,673	36,409	108	897	225,411
Percentage	34.46%	35.34%	13.61%	16.15%	0.05%	0.40%	100.00%

Table 5. Age Ranges for Children who were Alleged Victims of Maltreatment (Unduplicated) by State Fiscal Year



Note: In 2008-09, the Age Ranges identified did not match the current Age Ranges and were not added in.

In Table 6, the highlighted cells in orange show the highest numbers of race, ethnicity, and gender per circuit as well as statewide.

- The largest percentage of children and youth who were alleged victims of maltreatment were white (57.5%), from eighteen circuits.
- For ethnicity, the largest portion was Other (non Hispanic) (82.8%) from every circuit in Florida.
- Investigations were conducted for nearly equal numbers of boys and girls.

Table 6. Race, Ethnicity, and Gender of Children who were Alleged Victims of Maltreatment (Unduplicated) July 2014 – June 2015

Circuit	White	Black	Multiracial	Other
1	7,454	3,075	533	1,221
2	1,876	2,742	118	457
3	2,301	756	141	137
4	8,244	6,963	559	1,501
5	10,088	2,250	443	970
6	11,720	3,556	841	1,094
7	7,984	2,430	299	1,029
8	3,011	1,896	231	301
9	10,447	7,158	437	2,329
10	8,002	2,942	336	1,004
11	7,769	6,740	112	1,948
12	6,259	1,595	279	701
13	8,177	5,499	463	759
14	3,497	797	209	405
15	5,890	5,298	250	1,295
16	573	92	51	16
17	5,712	8,504	304	2,103
18	7,956	2,974	604	783
19	4,162	1,822	208	515
20	8,430	2,119	318	1,347
Statewide	129,552	69,208	6,736	19,915
Percentage	57.5%	30.7%	3.0%	8.8%

Hispanic	Other
510	11,773
150	5,043
217	3,118
897	16,370
1,490	12,261
1,715	15,496
982	10,760
297	5,142
5,993	14,378
2,387	9,897
7,070	9,499
1,683	7,151
3,277	11,621
168	4,740
2,810	9,923
247	485
3,173	13,450
1,639	10,678
1,095	5,612
2,939	9,275
38,739	186,672
17.2%	82.8%

Mala	Famala	The last of the	Total
Male	Female	Unknown	Total
6,088	5,909	286	12,283
2,510	2,558	125	5,193
1,646	1,667	22	3,335
8,427	8,551	289	17,267
6,814	6,742	195	13,751
8,600	8,459	152	17,211
5,906	5,667	169	11,742
2,653	2,708	78	5,439
10,226	9,813	332	20,371
6,105	5,955	224	12,284
8,108	8,097	364	16,569
4,371	4,346	117	8,834
7,458	7,334	106	14,898
2,369	2,474	65	4,908
6,345	6,173	215	12,733
370	357	5	732
8,141	8,111	371	16,623
6,200	5,996	121	12,317
3,350	3,279	78	6,707
5,882	6,133	199	12,214
111,569	110,329	3,513	225,411
49.5%	49.0%	1.5%	100%

Table 7. Race of Children who were Alleged Victims of Maltreatment (Unduplicated) by State Fiscal Year

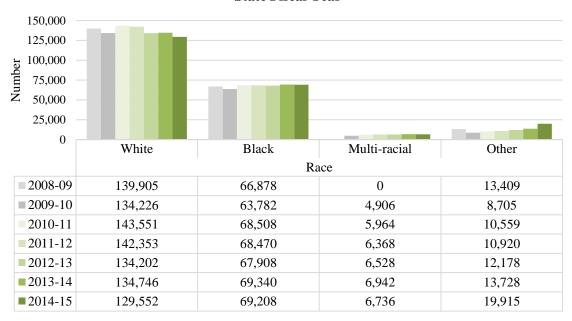
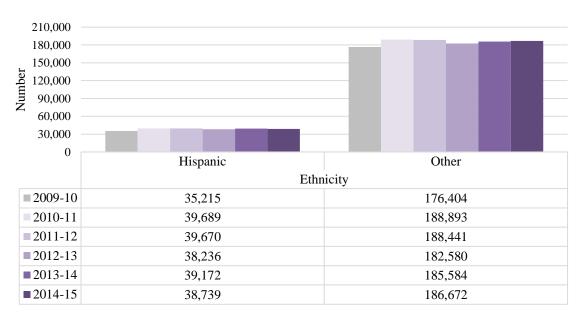


Table 8. Ethnicity of Children who were Alleged Victims of Maltreatment (Unduplicated) by State Fiscal Year



Note: No numbers reported for Ethnicity in 2008-09

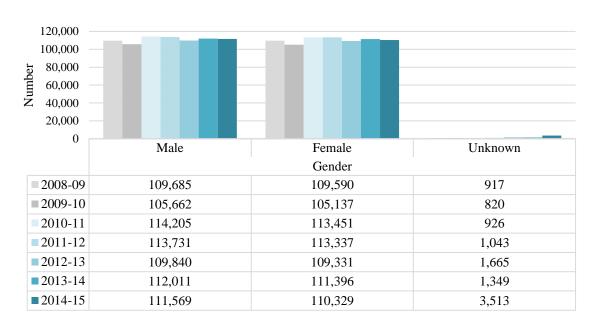


Table 9. Gender of Children who were Alleged Victims of Maltreatment (Unduplicated) by State Fiscal Year

Table 10 shows the number of allegations and verifications, in duplicated counts. The three highest values in each category are highlighted in orange while the three lowest are highlighted in green. A child might have been the alleged victim with more than a single allegation attributed to the same incident.

- For these children, there were 69,576 verified allegations of child maltreatment (duplicated child count).
- The highest numbers of allegations were for family violence threatens child, inadequate supervision, and physical injury.
- It should be noted that the top three most reported allegations (family violence, inadequate supervision, and physical injury) have fairly low verification rates (21.9%, 13.1%, and 7.6%, respectively).

Many factors can contribute to the relative rankings of these abuse types. For instance, abandonment is the most easily verified (67.3%) because it is easy to discern and few alternative explanations for a child being left alone. Mental injury or physical injury, on the other hand, can be more difficult to establish because far more alternative explanations can be given for their observable effects.

Table 10. Allegations and Verifications of Abuse (Duplicated Child Counts) July 2014 – June 2015

Type of Abuse Allegation	Allegations	Verified	Percent of Allegations Verified
Abandonment	1,237	833	67.3%
Asphyxiation	2,337	103	4.4%
Bizarre Punishment	2,082	221	10.6%
Bone Fracture	781	168	21.5%
Burns	1,351	114	8.4%
Death	481	152	31.6%
Environmental Hazards	50,581	5,088	10.1%
Failure to Protect	4,348	2,150	49.4%
Failure to Thrive	393	184	46.8%
Family Violence Threatens Child	89,417	19,619	21.9%
Human Trafficking	509	109	21.4%
Human Trafficking CSEC	668	182	27.2%
Human Trafficking Labor	67	24	35.8%
Inadequate Supervision	76,638	10,061	13.1%
Internal Injuries	45	27	60.0%
Malnutrition/Dehydration	200	64	32.0%
Medical Neglect	7,692	1,357	17.6%
Mental Injury	11,397	516	4.5%
Physical Injury	56,622	4,315	7.6%
Sexual Abuse	78	5	6.4%
Sexual Abuse – Sexual Battery	4,403	952	21.6%
Sexual Abuse – Sexual Exploitation	1,012	157	15.5%
Sexual Abuse – Sexual Molestation	10,376	1,570	15.1%
Substance Misuse	13,070	2,137	16.4%
Substance Misuse – Alcohol	28,359	4,309	15.2%
Substance Misuse – Illicit Drugs	48,541	8,308	17.1%
Substance Misuse – Prescription Drugs	17,250	2,795	16.2%
Threatened Harm	6,923	4,056	58.6%
Statewide	436,859	69,576	15.9%

#### **Reasons for Removal**

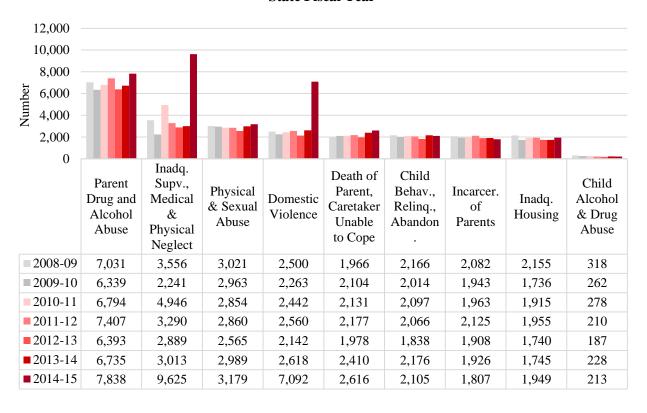
The Department of Children and Families' *Florida Safe Families Network* (FSFN) data system recorded the primary reasons for removal of the children entering into foster care. If a child was removed more than once during the year, all sets of reasons are included in this analysis. Of the 17,218 children entering foster care in the twelve month span from July 2014 – June 2015, the reasons for removal were divided into nine categories, shown in Table 11. A child may have more than one reason for removal noted, thus the counts in this chart will represent duplicated child counts.

- Highlighted in orange, the highest percentage of removals (55.90%) were due to inadequate supervision, medical and physical neglect. This is a 37.09% increase from the previous year.
- The second most cited service reason for a removal was parent drug and alcohol abuse (45.52%). This is a 2.47% increase from the previous year.
- The least cited reason for a child removal was child alcohol and drug abuse (1.24%), followed by incarceration of parents (10.49%).

Table 11. Reasons for Removal Reported (Duplicated Child Counts) July 2014 – June 2015

Removal Reason	Number of Children	Percent
Inadequate Supervision, Medical and Physical Neglect	9,625	55.90%
Parental Drug and Alcohol Abuse	7,838	45.52%
Domestic Violence	7,092	41.19%
Physical and Sexual Abuse	3,179	18.46%
Death of Parent/Caretaker Unable to Cope	2,616	15.19%
Child Behavior/Relinquishment/Abandonment	2,105	12.23%
Inadequate Housing	1,949	11.32%
Incarceration of Parents	1,807	10.49%
Child Alcohol and Drug Abuse	213	1.24%

Table 12. Reasons for Removal Reported (Duplicated Child Counts) by State Fiscal Year



# **Summary of Adoption Data**

This subsection comprises of three areas of reporting:

- A summary of the adoption data collected and reported to the federal Adoption and Foster Care Analysis and Reporting System (AFCARS) and the Federal Administration for Children and Families.
- A summary detailing the adoption process and its timeliness for children adopted from within the child welfare system.
- A summary of the support of adoptive families' information.

# Adoption Data Reported by the Department of Children and Families to the Federal Administration for Children and Families via the Adoption and Foster Care Analysis and Reporting System (AFCARS).

