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d. The lead agency must track requests for fee waivers and change in allowance and their outcomes. At a minimum, tracking should include date of request, requestor, client name and child welfare information system Person ID, committee members, committee recommendation, and outcome. Information must be made available upon request by the Department.

### 3-11. Termination of Trust.

a. The Department will remain Trustee of the client's trust account/subaccounts until one of the following events occur:

(1) The client turns 18 and is no longer in the legal custody of the Department.

(2) The client is between age 18 and 21, is participating in Extended Foster Care, and the Social Security Administration has not selected the lead agency to remain Representative Payee.

(3) The client turns 18 and has a physical or mental disability or is otherwise incapacitated or incompetent to handle his or her own financial affairs, and the Department applies for a court order from a court of competent jurisdiction establishing a separate trust for the client.

(4) A client under the age of 18 who has been in the legal custody, care, or control of the Department leaves the custody, care, or control of the Department due to adoption or placement of the client with a parent or relative, or as otherwise directed by a court of competent jurisdiction.

b. CLS shall be consulted as to disposition of funds. Refer to section [402.17\(7\)](#), F.S., and Paragraph 04 of the General Provisions of the Declaration of Master Trust dated July 8, 1997.

c. When the source of the client's income are benefits issued by the Social Security Administration, the Social Security Administration must be notified that the client is no longer in the custody of the Department and the conserved funds must be returned to the Social Security Administration. The conserved funds and/or future benefits will be paid as determined by the Social Security Administration. If a court order is issued to disperse the funds in another manner, the Social Security Administration should be consulted.

d. In the event of the death of the client while in the custody of the Department, any amount remaining in the trust account up to the total of medical assistance paid under Medicaid for the client shall be deducted and reimbursed to Medicaid prior to any other distribution to a designated remainder beneficiary pursuant to Section 11(5) of the General Provisions of the Master Trust Declaration or as otherwise provided by law. The Department, as soon as possible, shall also honor all unsatisfied Medicaid Third Party liens under section

[409.910](#), F.S., known to the Department, which involve personal injury court judgments or personal injury settlements received by Master Trust beneficiaries.

e. Except as provided paragraph d above, and except for certain allowable fees and costs, funds in the client's trust subaccount are not subject to the debts of the client.

3-12. ABLE United Accounts. The Achieving a Better Life Experience (ABLE) Act is a Federal Law that was enacted in December 2014 which authorizes each state to establish a program that offers tax-free savings and investment accounts for individuals with a disability. Florida operationalized the ABLE United program to offer these accounts.

a. Prior to pursuing an ABLE United account for a client, the following factors must be considered:

- (1) Age of client;
- (2) Needs of the client;
- (3) Account balances; and,
- (4) Progress towards Permanency Goal.

b. The client must meet the following eligibility requirements to open an ABLE United account:

- (1) Must be a Florida resident at the time of application; and,
- (2) Must meet one of the following:

(a) Entitled to Supplemental Security Income (SSI);

(b) Have a condition listed in the "List of Compassionate Allowances Conditions" maintained by the Social Security Administration and found at (<https://www.ssa.gov/compassionateallowances/conditions.htm>);

(c) Certify that the individual is blind within the meaning of Section 1614(a)(2) of the Social Security Act; or,

(d) Certify that the individual has a medically determinable physical or mental impairment that results in marked and severe functional limitations and that: (i) can be expected to result in death; or (ii) has lasted, or can be expected to last, for a continuous period of not less than 12 months.

c. Prior to establishing an ABLE United account, the child welfare professional must explain to the client, if age and developmentally appropriate, what ABLE United accounts are and the plan to establish an account on the client's behalf. This information must also be shared with the client's parents if termination of parental rights has not occurred. A child welfare information system case note must be created and the signed ABLE United Acknowledgment (Attachment 2 to this chapter, form CF-FSP [5464](#), available at DCF forms) must be attached to document the outcome of these conversations.

