



2020 ANNUAL REPORT

State Fiscal Year 2019 – 2020

Office of Adoption and Child Protection

Executive Office of the Governor



This annual report from the Office of Adoption and Child Protection is submitted to:

The Honorable Ron DeSantis, Governor, State of Florida

The Honorable Christopher Sprowls, Speaker, Florida House of Representatives

The Honorable Wilton Simpson, President, Florida Senate

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BACKGROUND

The Office of Adoption and Child Protection (Office) serves within the Executive Office of the Governor and provides leadership, service, and support to the following statutory functions:

- **Florida Child Abuse Prevention and Permanency (CAPP) Plan** – provides a statewide approach for the promotion of adoption, support of adoptive families, and prevention of child abuse, abandonment, and neglect (Section 39.001, Florida Statutes [§39.001, F.S.]).
- **Florida Children and Youth (Children’s) Cabinet** – ensures the public policy relating to children and youth is developed to promote interdepartmental collaboration and program implementation in order that services are planned, managed, and delivered in a holistic and integrated manner to improve health, safety, self-sufficiency, economic stability, and quality of life (§402.56, F.S.).
- **Florida Faith-Based and Community-Based (FBCB) Advisory Council** - serves to enlist, equip, enable, expand, and empower the work of faith, volunteer, and community organizations to work with government entities to deliver services more effectively (§14.31, F.S.).

To fulfill these requirements, the Office works within Florida’s public health, human service, safety, education, and employment systems (systems) to identify interagency and community connections, align operational functions, and integrate state initiatives to include:

- **Governor’s Faith and Community Based (FCB) Initiative** – promotes collaboration between state government, faith institutions, and community organizations to enhance agencies’ existing work to support Florida citizens.
- **Hope for Healing Florida** – helping good people in crisis by leveraging resources of state agencies, private partners, and state administration; and helping youth and families avert drug addiction, address mental health, and help them reach their full potential and lead healthier lives.

The intersection of these statutory functions and state initiatives are reflected in Figure 1 on the next page. This guides the Office’s involvement in activities across the life course to build capacity in the state’s prevention continuum for disease, injury, and disability.

OFFICE LEADERSHIP

The Office is led by the Director and Chief Child Advocate- Mr. Zackary Gibson; Special Projects Manager- Mrs. Jessica Jones; and Staff Assistant- Ms. Savannah Vickery. It assists state agencies, government entities, faith and community organizations, and public/private sectors with education and training on Florida systems and functions, and connections to services and supports for children, families, and adults. The Office maintains broad awareness of agency initiatives and activities to promote collaboration and coordination of efforts at the state and community levels.

Figure 1: Intersection of Statutory Responsibilities and State Initiatives

Children & Youth Cabinet

- Ensures the public policy relating to children and youth is developed to **promote interdepartmental collaboration and program implementation** in order that services are **planned, managed, and delivered in a holistic and integrated manner**.
- **To improve self-sufficiency, safety, economic stability, health, and quality of life.**



Hope for Healing Florida

- Helping good people in crisis by **leveraging resources of state agencies, private partners, and state administration.**
- Helping youth and families **avert drug addiction, address mental health, and help them reach their full potential and lead healthier lives.**

HOPE for HEALING



Child Abuse Prevention and Permanency Plan

- **Integrated within various state workgroups and committees and supported by 20 Circuit Taskforces.**
- **The central focus 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.**



Governor's Faith and Community Based Initiative

Governor's Faith and Community Based Initiative

- Collaboration between state government, faith institutions, and community organizations to **enhance agencies' existing work to support Florida citizens.**
- **Serves as the primary point of contact for all faith institutions and community organizations.**



Faith-Based & Community-Based Advisory Council

- Serves to **enlist, equip, enable, empower, and expand the work of faith, volunteer, and community-based organizations to work with government entities to deliver services more effectively.**
- **The mission is to facilitate connections to strengthen communities and families.**

SECTION I - OFFICE ACTIVITIES

CHILD ABUSE PREVENTION AND PERMANENCY PLAN

The 2015-2020 CAPP Plan (Plan) completed its final year of a five-year approach for the promotion of adoption, support for adoptive families and prevention of child maltreatment. The central focus of the plan 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**. The vision, mission, and 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.

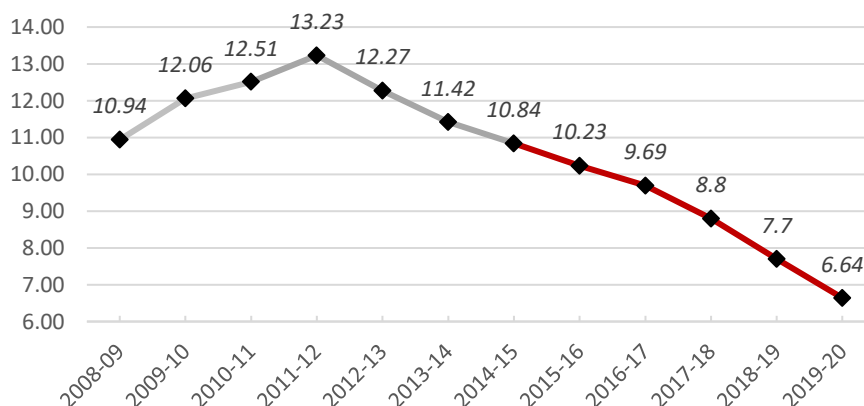
Overarching Goal

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

Progress toward each desired population-level outcome is identified below and on the following pages. Additional information on these outcomes is included in Section II of this annual report.

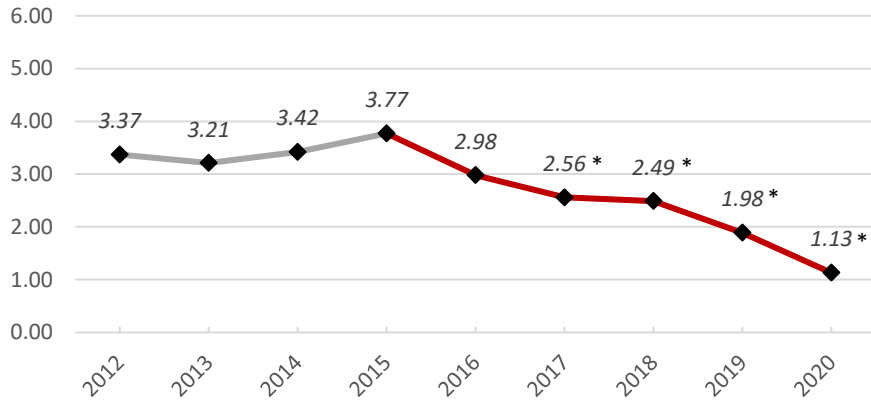
Child Maltreatment Prevention: By June 30, 2020, the verified rate of child maltreatment will be reduced from the SFY 2014-2015 statewide rate of 10.84 per 1,000 children.

Chart 1: Florida’s Child Maltreatment Rate per 1,000 Children



Child Maltreatment Death Prevention: By June 30, 2020, the verified rate of child maltreatment death will be reduced from the SFY 2012-2013 statewide rate of 3.21 per 100,000 children.

Chart 2: Florida’s Child Maltreatment Death Rate per 100,000 Children

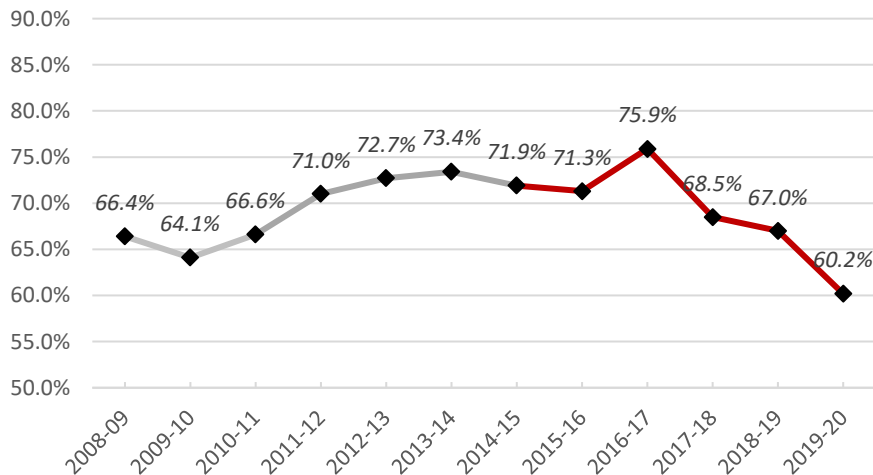


Note: Rates reflect prior year performance.

* Preliminary rates as some case reviews for 2016, 2017, 2018, and 2019 are pending.

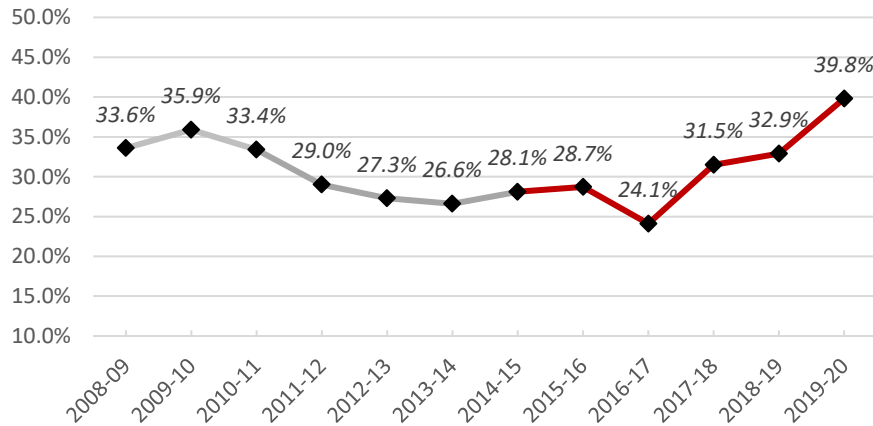
Promotion of Adoption: By June 30, 2020, the percent of children adopted within 12 months of becoming legally free for adoption will be increased from the SFY 2013-2014 statewide rate of 73.4 percent.

Chart 3: Percentage of Children Adopted Within 12 months of becoming Legally Free for Adoption



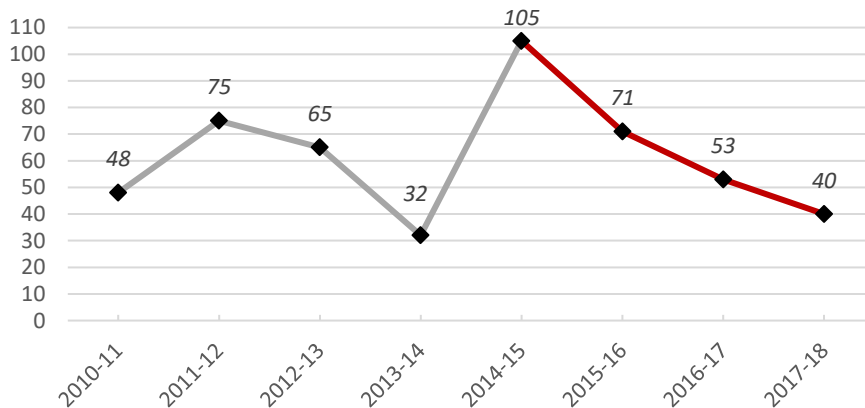
Promotion of Adoption: By June 30, 2020, the percent of children legally free for adoption who have been waiting for adoption since the date of termination of parental rights for more than 12 months will be decreased from the SFY 2013-2014 statewide rate of 26.6 percent.

Chart 4: Percentage of Children Adopted More Than 12 months from becoming Legally Free for Adoption



Support for Adoptive Families: By June 30, 2020, the annual number of adopted children who are returned to foster care (regardless of when the adoption was finalized) will be reduced from the average of SFYs 2010-2015 number of 65 children.

Chart 5: Number of Adoption Dissolutions



Note- no data reported for state fiscal years 2018-2019 and 2019-2020

CAPP Advisory Council

The Office engages a broad range of state and local government, agency, faith, and community professionals/partners/stakeholders (representatives) and foster/adoptive families through in-person meetings and participation on multiple state and community workgroups/committees (*Table 1*). These representatives reflect the membership of the CAPP Advisory Council and provide valuable perspectives, strategies, and feedback for the ongoing alignment, development, implementation, and evaluation of the CAPP Plan.