The Federal Administration for Children and Families (ACF) tracks state performance on federal child welfare outcome measures using AFCARS, including five measures related to the timeliness of adoptions from foster care. Four of these measures are included in this report.

Data and summaries were provided by the Department of Children and Families to the Governor's Office of Adoption and Child Protection in November 2015. These data and information have been aggregated in order to describe the status of adoption in Florida. It should be noted that for the information provided below on the AFCARS measures, original comparison benchmarks were established in 2007 based on analyses using data from the 2004 Federal Fiscal Year (FFY) which spans the months October through September. Differences in reporting period can alter measured performance. For example, FFY 2014 spans October 1, 2014 through September 30, 2015. On the other hand, the current state performance information is based on the 12 month period from July 1, 2014 to June 30, 2015 (SFY 2014 – 2015), using the most recent available data for this report.

During State Fiscal Year 2014 – 2015 Florida finalized 3,177 adoptions throughout the state. This is due to the diligent efforts of Community Based Care Lead Agencies, Florida Association of Heart Galleries, the Department of Children and Families, the Governor's Office of Adoption and Child Protection, and many others.

- Of the children adopted last state fiscal year for whom information is available:
  - o 853 were nine years of age or older (26.7%), 415 were 13 and older (13.0%), and 146 were 16 or 17 (4.6%).
  - o 2,098 were sibling groups that experienced finalized adoptions.
  - o 100 were identified as medically fragile that experienced finalized adoptions.

# The Adoption Process for Children Adopted from within the Child Welfare System

The Department of Children and Families uses several data sources and metrics related to adoption. Each serves a unique purpose. Some of the differences between these metrics, though important, can be somewhat nuanced. To avoid miscommunication or inadvertent misinterpretation, it is critical to use "the right tool for the right job". For example, the answer to the question of how many children are available for adoption in Florida depends entirely on what it means to be "available for adoption." Different interpretations of this term can operationally refer to different populations, or population subsets. These may include:

- a. Children with a primary goal of adoption, who have not been TPR'ed (that is, the termination of their parental rights);
- b. Children who have been TPR'ed, making them legally available for adoption, regardless of whether adoption is a primary goal;

- c. Children who have been both TPR'ed and have a primary goal of adoption;
- d. Children who have been TPR'ed, have a primary goal of adoption, and an adoptive family has been identified, but the adoption has not been finalized; and
- e. Children who are TPR'ed, have the primary goal of adoption, but no family has been identified and recruitment for a family is still ongoing. These are the children who are eligible to be featured on the *Explore Adoption* website.

As shown in Table 13, adoption-related populations overlap or are nested within each other, and each yields a different number. The table provides a point in time chart as of July 1, 2014 and provides a starting base at the beginning of SFY 2014 - 2015.

Table 13. Adoption-Related Populations as of June 30, 2014

Population Description	Number of Children
Children TPR'ed or who have a primary goal of adoption	5,415
Children with a primary goal of adoption regardless of TPR status	4,975
Children TPR'ed, regardless of goal	3,482
Children who have been TPR'ed and have a primary goal of adoption	3,031
Children who have been TPR'ed, have a primary goal of adoption, and are on the website	657*

<sup>\*</sup>The 657 is from the Monthly Adoption Report; all other figures are from the July 1, 2013 AFCARS extract.

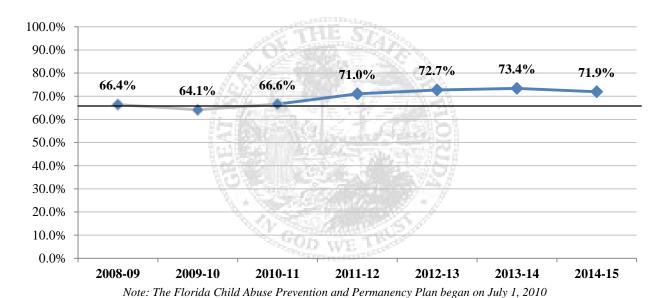
## **Timeliness of Adoption**

The Florida Child Abuse Prevention and Permanency Plan: July 2010 – June 2015 has two desired population results for the promotion of adoption. Both speak to the timeliness of adoption – increasing the adoptions that occur within 12 months of TPR and decreasing the length of time for children that have been waiting for adoption for more than 12 months since TPR.

*State Plan Desired Result 2 – Promotion of Adoption* – By June 30, 2015, the percent of children adopted within 12 months of becoming legally free for adoption will increase from the State Fiscal Year 2008 – 2009 rate of 66.4 percent.

The percentage of children adopted within 12 months of becoming legally free for adoption during SFY 2014 – 2015 was 71.9%. Florida has achieved its State Plan Desired Result 2 for Promotion of Adoption. Since the start of the Florida Child Abuse Prevention and Permanency Plan: July 2010-June 2015, Florida has exceeded the targeted percentage. The table on the next page reflects the state's performance since SFY 2008 – 2009 as provided by the Department of Children and Families.

Table 14. Percentage of Children Adopted within 12 months of becoming Legally Free for Adoption by State Fiscal Year

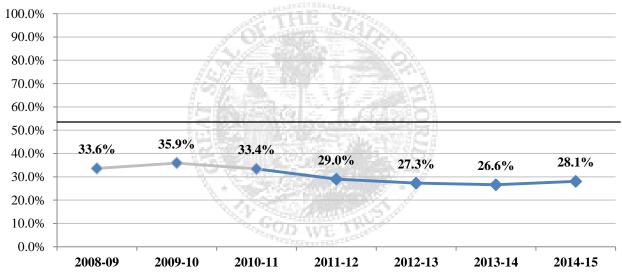


State Plan Desired Result 3 – Promotion of Adoption – By June 30, 2015, the percent of children legally free for adoption who have been waiting for adoption since the date of termination of parental rights (TPR)

for more than 12 months will be reduced from the State Fiscal Year 2008 – 2009 rate of 53.19 percent.

The percentage of children adopted more than 12 months from becoming legally free for adoption during SFY 2014 – 2015 was 28.1%. Florida has achieved its State Plan Desired Result 3 for Promotion of Adoption. Since the start of the Florida Child Abuse Prevention and Permanency Plan: July 2010-June 2015, Florida has exceeded the targeted percentage. The table below reflects the state's performance since SFY 2008 – 2009 as provided by the Department of Children and Families.

Table 15. Percentage of Children Adopted within 12 months of becoming Legally Free for Adoption by State Fiscal Year



Note: The Florida Child Abuse Prevention and Permanency Plan began on July 1, 2010

**AFCARS Measure 1 – Percent Discharged in Less than 24 Months.** Of all children who were discharged from foster care to a finalized adoption during the period July 2014 through June 2015, on average, *54.01* percent were discharged in less than 24 months from the date of the latest removal from home. The target was to reach the national 75<sup>th</sup> percentile for FFY 2004 which is 36.07 percent. Florida has exceeded this target for the seventh consecutive year.

This measure is limited to children adopted during the period and does not address the likelihood that children, presently in care, will be adopted within 24 months. It is important to note that this measure can be misleading, especially when an agency successfully recruits adoptive families for older children/teens who have been in foster care for multiple years—as opposed to recruiting adoptive families for younger children more recently introduced into foster care. Individual circuit performance of the measure is reflected below. As shown in Chart 5, all but two of the 20 Florida circuits exceeded the federal target.

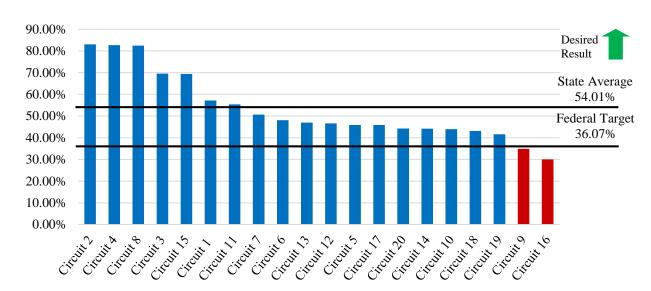


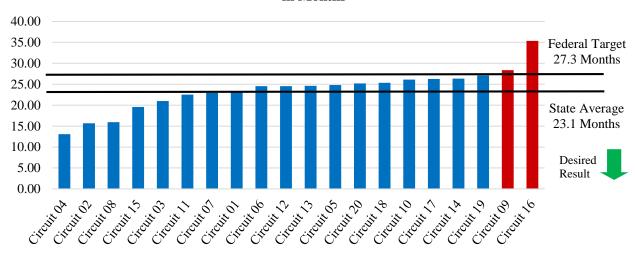
Chart 3. Percent Discharged to Adoption in Less than 24 Months by Circuit

Note: Private adoptions were excluded. County is based on county of courtesy worker or primary worker at time of adoption.

**AFCARS Measure 2** – **Median Length of Stay in Foster Care.** Of all children adopted from foster care during the period July 2014 through June 2015, the *median length of stay in foster care was 23.1 months from the date of latest removal from home to the date of discharge to adoption.* The target was to reach the national 25th percentile for FFY 2004, established in FFY 2007, which is 27.3 months. This measure, like the first measure, is limited to children adopted during the period, so it only describes the length of stay of this particular group of adopted children.

- Florida met and exceeded the federal target.
- Individual circuit performance of the measure is reflected below, and all of Florida's circuits but two were below the federal target in SFY 2014 2015.
- On average, the time spent by a child in foster care in Florida was 4.2 months shorter than the federal target.

Chart 4. Median Length of Stay in Foster Care for Children Discharged to Adoption by Circuit, in Months



**AFCARS Measure 3 – Finalized Adoptions.** Of all children who were in foster care on the first day of July 2013, and who had been in foster care for 17 continuous months or longer, *37.34 percent were discharged from foster care to a finalized adoption by June 30, 2015*. The target was to reach the national 75<sup>th</sup> percentile for FFY 2004, established in FFY 2007 of 22.7 percent.

- Florida has met and exceeded this target.
- This measure provides a means for examining the likelihood of children being adopted who have been in care for a long period of time. It selects all children who were in care at the beginning of the period and follows up after 12 months to see whether they have been adopted. This measure excludes children who, by the last day of the period, have achieved permanency through reunification with parents or primary caretakers, living with other relatives, or guardianship. Individual circuit performance of the measure is reflected below.
- As shown in Chart 5, all of the 20 Florida circuits met or exceeded this goal.