- d. Conserved funds in a client's Current Needs subaccount are used to establish and invest in an ABLE United account.
- e. The investment type for a client's ABLE United account must be the FDIC Savings Fund.
- f. Within seven days of establishing the client's ABLE United account, the lead agency must notify SSA of the account and the authorized legal representative for the client.
- g. Withdrawals or expenditures from this account must follow the same guidance and procedures outlined for Master Trust subaccounts. These funds are to be used for "qualified disability expenses."
- h. The most recent account statement must be filed with the court for each judicial review hearing.
- i. The Representative Payee report documenting the use of benefits must be completed annually. The form is mailed annually from SSA or can be completed online (available at [Representative Payee Portal | SSA](#)).
- j. When a client leaves licensed care or reaches the age of 18, unless the lead agency remains payee of the client's benefits, the appropriate ABLE United forms must be completed to change the authorized legal representative (ALR). Prior to changing the ALR, the lead agency must download and save all records from the client's ABLE United account and upload documents into child welfare information system. SSA must be notified of a change in ALR.
- (1) When the client leaves licensed care, the lead agency designee or child welfare professional must discuss with any potential caregiver or appointed representative payee about the existing ABLE United account, provide them with expectations for the use funds, and the ABLE United website to access additional information. Upon placement, the lead agency must complete the "Change Authorized Legal Representative" form (available at [ABLEUnited.com](#)) and assist the caregiver with the transfer of the ABLE United account.
- (2) When the client reaches the age of 18, and the lead agency will no longer be the representative payee, the lead agency will review the ABLE United account information with the client and provide the client with the ABLE United website to access additional information. The lead agency must complete the "Remove Authorized Legal Representative" form ([available at ABLUnited.com](#)) and assist the client with transfer from an ALR to the client assuming administrative duties and gaining access to their ABLE United account. In the event the client has an appointed Representative Payee for their social security benefits, the lead agency must inform the Representative Payee of the client's ABLE United account, expectations for its use, and provide the website to allow the Representative Payee to assist the client in managing these funds.
- k. The lead agency must follow all guidelines and procedures of the ABLE United program.

### 3-13. Child Welfare Information System Documentation.

a. The lead agency must enter and maintain benefit amounts in the child's Assets/Liabilities and Unearned Income page in child welfare information system. If the client receives more than one benefit type, an entry must be made for each.

b. The completed Notarized Designation of Client Money and Property (form CF-FSP [5222](#), available in DCF Forms) must be uploaded into the child welfare information system File Cabinet under the Image Category Trust Account and Image Type Signed Notarized Designation of Client Money and Property utilizing the name of the document as the file name.

c. The completed Notice of Fee Assessment and Rights of Foster Child Regarding Government Benefits (form CF [285D](#), available in DCF Forms) must be uploaded into the child welfare information system File Cabinet under the Image Category Trust Account and Image Type Signed Notice of Fee Assessment utilizing the name of the document and date as the file name.

d. The completed Social Security Application must be uploaded into the child welfare information system File Cabinet under the Image Category Participant Documents and Image Type Social Security. The naming convention shall include type of application (SSI or SSA) and date of application. Example: SSI Application 02022021 or SSA Application 02022021.

e. If the application is denied by Social Security Administration, the denial letter must be uploaded into the child welfare information system File Cabinet under the Image Category Trust Account and Image Type Denial Letter utilizing the naming convention SSI Denial MMDDYEAR or SSA Denial MMDDYEAR.

f. The Social Security Award Letters, Continuing Disability Reviews, Representative Payee Reports, and Notice of Change in Payments must be uploaded into the child welfare information system File Cabinet under the Image Category Trust Account and Image Type Other. The naming convention must include document type and date. Example: SSI Award Letter MMDDYEAR or Notice of Change in Payment MMDDYEAR.

g. Fee Waiver or Change in Allowance Packet to include, at a minimum, the request, communications from the committee, and decision from the region designee shall be uploaded into the child welfare information system File Cabinet under the Image Category Trust Account and Image Type Application utilizing the naming convention Fee Waiver, Approved (or Denied), date of decision. Example: Fee Waiver Approved MMDDYEAR or Change in Allowance Denied MMDDYEAR.