Table 1: State and Community Workgroups/Committees

Workgroup/Committee	Description
Building Healthy Military Communities	Provide recommendations, strategies and facilitate connections to improve the readiness, resiliency and well-being of active duty service members in Florida. https://cms.jointservicesupport.org/bhmc/About-Us
DELTA Impact Leadership Team	Provide recommendations and strategies to decrease intimate partner violence risk factors and increase intimate partner protective factors through community and societal level primary prevention activities. https://www.fcadv.org/projects-programs/domestic-violence-prevention-enhancement-and-leadership-through-alliances-delta
Department of Education – Faith Based and Community Outreach Advisory Council	Provide recommendations and strategies to advance efforts to engage faith and community organizations to support Florida schools and students. http://www.fldoe.org/schools/family-community/activities-programs/faith-community-outreach.stml
Early Childhood Comprehensive Systems	Provided recommendations and strategies to strengthen the early childhood system of care to enable children to be safe, healthy and ready to learn. https://mchb.hrsa.gov/earlychildhoodcomprehensivesystems
Early Steps- Child Find Workgroup	Provide recommendations and strategies to increase awareness and education for parents on services for infants and toddlers with certain physical and mental conditions known to create a risk of developmental delays. http://www.floridahealth.gov/alternatesites/cms-kids/families/early_steps/early_steps.html
Florida Children’s System of Care	Provide recommendations and strategies to improve the children’s mental health system as a coordinated and integrated continuum that is youth guided, family driven, community based and culturally and linguistically competent. http://www.socflorida.com/
Florida Council for the Interstate Compact on Educational Opportunities for Military Children	Provide recommendations and strategies regarding Florida’s participation in and compliance with the Interstate Compact. http://www.fldoe.org/academics/exceptional-student-edu/military-families/
Florida Injury and Violence Prevention Advisory Council	Provide advice and expertise on the development and implementation of the State Health Improvement Plan and the Florida Injury and Violence Prevention State Plan to include efforts that address child maltreatment. http://www.floridahealth.gov/programs-and-services/prevention/injury-prevention/injury-advisory-council/index.html
Florida KIDS COUNT Advisory Council	Provide recommendations and strategies to increase awareness, identify data sources, and disseminate information to expand the reach of Florida KIDS Count. http://www.floridakidscount.org/index.php/about-us/advisory-council
Florida Partnership for Healthy Schools	Provide recommendations and strategies to implement the Centers for Disease Control and Prevention’s Coordinated School Health approach in all Florida Schools. http://www.fldoe.org/schools/healthy-schools/building-a-healthy-dis.stml
Heart Gallery Big Bend	Provide recommendations and implement strategies to promote adoption for children available for adoption with no identified family. http://www.heartgallerybigbend.org/

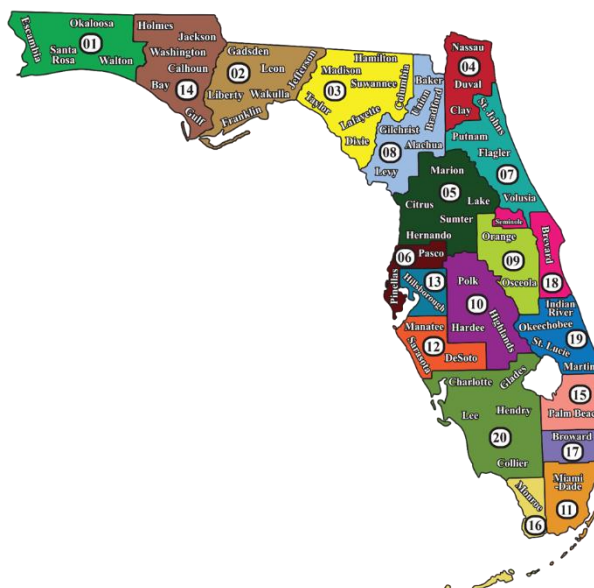
Peace 4 the Big Bend	Provide recommendations and strategies to advance A Trauma-Informed Initiative raising awareness, promoting resiliency and educating the community about trauma throughout Judicial Circuit 2. https://www.facebook.com/Peace4TheBigBend/
Restorative Practices Workgroup	Advance efforts to promote education, awareness, and capacity building to embed restorative practices into agencies serving children, youth and families.
Safe Kids Florida Advisory Council	Provide recommendations and strategies to prevent/reduce the number of unintentional injuries and death among children. http://www.floridahealth.gov/programs-and-services/safe-kids-florida/index.html
State Advisory Council on Early Childhood Care and Education	Implement measures that build upon the existing framework and infrastructure to increase the quality, alignment, and efficiency of Florida's early childhood care and education mixed-delivery system of programs and services. http://www.floridaearlylearning.com/statewide-initiatives/preschool-development-grant-birth-through-five
State Review Team	Provide guidance and support to local and regional review teams through the Cabinet Agreement. Review and present data from case reviews and provide policy recommendations to the Children's Cabinet. http://centerforchildwelfare.fmhi.usf.edu/CoordServices.shtml
Statewide Trauma Informed Care Workgroup	Provide recommendations and strategies to implement activities that increase awareness, provide education on adverse childhood experiences, and infuse trauma informed care within all of Florida's systems. http://floridatrauma.org/

Circuit Taskforces

The Office coordinates with 20 Circuit Taskforces to assess community needs, identify strategies, and implement action for the promotion of adoption, support for adoptive families, and prevention of child maltreatment. Taskforces are comprised of agency and multi-sector professionals and stakeholders, including family members who have adopted a child from the child welfare system, within each judicial circuit in Florida (Figure 2).

The DCF's Community Development Administrators (CDAs) serve as conveners for their circuit's taskforce. These taskforces may function as a stand-alone team or integrated with other team structures charged with a similar purpose.

Figure 2: Florida Judicial Circuits



Education and Training



The Office facilitated monthly statewide webinars with Circuit Taskforces and community stakeholders to provide information on state/community initiatives and Office activities. Presenters were invited to share innovative approaches and activities to promote healthy child development and strengthen families to prevent child maltreatment. Standing agenda items included information on/updates from the Children Cabinet, FCB Advisory Council, upcoming public awareness topics, and training opportunities focusing on health, safety, education, and employment.

To support adoption promotion efforts and post adoption services, the Office participated in monthly Adoption/Post Adoption calls facilitated by the Adoption Unit within the DCF Office of Child Welfare.

Educational opportunities and state information are also shared through the Office’s Emma distribution list that reaches over 1,000 participants with each message.

Prevention Framework

The release of the [2019 Florida Children and Youth Cabinet annual report](#) introduced two infographics that provided a look ahead on Cabinet agency prevention services across the life course (*Figure 3*) and the Prevention Framework (*Figure 4*).

Figure 3: Agency Prevention Services Across the Life Course

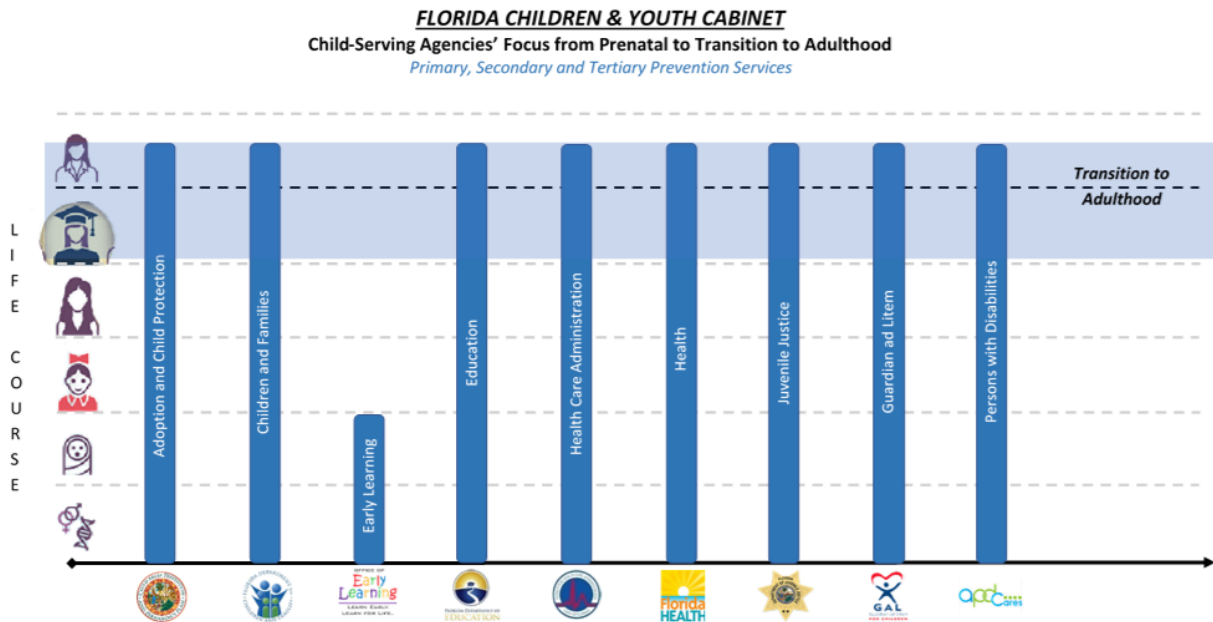
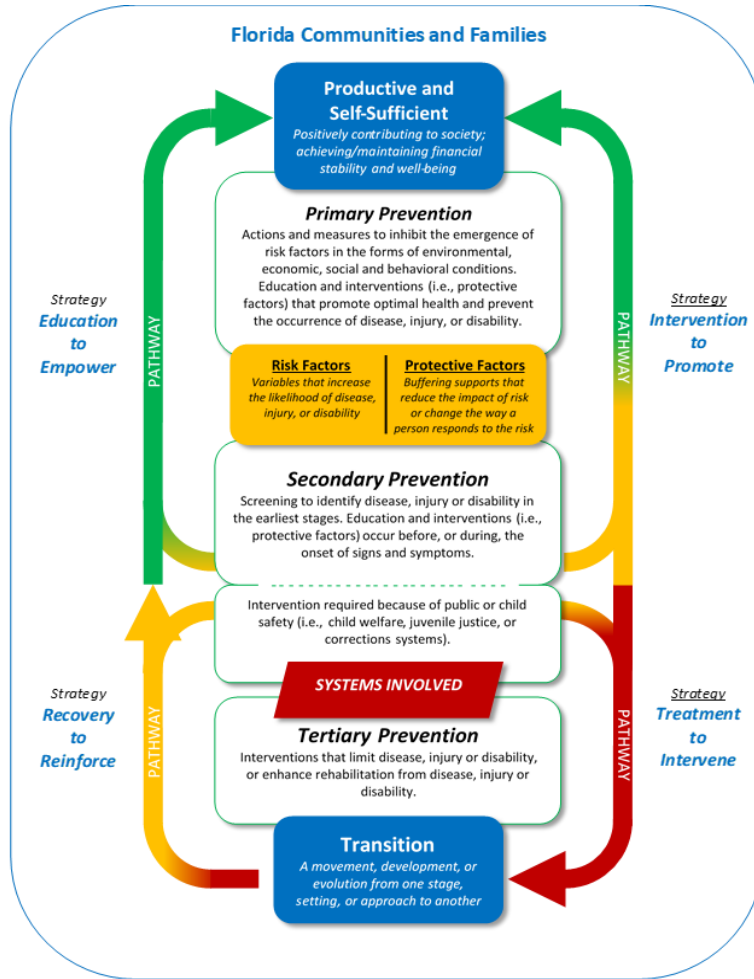


Figure 4: Prevention Framework



The framework identifies a continuum of primary, secondary, and tertiary prevention actions to address risk and protective factors for disease, injury, and disability. It also identifies strategies to strengthen knowledge, skills, and behaviors that assist individuals and families on their pathway towards becoming productive and self-sufficient. Transition is highlighted as an integral component to building connections and support systems that can sustain progress.

The CAPP Plan outlines a series of topics that support professional development and public education to establish universal understanding of factors and influences on healthy development across the life course. These topics include:

- **The Social-Ecological Model**- A Framework for Prevention: a four-level model (individual, relationship, community, and societal factors) that recognizes the influence of factors at one level have with factors at another level.
- **Life Course Theory**- suggests that each stage of life influences the next and together the social, economic, and physical environments in which we live have a profound influence on our health and the health of our community.

- **Social Determinants of Health**- are conditions in social, economic, and physical environments where people live, work, play, worship, and age that affect a wide range of health risks and outcomes.
- **Toxic Stress**- excessive or prolonged activation of the stress response systems without protective relationships or buffering supports that can disrupt brain architecture and other organ systems.
- **Adverse Childhood Experiences (ACEs)**- potentially traumatic events that occur in childhood as a result of adversity and family dysfunction. ACEs are linked to chronic health problems, mental illness, and substance misuse in adulthood.
- **Trauma and Trauma Informed Care**- understanding the three “E’s of Trauma – Event, Experiences and Effects, and the four “R’s” of Trauma Informed Care – Realizes, Recognizes, Responds and Resists.
- **Protective Capacities and Protective Factors**- strength-based approaches to assess, intervene, and serve families that reduce risk and promote healthy development.

The Office continues to refine its efforts and work with agency partners to identify outcome measures for the 2020-2025 CAPP Plan that further align existing state functions, initiatives, and activities. These efforts serve to prevent duplication of efforts and support community collaboration and implementation of strategies.