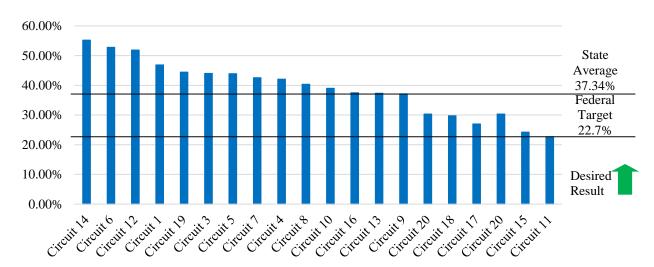


Chart 5. Percent of Finalized Adoptions by Circuit

**AFCARS Measure 4 – Legally Free for Adoption.** Of all children who were in foster care on the first day of July 2014 or January 2015, had been in foster care for 17 continuous months or longer, and were not legally free for adoption prior to that day, **32.39 percent became legally free for adoption** by December 31, 2014 or June 30, 2015 respectively—nearly double the percentage during that same span during the previous year. The target was to reach the national 75<sup>th</sup> percentile for FFY 2004, established in FFY 2007 which is 10.9 percent.

- Florida met and exceeded this target.
- As shown in Chart 6, all 20 of Florida's circuits exceeded this goal.

This measure reflects how quickly Florida moved to obtain termination of parental rights (TPR) when it appeared that reunification was no longer a viable option. This measure excludes children who did not become legally free during the first six months of the period but who, during that six-month period, achieved permanency through reunification with parents or primary caretakers, living with other relatives, or guardianship. Individual circuit performance of the measure is reflected on the next page.

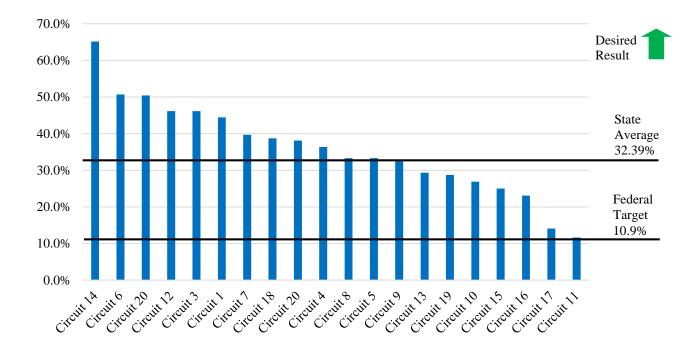


Chart 6. Percent of Children Legally Free for Adoption by Circuit

Chart 9 shows the length of time from the last TPR date until the adoption finalization for all children adopted during SFY 2013 – 2014. The date of TPR was recorded in the system for 3,198 out of the 3,244 of the children adopted.

- Of these 3,198 children, most (73.42%) were adopted in fewer than twelve months and almost all (91.71%) were adopted within 24 months of their TPR dates.
- This exceeds the 66.4 percent target rate for the next five-year plan. Statewide efforts will continue in order to maintain this progress.
- Of the children adopted during SFY 2013 2014, over 233 (7.29%) children were adopted after waiting two or more years and of these, 56 children (1.75%) had been waiting for four or more years.
- The longer a child is in foster care waiting adoption, the more difficult it may be to place the child with an adoptive family.

Table 16 below identifies the percentages of three adoptive populations by judicial circuit. Cells highlighted in orange show the highest percentage for each circuit. This information reflects a need for Community Based Care Lead Agencies to avoid a one-size-fits-all approach for maximizing adoption in their areas – instead allocating efforts which best meets the unique needs of their communities.

Table 16. Percentage of Adoption by Type of Adoptive Family by Circuit

Circuit	Foster Parents	Relatives	Recruited Parents
1	29.13%	53.15%	17.72%
2	21.67%	63.33%	15.00%
3	26.32%	42.11%	31.58%
4	22.36%	58.79%	18.85%
5	21.38%	50.31%	28.30%
6	31.94%	46.67%	21.39%
7	30.77%	47.60%	21.63%
8	11.20%	59.20%	29.60%
9	25.88%	38.24%	35.88%
10	22.98%	47.20%	29.81%
11	26.97%	56.93%	16.10%
12	25.35%	47.89%	26.76%
13	26.69%	47.41%	25.90%
14	29.67%	49.45%	20.88%
15	36.51%	48.41%	15.08%
16	50.00%	25.00%	25.00%
17	38.02%	42.98%	19.01%
18	15.66%	54.22%	30.12%
19	17.71%	63.54%	18.75%
20	43.84%	38.36%	17.81%
State	25.61%	51.25%	23.14%

Chart 7. Percentage of Adoptions by Type of Adoptive Family – Statewide

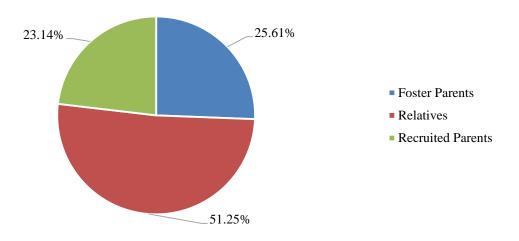


Table 17 shows the same categories found in Table 13 but for a different snapshot of time. These counts were taken on June 30, 2015 and provide for end of SFY 2014 - 2015 counts as well as a starting base for SFY 2015 - 2016. As of June 30, 2015 3,248 children were legally available with a primary goal of adoption, and waiting to be adopted.

Table 17. Adoption-Related Populations as of June 30, 2015

Population Description	Number of Children
Children TPR'ed or who have a primary goal of adoption	5,807
Children with a primary goal of adoption regardless of TPR status	5,288
Children TPR'ed, regardless of goal	3,767
Children who have been TPR'ed and have a primary goal of adoption	3,248
Children who have been TPR'ed, have a primary goal of adoption, and are on the website	654*

<sup>\*</sup>From the Monthly Adoption Report and includes all children who are legally free for adoption, have the goal of adoption, are listed on the adoption web site, and do not have an identified family.

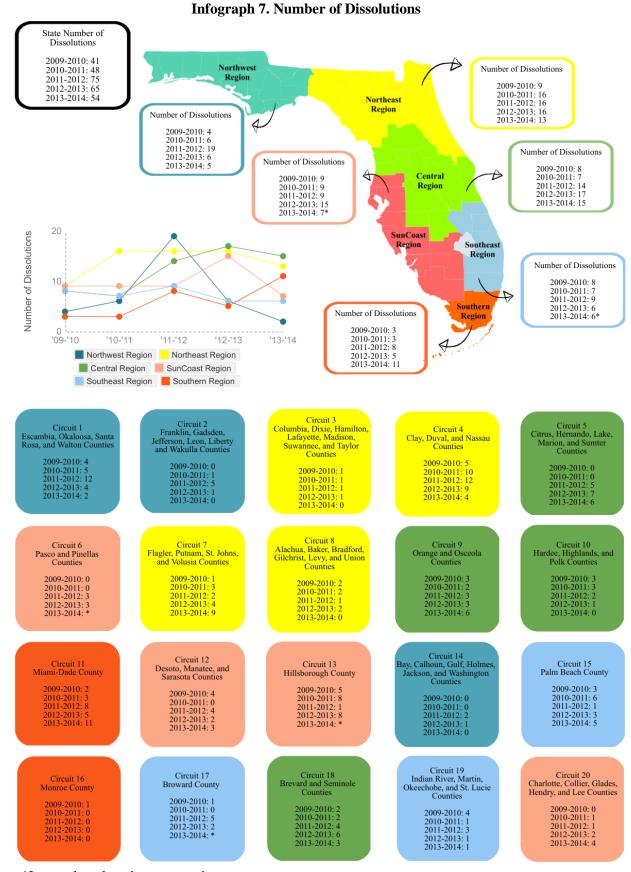
#### Dissolutions of Adoptions

Information was requested from the Department of Children and Families, Office of Child Welfare to provide data by the circuits on the number of children who were returned to foster care after finalized adoptions and the parental rights of the adoptive parents were terminated. By the time of this report, the Office has not received data to update information for SFY 2014 - 2015. As such, information provided for 2013 - 2014 will be included in this report and upon receiving requested data, the Office will adjust it annual report to reflect the most current data available.

*State Plan Desired Result 4, Support of Adoptive Families* – By June 30, 2015, the annual number of adopted children who are returned to foster care (regardless of when the adoption was finalized) will be reduced from the State Fiscal Year 2008 – 2009 number of 98.

The annual number of adopted children who were returned to foster care permanently for SFY 2013 – 2014 was 54 – well below the 2008 – 2009 goal of fewer than 98 children outlined in the *Florida Child Abuse Prevention and Permanency Plan: July 2010 – June 2015.* From this, it can be inferred that circuits have been more effective addressing issues ranging from physical and mental health to juvenile justice and behavioral issues. Because these numbers can fluctuate and are caused by a wide variety of circumstances, caution should be used when looking at trends. This information is perhaps better used as a general benchmark than for spotting trends.





<sup>\*</sup>Incomplete data due to reporting system error.

Table 18. Dissolutions and Child-Related Reasons Cited by Circuit

Circuit	Number of Dissolutions (Unduplicated Count)	Number of Families (Unduplicated Count)	Behavioral Issues	Educational Issues	Juvenile Justice Issues	Mental Health Issues	Physical Health Issues	Safety of Others
Circuit 01	1	1				1		
Circuit 02	0							
Circuit 03	0							
Circuit 04	2	2	1			1		
Circuit 05	1	1	1					
Circuit 06	*							
Circuit 07	4	3	3		1			
Circuit 08	0							
Circuit 09	0							
Circuit 10	0							
Circuit 11	8		1		3	2		2
Circuit 12	0							
Circuit 13	*							
Circuit 14	0							
Circuit 15	1	1						1
Circuit 16	0							
Circuit 17	*							
Circuit 18	1	1				1		
Circuit 19	1	1	1					
Circuit 20	3	3	3					
Statewide Total	22	13	10	0	4	5		3

The 32 children with abuse/neglect investigations listed in Table 11 represent 25 adoptive families. It should be noted that not every adoptive parent with an abuse investigation resulted in a case of verified child maltreatment, and numerous investigations involved sibling groups.

• Circuits cited that there were dissolutions due to the inability of the adoptive parents to either care for or provide a safe home for the adopted child(ren). Specifically, investigations were initiated after an adoptive parent refused to allow an adopted child to return home after being released from a mental health facility or Department of Juvenile Justice facility.