h. Completed Master Trust Expenditure Plans must be uploaded into the child welfare information system File Cabinet under the Image Category Trust Account and Image Type Expenditure Plan utilizing the naming convention Expenditure Plan MMDDYEAR.

i. Master Trust Withdrawal Requests and Authorization (form CF-FSP [5463](#), available in DCF Forms) and receipts for purchases must be uploaded as a completed packet into the child welfare information system File Cabinet under the Image Category Trust Account and Image Type Other utilizing the naming convention Expenditure Documentation MMDDYEAR.

j. Quarterly Accounting records for Master Trust subaccounts must be uploaded into the child welfare information system File Cabinet under the Image Category of Trust Account and Image Type Other. The naming convention must be Quarterly Accounting listing months and year. Example: Quarterly Accounting Jan-Mar2020 or Quarterly Accounting Apr-Jun2020.

k. The submitted application for the ABLE United account must be uploaded into the child welfare information system File Cabinet under the Image Category of Participant Documents and Image Type Other. The naming convention must be ABLE United Application and date of submission (MMDDYYYY). Example: ABLE United Application 02132021.

l. ABLE United account statements must be uploaded into the child welfare information system File Cabinet under the Image Category of Assets and Income and Image Type Bank Statement. The naming convention must be ABLE United Account Statement listing month(s) and year. Example: ABLE United Account Statement Apr-Jun2020.



## Explanation of Master Trust Notice

### 1. Why am I getting this Notice?

The Florida Department of Children and Families (Department) is keeping money for you in an account called a Master Trust. This document explains what that means and what your rights are.

This Master Trust is for children who have an open dependency (foster care) case.

The Department or your Community Based Care Lead Agency (lead agency) keeps track of how much money is put in and taken out for each child.

The Department is required by law [section 736.0813, Florida Statutes (F.S.)] to give you this notice.

### 2. Why does the Department have my money?

- a) If it comes from the federal government, the government will not send money directly to a child. Instead, it sends the money to a “representative payee” or “rep payee.” That is a person or organization that is responsible for using the money for the child’s needs. Parents are usually the rep payee for their children. But when children are in foster care, the parent cannot have access to the money. If there is not another adult who can be the rep payee, then the Department and/or your lead agency has that responsibility.
- b) If you have money or property (like stocks or a house) the court can order that it be put into the Master Trust. It still belongs to you. It is put in a trust to protect it from others.

### 3. Where does the money come from?

There are two main sources of money in the Master Trust. The first is Supplemental Security Income (SSI) which is money paid to care for a child with disabilities. The second is Social Security Administration (SSA) payments. These are for children whose parents worked and paid into the Social Security system and then the parent died, retired, or became disabled. Some children who lived with their grandparents may also get those funds.

Other possible sources of money are Veteran’s benefits and Railroad Retirement benefits. Sometimes children get money from other sources, like from a lawsuit or an inheritance.

### 4. Why does the Department take my money to pay for cost of care (room and board)?

Florida law requires the Department to take money from your account to pay for the cost of your care (section 402.33(2), F.S.). The cost of care is the amount the Department pays your caregiver or group home for your care. It may also include costs for other fees for your placement or medical or mental health services not covered by Medicaid. If another agency paid for the cost of your placement, or there was no cost, then the Department cannot take money from your account.

The Department has to set aside a minimum amount of money in your account for a “personal allowance”. If the amount of money you get each month is more than the cost of care, the extra money stays in your account.

### 5. What else can the money be used for?

The money is supposed to meet your short-term and long-term needs. You can talk to your caregiver, case manager, guardian ad litem, or attorney about using the money for things that you want and need.

**6. Is there any way to save up more money in my account?**

Yes. You have the right to ask for a “waiver or reduction of assessed fees.” If it is granted, the Department will reduce the amount it takes for the cost of care. Your caregiver, case manager, guardian ad litem, or attorney can help you fill out the form explaining how much you want and what you want to do with the money.