Public Awareness

Public Awareness to Promote Action in Florida Communities and Families

2020

JANUARY	FEBRUARY	MARCH	APRIL
1 M 2 T 3 W 4 Th 5 F 6 Sa 7 Su 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	1 M 2 T 3 W 4 Th 5 F 6 Sa 7 Su 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28	1 M 2 T 3 W 4 Th 5 F 6 Sa 7 Su 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	1 M 2 T 3 W 4 Th 5 F 6 Sa 7 Su 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30
Human Trafficking Awareness Month National Bullying Prevention Month	Healthy Teen Relationship Month (From Dating Violence Prevention)	Developmental Disabilities Awareness Month	Child Abuse Prevention Month Month of the Military Child Sexual Assault Prevention Month Violence Month
MAY	JUNE	JULY	AUGUST
1 M 2 T 3 W 4 Th 5 F 6 Sa 7 Su 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	1 M 2 T 3 W 4 Th 5 F 6 Sa 7 Su 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30	1 M 2 T 3 W 4 Th 5 F 6 Sa 7 Su 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	1 M 2 T 3 W 4 Th 5 F 6 Sa 7 Su 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31
Human Trafficking Awareness Month National Bullying Prevention Month National Child Abuse Prevention Month National Domestic Violence Awareness Month National Fire Prevention Month	Elder Abuse Awareness Day – June 15 Girl Car Awareness Month Foster Care Awareness Month National Child Abuse Prevention Month National Fire Prevention Month National Safety Month	Girl Car Awareness Month Autism Awareness Month National Fire Prevention Month National Safety Month	National Bullying Prevention Month National Child Abuse Prevention Month National Domestic Violence Awareness Month National Fire Prevention Month National Safety Month
SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER
1 M 2 T 3 W 4 Th 5 F 6 Sa 7 Su 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30	1 M 2 T 3 W 4 Th 5 F 6 Sa 7 Su 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	1 M 2 T 3 W 4 Th 5 F 6 Sa 7 Su 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30	1 M 2 T 3 W 4 Th 5 F 6 Sa 7 Su 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31
Childhood Obesity Awareness Month Child Passenger Safety Month (Sept. 30-31) Domestic Violence Awareness Month National Fire Prevention Month National Safety Month National Domestic Violence Awareness Month National Fire Prevention Month National Safety Month	Building Fire Prevention Month Domestic Violence Awareness Month National Fire Prevention Month National Safety Month National Domestic Violence Awareness Month National Fire Prevention Month National Safety Month	National Fire Prevention Month Family Engagement in Education Month National Fire Prevention Month National Safety Month National Domestic Violence Awareness Month National Fire Prevention Month National Safety Month	Home for the Holidays (A National Tradition) National Fire Prevention Month National Safety Month National Domestic Violence Awareness Month National Fire Prevention Month National Safety Month

WWW.FLORIDA-RAJUDGE.COM

To improve planning and collaboration on public awareness topics, the Office created the 2020 public awareness calendar that identified topics with statewide significance and those specific to agency functions. The Office worked with state agencies, community stakeholders, and the Governor’s Office of Citizen Services to assist in the development, review, submission, and dissemination of proclamations focusing on health, safety, education, and employment topics. To support community efforts in raising awareness of these topics, the Office:

- Provided copies of the Governor’s proclamation to be read at local events.
- Encouraged use of proclamations to recognize individuals/organizations for their support and contributions to the respective topic.
- Encouraged use of proclamations as a platform to highlight organizational efforts to improve the health, safety, and well-being of children and families.
- Encouraged collaboration with city and county leaders to issue local proclamations.

National Adoption Month

The Office continued its collaboration with the DCF on the statewide Explore Adoption campaign in November 2019 that featured 30 days of Amazing Children and a welcome video from First Lady Casey DeSantis. Through the efforts of multiple stakeholders at the state and community levels, 4,548 children in Florida found forever families during SFY 2019-2020. The Office participated in adoption events in Tallahassee, Miami, and the Florida Keys by presenting the Governor’s proclamation on Florida Adoption Month, thanking professional staff and advocates for their work and efforts, and celebrating with adoptive families and children.



Adoption Day
Miami, FL

Save the Date, National Adoption Day

O'Fish-ally a Family!

November 18, 2019

Come Celebrate with Us!

Finalizations: 9am - 12pm
Celebration: 1pm - 3pm

COURT HOUSE, 301 S. MONROE ST., ROOM 26
CELEBRATION: 1000 W. THARPEST ST., SUITE 16



Adoption Day
Marathon, FL

Adoption Day
Tallahassee, FL

Child Safety and Wellness

The Office worked with the DCF, DOH, and Department of Education to establish the Child Safety and Wellness Committee in response to schools closing for in-person instruction and concerns for child safety. Weekly virtual meet meetings occurred and resulted in the development and dissemination of information for the public and educators on child safety and mandatory reporting, and resources for parents and caregivers. Contact information for local DCF staff was shared with local school districts to assist in locating children who could not be contacted/were not participating in virtual learning.

Let's All Be on the Front Line in Keeping Our Children Safe

REPORTING ABUSE DURING COVID-19

With schools, many caregivers and most non-educational activities being closed due to COVID-19, we need you more than ever to help protect our children's safety. As Florida's largest child abuse reporting agency, we will assist you in reporting any suspicion or knowledge of abuse or neglect (FS 39.01). By making a report, you are not only ensuring the child's safety, you are also providing help and support to the family.

You May Be the Only Person to Act
If something does not look safe, sound right or feel safe – report.

How to Report Abuse
Be prepared to provide specific descriptions of the incidents or the circumstances contributing to the risk of harm.

800-962-2873
Florida Relay 711
TTY: 800-955-8771
<https://reportabuse.dcf.state.fl.us>

The Classroom May Be Empty, but Our Kids Still Need You More Than Ever

REPORTING ABUSE DURING COVID-19

While students are not in school, you still play a vital role in ensuring their safety during these trying times. As a member of the education community, you are in a unique position to observe and identify potential risks to a child's safety. If you have any concerns, please call or report to the local child abuse reporting agency.

You May Be the Only Person to Act
If a child does not look safe, sound right or feel safe – report.

How to Report Abuse
Be prepared to provide specific descriptions of the incidents or the circumstances contributing to the risk of harm.

800-962-2873
Florida Relay 711
TTY: 800-955-8771
<https://reportabuse.dcf.state.fl.us>

Areas of Concerns

- Lack of attention or verbal responses
- Withdrawal or isolation from peers
- Aggressive or disruptive behavior
- Changes in eating or sleeping patterns
- Changes in social interactions
- Changes in school performance
- Changes in behavior or personality
- Changes in appearance
- Changes in hygiene
- Changes in clothing
- Changes in possessions
- Changes in behavior or personality

Parents and Caregivers Play an Important Role During COVID-19

COVID-19 RESOURCES FOR PARENTS AND CAREGIVERS

Parents and caregivers, you play a vital role in helping children feel safe and secure. As we adjust to this new "normal," children may feel sad and worried about their friends, family and more. Resources, below are some tips and resources that will help your family have conversations about COVID-19, manage stress, and obtain additional support for your family.

Talking to Kids

- REMEMBER: It's always best to talk about the virus and how you can help.
- USE APPROPRIATE LANGUAGE: Use simple, clear language that is appropriate for your child's age.
- BE HONEST: It's better to talk and answer their questions.

Coping & Managing Stress

- IT'S OK: Everyone has their own coping mechanisms and not every mechanism is the same.
- STAY CONNECTED: Stay the same to help others know how you're feeling.
- STAY POSITIVE: Do activities with your family that you enjoy.

ACCESS Florida

The Department of Children and Families programs that can help Florida families:

- Food Assistance
- Temporary Cash Assistance
- Medicaid
- Relief Assistance

Additional Resources

Distance Learning: www.florida.gov/remote-learning

Statewide Emergency Response: www.florida.gov/emergency-response

Statewide Child Care: www.florida.gov/child-care

Students with Disabilities/Behavioral Challenges: www.florida.gov/students-with-disabilities-behavioral-challenges

Office of Parental Support: www.florida.gov/parental-support

Relationship Abuse & Mental Health: www.florida.gov/relationship-abuse-mental-health

COVID-19: www.florida.gov/covid-19

Child Abuse Prevention Month

The Office worked closely with Prevent Child Abuse (PCA) Florida on planning and preparations for the statewide Pinwheels for Prevention campaign in April. Efforts included sharing information on the PCA Florida toolkit, parenting and advocacy guides, ordering or making pinwheels, and coordinating state and community events. The Office also assisted PCA Florida identify youth organizations and other potential partners to expand the reach of the statewide campaign.



With concerns over in-person gatherings beginning in March 2020, and recognizing the increased stress experienced by families due to stay-at-home orders, home schooling their children, and loss of income to provide for basic needs, the Office assisted PCA Florida transition the Pinwheels for Prevention campaign to a virtual event.

With the support of representatives from the DCF Offices of Child Welfare and Substance Abuse and Mental Health, the Office and PCA Florida planned a series of educational webinars throughout the month of April and the first week in May that focused on building protective factors.



Prior to the start of each webinar, a set of opening slides were displayed to share information on state and community initiatives, public awareness topics, and resources to support individuals and families.



Survey questions were introduced throughout each webinar for a more interactive experience and content experts shared perspectives and insights to reinforced concepts. A personal story was shared during each webinar to describe how protective factors can bring positive change to challenging situations. Information on starting/accessing support groups was provided and each webinar ended with questions and comments from participants.

Over 1,100 attendees participated during the educational webinar series with over 400 attendees participating on the Social Connections educational webinar. Of the participants who responded to the question if they “increased their knowledge” from each of the educational webinars, an average of 98% of respondents confirmed they did. All webinars were recorded and made available for future viewing.

Community Activities

The Office serves as a resource for faith institutions, community organizations, and the public to access information, services, and supports in Florida. It collaborates with state agencies and the Office of Citizen Services to respond to issues and concerns from Florida citizens and provides education and training on topics to include, but not limited to:

- Accessing state and community programs and services
- Adoption and post adoption support
- Child maltreatment prevention
- Connecting/collaborating with faith institutions and organizations
- State Initiatives

Additionally, the Office assists community-led activities that align with state initiatives and highlight Florida’s efforts to strengthen children, families, and communities. Below are activities supported by the Office during SFY 2019-2020.

Project Opioid

Project Opioid serves to empower business, faith, and philanthropic leaders to confront the overdose crisis in their communities by embracing new strategies and leverage cutting-edge data. The initiative focuses on coalition building, lifesaving resources, and high-level advocacy with a goal of reducing opioid deaths in communities by at least 50% in three years.



Building on meetings coordinated by the Office with the Florida Chamber Foundation and the Governor’s Office, and a powerful presentation to the Florida Faith-Based and Community-Based Advisory Council, the Office continued its support of Project Opioid by:

- Presenting topics to support educational offerings to businesses and faith institutions.
- Promoting the first event in Orlando that featured the First Lady and Governor as speakers, and subsequent in-person and virtual events.
- Facilitating connections to other leaders to join and support the initiative.

Healing Neen Trauma Informed Care Conference



The 4th Annual National Healing Neen Trauma Informed Care Conference’s theme was “Integrating Your Trauma-Informed Care Knowledge Into the Lives of Survivors”. The Office, the Statewide Trauma Informed Care Workgroup, and the Network for Students with Emotional and Behavioral Disabilities (SEDNET) worked to plan and coordinate the conference that highlighted Florida’s efforts to become a trauma informed state. Breakout sessions featured a broad array of presentations from various sectors (e.g., courts, schools, juvenile justice, healthcare, non-profit) and on building trauma informed communities. The Director of the Office provided closing remarks and presented Ms. Tonier “Neen” Cain with the Governor’s proclamation recognizing November 1st as Trauma Informed Care Day in Florida.

Instilling Hope Conference

The 9th Annual Instilling Hope Conference is a community focused event to provide education on trauma to raise awareness and build resilience. The Office worked with the conference organizer, Peace 4 the Big Bend, to support the planning, organization, and promotion of this event. The Director of the Office provided opening remarks for the conference that featured various sessions covering new and innovative approaches to responding to individuals who have experienced trauma. Included in the lineup were speakers and sessions focused on the impacts of Hurricane Michael and efforts to assist the community find hope and build resilience.



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FLORIDA CHILDREN AND YOUTH CABINET

The Director of the Office serves as a representative on the Children’s Cabinet and supports the leadership of First Lady and Chair DeSantis and members provide a continuum of services that benefit children from prenatal care through programs supporting successful transition to self-sufficient adulthood. Below are activities of the Director that were supported by the Office during SFY 2019-2020.



Vision

All children in Florida grow up safe, healthy, educated and prepared to meet their full potential.

Mission

To ensure that the public policy of Florida relating to children and youth promotes interdepartmental collaboration and program implementation in order for services designed for children and youth to be planned, managed and delivered in a holistic and integrated manner to improve the self-sufficiency, safety, economic stability, health and quality of life of all children and youth in Florida.

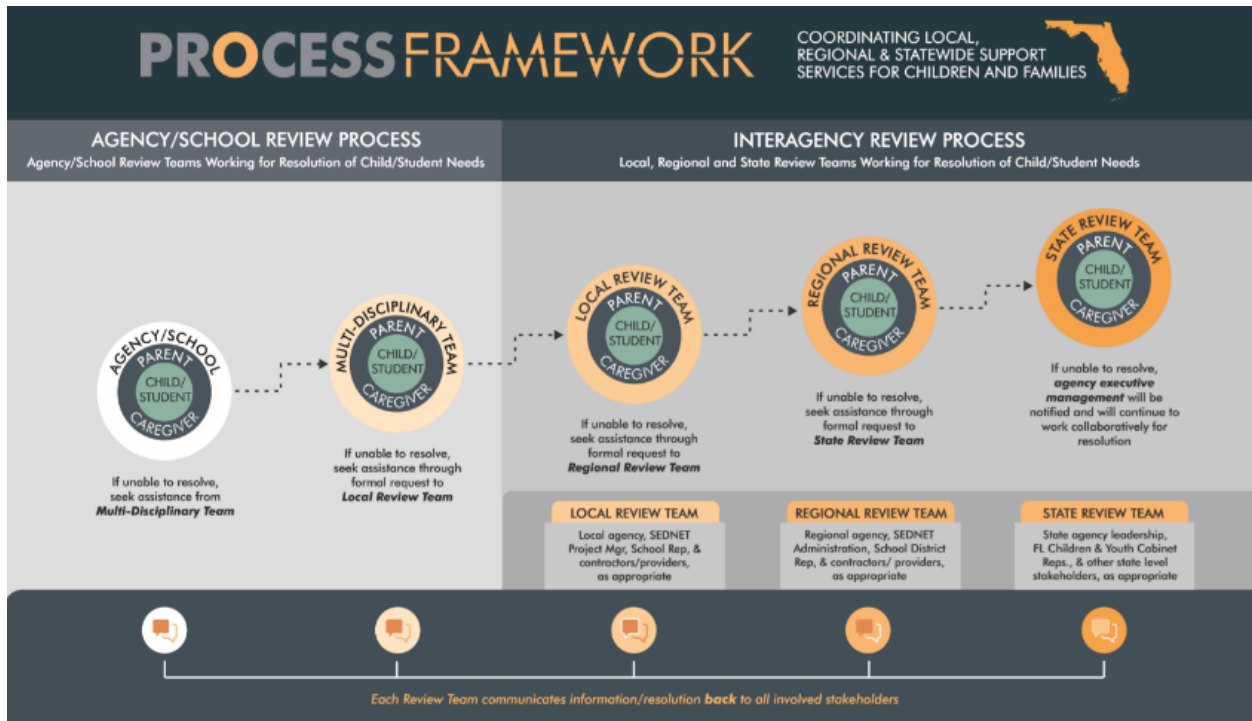
The Office provided administrative support to the Cabinet’s Executive Director by assisting with meeting notices and providing perspectives and recommendations on activities for the Cabinet’s consideration. The Director of the Office participated in each Cabinet meeting and worked to support the Cabinet’s focus on suicide prevention by disseminating the Governor’s proclamation on suicide prevention month and resources.

