

Child Caring Agency Assessment Guide

Chapter 65C-46, Florida Administrative Code

(Revised August 29, 2024)

- Initial (INTL); Renewal (RL); Quarterly (QRLY).
- Providers must submit updated documentation when there is a change within the agency that requires amendments and when the provider makes a change to one of the licensing standards.
- Policy and procedures shall be reviewed and approved by the regional licensing office at initial licensure and when updates are made by the provider during the licensing year and at time of license renewal.

65C-46.002 Application Packet and Licensing Documents.		
Inspection Type	Regulation	Interpretation Guideline
INTL RL	<p>The “License Application for Child-Caring and Child-Placing Agencies,” CF-FSP 5412, Apr 2021, incorporated by reference and available at http://www.flrules.org/Gateway/reference.asp?No=Ref-13068.</p> <p>(Document must be uploaded in CCWIS)</p>	<p>Application must be dated and signed by the Executive Director (licensee).</p> <p>All sections of application must be completed to include any additional facilities the agency is seeking to have licensed and disclosure of any previous roles as a board member or executive director.</p> <p>Qualified residential treatment programs will always fall under the house parent and/or 24-hour shift staff column.</p> <p>The licensee’s information is the information of the executive director. The primary contact information is the information for the facility/home.</p> <p>The licensee must be asked if they currently hold a license or have ever been licensed in the past. The licensee must provide the name of the facility/home and the licensing authority name and contact information.</p> <p>Providers that indicate they are a Medicaid provider must list the type of Medicaid they have. (BHOS, Therapeutic, Community, etc.)</p> <p>The application packet was submitted 90 days prior to the expiration of the licensed (RL)</p>

INTL	<p>Agencies providing care for one to six, or seven to 14 children shall complete the “Community Residential Homes Local Ordinance Certification,” CF 1786, May 2015, incorporated by reference and available at http://www.flrules.org/Gateway/reference.asp?No=Ref-13065.</p> <p>(Document must be uploaded in CCWIS)</p>	<p>This form must be filled out by providers who are applying to serve one to six or seven to fourteen residents in a community residential setting. This certifies if the home complies with the local government notification and the requirements in s. 419, F.S., regarding zoning.</p> <p>All traditional homes must meet this requirement. All other subtypes must align with s. 419, F.S., depending on the location of the home.</p> <p>*Relocation of the home during the licensing year requires the completion of the form when relocating to a community residential setting.</p>
INTL RL	<p>For child-caring agencies obtaining federal grants, loans, contracts, property, discounts, or other federal financial assistance, the executive director shall sign the “Civil Rights Certificate,” CF 707, Apr 2021, incorporated by reference and available at http://www.flrules.org/Gateway/reference.asp?No=Ref-13062.</p> <p>(Document must be uploaded in CCWIS)</p>	<p>This form must be completed by the licensee when obtaining federal grants, loans, contracts (except contracts of insurance or guaranty), property, discounts, or other federal financial assistance for programs.</p> <p>The provider’s budget and financial audit must reflect the financial assistance received.</p>
INTL	<p>Program Description</p> <p>(Documents must be uploaded in CCWIS)</p>	<p>The program description indicates:</p> <ol style="list-style-type: none"> 1. The geographic area the program will be serving, to include if serving on a county, region or statewide level, 2. If serving dependent and/or non-dependent populations, 3. List of services they will provide (service must at minimum align with the service requirements identified by the Department for the specific setting type), and 4. Which organization’s the child-caring agency will accept referrals from, or which organization’s referrals will not be accepted.
INTL	<p>Local zoning</p> <p>(Documents must be uploaded in CCWIS)</p>	<p>Confirmation the provider notified their local zoning agent indicating the child-caring agency intends to serve as a child-caring agency under the city’s zoning ordinance.</p> <p>*Also required when the provider relocates during the licensing year.</p>
INTL	<p>Accreditation, as applicable.</p>	<p>The accreditation that outlines the date of issuance and expiration, survey,</p>

	(Documents must be uploaded in CCWIS)	and the services the agency is permitted to perform under the accreditation.
INTL	Applicant reference check from the current or previous licensing authority (to include other agencies outside DCF such as APD, AHCA, SAMH, Day-care, etc), if licensed in another region or state. (Documents must be uploaded in CCWIS)	The reference confirms or refutes the licensee’s ability to serve children, and their work performance does not affect their ability to perform in the role of an executive director. The reference date should not be greater than the date in which the applicant first contacted the licensing team to begin the application process. The reference must outline the name of the person responding to the reference, their contact information, and name of agency/organization. *Unfavorable references must be staffed through the Provider Review Committee if the desire is to proceed with licensure. Written documentation in the licensing file must outline the outcome of the staffing and reason for approving or denying the license application based on the reference provided.
65C-46.003 Administration and Organization		
INTL	Statement of purpose (Documents must be uploaded in CCWIS)	Documentation outlining the following about the agency: 1. Mission and vision, 2. Whether they are For Profit or Non-Profit, 3. Specific services it will provide, and 4. Whether the services will be provided directly by the agency or through referral to an outside provider. *The statement of purpose may be included with the program description
INTL RL	Organizational chart and employee roster (Documents must be uploaded in CCWIS)	The organization chart shall outline the administrative structure (title/role) including the lines of authority for each position in the organizational chart. Employee roster shall include the name of all staff members, date of hire, if CPR/First aid certified and indicate their role as direct care or non-direct

		<p>care, and full time, part time or volunteer.</p> <p>When changes in the agency’s executive director, statement of purpose, admission criteria, business name, address, or licensing setting type occurred, the Department received written notification within 30 days of the change.</p>
INTL RL	<p>Governing Body/Board or Advisory members</p> <p>(Documents must be uploaded in CCWIS)</p>	<p>Provides a listing with a minimum of 5 members and the following information for each member:</p> <ol style="list-style-type: none"> 1. Name, 2. Address, 3. Term of membership, and 4. Each office and the term of that office. 5. If the agency is For Profit, they must also provide confirmation through written documentation from the Advisory board that each member does not have a proprietary interest in the child-caring agency or program. <p><i>*Non-For Profit, corporations, and public organization are required to have a Board of Directors</i></p> <p>A copy of the following must be submitted for the licensing file:</p> <ol style="list-style-type: none"> 1. Annual meeting minutes with the date of the meeting, participants, and topics of discussion. 2. Policy and procedures outlining the responsibilities of the governing body, selection criteria and rotation of its members, and plan for storage of child files.
INTL RL	<p>Annual Budget</p> <p>(Documents must be uploaded in CCWIS)</p>	<p>A copy of an annual budget with written confirmation that it was approved by the governing body.</p> <ul style="list-style-type: none"> • The annual budget shall capture the anticipated income and expenditures necessary to provide the services indicated in the statement of purpose and program description. <p>Copy of the correspondence confirming the provider submitted the Title IV-E Maintenance Budget to the Community Based Care Lead Agency, if serving</p>

		dependent children. The template must be submitted prior to accepting children. The final copy must be provided to the regional licensing team.
INTL RL	Financial Statements (Documents must uploaded in CCWIS)	<p>A bank statement or approval of a loan confirming the agency has at least six months of sufficient funding to operate without hardship. (INTL).</p> <p>Copy of a financial audit that contains the name of the auditor. All audits must accompany written confirmation that it was reviewed and approved by the governing body.</p> <ul style="list-style-type: none"> • An independent certified public accountant (CPA) must complete the audit for agencies who expend equal to or more than \$750, 000 annually, in accordance with Florida Statute. • If the provider is under the threshold of \$750,000, the provider shall provide proof of a financial review conducted by external auditors. <p>Audits that reflect a deficit and financial concerns requires the provider to be placed on a corrective action plan. If the deficit is minimal and does not impact the well-being of children, the provider must submit written documentation that outlines:</p> <ol style="list-style-type: none"> 1. A plan to be able to continue providing adequate service delivery, 2. The agency’s plan to eliminate the deficit, 3. Confirmation the plan was approved by the governing body.
INTL RL	Fees for Service (Documents must uploaded in CCWIS)	If fee for services is charged, a copy of written policy that outlines what the agency’s financial cost is for each service provided and criteria for fees to be waived.
INTL	Financial Contributions (Documents must uploaded in CCWIS)	A charitable permit pursuant to Chapter 496, F.S., if providers obtain funding through public solicitation.
INTL	Business Registration (Documents must uploaded in CCWIS)	<p>Copy of a Florida business registration confirming the provider is registered to conduct business in Florida.</p> <p>Validation of the submitted document must be completed through Search</p>

		<p>for Corporations, Limited Liability Companies, Limited Partnerships, and Trademarks by Name (sunbiz.org)</p> <p>Articles of incorporation, if applicable.</p>
INTL RL QTLY	Grievance (Documents must uploaded in CCWIS)	<p>Written procedures reflect are written in a clear and simple manner that is developmentally appropriate for children.</p> <p>Physical inspection confirms grievance procedures are posted in areas of the agency where children/staff frequent and can read without scrutiny. The posting of the grievance procedures outlines steps to file a grievance and how a grievance will be handled.</p>
INTL RL QTLY	Ombudsman Contact Information	Physical inspection confirms the phone number (1-844-KIDS-FLA) for the Department’s Ombudsman is posted in areas frequented by children and can be read without scrutiny.
65C-46.004 Buildings, Grounds, Equipment, and Interior Accommodations		
INTL RL QTLY	Grounds, Equipment, and Recreational Areas (Documents must uploaded in CCWIS)	<p>Physical Inspection confirms:</p> <ol style="list-style-type: none"> 1. The indoor, outdoor, and recreational areas were observed to be clean, well-kept, and free of hazards. 2. All hazardous equipment and chemicals are out of reach from residents based on their age, physical, and mental ability. 3. Recreational equipment has no jagged or sharp edges or construction and are in good condition. 4. The outdoor areas are free from trash, litter, and debris. 5. The outdoor areas are drained. 6. If the agency has equipment that is hazardous, safety regulations were implemented that prohibits children from using the equipment, such as signage and fencing to secure the area. <ul style="list-style-type: none"> • Written documentation was submitted by the agency outlining the requirement for keeping the equipment on site. The Department must approve the allowance of the hazard equipment to remain on site. • If the hazardous equipment is included activities, the agency must submit plan that outlines when the equipment will be used, age range of children who can use it, and the supervision requirements

		when the equipment is in use.
INTL RL QTLY	Interior Accommodations	Physical inspection confirms that facility/home: <ol style="list-style-type: none"> 1. Is decorated and furnished in a homelike environment. 2. All furniture is in good condition, well maintained, and age and development appropriate for the children residing in the facility/home. 3. There is space for the residents to study quietly and well lit. 4. All offices for administration function are separate from the children's living area. 5. There is adequate space to allow staff and children to speak in private. 6. The building has outside ventilation by means of windows, louvers, air conditioners, or mechanical ventilation in all rooms being used by the residents. Windows and doors being used for ventilation shall have screens. 7. Hallways have night lights or other means to ensure illumination at night. 8. There is operable central heat and air, and interior areas are temperature-controlled in a manner conducive to comfort, safety, and privacy. 9. Table fans and floor fans have protective covers.
INTL RL QTLY	Dining Area	Physical inspection confirms: <ol style="list-style-type: none"> 1. There is one or more dining area large enough to accommodate the number of children who reside in the facility. 2. The dining area accommodates staff who dine with the children. 3. The dining area must have comfortable seating arrangements to allow for ample space in between individuals seated at the table. 4. The number of chairs must match the licensed bed capacity to allow for each child to have a chair.
INTL RL QTLY	Living Room	Physical inspection confirms: <ol style="list-style-type: none"> 1. The home has a living room that is centrally located and available for all children to use. 2. Wilderness camps must have a designated meeting space that is used for staff and children to gather in. <ul style="list-style-type: none"> • If the living room, or a meeting space in the case of a wilderness camp, is also used as an indoor recreational area, the area must be large enough to accommodate the activities for all children.