Your request will be reviewed by a committee. If your request is denied, you can request an administrative hearing. [Rule 65C-17.005, Florida Administrative Code (F.A.C.)] Your request must be made within 21 days of the date of the denial. An administrative hearing is held by a hearing officer (like a judge) who listens to both sides and makes a decision. If you don't already have a lawyer, ask your guardian ad litem or case manager to help you get one.

**7. How do I find out what is happening with my money?**

- a) Your case manager is supposed to tell you about all purchases made from your account (Rule 65C-17.003, F.A.C.).
- b) At least twice a year, at the time of your judicial review hearing, your lead agency must provide you with information about asking for a “waiver or reduction” in the cost of care (Rule 65C-17.005, F.A.C.) and your court file should be updated with a current report about your money.
- c) You do not have to wait for a judicial review hearing to find out about your money. You can ask your caseworker to get you “an accounting” of your funds. An accounting is a document that shows details about your account:

For money put into your account:	For money taken out of your account:
<ul style="list-style-type: none"> <li>• The date that money is put in</li> <li>• The amount of money put in</li> <li>• Where the money is from</li> </ul>	<ul style="list-style-type: none"> <li>• The date money is taken out</li> <li>• The amount of money taken out</li> <li>• What the money was spent on</li> </ul>

**8. What if I have a question or disagree with the information about my Master Trust account?**

First see if your case manager, guardian ad litem, or attorney can help. If they cannot, then you should contact the Department or their designee. That person is responsible for taking your questions and responding to issues you raise. The contact information for your Department designee is \_\_\_\_\_. [put in name, phone number and email address]

**9. Can I get more details about the Master Trust?**

Yes – you can get a copy of the “trust instrument and amendments.” They are the legal documents that make up the trust. This trust was created by an order of the Circuit Court of Leon County on July 8, 1997.

You can ask the Trustee (the entity that is responsible for the Trust) for a copy.

The contact information for the Trustee is:

Office of General Counsel  
 Florida Department of Children and Families  
 2415 North Monroe St., Suite 400  
 Tallahassee, FL 32303

Phone: 850-488-2381 Email: [Agency.Clerk@myflfamilies.com](mailto:Agency.Clerk@myflfamilies.com)

## ABLE United Acknowledgement Form



### Achieving a Better Life Experience (ABLE) Act

#### What is an ABLE Account?

An ABLE account is a tax-free savings and investment account established to support qualified disability expenses, including living expenses, for an individual with a disability. Money in an ABLE account is generally disregarded when determining eligibility for federal benefit programs such as Supplemental Security Income (SSI) and Medicaid. The ABLE United Program is the qualified ABLE program offered by the state of Florida. ABLE accounts in the ABLE United Program are referred to as ABLE United accounts. The only investment type approved by the Department is the FDIC-Insured Savings Account. This investment type is insured, and funds are not at risk of being lost.

#### Eligibility Criteria to open an ABLE Account

There are three eligibility criteria for opening an ABLE United account:

- **Florida Residency:** The individual must be a Florida resident at the time of application.
- **Disability Severity Criteria:** The individual must be blind or have a disability that meets the disability and severity requirements such as for Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI).
- **Disability Onset:** The onset of blindness or disability must have occurred before the individual's 26th birthday.

Factors to consider when making the determination of the appropriateness of an ABLE United account include age and needs of the client, Master Trust account balances, and progress towards reaching the identified permanency goal.

#### Accessibility of Funds

The funds are available within two to five days from the approved request. The funds are tax-free if they are used on a "qualified disability expense." The expenditure documentation is the same as currently required to utilize funds in Master Trust accounts. There is no annual fee and online banking features exist. Paper statements can be obtained for a fee. As the Authorized Legal Representative (ALR), the lead agency will designate two individuals that will be named as the primary and secondary representative on the account.