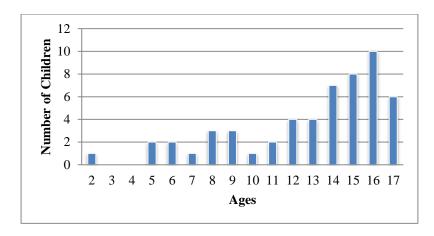
Table 19. Dissolutions and Adoptive Parent-Related Reasons Cited by Circuit

Circuit	Number of Dissolutions (Unduplicated Count)	Number of Families (Unduplicated Count)	Abuse Or Neglect Report by the Adoptive Parent	Other
Circuit 1	1	1	1	
Circuit 2	0			
Circuit 3	0			
Circuit 4	2	2	2	
Circuit 5	5	1	5	
Circuit 6	*			
Circuit 7	5	3	5	
Circuit 8	0			
Circuit 9	6	6	4	2 Private adoption
Circuit 10	0			
Circuit 11	3	2	2	1
Circuit 12	3	3	2	1
Circuit 13	*			
Circuit 14	0			
Circuit 15	4	2	1	3
Circuit 16	0			
Circuit 17	*			
Circuit 18	2	2	2	
Circuit 19	0			
Circuit 20	1	1	1	
Statewide Total	32	25	25	7

The dissolution number is counted by child and includes sibling groups. Large sibling groups can be more difficult to assimilate within a family, especially when the family may have a limited support network and one or more children in the sibling group are experiencing significant behavioral issues. In addition to four sibling groups of two, there was one large sibling group of five included in the dissolution data. This large sibling group of five children was adopted by a relative who became involved in illegal drug activity and the single adoptive father was unwilling to accept services.

The most prominent reasons for dissolutions of adoption were the adopted child's violent behaviors or significant mental health issues and most of the dissolutions (65%) occurred during the adopted child's teen years – ages 13 or older.

• Because the behaviors and mental health issues are so closely related, many of the reported dissolutions cited both reasons. In those cases, the counts are provided for both.



**Chart 8. Ages of Children at Time of Dissolution** 

Chart 8, above, shows the ages of children at the time of dissolution and includes sibling groups. A comprehensive analysis of adoption dissolutions by the post adoption services program for each Community Based Care Agency will assist in assessing the effectiveness of their post adoption services program.

- The most prominent reasons for dissolutions of adoption were the adopted child's violent behaviors or significant mental health issues, and most of the dissolutions (55%) occurred during the adopted child's teen years—ages 13 or older.
- Because the behaviors and mental health issues are so closely related, many of the reported dissolutions cited both reasons.
- An analysis of the dissolution data reveals that a significant number of the dissolutions involved teens 35 of the 54 children were 13 years of age or older.
- In addition to the developmental challenges of teen years, many begin to "start wondering about their birth families". This may require that a training curriculum be developed to directly address these concerns.

# **Status of Support of Adoptive Families**

To assess the status of support of adoptive families, the Department of Children and Families: Office of Child Welfare submitted data provided by the circuits on the number of adoptive parent support groups, number of adoption competent mental health professionals and number of post adoption services counselors. These data were checked against the numbers submitted in the local five-year plans for the support of adoptive families. Where discrepancies were found between the two sets of information, the circuits were contacted to assist with providing the final numbers.

#### Support Groups

Adoptive parent and youth support groups provide opportunities for adoptive parents and youth to meet with other adoptive parents and youth who are struggling with similar challenges and concerns, generally meeting once a month. These groups are designed to meet the needs of participating adoptive families in the languages and cultures of the communities they serve, receiving support from umbrella organizations and qualified facilitators when appropriate (e.g., teen support groups), etc. In the rural areas where there are limited numbers of adoptive families, newsletters and group emails are being



utilized to provide new information about post adoption services and to provide an avenue for adoptive families to communicate with each other.

- The twenty circuits reported 54 adoptive parent support groups this year and 10 teen support groups.
- There are fifteen more adoptive parent support groups than last year, and three new teen support groups.
- All support groups have local training opportunities as well as newsletters for adoptive families.
- It should be noted that support groups are easy to start but difficult to maintain over time.

Circuit	Number of Adoptive Parent Support Groups	Number of Teen Support Groups	Training Opportunities Included	Newsletters, Flyers, E-Mails Sent
Circuit 1	5		Yes	Quarterly
Circuit 2	3	1	Yes	Quarterly
Circuit 3	3		Yes	Quarterly
Circuit 4	4	1	Yes	Quarterly
Circuit 5	5		Yes	Quarterly
Circuit 6	4		Yes	Quarterly
Circuit 7	2		Yes	Quarterly
Circuit 8	2		Yes	Quarterly
Circuit 9	2	2	Yes	Quarterly
Circuit 10	5		Yes	Monthly
Circuit 11	1		Yes	Quarterly
Circuit 12	3		Yes	Quarterly
Circuit 13	2	4	Yes	Quarterly
Circuit 14	3		Yes	Quarterly
Circuit 15	3	1	Yes	Quarterly
Circuit 16	1		Yes	Quarterly
Circuit 17	1		Yes	Quarterly
Circuit 18	2	1	Yes	Quarterly
Circuit 19	1		Yes	Quarterly
Circuit 20	2		Yes	Quarterly
Statewide Total	54	10	20	20

Table 20. Quantity of Adoptive Parent Support Groups by Circuit

Over 23,000 children have been adopted from Florida's child welfare system in the last nine years. Research has shown that essential to family resilience are social connections, knowledge of parenting and of child and youth development, parental resilience, and concrete support in times of need. All of these can be made available to families through adoptive parent support groups. All of the post adoption services counselors are connected to one of the support groups in their area and assist with providing local community resource persons as speakers for one or more of the support group meetings during the year. Each teen support group has an adoption competent mental health professional facilitating.

#### Adoption Competency

Adoption competent mental health professionals are mental health professionals who have completed the Rutgers *Adoption Competency* or an equivalent curriculum and provide educational and therapeutic services

for adoptive families. The educational and therapeutic services focus on strengthening relationships within the family unit and assist families in understanding the developmental stages of adoption and how adoption impacts each family member and the family as a unit.

During State Fiscal Year 2012 – 2013, three more trainers of the Rutgers University Adoption Competency curricula were transferred to new positions. Therefore, limited training occurred during the past State Fiscal Year. More trainers are needed in order to continually build a sufficient number of mental health professionals who are adoption competent. A third train the trainer class was held during June 2014 and July 2014. In addition to losing trainers for the curricula, mental health professionals who completed the training moved to new positions and some are no longer accepting the Medicaid adoptive families utilize. For adoptive families in some areas of the state, this has created a significant loss of a needed service. The Department of Children and Families was able to provide train the trainer for approximately 35 new trainers. These trainers will start training Mental Health professionals in their local area during State Fiscal Year 2014 – 2015.

Fortunately, the Department of Children and Families has been able to provide, at no cost to the trainees, Certified Educational Units (CEUs) for each mental health professional who is licensed and needs the training hours for continued licensure. This has been an incentive for mental health professionals to attend the Adoption Competency training. Table 21 describes by circuit, the mental health professionals who completed the adoption competency training this past State Fiscal Year, with 87 new mental health professionals established statewide.

 The post adoption staff has stated that many mental health professionals who completed the training over a year ago are no longer in their county or are no longer working for the Medicaid provider or community mental health center.

Table 21. Quantity of New Adoption Competent Mental Health Professionals by Circuit

Circuit	Number of New Adoption Competent Mental Health Professionals
Circuit 1	0
Circuit 2	0
Circuit 3	0
Circuit 4	2
Circuit 5	0
Circuit 6	0
Circuit 7	4
Circuit 8	0
Circuit 9	37
Circuit 10	10
Circuit 11	0
Circuit 12	10
Circuit 13	3
Circuit 14	0
Circuit 15	0
Circuit 16	0
Circuit 17	0
Circuit 18	18
Circuit 19	3
Circuit 20	0
Statewide Total	87

#### **Post Adoption Services Counselors**

A post adoption services counselor is a staff person designated to respond to the requests and service needs of adoptive parents and their families after adoption finalizations have occurred. The response to requests

and service needs should include, at a minimum, information and referrals with local resources, assistance to child protective investigators when an investigation involves an adoptive parent, temporary case management, assistance with subsidy and Medicaid issues and assistance in establishing and maintaining one or more adoptive parent support groups.

All post adoption services staff assisted child protective investigators when an investigation involved an adoptive family. The post adoption services counselor assisted by conducting an assessment of the needs and potential services for the adopted child and adoptive family.

- It is significant that 47 adoption services staff have been identified to assist adoptive parents and their families, which is an increase of 7 positions from last year.
- Four circuits continue to assign the responsibilities for post adoption services to one or more staff as a part of their job duties rather than having at least one full time position for post adoption services.
- As noted, additional positions are being identified, including full and part time positions.

Table 22. Quantity of Post Adoption Services Counselors by Circuit

Circuit	Total Number of Post Adoption Services Counselors	Number of Full Time Post Adoption Services Counselors	Number of Part Time/Partial Job Duty Post Adoption Services Counselors
Circuit 1	5	3	2
Circuit 2	1	1	0
Circuit 3	1	1	0
Circuit 4	6	6	0
Circuit 5	2	2	0
Circuit 6	2	0	2
Circuit 7	2	2	0
Circuit 8	1	1	0
Circuit 9	2	2	2
Circuit 10	1	1	0
Circuit 11	3	0	3
Circuit 12	9	0	9
Circuit 13	2	2	0
Circuit 14	1	1	0
Circuit 15	1	1	0
Circuit 16	1	0	1
Circuit 17	1	1	0
Circuit 18	3	2	1
Circuit 19	1	1	0
Circuit 20	2	2	0
Statewide Total	47	29	18

With over 3,000 children adopted from foster care during each of the last nine years, one or more full time designated post adoption services counselors in each circuit are critical for responding timely to the service needs of adoptive families. The State of Florida and its partners are committed to providing a sufficient and accessible array of post adoption services in each circuit including information and referral services, temporary case management, assistance with assessments during investigations, assistance with subsidy and Medicaid issues and assistance in maintaining one or more adoptive parent support groups for the many adoptive families who face significant challenges as their adoptive children age and experience the various developmental milestones.

# PART 3 – AGENCY RECOMMENDATIONS AND REQUESTS

The following is a summary of the policy and budget recommendations as submitted to the Governor's Office of Adoption and Child Protection, by the various affected state agencies for the further development of services and programs for the promotion of adoption, support of adoptive families and prevention of child abuse and neglect. This summary is by no means to be considered all-inclusive, by error or intent.

The agencies recommendations are listed in alphabetical order by agency name. This order does not reflect in any way the priorities of the Executive Office of the Governor, or the Office of Adoption and Child Protection. This summary of agency recommendations may or may not even reflect the priorities of an agency, but it does show their level of commitment to these particular issues. By identifying the different, and sometimes similar, recommendations among the various state agencies, a dialogue will be created, duplicity of effort will diminish and better cooperation and collaboration between the agencies will be the result.

The state agencies below provided policy and budget recommendations related to the prevention of abuse, abandonment and neglect, the promotion of adoption, and the support of adoptive families. The Governor's Office of Adoption and Child Protection appreciates the time, resources, and support that each of the agencies invested into creating their recommendations and submissions. These recommendations are summarized below by state agency.

# **Agency for Health Care Administration**

Medicaid provides health insurance for children adopted from foster care, providing comprehensive coverage of medically necessary medical, behavioral health, and dental care services at no cost to the family. This benefit lends strong support for adoptions. We have no further recommendations at this time.