<p>INTL RL QTLY</p>	<p>Bathrooms</p>	<p>Physical inspection confirms:</p> <ol style="list-style-type: none"> 1. There is at least one bathroom fully equipped with a toilet, sink, and tub or shower for every six children. 2. Bathrooms have working water, electricity, are free of hazardous. 3. Toilets, tubs, and showers are for individual use to allow for privacy. 4. There are non-slip surfaces in showers/tubs, toilet paper and holders, hand towels or disposable paper towels, mirrors at a height convenient for children. 5. Toiletries are stored properly based on the child's age. If the bathroom does not allow for storage of toiletries, observations confirm adequate storage area outside of the bathrooms. 6. For non-ambulatory children, bathrooms were observed with: <ul style="list-style-type: none"> • Appropriate grab bars in the toilet and bathing area, and • Doors wide enough to accommodate wheelchair and waling device.
<p>INTL RL QTLY</p>	<p>Bedrooms (Documents must uploaded in CCWIS)</p>	<p>Physical inspection confirms:</p> <ol style="list-style-type: none"> 1. There is 1 bedroom for every 4 children. <ul style="list-style-type: none"> • If the provider has more than 4 children in 1 bedroom, there is a copy on file of a written request submitted to the regional licensing team to place more than 4 children in one room. The request outlines the best interest for each child to share a room collectively. • When the request to allow more than 4 children to share a room was granted by the Department, the provider adhered to the approval of only allowing those specific children in the circumstances cited in the written request to share the room with more than 4 beds. 2. The bedrooms have 50 square feet per child and the ceiling height is at least 7 feet, 6 inches. <ul style="list-style-type: none"> • Dormitory style bedroom is only for those providers licensed prior to July 1, 1987. • Providers licensed prior to July 1, 1987, who underwent new construction are now aligned with the 50 square feet per child the ceiling height requirements. 3. Each child has a bed and closet or dresser/chest for clothing and personal belongings.

		<p>4. Children personalized their room as evidence by decorations, and person belongings that are not offensive or discriminatory.</p> <p>5. Beds were observed to have clean sheets, pillows, pillow cases, blankets, and a non-institutional mattress that is in good condition. The bed is at least 30 inches wide and not shorter than the child's height.</p> <p>6. There is a bedroom that can accommodate non-ambulatory children on the first floor.</p> <p>7. Bunkbeds were observed:</p> <ul style="list-style-type: none"> • To have appropriate safety rails as needed. • Children using the top bunk can sit up in the bed. • Bunkbeds with more than 2 tiers has a manufacture sticker and is placed away from ceiling fans. <p>8. There appropriate sleeping structures and do NOT have any of the following:</p> <ul style="list-style-type: none"> • Cribs with drop-down sides. • Foldaway beds. • Cots <p>9. Night lights or other means to ensure illumination at night</p> <p>10. Children over the age of 36 months are sharing a room with the same gender, unless it is to maintain a sibling group.</p> <ul style="list-style-type: none"> • There is written documentation through the comprehensive placement assessment that supports room sharing for children over 36 months of age who are of different genders.
INTL RL QTLY	Laundry	<p>Physical inspection confirms:</p> <p>1. Laundry facilities are observed to be separate from areas occupied by the residents.</p> <p>2. Children who are age appropriate and engaging in life skills have the space for sorting, drying, and ironing their clothing.</p> <p>3. Laundry appliance are not permitted in the rooms where the residents sleep.</p>
65C-46.005 Safety, Sanitation, and Food Service Requirements.		
INTL RL	Health inspections	Radon test, if applicable, with date of completion and outcome of the testing. Documentation must outline which of the approved individuals

<p>QTLY</p>	<p>(Documents must uploaded in CCWIS)</p>	<p>completed the radon testing:</p> <ol style="list-style-type: none"> 1. DOH 2. State certified individual 3. Child-caring agency using a radon testing kit provided that the instructions are followed. <p>Copies of inspections shall have a satisfactory outcome by the Department of Health (DOH) or the Department’s regional licensing team.</p> <ol style="list-style-type: none"> 1. The date of the inspection must be reflective on the document. 2. Any deficiencies corrected by the provider shall be reflective on the inspection form. <p>Physical inspection confirms that the maximum hot water temperature is 120 degrees Fahrenheit at the kitchen and bathroom faucets and in bathing areas. (INTL, RL, QTLY)</p>
<p>INTL RL QTLY</p>	<p>Fire Safety (Documents must uploaded in CCWIS)</p>	<p>Copy of the fire inspection shall have a satisfactory outcome by the Fire Marshal. Written documentation must reflect the address that is being licensed and the date the inspection was completed.</p> <p>Damages caused by fire were reported immediately to the regional licensing team.</p> <p>Documentation confirms the following:</p> <ol style="list-style-type: none"> 1. A copy of all incident reports where a fire occurred is on file at the facility. 2. Fire drills were held at minimum once a month 3. Fire and emergency procedures were reviewed with staff and children on a scheduled basis according to the agencies policy. <p>Physical inspection confirms:</p> <ol style="list-style-type: none"> 1. Procedures for fire and other emergency situations, including the route of evacuation, are posted in conspicuous places. Evacuation maps include: <ul style="list-style-type: none"> • All exits of the home • Location of emergency equipment such as fire extinguisher • Safe assembly points outside of the facility/home. 2. Hallways, stairs, and exits are well-lit and kept clear for safe exit.

<p>INTL RL QTLY</p>	<p>Transportation (Documents must uploaded in CCWIS)</p>	<p>Documentation outlining dates when the transport occurred, number of children per vehicle, and name of the driver and staff during the transport to confirm ratio compliance.</p> <p>The ratio while transporting children shall follow requirements outlined in 65C-46.011 F.A.C</p> <p>Copy of insurance confirming liability coverage, and car registration with a valid expiration date.</p> <p>Policy and procedures outlining the use of vehicles to include the accountability of passengers and coverage for staff ratio.</p> <p>Physical inspection confirms all vehicles were observed to be in safe and operable condition. The inspection confirmed:</p> <ol style="list-style-type: none"> 1. The number of seats and and restraining devies align with the capacity on the license 2. First aid kit had complete supplies for buses and vans transporting 6 or more children
<p>INTL RL QTLY</p>	<p>Communication Accessibility & Signage</p>	<p>Physical inspection validates:</p> <ol style="list-style-type: none"> 1.The home/facility was observed with a means for staff and children to communicate, which may include mobile or landline telephones, computers for video communication or conferencing. 2. Postings of the following in a clear and conspicuous location: <ul style="list-style-type: none"> • Emergency numbers (911, poison control, and the Florida Abuse Hotline • Department approved youth in foster care rights and expectations brochure • Department’s standardized human trafficking awareness poster
<p>INTL RL</p>	<p>Firearms Safety Requirements</p>	<p>The personnel file contains a copy of the “acknowledgement of firearms safety requirements” form signed by the executive director, and program director and, house parent.</p>

<p>INTL RL</p>	<p>Pets</p> <p>(Document must uploaded in CCWIS)</p>	<p>If there are pets, documentation reflects the assessment of the pet and safety to the children. Documentation must include the type of pet, size, up to date vaccinations, as applicable, and any previously known incidents involving the pet and children or staff.</p> <p>Review of the child and personnel file verifies documentation if a resident and or staff member has a service animal under the Title II of the ADA.</p>
<p>INTL RL</p>	<p>Disaster Preparedness and Evacuation Plan</p> <p>(Document must uploaded in CCWIS)</p>	<p>A copy of a written disaster preparedness and evacuation plan for natural or man-made disasters. The plan must outline:</p> <ol style="list-style-type: none"> 1. Emergency exits, 2. Address for relocation, 3. Emergency contact information, 4. List of emergency supplies maintained at the facility, 5. Process for notifying the Department, Community Based Care lead agency, and legal guardians, 6. Plans for staff ratio, 6. Steps taken for sheltering-in-place in the event of an emergency that requires the facility to lockdown. <p>Confirmation that the provider reviewed the preparedness plan 30 days prior to the beginning of hurricane season.</p> <p>When a disaster occurred, the provider completed the following:</p> <ol style="list-style-type: none"> 1. Followed the directives of its local emergency management center. 2. Maintained ongoing communication with the regional licensing team during an evacuation until their return 3. Notified the regional licensing team within 1 calendar day upon learning of any structural damages to the property, building, and loss of electricity and water 4. Provided a plan to correct the damages identified. <p>Communication between the CCA and the licensing specialist shall include:</p> <ol style="list-style-type: none"> 1. Accounting for the census prior to and throughout the evacuation. 2. Confirmation of the address in which the agency is relocating to. 3. Anticipated date of return.

		<p>4. Any challenges to meeting staff ratio requirements outlined in subsection 65C-46.011(11), F.A.C.; and</p> <p>5. Providing the basic needs such as: food, clothing, and medical treatment for children.</p>
INTL RL	<p>Communicable Disease Prevention and Preparedness</p> <p>(Documents must uploaded in CCWIS)</p>	<p>Written policy and procedure outlines:</p> <ol style="list-style-type: none"> 1. Prevention measures to prevent the spread of a pandemic or epidemic, 2. List of available resources to use, 3. Admission criteria during an outbreak, 4. Accommodations for visitation and schooling, 5. Capacity and ratio, 6. Plans for emergency volunteers, 7. Safety measures for children and staff, and 8. Steps taken to ensure children have up to date consent forms for medical care and treatment. <p>The provider escalated any conflicting resources to the regional licensing team during a pandemic or epidemic.</p>
INTL RL QTLY	<p>Food Service</p> <p>(Documents must uploaded in CCWIS)</p>	<p>Written procedures reflect the overall management of food service which includes:</p> <ol style="list-style-type: none"> 1. Requirement of 3 well balanced meals and snacks provided to all children, 2. How the facility will accommodate meals and snacks to those children with special dietary needs, and 3. The requirement for staff to be served the same food and eat at the same time as the children. <p>Review of menus reflect:</p> <ol style="list-style-type: none"> 1. Three meals are offered each day 2. Contains an authorized approval/signature by a certified dietician 3. Dates reflect six months of meals, and the expiration date is not greater than two years from date of approval. <p>The provider maintains menus for six month period.</p>