Cabinet Interagency Agreement

The Cabinet Interagency Agreement to Coordinate Services for Children Served by More Than One Agency (Cabinet Agreement) is a multi-level approach to resolve complex needs of children that are unable to be resolved by traditional multi-disciplinary teams. The agreement focuses on children who are involved, or at-risk of becoming involved, in more than one agency system and utilizes Local, Regional and State Review Teams to assess and resolve needs. *Figure 3* on the next page provides the Process Framework infographic that reflects the escalation of review processes from agency/school to the review teams established by the agreement. Efforts of the Office to advance the Cabinet Agreement include:

- Presenting the Cabinet Agreement at the 2019 DCF Child Protection Summit.
- Promoting Quick Reference Guides that identify key points of contact within each judicial circuit to assist in addressing complex needs of children prior to referring needs to a Local Review Team.
- Reviewing and refining data collection efforts to support agency decision-making and efforts to prevent involvement in state systems.

Figure 3: Cabinet Agreement Process Framework Infographic



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FLORIDA FAITH-BASED AND COMMUNITY-BASED ADVISORY COUNCIL

The Office provides leadership and administrative support to the FBCB Advisory Council to advance its mission and fulfill its charge to enlist, equip, enable, expand, and empower the work of faith-based, volunteer, and other community organizations to collaborate with government entities to deliver services more effectively. Below are activities of the Office during SFY 2019-2020.



Vision

To maximize the collaboration between faith-based and community organizations and State agencies to help strengthen individuals and families.

Mission

The Florida Faith-Based and Community-Based Advisory Council exists to facilitate connections to strengthen communities and families in the state of Florida.

Statutory Charge

To advise the Governor and the Legislature on policies, priorities, and objectives for the state's comprehensive efforts to enlist, equip, enable, empower, and expand the work of faith-based, volunteer, and other community organizations to the full extent permitted by law.

The Office provided the following activities in support of the FBCB Advisory Council leadership and members:

- Maintained the Council's website at <https://www.flgov.com/fbcb>
- Coordinated planning sessions with the Council's leadership to identify meeting activities, agenda items, and speakers.
- Facilitated four quarterly meetings (two in-person and two virtual) and achieved quorum for each meeting.
- Provided information on state initiatives, activities, and education/training opportunities to assist members fulfill their mission and statutory charge.
- Facilitated the completion of the Council's annual report.

Governor's Faith and Community Based Initiative

In November 2019, Governor DeSantis announced the establishment of the Governor's Faith and Community Based (FCB) Initiative under the direction of Mr. Erik Dellenback, who serves as the Governor's Liaison for the initiative. The initiative serves to collaborate between state government and Florida's faith-based institutions and community organizations, enhancing agencies' existing work to support Florida citizens. The Governor also announced the appointment of Mr. Dellenback to the FBCB Advisory Council.



Governor's Faith and Community Based Initiative

The Office worked directly with the Governor's Liaison to support and advance the Governor's FCB initiative. These efforts include:

- Assisted in the creation of an online survey to identify vulnerable populations served by faith institutions and community organizations.
- Provided, and promoted the submission of, faith and community contacts to receive a letter that thanked them for their service to Florida and introduced the Governor's liaison and initiative.
 - Created a tracking log for returned mail to assist with maintaining accurate information to support future communications.
- Promoted the Governor's Faith and Community Based Initiative website (<http://faithandcommunityflorida.com/>) and completion of the online survey to receive future notices on announcements/important information from the Governor and state leaders.
- Provided information on public awareness topics for dissemination consideration on the Governor's FCB Initiative website and as part of future menu-based options for faith institutions.

Progress made by the Governor's FCB Initiative includes:

- Created an email database for over 34,000 faith and community leaders to maintain a healthy line of communication and distribute needs that are being met by faith institutions (i.e., computers, off-site housing during COVID).
- Mailed 41,000 letters of thanks to faith and community leaders expressing a desire for open communication from the Governor's FCB Initiative.
- Held a total of nine (9) calls with faith and community leaders and the Governor, Lieutenant Governor (in English and Spanish), and the Surgeon General to share important information and support collaboration between government and the faith community.
- Over 4,000 faith institutions and community organizations (approx. a 50/50 split between faith institutions and community organizations) have completed the survey on the Governor's FCB Initiative website and identified vulnerable populations they serve.

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SECTION II – STATUS OF CHILD MALTREATMENT, CHILD MALTREATMENT DEATHS, AND ADOPTIONS IN FLORIDA

This section of the 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 calls 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 (DCF) is the reporting agency for child maltreatment and adoptions and provided data and available information included in this report. Information from the Child Abuse Death Review Annual Report and the DCF Annual Adoption Incentive Report are included as part of this report.

Summary of Child Maltreatment

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 2020 for State Fiscal Year 2019-2020 (July 1, 2019 – June 30, 2020). 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, 2020, the verified rate of child abuse will be reduced from the State Fiscal Year 2014 – 2015 statewide rate of 10.84 per 1,000 children.

The targeted desired result was established by identifying the lowest rate of child maltreatment during the *2010-2015 CAPP Plan*. It should be noted that interaction effects among the items below 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.
- Foreseeable stressors:
 - Changes in family living arrangements.
 - Economic losses / unemployment.
 - Increase in adoptions without sufficient post adoption supports.
 - Teen pregnancies and births.
 - Natural and environmental disasters (e.g., oil spill, hurricanes, etc.).

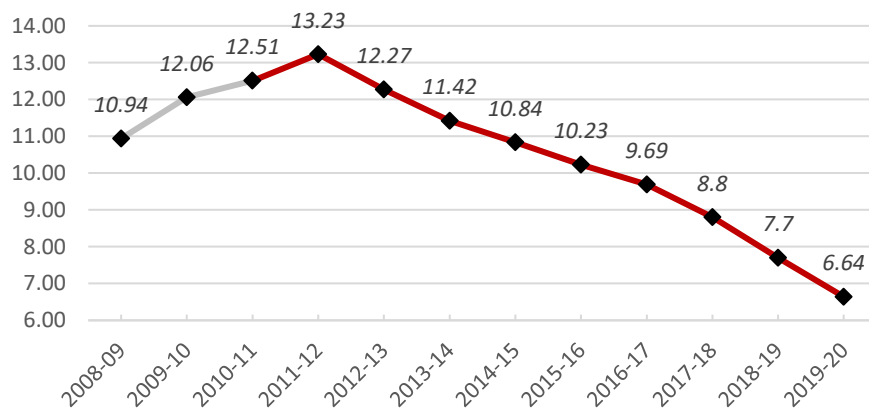
The incidence of child maltreatment is the *estimated number* of maltreated children in Florida, regardless of the number of children reported as abused. It would be expected that reporting and investigation rates would be low, conservative estimates of the actual abuse incident rates in Florida. According 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.

Verified Maltreatment

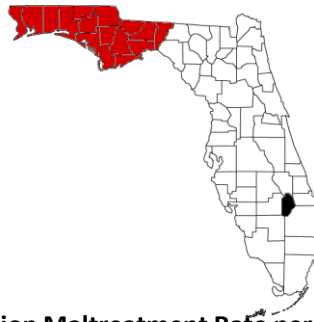
The rate of children with verified maltreatment during SFY 2019-20 was 6.64. This represents a reduction of 1.1 per 1,000 children since SFY 2017-18, and a reduction of 5.53 per 1,000 children since SFY 2011-12, the highest verified maltreatment rate during the 2010-2015 CAPP Plan period.

On the chart below, the state rate of verified maltreatment per 1,000 children are presented since SFY 2008-2009. On the following pages, rates of verified maltreatment per 1,000 children are presented with infographics at both the regional and judicial circuit levels.

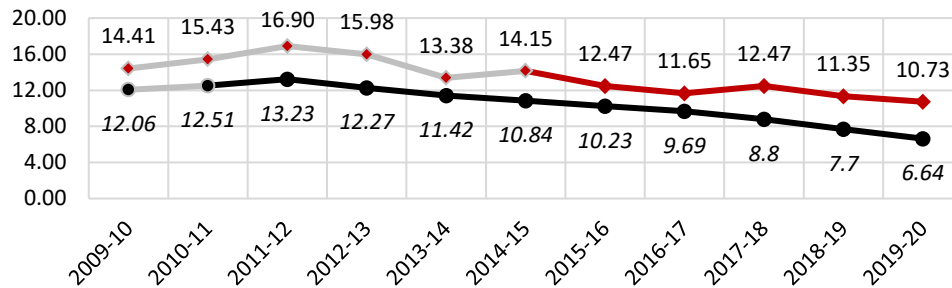
Chart 1: Florida's Child Maltreatment Rate per 1,000 Children



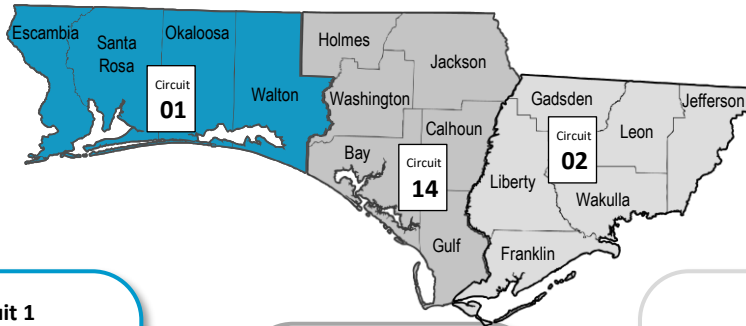
Infographic 1: Rate of Verified Maltreatment in Northwest Region and Circuits



Northwest Region Maltreatment Rate per 1,000 Children



Note: The Regional State Maltreatment Rate Northwest Region Maltreatment Rate Rate was calculated by dividing the total number of verified cases in the region by the combine child populations within each circuit of the region.



Circuit 1 Maltreatment Rate

- 2009-10: 15.91
- 2010-11: 17.88
- 2011-12: 20.26
- 2012-13: 19.09
- 2013-14: 15.37
- 2014-15: 17.59
- 2015-16: 14.68
- 2016-17: 14.04
- 2017-18: 14.54
- 2018-19: 14.68
- 2019-20: 13.08**

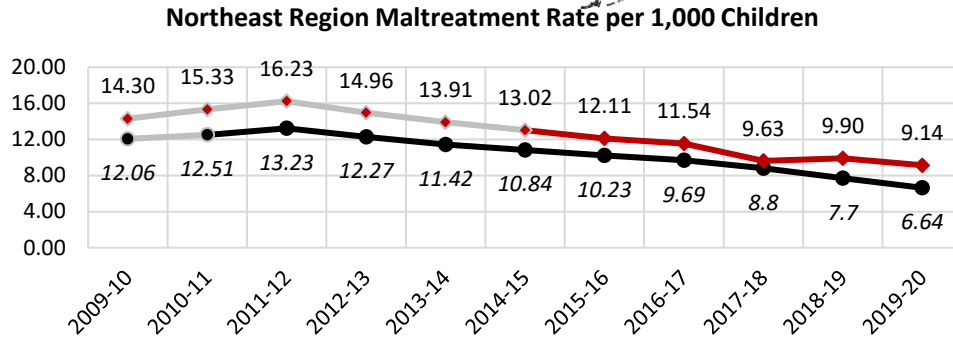
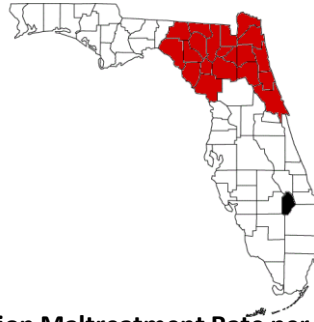
Circuit 14 Maltreatment Rate

- 2009-10: 14.79
- 2010-11: 11.81
- 2011-12: 13.75
- 2012-13: 15.26
- 2013-14: 12.57
- 2014-15: 11.06
- 2015-16: 13.39
- 2016-17: 10.57
- 2017-18: 12.1
- 2018-19: 7.65
- 2019-20: 8.76**