# **Agency for Persons with Disabilities**

During the 2015 Legislative Session, the Governor and the Legislature gave the Agency \$40.1 million dollars in total funds between General Revenue and the Trust Fund for moving clients from the waiting list to the Home and Community Based (HCBS) Medicaid Waiver. One of the categories within the waiting list is Children in the system that are being adopted or reunified.

The Agency priority is to move these children that are in foster care from the APD waiting list to the waiver when an adoption or reunification has been deemed imminent by the court. Potential adoptive and reunified parents have the assurance that APD will provide Medicaid Waiver funds, which further enhances the decision to adopt a child with special needs.

Further funding of the APD waiting list will ensure that the trend of moving foster children with known adoption or reunification dates will continue.

# **Department of Children and Families**

#### **Maintenance Adoption Subsidy**

The Department recognizes that maintenance adoption subsidies (MAS) enable families to consider adoption of special needs children who have been traumatized by abuse and neglect, are unable to safely return home to their birth parents and must remain in foster care until an approved adoptive family has been identified. Subsidies have enabled a new population of families to adopt special needs children, especially foster parents and relative caregivers who develop a committed and nurturing relationship with these children. As a result, thousands of children each year are being nurtured by permanent adoptive families in Florida's communities rather than being raised in foster care. At this time, there are over 35,000 children receiving maintenance adoption subsidies.

- 1. The Department requests \$6,733,138 of budget authority; \$2,444,177 in General Revenue; \$3,095,199 in Federal Grants and Trust Fund; and \$1,193,762 from the Welfare Transition Trust Fund to annualize funding and cover growth for maintenance adoption subsidies in Fiscal Year 2016-2017.
- MAS Benefits Received For Eligible Children, s.409.166(4)(b), F.S.,
  - A. Subsidies of \$5,000 annually or an amount agreed upon by the adoptive parents and the Department. This amount may be adjusted or enhanced based on the increased needs of a child. For example, a child with multiple physical problems or severe/increasing mental health issues may need additional services over time, especially as the child becomes an adolescent when some physical and mental health issues are exacerbated.
  - B. The Legal Fee for Finalization is a one-time payment that the State is able to provide up to \$1,000 per child per adoption for the costs/expenses related to adopting a foster child such as court costs, attorney fees, new birth certificate, and travel for the parent if required.
- 2. Total Need for Fiscal Year 2016-2017 fiscal year is \$191,079,823; Recurring Appropriation 2015-2016 \$184,346; Additional Request \$6,733,138

#### **Prevention**

For the funding of prevention services the Department requests \$28,380,263 of budget authority; \$19,114,251 from the General Revenue Fund, \$1,488,375 from the Federal Grants Trust Fund and \$7,777,637 from the Welfare Transition Trust Fund to be provided for the Healthy Families Florida Program. This includes just under \$2 million new dollars to fund a high risk enhancement to Healthy Families Florida core services that is designed to increase the number of participants with mental health, domestic violence, and substance abuse issues who will accept in-home therapeutic counseling services.

#### **Annual Post Adoption Survey**

The Department recognizes the post adoption services are essential for adopted children and families. Therefore, Department would recommend the development and distribution of annual surveys to families post adoption finalization that measures the availability of at least one designated post adoption specialist, services, support groups and trainings in their area. The annual post adoption survey will also be used to identify strengths and weakness in services offered to adopted families, as well as any gaps in post adoption services.

#### **Updated Adoption Competency Curriculum**

In 2009, the Department of Children and Families, along with Rutgers University, collaborated to bring Florida a statewide adoption competency curriculum for mental health professional. The curriculum was

created due to the lack of adoption competent mental health professionals in the State of Florida. Over the past 5 years the Department of Children and Families and the Community Base Care Agencies have provided mental health professionals adoption competency training to better prepare them in providing post adoption services to the adoptive families of Florida.

The Department recommends that an updated Adoption Competency Training curriculum be created in order to incorporate new practices regarding adopted families, such as a trauma informed care, and continued training of the core set of adoption competency areas throughout the state of Florida, taught by certified Adoption Competency Trainers.

#### **Prevention Services**

Federal requirements include the utilization of Community Based Child Abuse Prevention (CBCAP) funds to develop, operate, expand, enhance and coordinate initiatives, programs and activities to prevent child abuse and neglect and to support the coordination of resources and activities to better strengthen and support families to reduce the likelihood of child maltreatment and neglect.

In February 2015 the Department began surveying Community Based Care Organizations regarding their service needs and service availability as it relates to Family Support Services, Formal Safety Services and Informal Safety Services. Based on the responses of the Community Based Care Organizations the Department identified a need for increased services for children determined to be safe but at high or very high risk of future child maltreatment. The Department recognized the need to enhance community-based, prevention focused programs and activities designed to strengthen and support families to prevent child abuse and neglect and the removal of children from their homes.

During the Fiscal Year 2015/2016 the Department will seek to select proposals meeting these requirements and contract with Community Based Care Lead Agencies to begin implementing selected programs and evaluating their impact and effectiveness. Programs selected will provide a service or implement a program that demonstrates an acceptable level of evidence-based or evidence-informed practice, promote the enhancement of caregiver protective capacities and place a strong emphasis on program accountability and evaluation. Funds from the Community Based Child Abuse Prevention Grant will be allocated for these programs.

# **Department of Corrections**

The Governor's Office of Adoption and Child Protection's overarching goal is that "All families and communities ensure that children are safe and nurtured and live in stable environments that promote well-being." As outlined in the 2014 Annual Report, strengthening families' protective factors to reduce incidences of child abuse and neglect by providing parents with effective parenting strategies coincides with the Florida Department of Corrections (Department) family reunification and parenting efforts. Some of the Strengthening Families concepts (e.g., parenting and child development; parental resilience and social and emotional competence of children) were integrated in the Department of Corrections' Parenting from Inside curriculum. This curriculum is currently being offered in several institutions throughout the state.

• The Department of Corrections commits to disseminating the Protective Factor literature through the Parenting from Inside program and providing the Protective Factor handouts to each library for use by the inmate population. Protective factors are conditions (skills,

- strengths, resources, supports or coping strategies) in individuals, families, communities or the larger society that help people deal more effectively with stressful events to help mitigate risk in families and communities.
- The Department will continue to support organizations that foster positive family reunification efforts in an effort to strengthen families.
- The Department is committed to the continued development of quality family needs programming.

Furthermore, as addressed by the Center for the Study of Social Policy, "When ex-offenders are engaged in their communities, working and supporting their families, the community is safer and their families are more economically secure." The Department delivers comprehensive education and employment programming to the incarcerated, and provides connections to employment services post-release. For exoffenders on supervision, the Department works with local judges to implement alternative sanctions that keep them in community, connected to family and employment.

# **Department of Education**

In 2015, the department continued its participation in the Child Abuse Prevention and Permanency (CAPP) Council with support from all relevant bureaus and program areas; specifically, the Bureau of Exceptional Education and Student Services, the Bureau of Standards and Instructional Support and the Bureau of Family and Community Outreach. The department's efforts have included securing federal grant funds that will be used in part to combat trafficking of children, to promote child abuse prevention resources via training sessions and our agency website, and to provide technical assistance to school district administrators on compliance with the current anti-bullying statute.

At this time, the department has no further recommendations related to CAPP activities and will not be submitting a budget request for this area.

# **Department of Health**

# **Promotion of Adoption; Support of Adoptive Families**

• Children's Medical Services Managed Care Plan Current practice: Adopted children are automatically eligible for Medicaid. If a child is clinically eligible for the CMS Managed Care Plan, the Plan would ensure services are provided pursuant to section 391.029(4), Florida Statutes. Clinical eligibility is necessary for a child to remain in the Children's Medical Services Managed Care Plan.

§391.029 (4) – Program Eligibility: "Any child who has been provided with surgical or medical care or treatment under this act prior to being adopted and has serious and chronic special health needs shall continue to be eligible to be provided with such care or treatment after his or her adoption, regardless of the financial ability of the persons adopting the child."

• Maternal and Child Health Section

Current Practice: Support for prevention of child abuse and neglect, adoptive families, and those wishing to place their children through the Healthy Start Program. The Healthy Start Program provides resources to mothers who are considering placing a child for adoption, provides infant services to adoptive parents if the infant is at risk for health or developmental problems, provides parenting education which includes stress management, infant / child growth and development, shaken baby syndrome, conducts referrals for mental health counseling and other services as needed. <a href="http://www.floridahealth.gov/programs-and-services/childrens-health/healthy-start/">http://www.floridahealth.gov/programs-and-services/childrens-health/healthy-start/</a>

#### Prevention of Child Maltreatment (Abuse, Neglect, and Medical Neglect)

- Child Abuse Death Review Committee (CADR) Prevention Strategies
  The CADR's 2015 Annual Report identifies three primary issues related to preventable child
  maltreatment deaths:
  - 1. Water Safety
  - 2. Safe Sleep Practices
  - 3. Positive Parenting Practices (to address physical abuse)

The following represents a broad overview of prevention strategies developed by CADR to address child maltreatment:

- Education and Awareness Campaigns directed to public, caregivers and highrisk populations
- Direct Service Strategies
  - Train service staff in child safety practices
  - Educate parents on child development, positive parenting and long-term effects of child maltreatment
- State and Community-Level Strategies
  - Build parental capacity
  - Develop laws, policies, and procedures that take into consideration potentially high-risk situations and disseminate community-level information accordingly (i.e., water safety councils, faith-based organizations, birth centers/hospitals, child advocacy centers)
  - Monitor products marketed to children and communicate safety information, if warranted
  - Encourage community-based agencies, in-home service providers, and other organizations that provide services to children and families should provide training on evidence-based Motivational Interviewing (MI) practices to direct-service staff working with high-risk target populations
- Child Safety Collaborative Improvement and Innovation Network (CS CoIIN) In 2015, the Florida Department of Health was selected by the U.S. Department of Health and Human Services to participate in the CS CoIIN, which is a national initiative that serves to make advances in child safety and reduce child injuries. One of the focus areas for Florida will be injuries due to neglect and abuse that directly contribute to morbidity and mortality as well as increase risks for future adverse health behaviors and outcomes.
- CMS Child Protection Teams
  - o Educate and promote protective behaviors via communication media
    - Example: when funding is available, "Coping with Crying" and "Safe Sleep for Your Infant" pamphlets are sent to Florida birth centers for distribution to caregivers of newborns