		<p>A copy of the registered dietician’s certification that captures the date of issuance and expiration, or length certification is valid for.</p> <p>Documentation confirming participation in the United States Department of Agriculture Food and Nutrition Service, if applicable. Confirmation may be used in leu of a menus.</p> <p>Physical inspection confirms menus are posted in the facility/home.</p>
<p>INT RL QTLY</p>	<p>Pools and body of water</p>	<p>Interviews with children confirmed that aquatic activities were aligned with the child’s level of skill.</p> <p>Physical inspection confirms:</p> <ol style="list-style-type: none"> 1. Pools were observed to be clean that allows one to see to the bottom of the pool. 2. Providers with a swimming pool located at a detached on-family or two-family dwelling or a noe family townhouse not more than three stories high , complies with the Residential Pool Safety Act, Section 515.27(1). Providers licensed prior to the year 2000 when the enactment of the Residential Pool Safety Act was entered into law, are considered to have met the requirement. 3. Providers with 8 or more residents that do not meet the Residential Pool Safety Act, shall comply with the required sfaety features for public swimmig pools in Section 514.0315. 4. Lifesaving equipment was observed on the property and located where it can be immediately accessible in case of an emergency. Minimum equipment shall include the following: <ul style="list-style-type: none"> • A whistle or other audible signal device; • A first aid kit; and • A ring buoy, rescue tube, life jacket or other flotation device with a rope attached which is of sufficient length for the area. 5. Wading pools were observed to be empty and stored when not in use. 6. Step and ladders for above ground pools are secured, locked, or removed when the pool is not in use.
<p>INT RL</p>	<p>Pool Safety Personnel</p>	<p>Documentation in the personnel file and compared with the staff schedule reflects that there is at least one person on staff during each shift who has</p>

QTLY		completed a community water safety course administered by American Red Cross, YMCA, or a certified water safety provider.
INT RL QTLY	Boating Activities	<p>Documentation confirmed that the following for boat activities:</p> <ol style="list-style-type: none"> 1. Boat safety drills were conducted with all children and staff prior to boating activities. Documentation must outline the dates of the drill, names of staff members and children that participated. 2. Boat safety training completed by staff to minimize drowning while boating. 3. Staff ratio was met. 4. The number of lifejackets account for the capacity the home is licensed for. <p>Providers that own their own vessel or watercraft must provide confirmation of liability insurance for insurable vessels or water craft used for extended travel.</p> <p>Physical inspection confirms:</p> <ol style="list-style-type: none"> 1. The boat has adequate sleeping arrangements. 2. Interviews with children confirmed the use of life jackets.
65C-46.006 Health and Medical Services		
INT RL QTLY	First Aid and Cardiopulmonary Resuscitation (CPR) (Documents must uploaded in CCWIS)	<p>Documentation in the personnel file confirms that the shift schedule has at least one staff member on duty who is trained to administer CPR.</p> <p>Physical inspection confirms:</p> <ol style="list-style-type: none"> 1. First aid kits were observed to be available to all staff members in each living unit and accessible to adults and out of reach of children. 2. First aid kit did not contain any expired products.
INTL RL	Medical Care (Documents must uploaded in CCWIS)	<p>Copy of operating procedures for dental and emergencies or life-threatening agencies include:</p> <ol style="list-style-type: none"> 1. Care and supervision made in cases of emergency when staff are required to accompany a child to the emergency room or urgent care. 2. Arrangements for emergency transportation

		<p>Documentation in the child’s file confirms if:</p> <ol style="list-style-type: none"> 1. A medical professional operating within their scope of their license was used when medical care was beyond the provisions of first aid. 2. The child’s legal guardian, attorney guardian ad lite, community-based care, were notified when a child was hospitalized. 3. Temporary isolation of children with communicable disease. <p>Copies of cooperative agreements capture collaboration with community partners.</p>
<p>INTL RL QTLY</p>	<p>Medication (Docuemnts must uploaded in CCWIS)</p>	<p>Copies of policy and procedures outline:</p> <ol style="list-style-type: none"> 1. Requirements for the administration of medication, 2. Accountability process of the medication log and re-fills when needed, 3. Which staff may administer the medication, 4. The requirement to document all health screenings, medical history, appointments, immunizations, dental, etc. in the child’s file. 5. Not permitting medication prescribed for one child to be given to another child <p>Individual medication logs for children capture:</p> <ol style="list-style-type: none"> 1. The name of the child, 2. Reason for administration, 3. Dosage, 4. When to administer, 5. The child’s written acknowledgment for receipt of the medication, 6. Staff signature who administered the medication 7. Reason for not administering the medication, if applicable. <p>The child’s file reflects the prescribing doctor’s name, reason for prescription, quantity of medication in the container at admission, and method of administration of medication.</p> <p>Physical inspection confirms that all medicines, to include over the counter medications, are secured in a locked location. Medication that requires refrigeration is also kept in a locked location and out of the reach of the</p>

		children.
INTL RL	Medical Information and Health Screenings (Documents must uploaded in CCWIS)	<p>Copies of the policy and procedure for preventive, routine, emergency, and follow-up medical and dental care for all children.</p> <p>The child's file reflects the following documentation:</p> <ol style="list-style-type: none"> 1. Medical information and consents 2. Well-child checkup completed within 12 months of admission 3. Medical history 4. If the child is a minor parent, the medical history of the youth's child 5. Written consent from the legal guardian or court order authoring routine medical and dental care. 6. Annual physical examination and follow-up care as recommended 7. Children under the age of 3 have a child well checkup in accordance with the American Academy of Pediatrics periodicity schedule 8. Each child has a dental examination every 6 months 9. Prenatal and postnatal care for pregnant/parenting youth 10. Dates of immunization, medications, examinations, and any treatments specific to illness or medical emergencies. <p>Review of the child's file confirms that all documentation was obtained prior to the admission of the child.</p> <ul style="list-style-type: none"> • If not, the documentation was obtained within 30 days of admission. • If documentation was not obtained prior to admission, efforts to obtain all information is outlined in the child's file.
65C-46.007 Child Abuse and Neglect and Incident Notification Procedures		
INTL RL	Child Abuse and Neglect (Documents must uploaded in CCWIS)	<p>Documentation in personnel files confirm that all staff signed the child abuse and neglect reporting acknowledgment form.</p> <p>Policy and procedures outline:</p> <ol style="list-style-type: none"> 1. How suspected incidents of abuse or neglect by staff or residents will be handled, 2. How each staff will be trained on reporting any suspected child abuse and or neglect to the Department's hotline and the program director of the

		<p>agency,</p> <ol style="list-style-type: none"> 3. The requirement to sign an acknowledgement form, 4. Actions the Department may take during the investigation, 5. Steps taken to protect the child being abused and preventing recurrence of abuse/neglect pending the investigation.
INTL RL	<p>Incident Reporting (Documents must be uploaded in CCWIS)</p>	<p>Policy and procedures outline how incident reporting shall be documented and reported to the legal guardian, community-based care lead agency, Department, and law enforcement within one business day.</p> <p>A review of child files and abuse reports or foster care referrals are used to compare and confirm incidents outlined in CF-OP 215-6 were reported appropriately and timely within one business day.</p>
65C-46.008 Individual Needs and Rights of Children in Care		
INTL RL	<p>Community activities and services (Document must be uploaded in CCWIS)</p>	<p>Policy and procedures for community activities and services outline:</p> <ol style="list-style-type: none"> 1. How activities promote recreational and cultural enrichment, 2. Transportation and supervision provided by the facility as needed for use of community resources, 3. System of accounting for each child's location, and 4. Step to identifying activities for children who do not attend religious services. <p>Review of child's file confirms any public appearances by children have a written consent by the child's legal guardian.</p> <p>Physical inspection confirms there is a listing or log that outlines the available indoor and outdoor recreational activities, daily time for the youth to pursue individual interests and time for privacy, and alternate activities for children not attending religious services.</p>
INTL RL QTLY	Chores	<p>Physical inspection validates the posting of a chore list that outlines which children are assigned to specific chores in accordance with their age and the mental capability.</p> <ul style="list-style-type: none"> • Days for the completion of each chore does not interfere with

		schooling, medical appointments, goals for treatment or service plan, and visitation.
INTL RL QTLY	Personal Hygiene and Grooming	Physical inspection confirms children have personal hygiene and grooming products and clean clothing that is aligned with the season and child's age. Interviews with children confirm they were: 1. Involved in the selection, care, and maintenance of personal clothing 2. Received training and guidance on life skills in personal care and hygiene
INTL RL QTLY	Scheduled and Unscheduled Contact	Interviews with children confirm that they were permitted to contact their case manager, ombudsman, family, or persons with meaningful relationships.
INTL RL QTLY	Allowance (Documents must uploaded in CCWIS)	Policy and procedures on allowance. Documentation confirms there is a record of monies distributed for allowance that is maintained separately from the facilities finances. For privately placed youth, documentation confirms a discussion of allowance was completed and documented in the child's file. Confirmation was provided through child interviews that: 1. Monthly allowance was provided. 2. Behavior or completion of chores was not tied to the allowance 3. Children were not expected to use their allowance for personal hygiene, school supplies, clothing, or other necessities. 4. Allowance was not denied as source of punishment. 5. Children were provided with life skills to learn the value and use of money. Physical inspection confirms the facility has a means of keeping children's money secure.

65C-46.009 Discipline and Behavior Management.

INTL RL	Behavior Management (Documents must uploaded in CCWIS)	<p>Policy and procedures for discipline outline:</p> <ol style="list-style-type: none"> 1. Behavioral management techniques that must be used by staff to include an emphasize on positive behavior instead of punitive. 2. Methods, praise, and encouragement for exhibiting self-control and desirable behavior. 3. Methods for protecting children or others when a child is out of control and the child’s behavior is likely to endanger him or herself, other persons, or property. 4. Prohibition on using physical discipline, ridicule, chemical or mechanical restrains, humiliating or emotional abusive punishment, excessive or work duties, deny food, shelter, medical care, threatening the child with removal from the facility, permitting harassment or bullying, and attempts to change or discourage a child’s sexual orientation. <p>If the provider utilizes “Hands-On” behavior management. Policy indicates all staff shall be trained and certified and procedures when “hands-on” behavior management is utilized.</p> <p>Review of child’s file confirms the child was provided with a copy of the discipline policy and a discussion was held with the child in a manner that is aligned with the child’s developmental ability to understand.</p> <p>Physical inspection confirms:</p> <ol style="list-style-type: none"> 1. The facility has an unlocked, lighted, well-ventilated room with at least 50 square feet within hearing distance of a staff member when using it as a form of discipline to separate a child from others. 2. Interview with children confirm staff did not use physical discipline, ridicule, chemical or mechanical restrains, humiliating or emotional abusive punishment, excessive or work duties, deny food, shelter, medical care, threatening the child with removal from the facility, permitting harassment or bullying, and attempts to change or discourage a child’s sexual orientation.
65C-46.010 Child Records and Confidentiality Requirements.		
RL	Child File	Copy of permanent record (census) of all resident children. The