Circuit 2 Maltreatment Rate

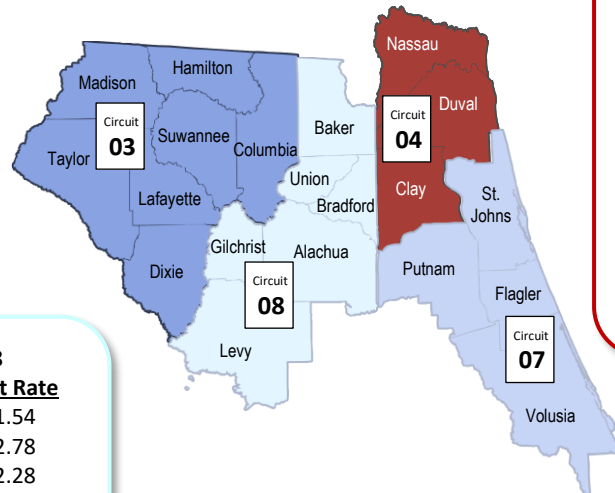
- 2009-10: 11.11
- 2010-11: 13.33
- 2011-12: 12.81
- 2012-13: 10.45
- 2013-14: 10.02
- 2014-15: 9.73
- 2015-16: 7.35
- 2016-17: 7.72
- 2017-18: 8.36
- 2018-19: 7.41
- 2019-20: 7.47**

Infographic 2: Rate of Verified Maltreatment in Northeast Region and Circuits



Note: The Regional Maltreatment Rate is calculated based on the number of verified cases in the region by the combine child populations within the region.
 ● State Maltreatment Rate ◆ Northeast Region Maltreatment Rate Rate was calculated

Circuit 3
Maltreatment Rate
 2009-10: 19.34
 2010-11: 19.15
 2011-12: 20.63
 2012-13: 16.83
 2013-14: 19.90
 2014-15: 18.87
 2015-16: 15.04
 2016-17: 16.54
 2017-18: 11.34
 2018-19: 8.50
 2019-20: 7.01

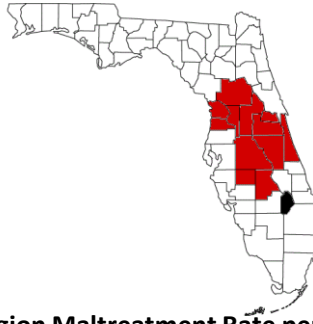


Circuit 4
Maltreatment Rate
 2009-10: 12.63
 2010-11: 13.35
 2011-12: 14.09
 2012-13: 13.83
 2013-14: 13.84
 2014-15: 12.06
 2015-16: 10.99
 2016-17: 11.11
 2017-18: 10.46
 2018-19: 9.86
 2019-20: 9.14

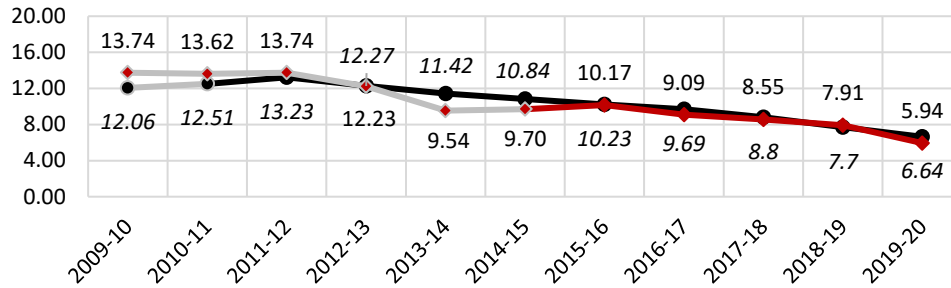
Circuit 8
Maltreatment Rate
 2009-10: 21.54
 2010-11: 22.78
 2011-12: 22.28
 2012-13: 21.68
 2013-14: 17.23
 2014-15: 15.32
 2015-16: 14.87
 2016-17: 10.80
 2017-18: 8.25
 2018-19: 7.59
 2019-20: 6.35

Circuit 7
Maltreatment Rate
 2009-10: 12.62
 2010-11: 14.32
 2011-12: 15.97
 2012-13: 13.45
 2013-14: 11.25
 2014-15: 12.22
 2015-16: 12.06
 2016-17: 11.40
 2017-18: 11.01
 2018-19: 11.18
 2019-20: 10.01

Infographic 3: Rate of Verified Maltreatment in Central Region and Circuits



Central Region Maltreatment Rate per 1,000 Children



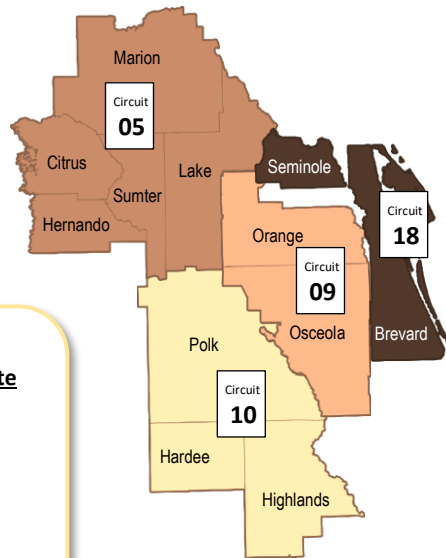
Note: The Regional State Maltreatment Rate Central Region Maltreatment Rate Rate was calculated by dividing the total number of verified cases in the region by the combine child populations within each circuit of the region.

Circuit 5
Maltreatment Rate

- 2009-10: 16.98
- 2010-11: 15.84
- 2011-12: 18.32
- 2012-13: 17.02
- 2013-14: 12.25
- 2014-15: 10.66
- 2015-16: 11.88
- 2016-17: 9.69
- 2017-18: 10.7
- 2018-19: 9.72
- 2019-20: 6.65**

Circuit 10
Maltreatment Rate

- 2009-10: 13.07
- 2010-11: 12.52
- 2011-12: 11.69
- 2012-13: 10.71
- 2013-14: 9.43
- 2014-15: 8.78
- 2015-16: 10.72
- 2016-17: 10.87
- 2017-18: 9.56
- 2018-19: 10.23
- 2019-20: 8.35**



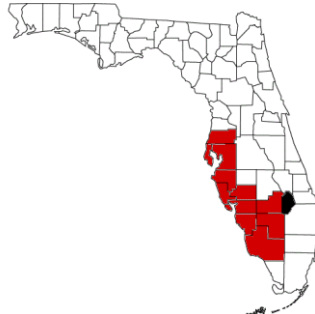
Circuit 18
Maltreatment Rate

- 2009-10: 11.74
- 2010-11: 12.25
- 2011-12: 11.97
- 2012-13: 9.35
- 2013-14: 7.95
- 2014-15: 11.23
- 2015-16: 1.07
- 2016-17: 9.35
- 2017-18: 8.9
- 2018-19: 7.63
- 2019-20: 5.57**

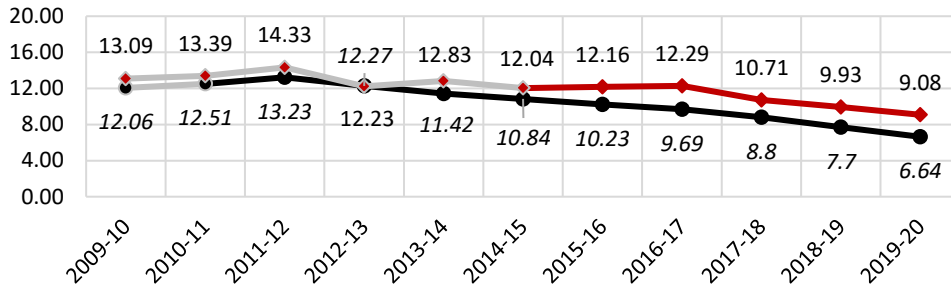
Circuit 9
Maltreatment Rate

- 2009-10: 13.47
- 2010-11: 13.71
- 2011-12: 13.24
- 2012-13: 12.01
- 2013-14: 9.04
- 2014-15: 8.80
- 2015-16: 8.78
- 2016-17: 7.84
- 2017-18: 6.84
- 2018-19: 6.16
- 2019-20: 4.74**

Infographic 4: Rate of Verified Maltreatment in Suncoast Region and Circuits



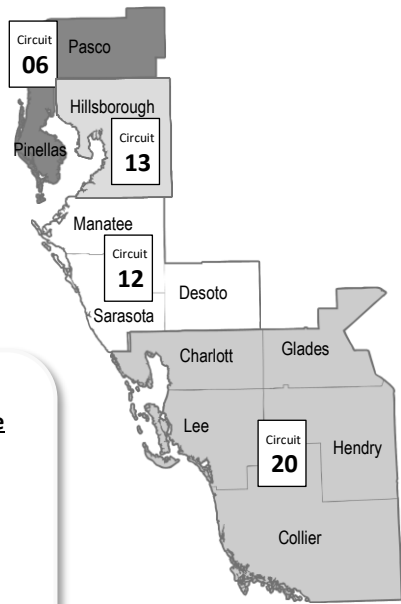
Suncoast Region Maltreatment Rate per 1,000 Children



Note: The Regional Maltreatment Rate was calculated by dividing the total number of verified cases in the region by the combine child population in the region.

Circuit 6 Maltreatment Rate

- 2009-10: 18.64
- 2010-11: 19.29
- 2011-12: 20.31
- 2012-13: 18.77
- 2013-14: 17.92
- 2014-15: 16.02
- 2015-16: 14.66
- 2016-17: 15.63
- 2017-18: 14.26
- 2018-19: 12.94
- 2019-20: 11.50



Circuit 13 Maltreatment Rate

- 2009-10: 10.58
- 2010-11: 10.12
- 2011-12: 10.86
- 2012-13: 10.49
- 2013-14: 10.03
- 2014-15: 9.83
- 2015-16: 10.37
- 2016-17: 9.97
- 2017-18: 8.58
- 2018-19: 7.72
- 2019-20: 7.15

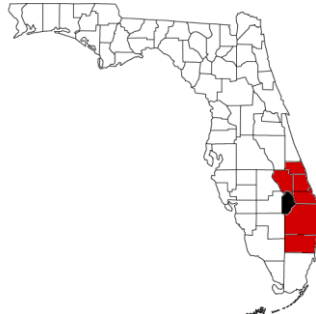
Circuit 12 Maltreatment Rate

- 2009-10: 15.03
- 2010-11: 16.92
- 2011-12: 16.32
- 2012-13: 14.10
- 2013-14: 13.70
- 2014-15: 15.11
- 2015-16: 15.78
- 2016-17: 14.14
- 2017-18: 10.51
- 2018-19: 11.14
- 2019-20: 10.29

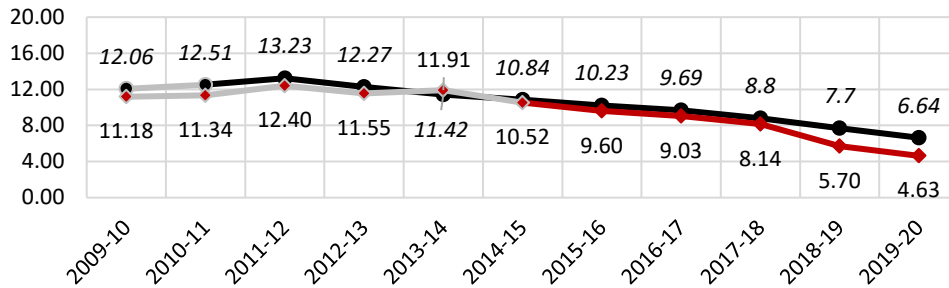
Circuit 20 Maltreatment Rate

- 2009-10: 8.92
- 2010-11: 8.86
- 2011-12: 10.80
- 2012-13: 10.26
- 2013-14: 10.29
- 2014-15: 8.70
- 2015-16: 9.66
- 2016-17: 10.57
- 2017-18: 9.78
- 2018-19: 8.89
- 2019-20: 8.23

Infographic 5: Rate of Verified Maltreatment in Southeast Region and Circuits



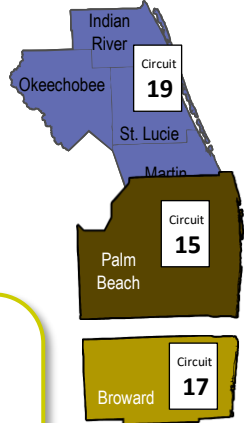
Southeast Region Maltreatment Rate per 1,000 Children



Note: The Regional State Maltreatment Rate Southeast Region Maltreatment Rate Rate was calculated by dividing the total number of verified cases in the region by the combine child populations within each circuit of the region.