- o Trainings conducted by Florida Child Protection Teams
  - Trainings for healthcare professionals: increase/enhance knowledge and skills regarding the identification of child maltreatment; requirements and methods of reporting child maltreatment; and the implementation of prevention/intervention best practices, and evidence-based strategies
  - Trainings for caregivers and general public: increase/enhance knowledge and skills to support protective behaviors and environments for children
- Informative and Supportive Research/Analysis of Factors Associated with Child Maltreatment and Child Maltreatment Outcomes
  - e.g., children who are in poor health, have chronic illnesses/disease, or were born with congenital anomalies are more likely to suffer maltreatment; children who have adverse childhood experiences are at increased risk of disease, death and poor quality of life as adults
- Evaluation and Assessment of Practices, Program Activities and Initiatives that Address Child Maltreatment
- Participation and Support of External Initiatives and Programs
  - Data consultant/advisement for the Department of Children and Families for DCF sponsored analytic projects
- Bureau of Family Health Services
  - The Maternal and Child Health Section supports prevention of Sudden Unexpected Infant Death through the Healthy Start Program and the County Health Departments by educating caregivers on safe sleep practices.
  - The DOH collaborates with the Department of Children and Families and promotes their Safe Sleep Campaign – <a href="http://www.myflfamilies.com/service-programs/child-welfare/safesleep">http://www.myflfamilies.com/service-programs/child-welfare/safesleep</a>
  - o Participation in HRSA's Infant Mortality CoIIN, which has a safe infant sleep component (Children's Medical Services participates as well).
- Sexual Violence Prevention Program
  - The Sexual Violence Prevention Program supports prevention of violence of all types (including child abuse) by implementing an evidence informed, evidence based curriculum to reduce personal power based violence. The curriculum, the Green Dot Strategy (GDS) capitalizes on the power of peer and cultural and focuses on all community members as potential bystanders, and seeks to engage them, through awareness, education, and skills-practice, in proactive behaviors that establish intolerance of violence as the norm, as well as reactive interventions in high-risk situations resulting in the ultimate reduction of violence. Entities learning and implementing the curriculum include: Universities, High Schools and Certified Rape Crisis Centers. <a href="http://www.livethegreendot.com/index.html">http://www.livethegreendot.com/index.html</a>
- Public Dental Health Program
  - Sealing Sunny Smiles Across Florida Dental Sealants to Prevent Dental Decay www.flhealth.gov/dental/sealant.html and https://youtu.be/Ukmpx7rd8pE
- Teen Pregnancy Prevention <a href="http://www.cdc.gov/teenpregnancy/about/index.htm">http://www.acf.hhs.gov/programs/fysb/resource/aegp-fact-sheet</a>

- Prevention of Unintended or Unwanted Pregnancies https://www.guttmacher.org/pubs/FB-Unintended-Pregnancy-US.html
- Bureau of Women, Infants and Children (WIC)
   Current Practice: Support for adoptive families who have children that are eligible for WIC\* in the following ways:
  - Prevention of malnutrition, anemia, and overweight/obesity in children who are on WIC. WIC services include the provision of nutritious foods, individualized nutrition assessment and counseling by a nutrition professional, and referral to health and social services.
  - Choking risk, food safety issues, and immunization status are also assessed for all children on WIC.
  - Florida WIC handouts, available on the Florida WIC internet site, include ageappropriate nutrition advice, choking prevention recommendations, food safety tips, and the importance of immunizations.

\*Children must meet the following requirements to be eligible to receive WIC services: be 0-5 years of age, at nutrition risk, resident of Florida, and income eligible. References for the FL WIC program: http://www.FloridaWIC.org, http://www.floridahealth.gov/programs-and-services/wic/wic-eligibility.html, http://www.floridahealth.gov/programs-and-services/wic/nutrition-materials/index.html

- Eyes on the Kids <a href="http://www.myflfamilies.com/service-programs/child-welfare/water-safety-tips">http://www.myflfamilies.com/service-programs/child-welfare/water-safety-tips</a>
- Who's Really Watching Your Child <a href="http://www.myflfamilies.com/service-programs/child-welfare/whoswatching">http://www.myflfamilies.com/service-programs/child-welfare/whoswatching</a>
- Summer Safety Tips High Temperatures and Hot Cars <a href="http://www.myflfamilies.com/service-programs/child-welfare/high-temperatures">http://www.myflfamilies.com/service-programs/child-welfare/high-temperatures</a>

# **Department of Juvenile Justice**

• The Department is seeking for fiscal year 2016-2017 recurring funding in the amount of \$1.3 million to support 75 additional slots for the PACE Center for Girls to provide prevention and early intervention services, improve girls' success in school, home and their community and stem the tide of girls referred to the juvenile justice system. Most girls entering the juvenile justice system are non-violent, but high-need, with histories of trauma, violence, neglect, mental and physical problems, family conflict, residential and academic instability, and school failure. In particular, school failure and dropout are risk factors for multiple problematic outcomes among girls, including delinquency. Of the girls who attended PACE in 2014-2015, 33% had previously been suspended from school, 29% coped with a learning disability and 5% had been expelled. Of the participants who completed the PACE program, 90% had no involvement in the criminal justice system

- one year after completion of the program and 85% were in school or employed one year after transitioning from PACE.
- The Florida Department of Juvenile Justice continues its participation and development of The Crossover Youth Practice Model (CYPM), a collaboration between DJJ and DCF, led by Georgetown University, which provides communication, joint case management, shared early intervention, and comprehensive services for foster care youth involved in the juvenile justice system to reduce delinquency and improve outcomes. Dually-served youth, those in both the child welfare system and the delinquency system need careful and competent joint case management. The support of this high-risk population results in fewer delinquent events and better outcomes for these youth. The CYPM has been implemented in Judicial Circuits 4, 5, 7, 10, 11, 17 and 18.

# **Department of Law Enforcement**

The Department of Law Enforcement has no budget requests or recommendations at this time.

# **Guardian ad Litem**

Priority #1 – This issue seeks slightly more than \$1 million to establish 19 new FTEs to represent the dramatic increase in children removed from their homes. Without this funding, the program will be unable to recruit, train and oversee additional volunteers to advocate for the best interests of foster children. The GAL Program has already exceeded its capacity to represent all children in out-of-home care, and needs this funding in order to meet the increased workload. Governor Rick Scott has recommended funding of this issue in his Recommended Budget for FY 16-17.

Priority #2 – This issue requests \$1.36 million and 25.5 FTEs to enable the GAL Program to represent children ages 0 to 3 years of age in in-home care. These children have been abused and neglected but remain in the home of their caregiver under court supervision and a safety plan.

Priority #3 – This issue seeks \$576,000 to establish a program of certification and training for professional employees of the GAL Program. In cooperation with the Florida Certification Board, this initiative will establish: a uniform set of quality and ethical standards; enhanced training, competency testing, and professional development on child welfare issues as well as volunteer management; improved recruitment and retention of staff and volunteers; and specialized training focusing on the First 1000 Days, consistent with Children's Cabinet resolution

Priorities #4 and #5 – These two issues request a total of \$1.7 million to adjust the pay scales for Program attorneys and Professional Staff. The salaries of these staff lag far behind comparable positions in other government agencies and negatively impact our ability to recruit and retain qualified staff.

# Office of Early Learning

The Office of Early Learning has no budget requests or recommendations at this time.

# Appendix

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# Governor's Office of Adoption and Child Protection Florida Statute 39.001, Sections 8 – 12

(8) LEGISLATIVE INTENT FOR THE PREVENTION OF ABUSE, ABANDONMENT, AND NEGLECT OF CHILDREN.—The incidence of known child abuse, abandonment, and neglect has increased rapidly over the past 5 years. The impact that abuse, abandonment, or neglect has on the victimized child, siblings, family structure, and inevitably on all citizens of the state has caused the Legislature to determine that the prevention of child abuse, abandonment, and neglect shall be a priority of this state. To further this end, it is the intent of the Legislature that an Office of Adoption and Child Protection be established.

#### (9) OFFICE OF ADOPTION AND CHILD PROTECTION.—

- (a) For purposes of establishing a comprehensive statewide approach for the promotion of adoption, support of adoptive families, and prevention of child abuse, abandonment, and neglect, the Office of Adoption and Child Protection is created within the Executive Office of the Governor. The Governor shall appoint a Chief Child Advocate for the office.
- (b) The Chief Child Advocate shall:
  - 1. Assist in developing rules pertaining to the promotion of adoption, support of adoptive families, and implementation of child abuse prevention efforts.
  - 2. Act as the Governor's liaison with state agencies, other state governments, and the public and private sectors on matters that relate to the promotion of adoption, support of adoptive families, and child abuse prevention.
  - 3. Work to secure funding and other support for the state's promotion of adoption, support of adoptive families, and child abuse prevention efforts, including, but not limited to, establishing cooperative relationships among state and private agencies.
  - 4. Develop a strategic program and funding initiative that links the separate jurisdictional activities of state agencies with respect to promotion of adoption, support of adoptive families, and child abuse prevention. The office may designate lead and contributing agencies to develop such initiatives.
  - 5. Advise the Governor and the Legislature on statistics related to the promotion of adoption, support of adoptive families, and child abuse prevention trends in this state; the status of current adoption programs and services, current child abuse prevention programs and services, the funding of adoption, support of adoptive families, and child abuse prevention programs and services; and the status of the office with regard to the development and implementation of the state strategy for the promotion of adoption, support of adoptive families, and child abuse prevention.
  - 6. Develop public awareness campaigns to be implemented throughout the state for the promotion of adoption, support of adoptive families, and child abuse prevention.
- (c) The office is authorized and directed to:

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- 1. Oversee the preparation and implementation of the state plan established under subsection (10) and revise and update the state plan as necessary.
- 2. Provide for or make available continuing professional education and training in the prevention of child abuse and neglect.
- 3. Work to secure funding in the form of appropriations, gifts, and grants from the state, the Federal Government, and other public and private sources in order to ensure that sufficient funds are available for the promotion of adoption, support of adoptive families, and child abuse prevention efforts.
- 4. Make recommendations pertaining to agreements or contracts for the establishment and development of:
  - a. Programs and services for the promotion of adoption, support of adoptive families, and prevention of child abuse and neglect.
  - b. Training programs for the prevention of child abuse and neglect.
  - c. Multidisciplinary and discipline-specific training programs for professionals with responsibilities affecting children, young adults, and families.
  - d. Efforts to promote adoption.
  - e. Postadoptive services to support adoptive families.
- 5. Monitor, evaluate, and review the development and quality of local and statewide services and programs for the promotion of adoption, support of adoptive families, and prevention of child abuse and neglect and shall publish and distribute an annual report of its findings on or before January 1 of each year to the Governor, the Speaker of the House of Representatives, the President of the Senate, the head of each state agency affected by the report, and the appropriate substantive committees of the Legislature. The report shall include:
  - a. A summary of the activities of the office.
  - b. A summary of the adoption data collected and reported to the federal Adoption and Foster Care Analysis and Reporting System (AFCARS) and the federal Administration for Children and Families.
  - c. A summary of the child abuse prevention data collected and reported to the National Child Abuse and Neglect Data System (NCANDS) and the federal Administration for Children and Families.
  - d. A summary detailing the timeliness of the adoption process for children adopted from within the child welfare system.
  - e. Recommendations, by state agency, for the further development and improvement of services and programs for the promotion of adoption, support of adoptive families, and prevention of child abuse and neglect.