		<p>documentation must capture:</p> <ol style="list-style-type: none"> 1. The name and birth date of the child; 2. The name and address of the child’s parents or guardians or child-placing agency; 3. The child’s dates of admission and discharge; and, 4. The child’s custody status. <p>A review of the child’s file reflect that the following information. If the information is not in the child’s file, documentation must refelct efforts to obtain the information.</p> <ol style="list-style-type: none"> 1. The name, gender, race, religion, birth date, and birthplace of the child; 2.The name, address, and telephone number of the parent or guardian, siblings, grandparents, or other persons significant to the child; 3. A social history of the child, the child’s family and other significant persons, and any other information required by the child-caring agency; 4. Copies of legal documents relating to the child; 5. Date of admission, source of referral, and any available assessments from the referring agency including the Comprehevsive Placement Assessment, and the Comprehevsive Behavioral Health Assessment; 6. Child’s placement agreement, also known as the precautionary or behavioral agreement; 7. Medical history, health record, treatment and clinical records, progress reports, prescriptions, and any psychological and psychiatric reports; 8. Educational records and reports; 9. Vocational exploration and training and employment records, if applicable; 10. Records of special or critical incidents in the child’s life; 11. The child’s case plan, treatment plan, and service plan reviews and revisions reflecting the child’s and family’s goal achievement, as applicable to the population served (i.e. dependency youth, community youth, etc.); 12. Visitation schedule outlining frequency of contact with parents, relatives, friends, or others with whom the child may have a significant relationship; 13. referrals to other agencies; 14. Discharge summary; 15. Standardized written statement pursuant to 65C-46.010(9) from the Department or CBC Lead agency upon acceptance of a child who is HIV
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		<p>infected; and</p> <p>16. Staff entries are dated and signed.</p> <p>Physical inspection confirms:</p> <ol style="list-style-type: none"> 1. There is an individual file for each child placed in the facility/home. 2. All files are kept confidential and in a locked area where other residents may not have access to files. 3. Files are not segregated or flagged to permit for the identification as case files of HIV infected children. 4. Files are being maintained for at least 5 years since child's discharge.
65C-46.011 Personnel and Staffing Requirements.		
<p>INTL RL</p>	<p>Personel and Staff Policies and Practices (Documents must uploaded in CCWIS)</p>	<p>Copy of policy and procedures that outline provisions to support the recruitment, retention, and performance of staff. The policy must include the following:</p> <ol style="list-style-type: none"> 1. Job descriptions and titles defining qualifications, duties, lines of authority, and distinguishing direct care verses non-direct care, and volunteers. 2. Provisions for encouraging professional growth through supervision, orientation, in-service training prior to unsupervised contact and staff development. 3. Requirement for newly hired staff to accompany trained staff until pre-services is completed. 4. Completion of annual evaluations and staff participation 5. Termination procedures for resignations or discharges 6. Steps for staff to file a grievance. 7. Background screening requirements for prospective staff, seasoned staff, and volunteers 8. Action steps for when an employee is named in an abuse and neglect investigation, have a verified report for abuse/neglect, and the requirement for reviewing abuse reports prior to hire. 9. Staff qualifications 10. Staff ratio requirements 11. Training and orientation requirements 12. Plan for staff participation in the review of personnel policies every

		three years.
INTL RL	Personnel Files	<p>Copy of policy that outlines the steps to secure files and maintain confidentiality.</p> <p>Review of the file confirms the file has the following documentation:</p> <ol style="list-style-type: none"> 1. Identification confirming staff is at least 18 yrs of age 2. Application for employment 3. Employment history check within the past two years from date of hire 4. Two character reference letters or checks from individuals unrelated to the staff, confirming the individual can work with children. 5. All background screenings were completed prior to hire and renewed prior to expiration. 6. Signed "Affidavit of Good Moral Character" form 7. Signed "Partnership Plan for Children in Out-of-Home Care" form 8. Start and termination dates and reason for termination 9. Annual performance evaluations. The executive director's annual performance evaluation must have confirmation that it was approved by the governing body. 10. Training records and conferences attended support the pre-service and annual training requirements. 11. Signed acknowledgement of "Child and Abuse" form 12. Signed acknowledgement of review of the discipline policies 13. Certifications or trainings that permit for the use of restraints. Documentation must outline the type of restraint the staff may use. 14. CPR certification, as applicable 14. Education qualifications and any orders or approvals waiving the qualifications 15. Disciplinary actions taken 16. Receipt acknowledging review of the discipline policy 17. Result of drug screens, as applicable 18. Copy of the child abuse and neglect records review (CARR) form, as applicable <p>Physical inspection confirms there is a personnel file for each employee and is secured appropriately. Files are maintained for employees who</p>

		terminated employment within the past 5 years.
INTL RL	Backgrounds Screenings (Documents must uploaded in CCWIS)	<p>Documentation confirms that direct and non-direct care staff completed all required screenings prior to hire and are tracked on the Department's background screening log:</p> <ol style="list-style-type: none"> 1. Fingerprinting (National and Florida criminal checks) every 5 years 2. Juvenile record check through fingerprinting every 5 years, as applicable 3. Local criminal checks every 5 years 4. Florida abuse and neglect record checks every 12 months 5. National sex offender and predator check every 12 months 6. Civil court records check every 12 months 7. Out of state abuse and neglect checks, if staff lived outside the state of Florida in the past five years <p>Documentation confirms juvenile record check for ages 12 to 17 of children of child-caring agency staff were completed.</p> <p>Documentation that adult household members, other than staff, complete the same background screening requirements as staff of the child-caring agency.</p> <p>Confirmation of law enforcement response to the facility or home, every 12 months.</p> <p>Documentation confirms that agency reviewed the staff's records for abuse and neglect.</p> <ul style="list-style-type: none"> • Provider requested for a Child Abuse Record Review when the staff has a verified report other than sexual abuse and when the staff is alleged as the caregiver responsible in a report close not substantiated for sexual abuse. • Employee rooster confirms that the provider terminated or declined to hire the staff based on the results of the staffing. <p>Background checks shall be reviewed and approved by the regional licensing office every 10th of the month including any new screenings.</p>

<p>INTL RL</p>	<p>Qualifications (Documents must uploaded in CCWIS)</p>	<p>Documentation in the staff’s personnel file confirms staff maintain the appropriate education requirements to fulfill the role outlined in their job description.</p> <ul style="list-style-type: none"> • Executive directors hired after July 1, 1987, shall have a bachelor’s degree and at least three (3) years of experience in management or supervision. • Program directors, or staff serving a similar function, who are responsible for supervising, evaluating, and monitoring the delivery of services within the child-caring agency and for supervising supervisors of direct care staff shall have a bachelor’s degree in social work or in a related area of study specified in Section 402.402(1)(b), F.S., from a college or university and four (4) years of experience working with children; or master’s degree from an accredited college or university and at least two (2) years of experience in social services. • Staff responsible for the supervision, evaluation, or monitoring of the direct care staff shall have a bachelor’s degree in social work or in a related area of study from an accredited college or university and at least two (2) years of experience working with children; or two (2) years of college and three (3) years of experience working with children; or at least five (5) years of experience working in child welfare without a post-secondary degree. <p>A review of documentation confirms that the staff who do not meet the education qualifications received an official approval or order from the Department waiving the requirements.</p> <ul style="list-style-type: none"> • An order from the clerk is required for executive directors. • An approval from the Chief of Licensing on Department letter head is required for program directors and staff responsible for supervision. • Waivers must be active and not expired. <p>Documentation confirms that staff who provide therapy to children meet the qualifications as required in the “Agency for Health Care Administration,</p>
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INTL RL	<p>Training</p> <p>(Documents must uploaded in CCWIS)</p>	<p>Personnel file reviews confirm all staff completed orientation during the first two weeks of employment. The date of completion is cross referenced with the hire date.</p> <p>The review of dates documented in the file confirms that all direct care staff completed a minimum of 21 hours of caregiver preparation training prior to unsupervised contact with children.</p> <p>Documentation outlines the completion of in-service annual training for all direct care staff, of which 40 hours of training activities were during each full year of employment. Activities related to supervision of the staff member’s routine tasks shall not be considered training activities.</p>
INTL RL	<p>Training Curriculum</p> <p>(Documents must uploaded in CCWIS)</p>	<p>Confirmation from the Department through email correspondence or Department letterhead, approving all training curriculums. If the training curriculum did not change at time of relicensure, the provider must submit written documentation attesting that there is no change.</p>

		<p>Orientation curriculum contains the following training topics:</p> <ol style="list-style-type: none"> 1. Job responsibilities, 2. Agency administrative procedures, 3. Confidentiality, 4. Health Insurance Portability and Accountabilty Act (HIPAA), 5. Program goals, 6. Agency purpose and objectives, 7. Resources and services, 8. Identification of and reporting responsibilities in regard to child abuse and neglect, and 9. Supervision of residents <p>Pre-services training curriculum contains trainings that accumulate to a minimum of 21 hours with the following topics:</p> <ol style="list-style-type: none"> 1. Emergency and safety procedures; 2. Medication administration, including psychotropic medication as outlined in Rule 65C-35.014, F.A.C; 3. Communicable diseases; 4. Pool and water safety; 5. Reasonable and prudent parenting and normalcy for youth placed in a child caring agency; 6. Sexual orientation, gender identity, and gender expression; 7. Role of staff as a team member in the development of service and or treatment plans, as applicable; 8. Transition, separation and loss, and attachment of youth in foster care; 9. Behavior management techniques, including crisis management and passive physical restraint; 10. Trauma-informed care, including recognizing the signs, symptoms, and triggers of trauma; and for maternity homes, the impact of trauma on the parent-child relationship; 11. Sexual abuse and interventions; 12. Human trafficking awareness; 13. The care of children at various developmental levels; 14. Multiethnic Placement Act (MEPA) and Americans with Disabilities Act (ADA); 15. Prevention of placement disruptions;
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<p>INTL RL</p>	<p>Volunteers (Documents must uploaded in CCWIS)</p>	<p>Copy of a policy and procedures for the orientation and training for volunteers in the philosophy of the child-caring agency, the needs of the children in care, and the needs of their families.</p> <p>Documentation that captures the hours and activities of all volunteers. Documentation is used to confirm the volunteer met all training and background screening requirements, as applicable.</p> <ul style="list-style-type: none"> • Volunteers who perform the same or substantially similar services for children as a paid employee shall have the same qualifications and training as the paid employee for the position and shall receive the same supervision and evaluation as the paid employee. • Volunteers that have unsupervised contact with children will be required to meet the background screening requirements outlined

		<p>in the same manner as direct care staff.</p> <ul style="list-style-type: none"> Volunteers who have supervised contact with children for more than 10 hours per month will be required to meet the background screening requirements in the same manner as direct care staff.
INTL RL	<p>Staff Ratio</p> <p>(Documents must uploaded in CCWIS)</p>	<p>Copy of policies and procedures for the supervision of children using ratio requirements. The policy must outline the following:</p> <ol style="list-style-type: none"> Staff coverage at all times to provide for the services identified in the agency's statement of purpose. A written staff to child ratio formula. The formula shall be appropriate to the agency's purpose and to the types, ages, and functioning levels of the children in care. The staff to child ratio shall assure the children's safety, protection and privacy, as well as physical, hygienic, emotional and developmental needs. The staff to child ratio shall be at least: <ul style="list-style-type: none"> One direct care staff member or trained volunteer to six (6) children, when children six (6) years of age or older are awake and one (1) to 12 when children are sleeping, or Children under the age of six (6) shall be supervised by a staffing ratio of one (1) to four (4) when children are awake and one (1) to six (6) when children are sleeping. For group homes that house parenting young adults, the child of the young adult shall be counted in the staff to child ratio if the child is in the custody of the Department. The child of the young adult shall not be counted in the staff to child ratio if the child is in the custody of the young adult. The child-caring agency shall designate a staff member on the premises when children are present in the home or expected to be present, and when children are or will be in need of supervision. The child-caring agency shall have and follow a written plan to provide additional emergency staff when only one (1) staff member is on duty. The child-caring agency shall count any children living with staff families in the child to staff ratio. The child-caring agency shall provide supervision to each staff member working with children and parents.