Circuit 19
Maltreatment Rate

- 2009-10: 15.04
- 2010-11: 14.89
- 2011-12: 13.64
- 2012-13: 10.84
- 2013-14: 10.84
- 2014-15: 11.74
- 2015-16: 9.61
- 2016-17: 9.95
- 2017-18: 9.58
- 2018-19: 8.16
- 2019-20: 4.08



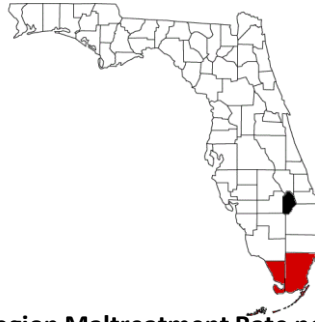
Circuit 17
Maltreatment Rate

- 2009-10: 10.36
- 2010-11: 11.18
- 2011-12: 13.45
- 2012-13: 12.97
- 2013-14: 12.53
- 2014-15: 12.54
- 2015-16: 12.52
- 2016-17: 11.47
- 2017-18: 9.77
- 2018-19: 5.90
- 2019-20: 4.53

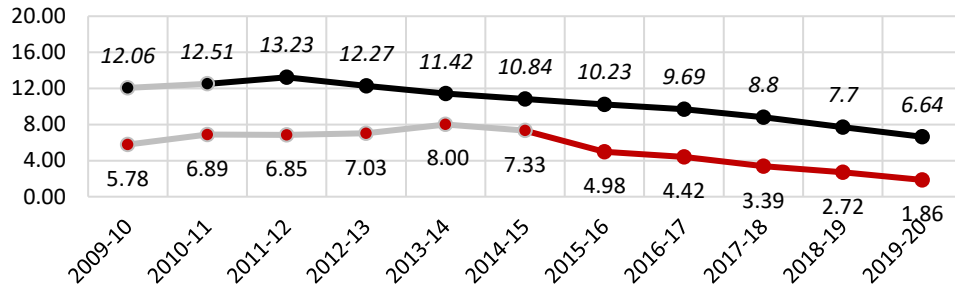
Circuit 15
Maltreatment Rate

- 2009-10: 10.71
- 2010-11: 10.02
- 2011-12: 10.31
- 2012-13: 9.84
- 2013-14: 11.50
- 2014-15: 7.07
- 2015-16: 5.37
- 2016-17: 5.11
- 2017-18: 5.12
- 2018-19: 4.30
- 2019-20: 4.08

Infographic 6: Rate of Verified Maltreatment in Southern Region and Circuits



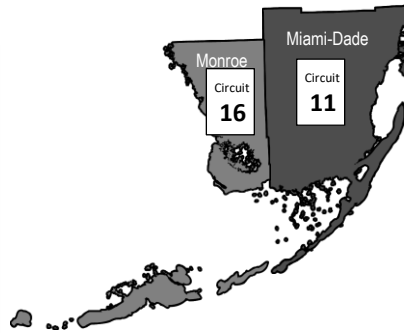
Southern Region Maltreatment Rate per 1,000 Children



Note: The Regional State Maltreatment Rate Southern Region Maltreatment Rate Rate was calculated by dividing the total number of verified cases in the region by the combine child populations within each circuit of the region.

Circuit 16
Maltreatment Rate

- 2009-10: 16.68
- 2010-11: 15.57
- 2011-12: 15.46
- 2012-13: 16.82
- 2013-14: 23.02
- 2014-15: 21.17
- 2015-16: 14.39
- 2016-17: 10.92
- 2017-18: 10.08
- 2018-19: 8.44
- 2019-20: 6.56**



Circuit 11
Maltreatment Rate

- 2009-10: 5.54
- 2010-11: 6.70
- 2011-12: 6.68
- 2012-13: 6.83
- 2013-14: 7.71
- 2014-15: 7.06
- 2015-16: 4.80
- 2016-17: 4.29
- 2017-18: 3.26
- 2018-19: 2.61
- 2019-20: 1.77**

Age Ranges with Verified Maltreatment

As shown in Chart 2 and Table 1 below, the younger the child, the more vulnerable the child is to be maltreated.

- The highest percentage of children with verified maltreatment 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 21,015 of 28,483 verifications, over 73.78% 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 2019 – 2020 (12.76% vs. 13.25%).

Chart 2: Unduplicated Counts of Children with Most Serious Finding of Verified Abuse by Age Range, SFY 2019-2020 Statewide

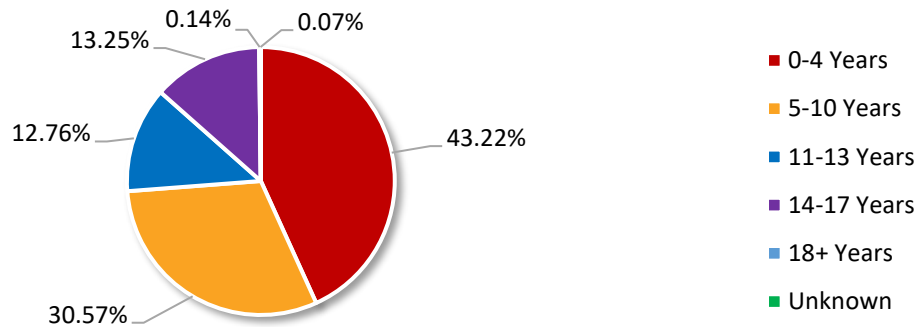


Table 1. Unduplicated Counts of Children with Most Serious Finding of Verified Abuse by Age Range

Circuit	Age of Child						Totals
	0-4 Years	5-10 Years	11-13 Years	14-17 Years	18+ Years	Unknown	
1	952	685	257	275	2	1	2,172
2	261	167	79	84	3	0	594
3	148	93	34	39	3	0	317
4	1,174	837	345	345	3	4	2,708
5	621	399	165	146	0	1	1,332
6	1,359	1,023	383	347	7	2	3,121
7	854	569	236	226	0	0	1,885
8	220	141	49	55	0	0	465
9	756	599	285	301	2	1	1,944
10	675	417	204	206	2	1	1,505
11	393	299	143	187	2	1	1,025
12	578	480	206	218	4	3	1,489
13	1,077	754	295	260	3	1	2,390
14	222	185	76	79	0	1	563
15	528	359	132	133	1	1	1,154
16	35	20	9	9	0	0	73
17	844	529	215	241	3	1	1,833
18	510	316	140	199	1	0	1,166
19	317	238	95	124	0	1	775
20	785	596	287	299	4	1	1,972
Statewide	12,309	8,706	3,635	3,773	40	20	28,483
Percentage	43.22%	30.57%	12.76%	13.25%	.14%	0.07%	100%

As shown in Chart 3 and Tables 2 below, the largest range of allegations is for children between the ages of birth and four years old and children between 5 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 129,390 children who were alleged victims of maltreatment or 67.69% of all children who were alleged victims.

Chart 3: Age Ranges for Children who were Alleged Victims of Maltreatment (Unduplicated)

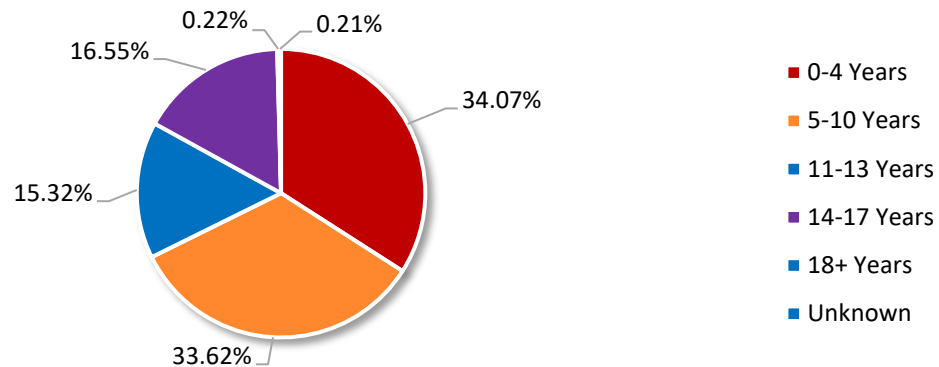


Table 2: Age Ranges for Children who were Alleged Victims of Maltreatment (Unduplicated)

Circuit	Age of Child						Total
	0-4 Years	5-10 Years	11-13 Years	14-17 Years	18+ Years	Unknown	
1	3,616	3,465	1,554	1,621	14	37	10,307
2	1,676	1,431	633	664	5	8	4,417
3	1,070	1,013	464	485	5	9	3,046
4	5,088	4,850	2,219	2,322	24	49	14,552
5	4,955	4,768	2,183	2,307	21	17	14,251
6	5,160	4,871	2,139	2,303	43	33	14,549
7	3,614	3,598	1,651	1,745	28	16	10,652
8	1,850	1,854	763	802	8	12	5,289
9	5,391	5,532	2,626	2,847	32	35	16,463
10	3,761	3,650	1,741	1,773	36	12	10,973
11	3,887	4,242	1,952	2,256	32	39	12,408
12	2,303	2,389	1,123	1,166	19	13	7,013
13	4,603	4,593	1,897	1,954	36	24	13,107
14	1,252	1,274	628	684	0	16	3,854
15	3,456	3,473	1,474	1,765	26	22	10,216
16	173	169	76	77	0	1	496
17	4,068	3,745	1,797	2,001	33	13	11,657
18	3,470	3,441	1,682	1,835	18	16	10,462
19	1,745	1,764	843	932	12	14	5,310
20	3,988	4,142	1,854	2,102	24	22	12,132
Statewide	65,126	64,264	29,299	31,641	416	408	191,154
Percentage	34.01%	33.62%	15.32%	16.55%	0.22%	0.21%	100%

In Table 3, 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 (54.23%), from eighteen circuits.
- For ethnicity, the largest portion was Other (non – Hispanic) (82.19%) from every circuit in Florida.
- Investigations were conducted for nearly equal numbers of boys and girls.

Table 3: Race, Ethnicity, and Gender of Children who were Alleged Victims of Maltreatment (Unduplicated), SFY 2019–2020, Statewide

Circuit	White	Black	Multiracial	Other	Hispanic	Other	Male	Female	Unknown	Total
1	6,037	2,387	522	1,356	513	9,789	5,027	5,079	201	10,307
2	1,624	2,114	125	553	159	4,257	2,095	2,219	103	4,417
3	2,019	560	153	315	173	2,874	1,500	1,499	47	3,046
4	6,436	5,776	581	1,771	928	13,636	7,049	7,276	227	14,552
5	9,788	2,309	549	1,611	1,685	12,572	7,003	7,033	215	14,251
6	9,126	3,202	806	1,413	1,385	13,162	7,297	7,122	130	14,549
7	6,590	2,224	378	1,440	999	9,633	5,164	5,356	132	10,652
8	2,725	1,681	297	586	285	5,004	2,593	2,628	68	5,289
9	7,644	5,647	423	2,749	5,063	11,400	8,125	8,064	274	16,463
10	6,660	2,662	412	1,236	2,300	8,670	5,331	5,456	186	10,973
11	5,303	4,520	106	2,472	5,392	7,009	5,976	6,186	246	12,408
12	4,475	1,343	374	822	1,387	5,627	3,524	3,416	73	7,013
13	6,973	4,840	545	758	3,248	9,868	6,528	6,519	60	13,107
14	2,678	533	183	462	158	3,698	1,862	1,938	54	3,854
15	4,210	3,989	226	1,789	2,267	7,947	4,975	5,068	173	10,216
16	335	63	26	72	145	351	244	233	19	496
17	3,865	5,670	326	1,808	2,461	9,208	5,698	5,774	185	11,657
18	6,388	2,532	604	941	1,700	8,765	5,211	5,157	94	10,462
19	3,064	1,302	233	706	873	4,432	2,594	2,647	69	5,310
20	7,716	1,873	373	2,169	2,929	9,202	5,966	6,028	138	12,132
Statewide	103,656	55,227	7,242	25,029	34,050	157,104	93,762	94,698	2,694	191,154
Percentage	54.52%	28.89%	3.79%	13.09	17.81%	82.19%	49.05%	49.54%	1.41%	100%

Table 4, on the next page, shows the number of allegations and verifications, in duplicated counts. The three highest values in each category are highlighted in orange. A child might have been the alleged victim with more than a single allegation attributed to the same incident.

- For these children, there were 49,083 verified allegations of child maltreatment (duplicated child count).
- The highest numbers of allegations were for household violence threatens child, inadequate supervision, and physical injury.

- It should be noted that the top three most reported allegations (household violence, inadequate supervision, and physical injury) have fairly low verification rates (14.16%, 12.25%, and 5.13%, respectively).

Table 4: Allegations and Verifications of Abuse (Duplicated Child Counts), SFY 2019-2020, Statewide

Type of Abuse Allegation	Allegations	Verified	Percent of Allegations Verified
Abandonment	2,365	759	32.09%
Asphyxiation	1,817	70	3.85%
Bizarre Punishment	1,614	129	7.99%
Bone Fracture	927	214	23.09%
Burns	919	49	5.33%
Death	393	89	22.6%
Environmental Hazards	37,164	3,643	9.80%
Failure to Protect	3,602	1,809	50.22%
Failure to Thrive/Malnutrition/Dehydration	465	158	33.98%
Family Violence Threatens Child	7	3	42.86%
Household Violence Threatens Child	74,248	10,513	14.16%
Human Trafficking	0	0	0%
Human Trafficking CSEC	1,553	401	25.82%
Human Trafficking Labor	130	37	28.46%
Inadequate Supervision	63,173	7,734	12.25%
Internal Injuries	150	53	35.33%
Intimate Partner Violence Threatens	5,498	942	17.13%
Medical Neglect	5,683	1,121	19.73%
Mental Injury	8,825	223	2.53%
Physical Injury	45,439	2,332	5.13%
Sexual Abuse – Sexual Battery	3,383	924	27.31%
Sexual Abuse – Sexual Exploitation by Parent/Legal Guardian	973	205	21.07%
Sexual Abuse – Sexual Molestation	8,114	1,315	16.21%
Substance Exposed Newborn	5,859	1,280	21.85%
Substance Misuse	4,339	405	9.33%
Substance Misuse – Alcohol	24,555	3,596	14.64%
Substance Misuse – Illicit Drugs	41,696	7,449	17.87%
Substance Misuse – Prescription Drugs	5,611	1,080	19.25%
Threatened Harm	4,004	2,550	63.69%
Statewide	352,506	49,083	13.92%

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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 children entering foster care in the twelve month span from July 2019 – June 2020, the reasons for removal were divided into twenty-three categories, shown in Table 5 below. 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 (27.15%) was due to Parental Drug Abuse.
- The second most cited service reason for a removal (13.64%) was due to Domestic Violence.
- The least cited reason for a child removal was Labor Trafficking (0.01%), followed by Adoption Dissolution (0.02%).