- f. Budget requests, adoption promotion and support needs, and child abuse prevention program needs by state agency.
- 6. Work with the direct-support organization established under s. <u>39.0011</u> to receive financial assistance.

#### (10) PLAN FOR COMPREHENSIVE APPROACH.—

- The office shall develop a state plan for the promotion of adoption, support of adoptive families, and prevention of abuse, abandonment, and neglect of children and shall submit the state plan to the Speaker of the House of Representatives, the President of the Senate, and the Governor no later than December 31, 2008. The Department of Children and Families, the Department of Corrections, the Department of Education, the Department of Health, the Department of Juvenile Justice, the Department of Law Enforcement, and the Agency for Persons with Disabilities shall participate and fully cooperate in the development of the state plan at both the state and local levels. Furthermore, appropriate local agencies and organizations shall be provided an opportunity to participate in the development of the state plan at the local level. Appropriate local groups and organizations shall include, but not be limited to, community mental health centers; guardian ad litem programs for children under the circuit court; the school boards of the local school districts; the Florida local advocacy councils; community-based care lead agencies; private or public organizations or programs with recognized expertise in working with child abuse prevention programs for children and families; private or public organizations or programs with recognized expertise in working with children who are sexually abused, physically abused, emotionally abused, abandoned, or neglected and with expertise in working with the families of such children; private or public programs or organizations with expertise in maternal and infant health care; multidisciplinary child protection teams; child day care centers; law enforcement agencies; and the circuit courts, when guardian ad litem programs are not available in the local area. The state plan to be provided to the Legislature and the Governor shall include, as a minimum, the information required of the various groups in paragraph (b).
- (b) The development of the state plan shall be accomplished in the following manner:
  - 1. The office shall establish a Child Abuse Prevention and Permanency Advisory Council composed of an adoptive parent who has adopted a child from within the child welfare system and representatives from each state agency and appropriate local agencies and organizations specified in paragraph (a). The advisory council shall serve as the research arm of the office and shall be responsible for:
    - a. Assisting in developing a plan of action for better coordination and integration of the goals, activities, and funding pertaining to the promotion and support of adoption and the prevention of child abuse, abandonment, and neglect conducted by the office in order to maximize staff and resources at the state level. The plan of action shall be included in the state plan.
    - b. Assisting in providing a basic format to be utilized by the districts in the preparation of local plans of action in order to provide for uniformity in the district plans and to provide for greater ease in compiling information for the state plan.
    - c. Providing the districts with technical assistance in the development of local plans of action, if requested.

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- d. Assisting in examining the local plans to determine if all the requirements of the local plans have been met and, if they have not, informing the districts of the deficiencies and requesting the additional information needed.
- e. Assisting in preparing the state plan for submission to the Legislature and the Governor. Such preparation shall include the incorporation into the state plan of information obtained from the local plans, the cooperative plans with the members of the advisory council, and the plan of action for coordination and integration of state departmental activities. The state plan shall include a section reflecting general conditions and needs, an analysis of variations based on population or geographic areas, identified problems, and recommendations for change. In essence, the state plan shall provide an analysis and summary of each element of the local plans to provide a statewide perspective. The state plan shall also include each separate local plan of action.
- f. Conducting a feasibility study on the establishment of a Children's Cabinet.
- g. Working with the specified state agency in fulfilling the requirements of subparagraphs 2., 3., 4., and 5.
- 2. The office, the department, the Department of Education, and the Department of Health shall work together in developing ways to inform and instruct parents of school children and appropriate district school personnel in all school districts in the detection of child abuse, abandonment, and neglect and in the proper action that should be taken in a suspected case of child abuse, abandonment, or neglect, and in caring for a child's needs after a report is made. The plan for accomplishing this end shall be included in the state plan.
- 3. The office, the department, the Department of Law Enforcement, and the Department of Health shall work together in developing ways to inform and instruct appropriate local law enforcement personnel in the detection of child abuse, abandonment, and neglect and in the proper action that should be taken in a suspected case of child abuse, abandonment, or neglect.
- 4. Within existing appropriations, the office shall work with other appropriate public and private agencies to emphasize efforts to educate the general public about the problem of and ways to detect child abuse, abandonment, and neglect and in the proper action that should be taken in a suspected case of child abuse, abandonment, or neglect. The plan for accomplishing this end shall be included in the state plan.
- 5. The office, the department, the Department of Education, and the Department of Health shall work together on the enhancement or adaptation of curriculum materials to assist instructional personnel in providing instruction through a multidisciplinary approach on the identification, intervention, and prevention of child abuse, abandonment, and neglect. The curriculum materials shall be geared toward a sequential program of instruction at the four progressional levels, K-3, 4-6, 7-9, and 10-12. Strategies for encouraging all school districts to utilize the curriculum are to be included in the state plan for the prevention of child abuse, abandonment, and neglect.
- 6. Each district of the department shall develop a plan for its specific geographical area. The plan developed at the district level shall be submitted to the advisory council for utilization

in preparing the state plan. The district local plan of action shall be prepared with the involvement and assistance of the local agencies and organizations listed in this paragraph, as well as representatives from those departmental district offices participating in the promotion of adoption, support of adoptive families, and treatment and prevention of child abuse, abandonment, and neglect. In order to accomplish this, the office shall establish a task force on the promotion of adoption, support of adoptive families, and prevention of child abuse, abandonment, and neglect. The office shall appoint the members of the task force in accordance with the membership requirements of this section. The office shall ensure that individuals from both urban and rural areas and an adoptive parent who has adopted a child from within the child welfare system are represented on the task force. The task force shall develop a written statement clearly identifying its operating procedures, purpose, overall responsibilities, and method of meeting responsibilities. The district plan of action to be prepared by the task force shall include, but shall not be limited to:

- a. Documentation of the magnitude of the problems of child abuse, including sexual abuse, physical abuse, and emotional abuse, and child abandonment and neglect in its geographical area.
- b. A description of programs currently serving abused, abandoned, and neglected children and their families and a description of programs for the prevention of child abuse, abandonment, and neglect, including information on the impact, cost-effectiveness, and sources of funding of such programs.
- c. Information concerning the number of children within the child welfare system available for adoption who need child-specific adoption promotion efforts.
- d. A description of programs currently promoting and supporting adoptive families, including information on the impact, cost-effectiveness, and sources of funding of such programs.
- e. A description of a comprehensive approach for providing postadoption services. The continuum of services shall include, but not be limited to, sufficient and accessible parent and teen support groups; case management, information, and referral services; and educational advocacy.
- f. A continuum of programs and services necessary for a comprehensive approach to the promotion of adoption and the prevention of all types of child abuse, abandonment, and neglect as well as a brief description of such programs and services.
- g. A description, documentation, and priority ranking of local needs related to the promotion of adoption, support of adoptive families, and prevention of child abuse, abandonment, and neglect based upon the continuum of programs and services.
- h. A plan for steps to be taken in meeting identified needs, including the coordination and integration of services to avoid unnecessary duplication and cost, and for alternative funding strategies for meeting needs through the reallocation of existing resources, utilization of volunteers, contracting with local universities for services, and local government or private agency funding.

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- A description of barriers to the accomplishment of a comprehensive approach to the promotion of adoption, support of adoptive families, and prevention of child abuse, abandonment, and neglect.
- j. Recommendations for changes that can be accomplished only at the state program level or by legislative action.

#### (11) FUNDING AND SUBSEQUENT PLANS.—

- (a) All budget requests submitted by the office, the department, the Department of Health, the Department of Education, the Department of Juvenile Justice, the Department of Corrections, the Agency for Persons with Disabilities, or any other agency to the Legislature for funding of efforts for the promotion of adoption, support of adoptive families, and prevention of child abuse, abandonment, and neglect shall be based on the state plan developed pursuant to this section.
- (b) The office and the other agencies and organizations listed in paragraph (10)(a) shall readdress the state plan and make necessary revisions every 5 years, at a minimum. Such revisions shall be submitted to the Speaker of the House of Representatives and the President of the Senate no later than June 30 of each year divisible by 5. At least biennially, the office shall review the state plan and make any necessary revisions based on changing needs and program evaluation results. An annual progress report shall be submitted to update the state plan in the years between the 5-year intervals. In order to avoid duplication of effort, these required plans may be made a part of or merged with other plans required by either the state or Federal Government, so long as the portions of the other state or Federal Government plan that constitute the state plan for the promotion of adoption, support of adoptive families, and prevention of child abuse, abandonment, and neglect are clearly identified as such and are provided to the Speaker of the House of Representatives and the President of the Senate as required under this section.
- (12) LIBERAL CONSTRUCTION.—It is the intent of the Legislature that this chapter be liberally interpreted and construed in conformity with its declared purposes.

**History.**—s. 1, ch. 26880, 1951; s. 1, ch. 73-231; s. 1, ch. 78-414; s. 1, ch. 82-62; s. 62, ch. 85-81; s. 1, ch. 85-206; s. 10, ch. 85-248; s. 19, ch. 86-220; s. 1, ch. 90-53; ss. 1, 2, ch. 90-208; s. 2, ch. 90-306; s. 2, ch. 91-33; s. 68, ch. 91-45; s. 13, ch. 91-57; s. 5, ch. 93-156; s. 23, ch. 93-200; s. 19, ch. 93-230; s. 14, ch. 94-134; s. 14, ch. 94-135; ss. 9, 10, ch. 94-209; s. 1332, ch. 95-147; s. 7, ch. 95-152; s. 8, ch. 95-158; ss. 15, 30, ch. 95-228; s. 116, ch. 95-418; s. 1, ch. 96-268; ss. 128, 156, ch. 97-101; s. 69, ch. 97-103; s. 3, ch. 97-237; s. 119, ch. 97-238; s. 8, ch. 98-137; s. 18, ch. 98-403; s. 1, ch. 99-193; s. 13, ch. 2000-139; s. 5, ch. 2000-151; s. 5, ch. 2000-263; s. 34, ch. 2004-267; s. 2, ch. 2006-97; s. 1, ch. 2006-194; s. 2, ch. 2006-227; s. 1, ch. 2007-124; s. 3, ch. 2008-6; s. 1, ch. 2010-114; s. 42, ch. 2011-142; s. 2, ch. 2012-105; s. 19, ch. 2012-116; s. 4, ch. 2013-15; s. 9, ch. 2014-19; s. 2, ch. 2014-224.

**Note.**—Former s. 39.20; subsections (3), (5), and (6) former s. 39.002, s. 409.70, subsections (7)-(9) former s. 415.501.