		Physical inspection confirms there is adequate staff ratio.
65C-46.012 Admission, Placement, and Ongoing Services		
INTL RL	Admissions (Documents must uploaded in CCWIS)	<p>Review of policy and procedure for admission outlines:</p> <ol style="list-style-type: none"> 1. Age of children the provider would like to serve. Age must be between 10-17 unless serving pregnant and parenting youth. 2. Materials and forms required from the legal guardian, Community Based Care Lead agency, and the child, 3. Conditions to provide services to children without parental consent (For runaway and emergency shelters only) 4. Family visitation and engagement. Encouraging and supporting family visits, mail, telephone calls, and other forms of communication with parents, relatives, friends or others with whom the child may have a significant relationship. 5. Regulations to ensure no child is denied services based on race, religion, gender, gender expression, sexual orientation, or transgenderism. 6. Considerations that each child should be placed in the most suitable setting according to that child’s individual needs, taking into account the capacity of the placement to meet the child’s needs, and the needs of the other children already placed in that setting. <p>Copy of preplacement/placement procedures includes:</p> <ol style="list-style-type: none"> 1. Consideration of the needs for the child being placed, 2. All children currently in residing in the facility/home, 3. The expertise of staff 4. Admission criteria and exclusionary criteria that aligns with the specific setting type the child-caring agency is licensed for. <p>The child’s files reflect the completion of a Pre-Admission study completed on each child that captures the following:</p> <ol style="list-style-type: none"> 1. A determination that the provider can care for the child’s presenting needs, based on interviews with the child, legal guardian, and other relevant persons, without negatively impacting other children in the facility/home. 2. Court orders for commitment or voluntary placement agreement. 3. Social history of the child and family

		<p>4. Placement agreement outlining financial arrangements, and visitation plan.</p> <p>5. Determination for placement based on the child’s gender while considering the child’s preference, safety, and recommendation from relevant individuals in the child’s life.</p> <p>*The provider may use the child’s comprehensive placement assessment in lieu of the pre-admission study.</p> <p>The child file reflects the date and topics discuss during the admission orientation with the child, legal guardian, and community base care lead agency. The orientation topics include the following:</p> <ol style="list-style-type: none"> 1. Rules of the facility; 2. Expectations for the caregivers; 3. Expectations for the child; 4. Services offered; 5. Behavior management practices; and, 6. The inherent diversity of group home populations, including race, ethnicity, gender, religion. 7. Providing copies of written policies governing the care of children, visitation and contact, and discipline policies.
<p>INL RL QTLY</p>	<p>Age Differential (Documents must uploaded in CCWIS)</p>	<p>A review of the child’s file verifies no child under the age of 10 years, or the age of enrollment in the fifth grade of school, was admitted to a child-caring agency unless the child meet one of the following circumstances:</p> <ol style="list-style-type: none"> 1. When the comprehensive placement assessment and the multidisciplinary team staffing recommend placement in a child-caring agency <u>and</u> when the child meets the eligibility requirements for admission into a child caring agency. <ul style="list-style-type: none"> • An MDT staffing must occur and approve the placement for a child under the age of 10 prior to admission in each individual child-caring agency. 2. The age differential does not apply for youth under the age of 10 when: <ul style="list-style-type: none"> • To prevent separation of a parenting young adult and child when placement in a maternity home is not feasible. If the parenting young adult and child are placed outside of a maternity home, the child-caring agency shall provide the services outlined in Rule 65C-

		<p>46.017, F.A.C. The child of the parenting young adult must meet the eligibility requirements for admission into a child-caring agency.</p> <ul style="list-style-type: none"> • A non-dependent child meets the criteria for placement in an emergency shelter, or runaway shelter. <p>Physical inspection and interview with the child reflects if a youth who turns 18 years old remained in the child-caring agency if receiving services under the Department's Extended Foster Care Program and Road to Independence Program.</p> <ul style="list-style-type: none"> • Young adults may continue room sharing arrangements until there is a disruption or transition, at which point the young adult can no longer share a room with a minor. • Young adults residing in the child-caring agency are included in the overall capacity. • All young adults age 18 and older residing in a licensed setting serving children under the age of 18 must comply with fingerprinting screenings and abuse check requirements
INTL RL	Written Placement Agreement or Plan (Documents must uploaded in CCWIS)	<p>A review of the child's file confirms the completion of a written agreement or plan with the child and parent or guardian, and the Department or the licensed child-placing agency which describes the following:</p> <ol style="list-style-type: none"> 1. The frequency of contact with the child's family and staff from the agency. 2. A plan for sharing information about the child's care and development with the parent or guardian, and the Department. 3. The child-caring agency's participation in the ongoing evaluation of the child's needs and progress. 4. Visitation plans for the child's parent or guardian, agency or the Department. 5. Provisions for service or treatment plan development and review. 6. The conditions under which the child will be discharged from the program. 7. A designation of responsibility for post-release services. <p>*The provider may use the child's transition plan in lieu of a written agreement or plan.</p>

<p>INTL RL</p>	<p>Service Plans (Documents must uploaded in CCWIS)</p>	<p>A copy of the agency’s service plan that will be utilized upon the child’s admission.</p> <p>A review of the child’s file confirms that the service plan:</p> <ol style="list-style-type: none"> 1. Initiated within 14 business days of placement and completed and executed by day 30. It also confirms the plans was reviewed reviewed every 30 days, and updated at least every six (6) months. 2. Outlines the supports, activities, and resources required for the resident to achieve individual goals. 3. Was developed with the input of the resident, resident’s parents or guardians, child welfare professional, attorney and guardian ad litem. 4. Includes the following: <ul style="list-style-type: none"> • An assessment of the child’s and family’s needs, strengths, weaknesses, and problems • An assessment of the child’s life skills; educational, vocational, recreational and physical and behavioral health needs; and a plan for meeting the child’s needs • Arrangements for individual or group counseling, as needed; and • A projection in regard to the child’s length of stay and an initial plan for discharge 5. Updates involve the child, the facility staff members working directly with the child, the parent or guardian, and the child-placing agency or Department. <ul style="list-style-type: none"> • At the time of the update, the service plan shall be revised to include the following: <ol style="list-style-type: none"> a. Progress made toward achieving the goals established in the previous service plan. b. Any changes in the service plan. c. A projected date for the child’s release from care.
<p>INTL RL</p>	<p>Treatment Plan (Documents must uploaded in CCWIS)</p>	<p>A copy the agency’s treatment plan that will be utilized upon the child’s admission.</p> <p>A review of the child’s file confirms that the treatment plan:</p> <ol style="list-style-type: none"> 1. Initiated within 14 business days of placement. It also confirms the plans

		<p>was reviewed reviewed every 30 days, and updated at least every six (6) months.</p> <p>2. Was developed with the input of the resident, resident’s parents or guardians, child welfare professional, attorney and guardian ad litem.</p> <p>3. Includes the following:</p> <ul style="list-style-type: none"> • Treatment goals • Action steps which will be taken to accomplish identified goals • Target dates for the accomplishment of action steps and goals • A description of the services to be provided and the frequency of such services • The assignment of a primary therapist or counselor • The youth’s diagnosis, including diagnostic codes; and • Discharge criteria <p>4. Reviewed and signed by the youth, if appropriate, and clinician and placed in the child’s file.</p>
INTL RL	Trauma-informed approach (Documents must uploaded in CCWIS)	Documentation outlining the agency’s trauma-informed model.
INTL RL	Education and child care needs	<p>A review of the child’s service or treatment plan confirms if child caring agencies providing therapeutic treatment collaborated with the child’s education program. The review also confirms if the child caring agency’s education and hands-on instruction in life skills was provided to the child that includes:</p> <ul style="list-style-type: none"> • Vocational exploration opportunities • Problem solving and decision making • Independent living skills • Social skills • Internet safety, and • Parenting skills and family planning for youth who are pregnant and parenting. <p>Physical inspection confirms:</p> <p>1. Interviews with children validate attendance in school or educational setting and whether they are encouraged to participate in afterschool or</p>

		<p>extracurricular activities, higher education and seeking employment for age appropriate children.</p> <p>2. The provider offers on-campus educational programs.</p> <ul style="list-style-type: none"> • It shall be designed to meet the educational needs of each child. All on-campus program must be accredited. • Must be approved by the Department of Education
65C-46.013 Discharge Planning and Aftercare Services.		
<p>INTL RL</p>	<p>Discharge and Aftercare (Documents must uploaded in CCWIS)</p>	<p>Copy of policy and procedures on discharging planning and aftercare services outlining:</p> <ol style="list-style-type: none"> 1. Availability of services, 2. Identification of the staff member or agency responsible for implementation of the aftercare plan, 3. The minimum requirements for contacting the child and family upon discharge, 4. Requirements that residents shall only be discharged to the parent, guardian, or child-placing agency, unless the child-caring agency is otherwise directed by the court who the child may be discharged to. 5. Considering evidence-based prevention services as a component of aftercare. 6. Requirement to provide a copy of the discharge summary to the parent(s) or legal guardian, child’s attorney, and guardian ad litem. <p>A review of the child’s file confirms that:</p> <ol style="list-style-type: none"> 1. Discharge planning included input from the child, the child’s parent or guardian, foster parents, caregiver, Department, child’s attorney, and guardian ad litem. 2. Aftercare plans reflect recommendations for services, where appropriate, and document any referrals generated, and include at least one documented contact with the discharged child or his or her family within the first 30 days following discharge. 3. The discharge summary was completed at least 45 calendar days prior to the child’s projected date of release from the facility, unless the release is unplanned and unforeseen. 4. A copy of the discharge summary was provided to the parent or guardian

		<p>or referral agency at least seven calendar days prior to the proposed release date, unless the release is unplanned and unforeseen.</p> <p>5. The discharge summary included the following:</p> <ul style="list-style-type: none"> • A copy of the discharge plan; • A summary of services, an assessment of goal achievement, and identification of the needs which remain to be met; • Recommendations for the child and family following release from care, including provisions for support and referrals; • The date and reasons for release, the name, address, telephone number and relationship of the person or agency to whom the child is being discharged; and • A copy of the child’s medical, dental, educational and other records for the use of the person or agency who will assume care of the child.
<p>65C-46.015 Standards for Contracted Emergency Shelters. <i>Emergency shelter shall comply with the licensing requirements set forth in Rules 65C-46.001 through 65C-46.014, F.A.C., in addition to 65C-46.015.</i></p>		
<p>INTL RL</p>	<p>Availability, Services and Records. (Documents must uploaded in CCWIS)</p>	<p>The agencies program description validates:</p> <ol style="list-style-type: none"> 1. The facility will be available on a 24-hour basis, 7 days a week. 2. The agency will not refuse to accept and provide care for children because of a minor illness or injury. 3. Collaboration with the community based care to ensure children are enrolled in school or schooling is provided onsite at the shelter. 4. Serves “youth in need of shelter on a temporary basis.” <p>A review of the child’s file confirms:</p> <ol style="list-style-type: none"> 1. If there are restrictions on private calls based on the effect of the call on the child, i.e. potential runaway, self-harming, or other destructive and unsafe behaviors, and any existing court orders regarding contact. 2. If the files are labeled to identify if the child is a dependent or community child. 3. A discussion of program goals, available services, and rules governing conduct with each resident upon admission to the shelter was held. The date and topics are documented, and the employee and resident signed the acknowledgment form.