Table 5: Reasons for Removal Reported (Duplicated Child Counts), SFY 2019-2020, Statewide

Removal Reason	Number of Children	Percent
Parental Drug Abuse	7,818	27.15%
Domestic Violence	3,926	13.64%
Inadequate Supervision	3,602	12.51%
Caretaker's Inability to Cope	2,873	9.98%
Inadequate Housing	2,113	7.34%
Physical Abuse	2,010	6.98%
Incarceration of Parents	1,280	4.46%
Abandonment	1,187	4.12%
Parental Alcohol Abuse	1,184	4.11%
Medical Neglect	648	2.25%
Sexual Abuse	542	1.88%
Physical Neglect	523	1.82%
Child's Behavioral Problem	350	1.22%
Death of Parent(s)	236	0.82%
Child Drug Abuse	210	0.73%
Relinquishment	122	0.42%
Child's Disability	67	0.23%
Child Alcohol Abuse	31	0.11%
Sexual Abuse-Sexual Exploitation	29	0.10%
Emotional Abuse and Neglect	21	0.07%
Comm. Sexual Exploitation of Child	12	0.04%
Adoption Dissolution	6	0.02%
Labor Trafficking	1	0.01%

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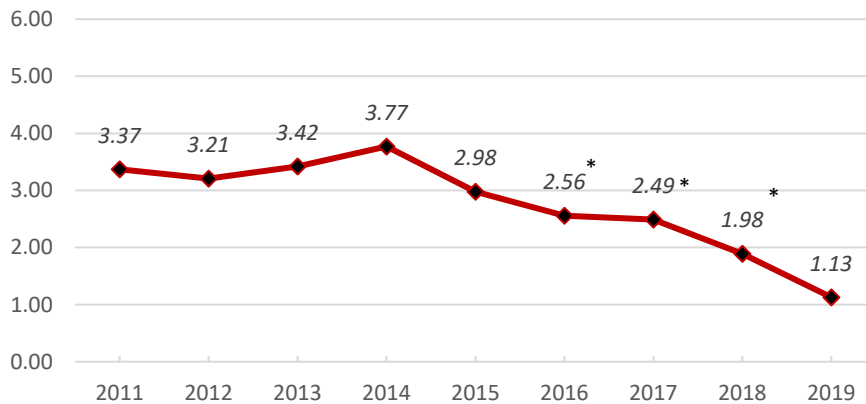
Summary of Child Maltreatment Deaths

State Plan Desired Result 2 – Child Maltreatment Death Prevention. By June 30, 2020, the verified rate of child maltreatment death will be reduced from the State Fiscal Year 2012-2013 statewide rate of 3.21 per 100,000 children.

Section 383.402, F.S., has been expanded over the years and currently requires local and state Child Abuse Death Review (CADR) committees to review all child deaths reported to the Florida Abuse Hotline. The three primary preventable causes of child deaths, which have remained consistent with findings from previous years, include Sleep-related Infant Death, Drowning, and Inflicted Trauma (e.g., fists, hands and feet or use of weapons and firearms).

The rate of child maltreatment death rate in 2019 was 1.13* per 100,000 children. Chart 4 below should be considered tentative and an underestimate as there are cases that are still open at DCF and not yet transferred to local CADR committees for which verification status has been determined. Trends for child maltreatment deaths are provided for the period of 2011-2019 by the CADR 2020 Annual Report.

Chart 4: Florida's Child Maltreatment Death Rate per 100,000 Children



* The number of verified child maltreatment cases for 2016, 2017 and 2018 are not complete given the number of cases still open and not yet transferred to local CADR Committees for review. Past year figures may have changed as cases were closed following the submission of past CADR reports.

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The following prevention recommendations developed by the State CADR Committee provide an overview of strategies and approaches intended to address preventable child fatalities in Florida.

- Continue Efforts to Relay Timely Information to Caregivers Regarding the Safety of Children.
- Develop strategies to ensure consistent and coordinated prevention-related messaging across local and state agencies.
- Expand efforts to collect data related to co-occurring substance abuse and mental health disorders.
- Explore efforts to collect data related to near fatalities in cases of near-drowning, near-fatal incidents of inflicted trauma and near-fatal sleep-related asphyxia.
- Increase messaging around appropriate supervision and barriers of protection as primary factors in drowning prevention, in addition to establishing age appropriate expectations related to young children and swimming capabilities consistent with recommendations of the American Academy of Pediatrics.
- Continue to support programs and practices that enhance parenting skills and coordinate services provided to expectant mothers and partners.
- Encourage the consistent use of Sudden Unexpected Infant Death Reporting Forms and doll reenactments by death scene investigators for all sleep-related infant death investigations.
- Continue to support and encourage the development and evaluation of pilot projects and initiatives focused on local and regional community-based child fatality prevention.
- Explore the expansion of the CADR Florida Statutes language to permit Local CADR Committees the ability to review child and adolescent suicides to better inform targeted prevention initiatives.

Child Abuse Death Review Annual Report

As authorized by §39.001(11)(b), F.S., the Office has merged this section of its report with the Child Abuse Death Review Annual Report to avoid duplication of efforts. A copy of the most recent Child Abuse Death Review Annual Report will be made available on the Office's public website at www.flgov.com/child_advocacy.

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Summary of Adoption and Support for Adoptive Families

During SFY 2019 – 2020, Florida finalized 4,519 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, Guardian ad Litem, the Governor’s Office of Adoption and Child Protection, and many others.

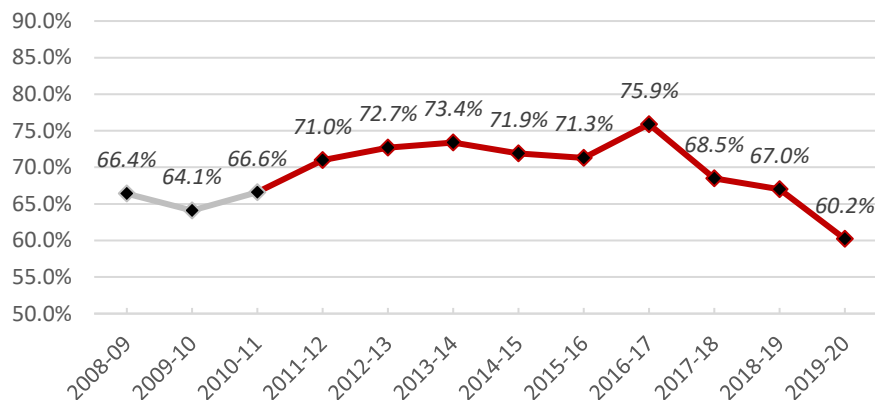
Timeliness of Adoption

The 2015-2020 CAPP Plan 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 Termination of Parental Rights (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 3 – Promotion of Adoption – By June 30, 2020, the percent of children adopted within 12 months of becoming legally free for adoption will be increased from the State Fiscal Year 2013 – 2014 rate of 73.4%.

The percentage of children adopted within 12 months of becoming legally free for adoption during SFY 2019 – 2020 was 60.2%. The table below reflects the state’s performance since SFY 2008 – 2009 as provided by the Department of Children and Families.

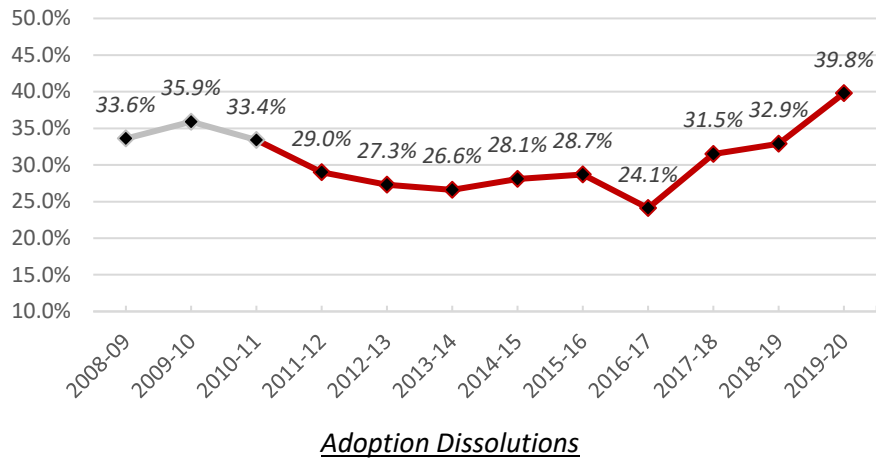
Chart 4: Percentage of Children Adopted Within 12 months of becoming Legally Free for Adoption



State Plan Desired Result 4 – Promotion of Adoption – By June 30, 2020, 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 decreased from the State Fiscal Year 2013 – 2014 rate of 26.6%.

The percentage of children adopted more than 12 months from becoming legally free for adoption during SFY 2019 – 2020 was 39.8%. The table on the next page reflects the state’s performance since SFY 2008 – 2009 as provided by the Department of Children and Families.

Chart 5: Percentage of Children Adopted More Than 12 months from becoming Legally Free for Adoption



The number of adoption dissolutions has continued to decrease from 105 in SFY 2014-2015 to 40 in SFY 2017-2018. Section 65C-16.001(12), Florida Administrative Code, defines dissolutions as the return of a child to out-of-home care and the subsequent termination of the parental rights of the adoptive parents.

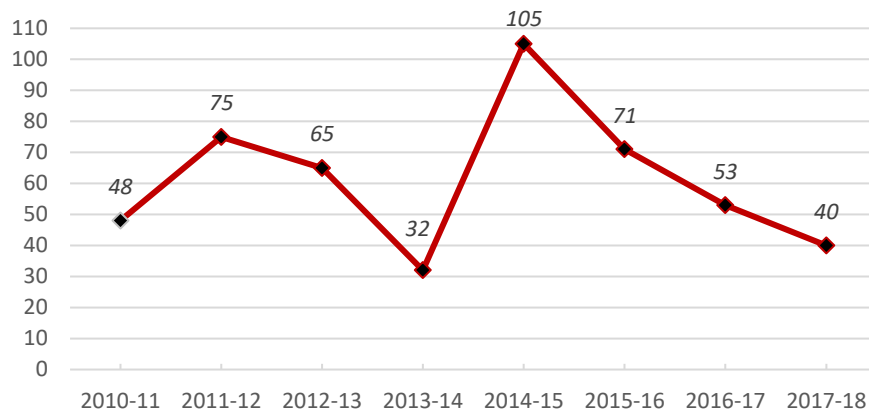
Dissolutions continue to be tracked manually by the CBC Lead Agencies and the DCF Statewide Adoption Program Specialist. Dissolutions are less likely to occur within the first year, so this information is reported for the prior fiscal year. CBC Lead Agencies reported that often adoptions that occurred years ago when the child was at a young age are the population of children who are now having dissolutions. This subset of children are now adolescents, and their adoptive parents are unable to manage their behaviors. CBC Lead Agencies continue to expand post adoption services to better support families in areas to prevent dissolutions.

State Plan Desired Result 5 – Support for Adoptive Families – By June 30, 2020, the annual number of adopted children who are returned to foster care (regardless of when the adoption was finalized) will be reduced from the average of SFYs 2010-2015 number of 65 children.

Note: The performance measure was adjusted due to incorrect fiscal years identified and inconsistencies in dissolution numbers prior to the submission of the DCF Adoption Incentive Annual Report. Adjustments made ensures alignment with all submitted Adoption Incentive Annual Reports since 2016.

The number of adopted children who were returned to foster care during SFY 2017 – 2018 was 40. The table on the next page reflects the state’s performance since SFY 2010 – 2018 as provided by the Department of Children and Families.

Chart 6: Number of Adoption Dissolutions



Adoption Incentive Annual Report

As authorized by §39.001(11)(b), F.S., the Office has merged this section of its report with the Department of Children and Families' Adoption Incentive Annual Report to avoid duplication of efforts. A copy of the most recent Adoption Incentive Annual Report will be made available on the Office's public website at www.flgov.com/child_advocacy.

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Section 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.

[Agency for Health Care Administration](#)

Medicaid provides health insurance for adopted children, providing comprehensive coverage of medically necessary medical, behavioral health, and dental care services at no cost to the family. These services are provided under the federal Early and Periodic Screening, Diagnosis, and Treatment benefit.

The Agency for Health Care Administration has no further recommendations at this time.

[Agency for Persons with Disabilities](#)

The Agency for Persons with Disabilities (APD) works closely with its 15 regional Family Care Councils (FCCs) to educate adoptive and foster parents about services and supports available for children with special needs. APD developed, and continues to use, an informational card to assist the FCCs with spreading the word about the rewards of caring for youth with developmental disabilities and to encourage families to consider becoming foster parents. The FCCs have agreed to provide peer support for foster families serving children with developmental disabilities.

Youth in the child welfare system are a high priority for waiver enrollment. The agency enrolled 99 children into the iBudget Florida Medicaid waiver at the time of adoption, entry into extended foster care, and family reunification, who were referred to APD for services by Community-Based Care organizations in fiscal year 2019-20.

Department of Children and Families

The Department of Children and Families has no budget requests or recommendations at this time.