#### Comparison of Master Trust Accounts and ABLE Accounts

Master Trust Accounts	ABLE Accounts
• Has an asset limit of \$2,000 or the child becomes ineligible for SSI Medicaid which limits ability to conserve funds.	• Are exempt from federal means tested benefits, up to \$100,000.
• Cost-of-care is deducted from the child's current needs account on a monthly basis; however, funds accumulate and must be monitored closely.	• Cost-of-Care is deducted from benefits received prior to transferring funds into an ABLE Account.
• Once account reaches \$1,500, the lead agency completes an Expenditure Plan outlining how funds are to be spent to prevent going over the allowable asset limit.	• The lead agency could allow up to \$15,000 annually to accumulate in the child's account to better plan and meet future needs.
• Funds can accrue interest.	• Funds will accrue interest. Tax forms 5498-QA or 1099-QA may be received.
• Social Security funds are sent back to social security to establish a new payee once a child leaves care which can cause a delay in access to benefits.	• Child can continue to benefit from account once a child leaves care and the ALR can be transferred within 30 days.
• Social Security Administration conducts reviews.	• Social Security Administration has the authority to conduct reviews on withdraws for SSI recipients.

#### Acknowledgement of Receipt of Information

<b>I confirm that I have reviewed the information within this document with the individuals listed below.</b>			
Youth's name:			
Parent's name(s):			
Child Welfare Professional's Name:		Child Welfare Professional's Signature:	

#### ADDITIONAL INFORMATION

Additional information can be found by visiting the ABLE United website at <https://www.ableunited.com>

## Chapter 4

### STATE INSTITUTIONAL CLAIMS FOR DAMAGES CAUSED BY SHELTER OR FOSTER CHILD

4-1. Purpose. This chapter outlines the procedure to follow when an individual wants to request restitution for direct medical expenses and/or property damage caused by a shelter or foster child.

#### 4-2. Definitions.

a. State Institutions Claim Fund. A program established by the Legislature pursuant to s. 402.181(1), F.S., for the purpose of making restitution for property damages and direct medical expenses related to injuries caused by shelter or foster children.

b. Claimant. The person who suffered personal injury or property damage.

#### 4-3. Authority.

a. Section [402.181](#), F.S.

b. Chapter [2-6](#), Florida Administrative Code (F.A.C.).

#### 4-4. General Requirements.

a. At the time the injury or damage occurred, if the child responsible was:

(1) In shelter legal status (pursuant to a court's shelter order), restitution up to \$1,000.00 may be claimed.

(2) In foster care legal status (pursuant to a court order granting custody to the department for placement in foster care), restitution up to \$1,500.00 may be claimed.

b. The child's placement, such as shelter, foster home, or group care has no bearing on the above distinction; it is based solely on the child's legal status at the time the injury or damage occurred.

#### 4-5. Responsibilities of the Child Welfare Professional.

a. When a shelter parent, foster parent, or other individual advises the Child Welfare Professional of expenses they have incurred as a result of personal injury or property damage caused by a shelter or foster child, the Child Welfare Professional shall:

(1) Assist the claimant in completion of the Restitution Claim Form (form [BVC 402 IS](#), available in DCF Forms).

(2) Ensure that the form is completed in its entirety and that legible receipts (or estimates) from a licensed vendor are attached.

(3) Confirm the damage described on the application. This can be completed through observation of the home or by reviewing validated documentation provided by the claimant (i.e., pictures).

(4) Confirm that the claimant has provided pictures of the damage, two written estimates for repair, or receipt(s) if the repair has been paid for.

(5) Review the circumstances of the claim and have the claimant sign the form.

(6) The form will be processed and sent to the Office of the Attorney General no later than 10 business days after receipt of the completed form with receipts and estimates attached.

b. The Child Welfare Professional will review the application and complete “Section Three: State Agency Delegate Information” on the [form](#), complete the State Institutional Claims for Damages Recommendation (form CF-FSP [5453](#), available in DCF Forms), and submit the completed and signed application form and recommendation form to the Office of the Attorney General.

c. Examples of personal injury or damages that may be submitted for processing include, but are not limited to:

(1) Child intentionally breaks furniture;

(2) Child punches holes in the wall;

(3) Child hits the foster parent causing bodily harm and medical treatment is required; or,

(4) Child destroys personal property of another foster child.

d. Examples of damages that cannot be claimed include, but are not limited to:

(1) Child purchases movies on the foster parent’s internet account;

(2) Child purchases items online with the foster parent’s credit card; or,

(3) Damages resulting from circumstances where the biological/adoptive child and foster child are equally responsible.

e. In the event a claim is denied by the Office of the Attorney General and the claimant requests a 120 hearing, the Child Welfare Professional must attend the hearing.