		<p>4. The child met the admission criteria established by the Department: “youth in need of shelter on a temporary basis.”</p> <p>Physical inspection confirms that communication access is available to residents for making and receiving approved private calls</p>
<p>65C-46.016 Standards for Runaway Shelters. <i>Runaway shelter shall comply with the licensing requirements set forth in Rules 65C-46.001 through 65C-46.014, F.A.C., in addition to 65C-46.016.</i></p>		
<p>INTL RL</p>	<p>Operation (Documents must uploaded in CCWIS)</p>	<p>The agencies program description validates:</p> <ol style="list-style-type: none"> 1. The facility will be available on a 24-hour basis, 7 days a week. 2. Service “children who are in conflict with their parents or who runaway or are recovered from a missing child episode.” <p>Review of child files confirms there is documentation that captures:</p> <ol style="list-style-type: none"> 1. A discussion with the child was held about program goals, available services and rules governing conduct with each resident upon admission to the shelter. The employee and resident must sign the completed form. 2. Restrictions on private calls are based on the effect of the call on the child, i.e. potential runaway, self-harming or other destructive and unsafe behaviors, and any existing court orders regarding contact. 3. The child meets the admission criteria established by the Department: “children who are in conflict with their parents or who runaway or are recovered from a missing child episode.” 4. Attempts to notify the child’s parents or legal guardian immediately when when a child is referred to a runaway shelter without the knowledge of Department or a child voluntarily requests placement. This procedure shall occur except in cases where there have been allegations of abuse or neglect by the parents. In these cases the runaway shelter shall contact the Department according to Section 39.201, F.S. 5. Files are labeled to identify if the child is a dependent or community child. <p>Copy of policy and procedures that outlines:</p> <ol style="list-style-type: none"> 1. Steps the runaway shelter will take for assuring quality care to clients which includes professional review and monitoring of client assessments, service, and discharge planning. 2. Service delivery process for an active outreach component which includes

		<p>direct contact with the youth themselves, with law enforcement officials, youth workers, school and transportation personnel, child protective agencies, and others likely to encounter runaway or homeless youth.</p> <p>3. Adequate aftercare and shall require at least one (1) contact with the discharged child or his or her family within the first 30 days following discharge.</p>
<p>INTL RL</p>	<p>Client Rights and Service Expectations (Documents must uploaded in CCWIS)</p>	<p>Submission of client’s rights summary outlines the rights of children in a manner that is developmentally appropriate for all children.</p> <p>Review of child’s file confirms:</p> <ol style="list-style-type: none"> 1. Documentation that the child was provided with a copy of the “client rights”. 2. Source of referral for child/family to receive services <ul style="list-style-type: none"> • Upon self-referral; or • Through referrals by the child welfare system, juvenile justice system, community mental health system, or community referral systems. 3. Early intervention counseling services was provided for all troubled youth, runaway youth, and families that include the following services: <ul style="list-style-type: none"> • Individual or group counseling, available daily, to each youth admitted into the shelter. • Family counseling available to each family whose child is admitted to the program on a residential or non-residential basis. • Weekly case management sessions, involving appropriate program staff, to review current cases and the types of counseling which are being provided. 4. Children were informed of the basic expectations for clients using its services, the hours during which services are available, and any rules set by the agency covering client conduct with particular reference to any activity which could result in the discontinuation of services. 5. Children were made aware of any waiting period for service, the lack of a particular service, or of its determination that it cannot meet the clients needs and that service elsewhere would be more appropriate. 6. Documentation supports children were part of the service planning process and were encouraged to retain as much responsibility as possible. <p>Documentation supports attempts to involve parents or legal guardians I the</p>

		<p>development of the service plan.</p> <p>7. An intake form is in the file which contains basic background information, counseling notations, information on the services provided both directly and through referrals to community agencies and individuals, disposition data, and any follow-up and evaluation data which are compiled by the shelter.</p> <p>Physical inspection confirms that:</p> <ol style="list-style-type: none"> 1. A written summary of the clients' rights is available in the agency's reception area for children and their families or legal guardians and in a clear language and developmentally appropriate and posted in areas frequented by clients and reception area. 2. Communication access is available to residents for making and receiving approved private calls. 3. If serving a shelter for adults, there is separate housing for persons age 18 and older. 4. All files are maintained in a secure location.
<p>INTL RL</p>	<p>Basic Service Requirements</p>	<p>Review of child file reflects documentation that:</p> <ol style="list-style-type: none"> 1. Within the first 24 hours of admittance into the shelter, a direct care staff member conducted an initial screening and initiated an individualized service plan for the child. Documentation confirms the supervisor reviewed the plan within 72 hours. The screening included an assessment of : <ul style="list-style-type: none"> • immediate emergency needs, including food, housing, and clothing, • relevant family, • social, emotional, educational, health, and • employment history. 2. The child or young adult suspected of being sexually exploited or who meets the indicators listed in paragraphs 65C-43.001(1)(a)-(e), F.A.C., was also assessed using the "Human Trafficking Screening Tool Administration Guide (HTST). 3. Crisis counseling with a range of counseling services which includes immediate crisis intervention, short-term counseling, and referrals to, or arrangements for, long-term treatment, were provide, when appropriate. 4. The child remianed in the runaway shelter for a 35 day maximum stay. <ul style="list-style-type: none"> • Written documentation outlines the specific exceptions as to why the child required placement beyond the 35 days.

		<ul style="list-style-type: none"> • The specific exceptions must align with the exceptions outlined in the agency’s polices and procedures • A clinical supervisory staff is monitoring the exceptions during the child’s stay beyond the 35 days. <p>5. Discharge planning included consideration of alternative living arrangements.</p> <p>6. Documentation confirms aftercare plans were:</p> <ul style="list-style-type: none"> • Developed under the direction of clinical supervisory staff and the child participated in the development of the plan. • Include referrals for ongoing individual or family counseling, and arrangements for services including education, career planning, and legal assistance, when appropriate. • Distinguishes the different needs of runaway and homeless youth. • All non-local youth were provided with referrals to appropriate services in the youth’s home area. <p>A review of the organization chart and personnel file confirms the staff member responsible for assuring continuity of care from emergency services and crisis counseling through the provisions for aftercare and follow-up.</p> <p>A review of personnel file confirms the identified staff with case management responsibility have the necessary skills to utilize community resources and maintain linkages and obtain services needed by the agency’s clients.</p>
<p>65C-46.017 Standards for Maternity Homes. <i>The child-caring agency providing services for prenatal, post-partum or parenting youth must meet the licensing requirements set forth in Rules 65C-46.001 through 65C-46.014, F.A.C., in addition to 65C-46.017.</i></p>		
INTL RL	Specialized Training	<p>A review of personnel files confirms that all staff completed an additional 20 hours of pre-service training approved by the Department and related to the care of prenatal, postpartum, and parenting youth of young adults during pre-service.</p> <p>The review also confirmed that eight of the 40 hours of annual in-service training is related to the care of prenatal, postpartum, and parenting youth of young adults.</p>

<p>INTL RL</p>	<p>Training Curriculum (Documents must uploaded in CCWIS)</p>	<p>Confirmation from the Department through email coorespondance or Department letterhead, approving the training currliculum. If the trainnig curriulum did not change at time of relicensure, the provider must submit written documentation attesting that there is no change.</p> <p>Training topics shall include, but are not limited to:</p> <ol style="list-style-type: none"> 1. Mother/child health and development; 2. Developmental stages, ages birth to five; 3. Trauma, triggers, and calming strategies for young parents; 4. Pregnancy and childbirth, basic infant care, and safety; and 5. Parent and child relationships. 6. The child-caring agency may utilize a shift or house parent staffing model. 7. The child-caring agency may provide services to any youth who is pregnant or parenting, in addition to providing care for sibling groups of a youth who is pregnant or parenting.
<p>INTL RL</p>	<p>Basic Requirements and Service Plan</p>	<p>A review of the child’s file confirms the following:</p> <ol style="list-style-type: none"> 1. Services specific to: <ul style="list-style-type: none"> • Pre-natal and childbirth education; • Parenting education to include safe and health parenting practices, child development of infants and toddlers, active and responsive caregiving, and emerging language and literacy; • Water safety education and training; • Individual/group/family counseling; • Clinical services to address trauma, childhood sexual exploitation, trafficking, and the parent/child relationship; • Ongoing multi-disciplinary team staffing to determine appropriate placements, service needs, and support from community partners. 2. Minor parent was trained on the following topics and signed a form acknowledging they have been trained. <ul style="list-style-type: none"> • Infant safety and care, • Infant water safety, • Nutrition for children ages zero to five, and • Safety sleep practices

		<p>3. The service plan outline details of the supports and resources to allow the pregnant or parenting youth to be successful with, but not limited to, school, employment, and providing for the care of their child.</p> <p>4. Documentation in the child’s file confirms the facility made attempts to contact the Lead agency to provide daycare referrals for the infant of the dependent youth, and collaborate to ensure the young parent has diapers, food, and clothing for their child.</p> <p>5. The child met the admission criteria established by the Department: “children who are pregnant or parenting.”</p>
<p>65C-46.018 Standards for Wilderness Camps. <i>The child-caring agency providing 24-hour care to youth as a wilderness camp must meet the licensing requirements set forth in Rules 65C-46.001 through 65C-46.014, F.A.C., in addition to 65C-46.018.</i></p>		
INTL RL QTLY	Operation	<p>A review of the child file confirms the child met the admission criteria established by the Department: “children requiring their physical, emotional, and social needs met.”</p> <p>Physical inspection confirms that the camp:</p> <ol style="list-style-type: none"> 1. Does not present as a fire, health, or safety hazard to the residents and does not have a surplus of water. 2. Has a closet or chest of drawers for clothing and personal belongings which shall be reserved for the individual child’s use or an alternative storage. 3. Observations confirm that the agency has a copy of the emergency plan on file at the program’s office or left with a designated home base person.
INTL RL	Training and Training Curriculum (Documents must uploaded in CCWIS)	<p>Confirmation from the Department through email coorespondance or Department letterhead, approving the training currliculum. If the trainnig curriulum did not change at time of relicensure, the provider must submit written documentation attesting that there is no change.</p> <p>Training topics shall include speciif topics realted to wilderness programs:</p> <ol style="list-style-type: none"> 1. Safety, 2. Technical skills, 3. Leadership, and 4. Problem-solving skills.