# Florida Children and Youth Cabinet Florida Statute 402.56

- (1) SHORT TITLE.—This act may be cited as the "Children and Youth Cabinet Act."
- (2) LEGISLATIVE FINDINGS AND INTENT.—
  - (a) The Legislature finds that all state agencies and programs that touch the lives of children and youth must work in a coordinated and comprehensive fashion, with an emphasis on providing a continuum of services that benefit children from prenatal care through programs supporting successful transition to self-sufficient adulthood. The Legislature further finds that creating a Children and Youth Cabinet is the best method by which the state might achieve the visions and plans necessary to ensure that this state is the first place families think of when asked, "Where do you want to raise a child?"
  - (b) The Legislature, in collaboration with the Governor, intends to develop and implement a shared vision among the branches of government in order to improve child and family outcomes in this state. By working collaboratively, the Legislature intends to invest in the education and skills of our children and youth, develop a cohesive vision and plan that ensures a long-term commitment to children and youth issues, align public resources serving children and youth to support their healthy growth and development, and promote increased efficiency and improved service delivery by all governmental agencies that provide services for children, youth, and their families.
- (3) ORGANIZATION.—There is created the Children and Youth Cabinet, which is a coordinating council as defined in s. 20.03.
  - (a) The cabinet shall ensure that the public policy of this state relating to children and youth is developed to promote interdepartmental collaboration and program implementation in order that services designed for children and youth are planned, managed, and delivered in a holistic and integrated manner to improve the children's self-sufficiency, safety, economic stability, health, and quality of life.
  - (b) The cabinet is created in the Executive Office of the Governor, which shall provide administrative support and service to the cabinet.
  - (c) The cabinet shall meet at least four times each year, but no more than six times each year, in different regions of the state in order to solicit input from the public and any other individual offering testimony relevant to the issues considered. Each meeting must include a public comment session.
- (4) MEMBERS.—The cabinet shall consist of 14 members including the Governor and the following persons:
  - (a) 1. The Secretary of Children and Families;
    - 2. The Secretary of Juvenile Justice;
    - 3. The director of the Agency for Persons with Disabilities;
    - 4. The director of the Office of Early Learning;
    - 5. The State Surgeon General;
    - 6. The Secretary of Health Care Administration;

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- 7. The Commissioner of Education;
- 8. The director of the Statewide Guardian Ad Litem Office:
- 9. The director of the Office of Child Abuse Prevention; and
- 10. Five members representing children and youth advocacy organizations, who are not service providers and who are appointed by the Governor.
- (b) The President of the Senate, the Speaker of the House of Representatives, the Chief Justice of the Supreme Court, the Attorney General, and the Chief Financial Officer, or their appointed designees, shall serve as ex officio members of the cabinet.
- (c) The Governor or the Governor's designee shall serve as the chair of the cabinet.
- (d)Nongovernmental members of the cabinet shall serve without compensation, but are entitled to receive per diem and travel expenses in accordance with s. <u>112.061</u> while in performance of their duties.
- (5) DUTIES AND RESPONSIBILITIES.—The Children and Youth Cabinet shall:
  - (a) Develop and implement a shared and cohesive vision using integrated services to improve child, youth, and family outcomes in this state.
  - (b) Develop, no later than December 31, 2007, a strategic plan to achieve the goals of the shared and cohesive vision. The plan shall be centered upon a long-term commitment to children and youth issues and align all public resources to serve children and youth and their families in a manner that supports the healthy growth and development of children. The plan shall prepare the children and youth to be responsible citizens and productive members of the workforce. The plan shall include a continuum of services that will benefit children from prenatal care through services for youth in transition to adulthood.
  - (c) Develop and implement measurable outcomes for each state department, agency, and program that are consistent with the strategic plan. The cabinet shall establish a baseline measurement for each outcome and regularly report on the progress made toward achieving the desired outcome.
  - (d) Design and implement actions that will promote collaboration, creativity, increased efficiency, information sharing, and improved service delivery between and within state governmental organizations that provide services for children and youth and their families. In particular, the efforts shall include the long-range planning process mandated by s. <u>216.013</u>.
  - (e) Foster public awareness of children and youth issues and develop new partners in the effort to serve children and youth.
  - (f) Create a children and youth impact statement for evaluating proposed legislation, requested appropriations, and programs. The impact statement shall be shared with the Legislature in their deliberative process.
  - (g) Identify existing and potential funding streams and resources for children's services, including, but not limited to, public funding, foundation and organization grants, and other forms of private funding opportunities, including public-private partnerships.

- (h) Develop a children-and-youth-based budget structure and nomenclature that includes all relevant departments, funding streams, and programs. The budget shall facilitate improved coordination and efficiency, explore options for and allow maximization of federal financial participation, and implement the state's vision and strategic plan.
- (i) Engage in other activities that will implement improved collaboration of agencies in order to create, manage, and promote coordinated policies, programs, and service delivery systems that support children and youth.
- (6) ADVISORY BOARD.—The Governor may appoint an advisory board to assist the cabinet in its tasks. The board shall include persons who can provide to the cabinet the best available technical and professional research and assistance. If an advisory board is created, it shall include representatives of children and youth advocacy organizations and youth, wherever practicable, who have been recipients of services and programs operated or funded by state agencies.
- (7) ANNUAL REPORT.—The Children and Youth Cabinet shall, by February 1 of each year, provide an annual report to the Governor, the President of the Senate, the Speaker of the House of Representatives, and the public concerning its activities and progress towards making this state the first place families think of when asked, "Where do they want to raise their children?" The annual report may include recommendations for needed legislation or rulemaking authority.

**History.**—s. 1, ch. 2007-151; s. 53, ch. 2008-6; s. 284, ch. 2011-142; s. 61, ch. 2012-96; s. 16, ch. 2012-178; s. 152, ch. 2014-19.

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# Florida Faith-Based and Community-Based Advisory Council Florida Statute 14.31

- (1) LEGISLATIVE FINDINGS.—The Legislature finds that:
  - (a) Compassionate groups of individuals have selflessly aided this state in serving our most vulnerable residents and our most debilitated neighborhoods.
  - (b) Inspired by faith and civic commitment, these organizations have accomplished much in changing the lives of thousands and resurrecting neighborhoods torn by the strife of crime and poverty.
  - (c) It is essential that this state cooperate with these organizations in order to provide an opportunity to participate on an equal basis, regardless of each organization's orientation, whether faith-based or secular.
- (2) LEGISLATIVE INTENT.—It is therefore the intent of the Legislature to recognize the contributions of these organizations and to encourage opportunities for faith-based and community-based organizations to work cooperatively with government entities in order to deliver services more effectively. The Legislature further intends that the purpose of the council is to advise the Governor and the Legislature on policies, priorities, and objectives for the state's comprehensive effort to enlist, equip, enable, empower, and expand the work of faith-based, volunteer, and other community organizations to the full extent permitted by law.

# (3) ESTABLISHMENT OF THE COUNCIL.—

- (a) The Florida Faith-based and Community-based Advisory Council, an advisory council as defined in s. 20.03, is established and assigned to the Executive Office of the Governor. The council shall be administratively housed within the Executive Office of the Governor.
- (b) The council shall consist of 25 members. Council members may include, but need not be limited to, representatives from various faiths, faith-based organizations, community-based organizations, foundations, corporations, and municipalities.
- (c) The council shall be composed of the following members:
  - 1. Seventeen members appointed by and serving at the pleasure of the Governor.
  - 2. Four members appointed by and serving at the pleasure of the President of the Senate.
  - 3. Four members appointed by and serving at the pleasure of the Speaker of the House of Representatives.
- (d) Council members shall serve 4-year terms, except that the initial terms shall be staggered as follows:
  - 1. The Governor shall appoint six members for a term of 3 years, six members for a term of 2 years, and five members for a term of 1 year.
  - 2. The President of the Senate shall appoint two members for a term of 3 years and two members for a term of 2 years.
  - 3. The Speaker of the House of Representatives shall appoint two members for a term of 3 years and two members for a term of 2 years.

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(e) A vacancy shall be filled by appointment by the original appointing authority for the unexpired portion of the term.

# (4) MEETINGS; ORGANIZATION.—

- (a) The first meeting of the council shall be held no later than August 1, 2006. Thereafter, the council shall meet at least once per quarter per calendar year. Meetings may be held via teleconference or other electronic means.
- (b) The council shall annually elect from its membership one member to serve as chair of the council and one member to serve as vice chair.
- (c) Thirteen members of the council shall constitute a quorum.
- (d) Members of the council shall serve without compensation but may be reimbursed for per diem and travel expenses pursuant to s. 112.061.
- (5) SCOPE OF ACTIVITIES.—The council shall review and recommend in a report to the Governor, the President of the Senate, and the Speaker of the House of Representatives:
  - (a) How faith-based and community-based organizations can best compete with other organizations for the delivery of state services, regardless of an organization's orientation, whether faith-based or secular.
  - (b) How best to develop and coordinate activities of faith-based and community-based programs and initiatives, enhance such efforts in communities, and seek such resources, legislation, and regulatory relief as may be necessary to accomplish these objectives.
  - (c) How best to ensure that state policy decisions take into account the capacity of faith-based and other community-based initiatives to assist in the achievement of state priorities.
  - (d) How best to identify and promote best practices across state government relating to the delivery of services by faith-based and other community-based organizations.
  - (e) How best to coordinate public awareness of faith-based and community nonprofit initiatives, such as demonstration pilot programs or projects, public-private partnerships, volunteerism, and special projects.
  - (f) How best to encourage private charitable giving to support faith-based and community-based initiatives.
  - (g) How best to bring concerns, ideas, and policy options to the Governor and Legislature for assisting, strengthening, and replicating successful faith-based and other community-based programs.
  - (h) How best to develop and implement strategic initiatives to strengthen the institutions of families and communities in this state.
  - (i) How best to showcase and herald innovative grassroots nonprofit organizations and civic initiatives.

- (j) How best to eliminate unnecessary legislative, regulatory, and other bureaucratic barriers that impede effective faith-based and other community-based efforts to address social problems.
- (k) How best to monitor implementation of state policy affecting faith-based and other community-based organizations.
- (l) How best to ensure that the efforts of faith-based and other community-based organizations meet objective criteria for performance and accountability.
- (6) RESTRICTED ACTIVITIES.—The council may not make any recommendation that conflicts with the Establishment Clause of the First Amendment to the United States Constitution or the public funding provision of s. 3, Art. I of the State Constitution.
- (7) REPORT.—By February 1 of each year, the council shall prepare a written report for the Governor, the President of the Senate, and the Speaker of the House of Representatives containing an accounting of its activities and recommended policies, priorities, and objectives for the state's comprehensive effort to enlist, equip, enable, empower, and expand the work of faith-based, volunteer, and other community-based organizations to the full extent permitted by law.

History.—s. 1, ch. 2006-9; s. 1, ch. 2011-155.

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