Department of Corrections

The Florida Department of Corrections recognizes that family and family members are vital to the successful restoration and transition of individuals returning to the community. Maximizing the role of families in the reentry process increases public safety. By focusing on family reunification and parenting skills, the Department continues to promote stronger relationships between returning citizens and their families which correlates with increased post-release success. In addition to strengthening families' protective factors to reduce incidences of child abuse and neglect by providing parents with effective parenting strategies the Florida Department of Corrections continues to:

- Foster visitation of family members by moving inmates closer to home, when suitable
- Partner with organizations, such as Children of Inmates
- Utilize volunteers to implement the Parenting from Inside curriculum at our institutions
- Employ video visitation and email to maintain family ties while individuals are incarcerated through both an interactive kiosk, available in each general population housing unit and secure tablets
- Incorporate family reunification/parenting programs into each contract for substance use disorder treatment services in our institutions
- Identify risk factors associated with family dynamics using the Department's evidence driven assessment, CINAS, and delivering programs and services to mitigate these risks for both inmates and offenders
- Utilize a vast list of community providers to provide offenders with programs and services designed to teach positive parenting skills and prevent abuse and neglect.

Department of Education

In 2020, the department continued its participation in Child Abuse Prevention and Permanency (CAPP) efforts with support from all relevant bureaus and program areas. Specifically, this included the Bureau of Federal Educational Programs, the Bureau of Exceptional Education and Student Services, the Bureau of Standards and Instructional Support, the Office of Independent Education and Parental Choice, and the Bureau of Family and Community Outreach. The department's efforts have included securing grant funds that are used, in part, to combat trafficking of children; promoting child abuse prevention resources via training sessions and our agency website; and offering technical assistance to school district administrators on compliance with the current anti-bullying statute.

In 2019, the State Board of Education adopted a new rule declaring that every school in Florida be a "Child Trafficking Free Zone" and requiring instruction in child trafficking prevention in grades K-12. The instruction must include, at a minimum, the following components:

- (a) Recognition of signs of human trafficking;
- (b) Awareness of resources, including national, state and local resources;
- (c) Prevention of the abuse of and addiction to alcohol, nicotine, and drugs;

(d) Information on the prevalence, nature, and strategies to reduce the risk of human trafficking, techniques to set healthy boundaries, and how to safely seek assistance; and

(e) Information on how social media and mobile device applications are used for human trafficking.

The department reviews school district implementation plans related to the aforementioned rule, which are due December 1 of each year, and the district annual report, which are due July 1 of each year.

The department used federal grant funds to task a Human Trafficking Prevention Education Specialist with providing workshops to teachers and creating a child trafficking prevention education guide. A Required Instruction Reporting Portal was developed in 2020 to allow school districts to document instruction for students in grades K-12 related to their implementation of required instruction, including child trafficking prevention education. The online portal is a benefit to school districts, stakeholders, and the department. The online submission system provides stakeholders with access to related plans and documentation on one central website. It also allows the department to streamline the guidance and support it provides to districts and the public. Implementation plans and annual reports are accessible by topic or by local educational agency at <https://flrequiredinstruction.org/>.

The department also has a State Foster Care Liaison who works closely with the Department of Children and Families to provide guidance and professional development on federal requirements for students in care to community-based care facilities and district foster care liaisons.

Florida offers a number of K-12 scholarship programs for students in the foster care system. Specifically, there are provisions for foster students to utilize the McKay Scholarship Program for students with disabilities by choosing to attend either an approved private school or another public school. Additionally, both the Florida Tax Credit Scholarship and Family Empowerment Scholarship programs for families with limited financial means have carved out eligibility provisions for students in the foster system. Lastly, the Hope Scholarship Program was created for public school students who have been subjected to an incident of bullying. Additional information on these programs can be found at <http://fldoe.org/schools/school-choice/k-12-scholarship-programs/>

Department of Health

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

Department of Juvenile Justice

The Department of Juvenile Justice recognizes that proactive prevention and data-driven interventions for at risk youth can save taxpayer dollars, while saving the futures of youth and keeping communities safe. Many of the youth involved in the juvenile justice system are also involved in the dependency system or have a history of DCF out-of-home placement. For this population, it is important that both agencies utilize their resources and respond to a youth's behavior from a trauma informed perspective to positively impact the future of these youth. To that end, the department's FY 2021-22 legislative budget request and legislative policy proposals include items that aim to increase the success of youth in both the juvenile justice and dependency systems.

\$457,232 in funding is requested to upgrade current electronic monitoring services to improve the tracking and monitoring of youth and increase the number of units available. Courts are increasingly ordering electronic monitoring for youth as a means of keeping them out of secure detention, while still ensuring public safety. For youth in the dependency system, secure detention could potentially be yet another traumatic change in placement. Youth on electronic monitoring are closely supervised to ensure they are following the guidelines laid out by the court to help curb their at-risk behaviors to prevent future juvenile delinquency and encourage positive choices and healthy relationships.

In addition, the Department is seeking changes to statute that will discourage low risk youth from being ordered to secure detention for failing to appear in court or for violating a condition of their probation that is not a new law violation. Research shows that sanctions should reflect the seriousness of the violation and how effective that sanction will be in moving the youth to compliant behavior. When youth receive optimal placement and sanctions match the seriousness of the offense, they are less likely to recidivate. Violations that are not new law violations, such as truancy or missing curfew, may not rise to the level necessary to violate the youth on the terms of their court ordered probation or hold them in secure detention. Moreover, courts should consider whether a child's failure to appear was due to circumstances beyond their control, such as a lack of transportation. Encouraging the courts to use appropriate consequences for youth will help to further the Department's mission to increase public safety by reducing delinquency through effective prevention, intervention and services that strengthen families and turn around the lives of troubled youth.

Maintaining current levels of prevention and early intervention funding continues to be a priority for the Department as well. Within the Department's base budget, over \$78 million in recurring dollars is allocated for prevention efforts and subsequently distributed to community programs throughout the state. Ensuring that this recurring funding is sustained each year is vital to the work of the Department and our community partners. Some of these community partners include Prodigy, PACE Center for Girls, and The Boys and Girls Clubs. These programs work to identify risk factors and build upon protective factors such as positive peer relationships, active participation in school and engagement in healthy and productive activities. One of the largest recipients of this prevention funding is the Children in Need of Services and Families in Need of Services (CINS/FINS) programs. CINS/FINS programs receive over \$42 million of the \$78 million base budget. Many of the youth served by these programs are involved with the dependency system and are runaways, habitually truant or homeless. By providing counseling and temporary shelters, CINS/FINS aims to help children and their families resolve conflict. Success in these programs can lead to better family connections and better life outcomes for these youth.

Department of Law Enforcement

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

Guardian ad Litem

The Guardian ad Litem Program, as the entity representing abused, abandoned, and neglected children in dependency court, engages in numerous ongoing efforts to further permanency for children.

For the last three years, the Program championed legislation to promote timely permanency for children in the dependency system. In 2020, those efforts resulted in the enactment of the “Helping a Child One Veteran at a Time Act,” which expanded adoption incentives to state OPS employees, veterans and service members, as well as other legislation to promote accountability and improve performance by all parties.

In the 2021 session, the GAL Program will be advocating for legislation to streamline the adoption process. To do this, we propose having dependency judges handle appeals hearings rather than doing this through the Ch. 120 process of administrative hearings.

We will also be championing a bill to remove barriers for attending college or vocational school for youth aging out of the system. This includes clarifying that youth who graduate before age 18 are eligible for the tuition waiver and post-secondary financial supports and services to help them succeed.

Office of Early Learning

The Office of Early Learning (OEL) serves children birth to 13 years of age and works to ensure caregivers and educators are trained in early development, healthy social-emotional development and positive classroom strategies so all children are ready to learn. With funding from the Child Care and Development Block Grant along with a Preschool Development Birth through Five Renewal Grant (PDGR), OEL has implemented the following projects to help teachers and caregivers mitigate Adverse Childhood Experiences (ACEs) and establish a healthy learning environment.

Infant and Early Childhood Mental Health

Children experiencing toxic stress and trauma often struggle in the classroom. Educators who understand a child’s healthy social-emotional development are key to identifying when a child should be screened for possible concerns, employing classroom strategies to develop those skills, and knowing when a child needs additional services. OEL is working to endorse early childhood educators in the [Florida Infant Mental Health Endorsement](#) (FIMH-E®). OEL is working closely with the Florida Association for Infant Mental Health (FAIMH), the University of South Florida, St. Petersburg (USFSP), and the Panhandle Area Education Consortium (PAEC) to provide these endorsement supports.

OEL also works with the Department of Children and Families (DCF), Office of Child Care Regulation, to provide [Trauma-Informed Care for Child Care Program Directors](#) to assist child care programs in implementing trauma-informed care for the families they serve. Focus is on recognizing the signs of trauma to help children regulate emotions and behaviors, evaluation of the physical learning environment for trauma-sensitive supports, and examination of the importance of self-care.

The Florida State University (FSU) 10 Components of Quality Care for Infants and Toddlers

The *FSU 10 Components of Quality Care for Infants and Toddlers* (10 Components of Quality) is a quality improvement tool developed by the FSU Center for Prevention and Early Intervention Policy (CPEIP). CPEIP’s focus is on infants and toddlers in the areas of school readiness, infant mental health, home visiting and quality child care practices. The 10 Components of Quality system addresses the gap between existing levels of quality in infant and toddler care and the higher levels of quality needed to support the unique developmental needs of infants and toddlers. Each component gives prominence to the social-

emotional and relationship needs of infants and toddlers, identified by the latest research as the foundation for all future development.

CLASS Assessment and CLASS Group Coaching - MMCI

Positive interactions between teachers and children establish trusting relationships that influence the classroom environment and students' learning. These relationships also help establish a connection for children, especially those who have experienced trauma and toxic stress. The statewide capacity-sustaining Classroom Assessment Scoring System® (CLASS) Initiative offers training to early learning coalition and Redlands Christian Migrant Association (RCMA) staff, Head Start/Early Head Start staff, OEL staff, training partners and early education representatives from various provider associations. An observation-based program assessment, CLASS measures the strength of teacher-child interactions. Quality measurement requirements under the law include a minimum threshold for contracting purposes and program improvement through a quality improvement plan. The CLASS Group Coaching-MMCI (formerly Making the Most of Classroom Interactions or MMCI) training provides educators with a deeper understanding of each CLASS measure and how to use them to improve classroom interactions.

Screening and Referral

Identification of potential learning delays makes a difference when a child is in need of early intervention services. By law, with parental consent, coalitions must screen children six weeks of age to kindergarten entry for developmental concerns. Many children are screened for social-emotional concerns as well. Each coalition employs an inclusion specialist to work with children, families and early childhood educators to make referrals for additional assessments and services. Additionally, the inclusion specialist may work with teachers and center directors to ensure the classroom environment supports each child's individual needs.

Warm Line Services

Each early learning coalition offers *Warm Line* services to assist parents and providers with information and referrals for child evaluations and inclusive services. The inclusion specialists respond after a developmental screening has indicated areas of concern regarding a child or when a warm line call comes through the coalition. The inclusion specialist will contact the early learning provider to offer observations of the child in the early learning environment and will rescreen the child as part of the inclusion services. The inclusion specialists support early learning providers and parents with technical assistance, planning focused interventions for individual children who require additional supports and linking early interventions for children prior to kindergarten entry.

Pyramid Model

The University of South Florida is supporting OEL in the statewide implementation of the *Pyramid Model for Supporting Social Emotional Competence in Infants and Young Children* (Pyramid Model), which is a positive behavioral intervention and support framework that uses systems thinking and implementation science to promote evidence-based practices. The [Pyramid Model](#) helps early childhood educators build skills for nurturing and responsive caregiving, create learning environments, provide targeted social-emotional skills and support children with challenging behavior. Research has demonstrated that when implemented with fidelity, the Pyramid Model reduces challenging behavior and improves social skills in young children.

Online Digital Supports

Online digital supports connect families with programs and services that meet children’s unique needs. The services provide families with tools for supporting children’s development through an educational program or mobile application with a specific focus on dual language learners, children with unique abilities, at-risk, homeless and rural populations. The Home Instruction for Parents of Preschool Youngsters (HIPPY) program is conducting a pilot of the mobile application, utilizing their program’s home visitors and families enrolled in their program. The [HIPPY](#) program serves rural families who have children that are dual language learners and HIPPY also works with families that are at-risk and some that are homeless.

Social-Emotional and Mental Health Grants

Through the PDGR, early learning coalitions and RCMA were awarded sub-grants to identify and provide mental health and/or social-emotional supports for School Readiness and Voluntary Prekindergarten children, their families and contracted providers, as well as coalition and RCMA staff. Recognizing that the COVID-19 pandemic has added stress to the lives of many children, early learning providers and coalition staff, OEL provided these sub-grants to meet the needs of the constituents of each coalition and RCMA. Coalitions and RCMA identified local community needs and created plans to provide assistance for products and services that best support providers, children and their families.

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APPENDIX

Governor's Office of Adoption and Child Protection
Florida Statutes 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:
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. 39.0011 to receive financial assistance.

(10) PLAN FOR COMPREHENSIVE APPROACH.—

- (a) 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.
 - 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.
- i. 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 16 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;
7. The Commissioner of Education;
8. The director of the Statewide Guardian Ad Litem Office;
9. The director of the Office of Adoption and Child Protection;
10. A superintendent of schools, appointed by the Governor; and
11. Five members who represent children and youth advocacy organizations, and who are not service providers, 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. 112.061 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. 216.013.
 - (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; s. 1, ch. 2016-19.

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.
- (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.