		A review of personnel files confirms that all staff completed the approved pre-service and annual in-service training that incorporates the wilderness topics.
INTL RL QTLY	Emergency Response and Prevention Plan (Documents must uploaded in CCWIS)	A copy of the policy and procedures outline: 1. The requirement for methods of immediate response in case of an emergency and the ability to immediately notify appropriate agency staff, police, fire department, physician, poison control center, ambulance, or other emergency services that may be needed. 2. Travel plan that includes an itinerary and a pre-established check-in time for any program which are mobile in the wilderness. 3. The requirement for the emergency assistance plan to be initiated upon the failure of a traveling group to meet the check-in time. Physical inspection confirms that the agency has a copy of the plan on file at the program's office or left with a designated home base person.
65C-46.019 Standards for At-Risk Houses. <i>The child-caring agency providing services for youth who are at risk of sex trafficking must meet the licensing requirements set forth in Rules 65C-46.001 through 65C-46.014, F.A.C., in addition to 65C-46.019.</i>		
INTL RL	Policies and procedures (Documents must uploaded in CCWIS)	Copy of policy and procedures that outline the requirements for: 1. Services provided to children (may be captured in the program description or statement of purpose) 2. Home/facility security plans to keep the children safe (Example: cameras, routine bed checks, etc.)
INTL RL	Specialized Training Curriculum (Documents must uploaded in CCWIS)	Confirmation from the Department through email coorespondance or Department letterhead, approving the pre-service/in-service training specialized curriculum. If the trainnig curriulum did not change at time of relicensure, the provider must submit written documentation attesting that there is no change. The training shall include speciif topics realted to human trafficking: 1. Pathways to entry and vulnerabilities; 2. Human trafficking and at-risk children; 3. Understanding the impact of trauma;

		<p>4. Essential service delivery and collaboration; and</p> <p>5. Motivational Interviewing.</p>
INTL RL	Specialized Training	<p>A review of personnel files confirms:</p> <ol style="list-style-type: none"> 1. All staff completed an additional 12-hour pre-service training approved by the Department and related to human trafficking. 2. All staff completed eight of the 40 hours of annual in-service training related to human trafficking. 3. Identified staff complete the Department-approved human trafficking prevention education curriculum to facilitate to youth residing in the home.
INTL RL	Service Requirements	<p>The child’s file contains documentation confirming:</p> <ol style="list-style-type: none"> 1. The child met the admission criteria established by the Department: “Child or youth at risk of sex trafficking that have experienced trauma, such as abuse, neglect, and/or maltreatment, and presents with one or more of the accompanying risk factors: <ul style="list-style-type: none"> • History of running away and/or homelessness. • History of sexual abuse and/or sexually acting out behavior. • Inappropriate interpersonal and/or social media boundaries. • Family history of or exposure to human trafficking. • Out-of-home placement instability demonstrated by repeated moves from less restrictive levels of care.” 2. The child received services for the following, as appropriate: <ul style="list-style-type: none"> • Family/group/individual counseling; • Treatment and intervention for sexual assault, if applicable; • Substance abuse and mental health screening; • Life skills; • Vocational or educational supports; • Discharge planning; • Behavioral health care, if applicable; • Mentoring; and • Human trafficking education prevention course (programming related to the prevention of sex-trafficking including healthy relationships, interpersonal boundaries, community engagement,

		etc.)
65C-46.020 Standards for Safe Houses. <i>The child-caring agency providing services for commercially sexually exploited children (CSEC) must meet the licensing requirements set forth Rules 65C-46.001 through 65C-46.014, F.A.C., in addition to 65C-46.020.</i>		
INTL RL	Program Requirements (Documents must uploaded in CCWIS)	Documentation confirms: 1. A complete Application for Certification that is signed and dated. 2. Program description of similar documentation identifying <ul style="list-style-type: none"> • if they are a tier 1 or tier2 • Having awake staff members on duty 24 hours a day A review of the child’s file confirms that: 1. The child met the Department approved admission criteria: “children who have been sexually exploited.” 2. The child was provided with the following services, when appropriate <ul style="list-style-type: none"> • Victim-witness counseling. • Family counseling. • Behavioral health care. • Treatment and intervention for sexual assault. • Education tailored to the child’s individual needs, including remedial education if necessary. • Life skills and workforce training. • Mentoring by a survivor of commercial sexual exploitation, if available and appropriate for the child. • Substance abuse screening and, when necessary, access to treatment. • Planning services for the successful transition of each child back to the community. • Activities structured in a manner that provides child victims of commercial sexual exploitation with a full schedule. • Deliver age-appropriate programming to educate children regarding the signs and dangers of commercial sexual exploitation and how to report commercial sexual exploitation. The department shall develop or approve such programming. 3. Prior to discharge the provider completed a re-evaluation of the child’s service plan and multidisciplinary team staffing with the case management agency and community-based care’s human trafficking liaison.

		<p>Physical inspection confirms:</p> <ol style="list-style-type: none"> 1. Department approved signage is placed on the premises to warn children of the dangers of human trafficking and to encourage the reporting of individuals observed attempting to engage in human trafficking activity. 2. There is one direct care staff to every four children or young adults for supervision and care. 3. There is one bedroom for every two children or young adults
INTL RL	<p>Training and Training Curriculum (Documents must uploaded in CCWIS)</p>	<p>Confirmation from the human trafficking team with the Department through email coorespondance or Department letterhead, approving the specialized training curriculum or pre-service (24 hours) and in-service (8 hours). If the trainnig curriulum did not change at time of relicensure, the provider must submit written documentation attesting that there is no change</p> <p>Review of personnel files confirm that all staff completed the additional 24-hours of pre-service specialized training on commercial sexual exploitation prior to unsupervised contact with youth, and 8 hours of training focused on human trafficking as part of the 40 hour annual in-service training.</p> <p>Identified staff complete the Department-approved human trafficking prevention education curriculum to facilitate to youth residing in the home.</p>
INTL RL	<p>Policies and Procedures (Documents must uploaded in CCWIS)</p>	<p>Review of policy and procedure outline the following:</p> <ol style="list-style-type: none"> 1. Facility’s security plan and emergency response plan with law enforcement <ul style="list-style-type: none"> • Provides appropriate security through facility design, hardware, technology, staffing, and siting, including, but not limited to, external video monitoring or door exit alarms, a high staff-to-client ratio, or being situated in a remote location that is isolated from major transportation centers and common trafficking areas. • Provides for, at a minimum, the detection of possible trafficking activity around a facility, coordination with law enforcement, and be part of the emergency response to search for absent or

		<p>missing children using one of the following methods:</p> <ul style="list-style-type: none"> o Employ or contract with at least one individual that has law enforcement, investigative, or other similar training, as established by rule by the Department or o Execute a contract or memorandum of understanding with a law enforcement agency to perform these functions. o The employee, contracted individual, or MOU with LE must be on-site during the evening hours between 7PM to 7AM, seven days a week, as outlined in their policies and procedures, and available 24-hours a day, seven days a week for response to search for missing children. <p>2. Outline of client services that will be provided (may be captured in the program description or statement of purpose)</p> <p>3. Documentation outlining the following:</p> <ul style="list-style-type: none"> • Use of strength-based and trauma-informed approaches to care, to the extent possible and appropriate. • Serve exclusively one sex. • Group child victims of commercial sexual exploitation by age or maturity level. • Care for child victims of commercial sexual exploitation in a manner that separates those children from children with other needs. Safe houses may care for other populations if the children who have not experienced commercial sexual exploitation do not interact with children who have experienced commercial sexual exploitation. <p>4. Method for responding to behaviors that support and develop the child recovery and resilience</p> <p>5. Admission and discharge requirements that includes exclusionary criteria other than running away; non-violent delinquency offenses, recruitment or similar behaviors, violent behaviors that do not pose an imminent risk; mental health diagnosis that do not require a higher level of care; or occasional substance abuse.</p>
INTL RL	Appropriate Security	Safe House hired staff, contracted individual, or MOU with the LE agency meet the following qualification, background screenings, and trainings.

		<p>1. Hired Security: Shall complete background screening requirements outlined in 65C-46.011(4), F.A.C., a Department approved training on missing children and personal security, and training requirements outlined in 65C-46.020(3), F.A.C.</p> <p>2. Contracted Security: Child-caring agencies that contract with an individual must ensure the individual has two years of experience working in the field of law enforcement, military, or investigations, and has met Level II background screening requirements under s. 435, F.S. and has received missing children and human trafficking training from a child-caring agency or as part of their prior experience.</p> <p>3. Law Enforcement Agency: A child-caring agency that contract or execute a memorandum of understanding with a law enforcement agency shall not require additional trainings and background screenings.</p>
<p>65C-46.021 Standards for Qualified Residential Treatment Program Credential.</p> <p><i>Entities applying for a qualified residential treatment program credential to provide services for youth who have serious emotional or behavioral disorders or disturbances must meet the licensing requirements set forth in Section 394.875(2), F.S., and rule Chapter 65E-9, F.A.C. Entities issued a QRTP credential by the regional licensing authority are subject to requirements outlined in Rules 65C-46.014 and 65C-46.024, F.A.C., in addition to 65C-46.021.</i></p>		
<p>INTL RL</p>	<p>Application(s) and additional forms (Documents must uploaded in CCWIS)</p>	<p>The application for “Credential as a Qualified Residential Treatment Program” captures a date and signature of the applicant.</p> <p>Copy of the AHCA license confirms licensure as a residential treatment center. Licensure dates on the AHCA license confirms the provider is actively licensed.</p> <p>A copy of the accreditation and the survey results that outlines the date of issuance and expiration, and the services they permitted to perform under the accreditation. The QRTP must be accredited by any of the following organizations:</p> <ul style="list-style-type: none"> • Commission on Accreditation of Rehabilitation Facilities (CARF); • The Joint Commission; • Council on Accreditation (COA); or • Any other not-for-profit accrediting agency approved by the Department through the Children’s Bureau

		IV-E budget was submitted to the lead agency and final copy to the regional licensing team.
INTL RL	Backgrounds (Documents must uploaded in CCWIS)	<p>A review of background screening logs and all screenings confirm that all direct care staff employed by the entity completed and passed the following background screenings:</p> <ol style="list-style-type: none"> 1. National and Florida criminal records checks through fingerprinting every five (5) years; 2. Juvenile records check through fingerprinting every five (5) years as applicable; 3. Florida abuse and neglect records checks through the Department’s child abuse registry every 12 months; and 4. Out of state abuse history records check if the individual resided out of state in the past five years from the time of the request for a QRTP credential. 5. Juvenile records checks through the Florida Department of Juvenile Justice for ages 12 to 17 of children of QRTP staff who reside in the facility/home. <p>Background checks and the log shall be reviewed and approved by the regional licensing office annually and prior to the hire of new staff during the licensing year.</p>
INTL RL	File requirements	<p>A review of the child’s file confirms the following:</p> <ol style="list-style-type: none"> 1. Child completed a suitability assessment as defined in Rule 65C-28.021, F.A.C., for dependent children. 2. Independent assessment confirming the child meets criteria to receive services in a QRTP program for non-dependent children. 3. Treatment plan developed for the child.
INTL RL	Training (Documents must uploaded in CCWIS)	<p>A copy of certificates of completion confirming all direct care staff completed trauma informed care, or a copy of staff roster confirming the dates the training was completed.</p> <p>Shall be reviewed and approved by the regional licensing office at initial and/or if any changes are made by the provider</p>

INTL RL	Staffing	<p>The organization chart or background screening log identifying the roles of the staff and confirms the agency has a registered or licensed nursing staff and other licensed clinical staff that:</p> <ul style="list-style-type: none"> • Are on-site as outlined in the agency’s trauma informed treatment model • Available 24-hours a day, seven (7) days a week for response • May be contracted providers
INTL RL	Policies and procedures (Documents must uploaded in CCWIS)	<p>A review of policy and procedures confirms the requirement of:</p> <ol style="list-style-type: none"> 1. A trauma- informed treatment model that addresses the clinical needs of children with emotional or behavioral or disturbances and can implement the treatment identified for the child. Policy shall address the staffing requirements needed to implement the trauma-informed model. 2. Discharge planning and aftercare supports that specifies the availability of services and the persons responsible for implementation of the aftercare supports. 3. Provide time-limited, high-quality, supportive services for youth. 4. Family engagement facilitated by the agency for participation of family members in the child’s treatment program including, but not limited to: <ul style="list-style-type: none"> • Inclusion in family therapy; • Outreach to family members, including siblings; • Documenting how family members are integrated into the treatment process for the child, including post-discharge; and • Documenting how sibling connections are maintained. 5. Family participation in the discharge planning.
INTL RL	Service Requirements	<p>A review of the child’s file confirms:</p> <ol style="list-style-type: none"> 1. The child was provided with the following services as appropriate <ul style="list-style-type: none"> • Substance abuse and mental health screening and treatment, if applicable; • Family/group/individual therapy; • Behavioral management; • Psychiatric services; • Support groups; • Specialized intervention services;

		<ul style="list-style-type: none"> • Social & rehabilitative services; and • Psycho-educational services. <p>2. Documentation confirms the agency facilitated participation of family members in the child’s treatment program including.</p> <p>3. Aftercare support was provided for at least 6 months post-discharge and consisted of the following</p> <ul style="list-style-type: none"> • Community service coordination for the youth and their family/caregiver • Ensure all service referrals have been linked and barriers to access services are eliminated • Provide a minimum of two (2) contacts per month. While face to face contact is the preferred method for contact with the youth and family/caregiver, the QRTP may utilize telehealth • Provide written progress reports every 30 calendar days to the youth’s child welfare professional. <p>4. The child was admitted at the recommendation of a suitability assessment.</p>
INTL RL	Disciplinary Action (Documents must uploaded in CCWIS)	Confirmation from AHCA’s licensing team to determine if the provider received disciplinary action during the licensing year and notified the regional licensing authority within one business day of any disciplinary actions executed by AHCA.
<p>65C-46.0211 Standards for Behavioral Qualified Residential Treatment Program.</p> <p><i>Entities applying for a qualified residential treatment program to provide services for youth who have serious emotional or behavioral disorders or disturbances must meet the licensing requirements set forth in 65C-46.001 through 65C-46.014, F.A.C., in addition to 65C-46.0211.</i></p>		
INTL RL	Program Requirements (Documents must uploaded in CCWIS)	<p>Review confirms the provider has the following:</p> <p>1. A copy of the accreditation and the survey results that outlines the date of issuance and expiration, and the services they permitted to perform under the accreditation. The QRTP must be accredited by any of the following organizations:</p> <ul style="list-style-type: none"> • Commission on Accreditation of Rehabilitation Facilities (CARF); • The Joint Commission; • Council on Accreditation (COA); or • Any other not-for-profit accrediting agency approved by the Department through the Children’s Bureau

INTL RL	File requirements	<p>A review of the child’s file confirms the following:</p> <ol style="list-style-type: none"> 1. Child completed an assessment as defined in Rule 65C-28.021, F.A.C., for dependent children. 2. Independent assessment confirming the child meets criteria to receive services in a QRTP program for non-dependent children. 3. The development of treatment plans as outlined in Rule 65C-46.012, F.A.C. Any BQRTP enrolled as a Medicaid provider, must complete treatment plans in accordance with Medicaid policy requirements.
INTL	Trauma Informed Treatment Model	<p>Written documentation that confirms the agencies choice of model and why it’s trauma informed. The following are some options the agency can use to provide confirmation:</p> <ul style="list-style-type: none"> • Clinical staff providng written justification as to the model beign used and why it is trauma informed. • Confirmation from the National Child Traumatic Stress Network (NCTSN) • Confirmation from the California Clearing House.
INTL RL	<p>Training Curriculum</p> <p>(Documents must uploaded in CCWIS)</p>	<p>Confirmation from the Department through email coorespondance or Department letterhead, approving the specialized pre-service/in-service training currliculum. If the trainnig curriulum did not change at time of relicensure, the provider must submit written documentation attesting that there is no change</p> <p>The training shall include speciif topics realted to the treatment of serious emotional or behavioral disorders or disturbances:</p> <ol style="list-style-type: none"> 1. Emotional disturbances in children and common behavioral problems exhibited; 2. Behavior management, theory, and skills; 3. Discipline, limit-setting, logical consequences, problem-solving, and relationship building skills; 4. Crisis intervention and emergency procedures; 5. Behaviors and emotional issues of children who have been sexually abused, are sexually reactive, or have developmental disabilities; 6. Working with biological or adoptive families; 7. Motivational Interviewing; and 8. Understanding the impact of trauma.

INTL RL	Training	Review of personnel files confirm that all staff completed the additional 24-hours of pre-service specialized training on specific to the treatment of serious emotional or behavioral disorders or disturbances prior to unsupervised contact with youth, and 8 hours of the 40 hour training for in-service training focused on specific to the treatment of serious emotional or behavioral disorders or disturbances.
INTL RL	Professional Staffing (Documents must uploaded in CCWIS)	The organization chart identifies the roles of the staff, and the personnel file contains a copy of the individuals professional license to practice in the field of maladaptive behaviors, a registered or licensed nursing staff and other licensed clinical staff that: <ul style="list-style-type: none"> • Are on-site as outlined in the agency’s trauma informed treatment model • Available 24-hours a day, seven (7) days a week for response • May be contracted providers, as confirmed by a copy of the contract provided by the agency or listed as a vendor.
INTL RL	Policies and procedures (Documents must uploaded in CCWIS)	A review of policy and procedures confirms the requirement of: <ol style="list-style-type: none"> 1. An admission plan that outlines the intake procedures and identifies exclusionary criteria. Children requiring services and treatment for acute emotional or behavioral disorders or disturbances outlined in s. 394.492(5) and (6), F.S., should be referred to a residential treatment center licensed under 65E-9, F.A.C. 2. A trauma- informed treatment model that addresses the clinical needs of children with emotional or behavioral or disturbances and can implement the treatment identified for the child. Policy shall address the staffing requirements needed to implement the trauma-informed model. 3. Family engagement facilitated by the agency for participation of family members in the child’s treatment program including, but not limited to: <ul style="list-style-type: none"> • Inclusion in family therapy; • Outreach to family members, including siblings; • Documenting how family members are integrated into the treatment process for the child, including post-discharge; and • Documenting how sibling connections are maintained. 4. Discharge planning and aftercare supports that specifies the availability of services and the persons responsible for implementation of the aftercare

		<p>supports.</p> <p>5. Provide time-limited, high-quality, supportive services for youth</p> <p>6. Facilitate participation of family members in the child’s treatment program</p>
<p>INTL RL</p>	<p>Service Requirements</p>	<p>A review of the child’s file confirms:</p> <ol style="list-style-type: none"> 1. The child was provided with the following services as appropriate <ul style="list-style-type: none"> • Substance abuse and mental health screening and treatment, if applicable; • Family/group/individual therapy; • Behavioral management; • Psychiatric services; • Support groups; • Specialized intervention services; • Social & rehabilitative services; and • Psycho-educational services. 2. The treatment plan captures the following: <ul style="list-style-type: none"> • Treatment goals; • Action steps which will be taken to accomplish identified goals; • Target dates for the accomplishment of action steps and goals; • A description of the services to be provided and the frequency of such services; • The assignment of a primary therapist or counselor; • The youth’s diagnosis, including diagnostic codes; and • Discharge criteria. 3. Documentation confirms the agency facilitated participation of family members and relevant parties in the child’s treatment program and discharge planning. 4. Aftercare support develop at least one month prior to discharge and was provided for at least 6 months post-discharge and consisted of the following <ul style="list-style-type: none"> • Community service coordination for the youth and their family/caregiver • Ensure all service referrals have been linked and barriers to access services are eliminated • Provide a minimum of two (2) contacts per month. While face to face contact is the preferred method for contact with the youth

		<p>and family/caregiver, the QRTP may utilize telehealth</p> <ul style="list-style-type: none"> • Provide written progress reports every 30 calendar days to the youth's child welfare professional. <p>5. The child was admitted at the recommendation of a suitability assessment.</p> <p>6. Aftercare support is not required when a child discharge to another BQRTP setting or higher level of care to include residential treatment programs, also known as Statewide Inpatient Psychiatric Program (SIPP), or a therapeutic group home which are defined in s. 39.407(6), F.S.</p> <p>7. Whether the agency or the community based care lead agency provided aftercare support.</p> <ul style="list-style-type: none"> • When a youth is discharged to a placement setting outside a 50-mile radius of the provider, the BQRTP must coordinate aftercare support with the community-based care lead agency having jurisdiction of the youth. The community-based care lead agency shall resume responsibility for the aftercare support services provided to the dependency youth.
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65C-46.023 Standards for Traditional and Residential Homes.
The child-caring agency licensed as a traditional group home, as defined in subsection 65C-46.001(22), F.A.C., or residential group home, as defined in subsection 65C-46.001(16), F.A.C., must meet licensing requirements set forth in Rules 65C-46.001 through 65C-46.014, F.A.C., in addition to 65C-46.023.

INTL RL	<p>Program Requirements</p> <p>(Documents must uploaded in CCWIS)</p>	<p>Review of child file confirms:</p> <ol style="list-style-type: none"> 1. The Comprehensive Placement Assessment recommends placement in a group care setting but was unavailable at the time of placement; therefore, placement is made in this traditional setting. 2. Transition planning was initiated 48 hours after placement. 3. Documentation reflects the coordination of assessments including, but not limited to, suitability assessments, Early and Periodic Screening Diagnostic and Treatment (EPSDT), or assessments of preliminary mental and/or behavioral health needs. 4. Coordinate referrals to and arrangements for continued services in a least restrictive setting. 5. Assess family connections/relationships to assist with family finding efforts.
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Residential Group Home Quality Standards Assessment (QSA) Survey

Surveys shall be completed annually at time of each relicensure, in accordance with s. 409.996(25), F.S.

RL	Agency Survey	<p>Confirmation that surveys were completed by the following individuals:</p> <ol style="list-style-type: none">1. Two different staff at the agency.2. Two different youth.3. Two staff at the community-based care lead agency. This can be the placement team, contract team, or case management.4. One licensing specialist with the Department <p>The survey results reflect that the provider is aligned with the quality standards tool.</p>
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