#### 4-6. Responsibilities of the Claimant.

a. The claim must be written and filed by the claimant with the Child Welfare Professional within 120 days of the occurrence of the incident upon which the claim is based. The form is available in DCF Forms (form BVC 402 IS). The form is also available at <http://myfloridalegal.com> under the “Programs” heading.

b. The claimant must provide pictures of the damage, two written estimates for repair, or receipt(s) if the repair has been paid for.

c. The claimant is not required to submit a claim to his or her homeowner's insurance company for primary coverage of the expenses.

d. If the claimant's homeowner's insurance coverage is used, the Institutional Claims Fund may be used only to request restitution for any deductible amount and/or repair of damage the homeowner's insurance coverage did not pay. Paperwork from the homeowner's insurance must be included with the form and receipts. For example, if the damage cost \$600 to repair and homeowner's insurance paid \$100 due to a \$500 deductible, the \$500 deductible could be claimed through Institutional Claims.

e. If the claim is denied by the Office of the Attorney General, the claimant has a right to appeal pursuant to Chapter 120, F.S. The claimant must request a hearing in writing within 21 days following notification of the adverse decision pursuant to s. [120.57](#), F.S. The request for a hearing must be sent to the Office of the Attorney General.

## Chapter 5

### EMPLOYEES INVOLVED IN REPORTS OF ABUSE, NEGLECT OR EXPLOITATION

5-1. Purpose. This chapter describes the processes to follow when department employees identified in paragraph 5-2 of this operating procedure (including other personnel services [OPS] positions) and community-based providers, contractors and subcontractors working with children or vulnerable adults (or the family or household members of any of these individuals) are the subject of a report of abuse, neglect or exploitation. The procedure is also designed to:

- a. Preserve the integrity of the investigative process; and,
- b. Afford employees, to the extent possible, the same confidentiality provided to any other citizen of Florida as provided for by Chapters 39 and 415, Florida Statutes (F.S.).

5-2. Scope. This chapter applies to employees of the Office of Child Welfare (CW), Adult Protective Services (APS), Substance Abuse and Mental Health (SAMH) and community-based providers, contractors and subcontractors working with children or vulnerable adults.

5-3. Access to Restricted and Confidential Information.

- a. Access to reports of abuse, neglect or exploitation in the Florida Safe Families Network (FSFN) or any other supporting or ancillary computer programs or records containing the identities of those employees listed in paragraph 5-2 above (or their family or household members) shall be limited to only individuals with a legitimate business need. A legitimate business need to access records involving employees and their family or household members is established for the child or adult protective investigator conducting the investigation, supervisors responsible for approving the investigator's work, and managers responsible for placing affected staff on administrative leave or assigning the employee to administrative, non-client contact duties.

- b. All department employees and community-based providers, contractors and subcontractors working with children or vulnerable adults are statutorily bound to abide by the laws of confidentiality in ss. [39.202](#) and [415.107](#), F.S. All employees:

- (1) Must protect the individual's right to privacy by safeguarding the confidentiality of the information received or accessed when acting in a professional capacity, and shall not share information received about one employee with any other person not having a legitimate business need;

- (2) Are not authorized to access the Florida Safe Families Network (FSFN) or any other supporting or ancillary computer programs or records for personal reasons, including reviewing reports in which the individual or a family or household member of the employee is a subject of the report; and,

- (3) Shall immediately exit any report as soon as the employee becomes aware that the report involves a family or household member, or a co-worker as a subject of the report, or the individual themselves. Any employee inadvertently obtaining access to



unrestricted, but confidential information shall immediately notify their supervisor of the situation.

c. When a report involves alleged abuse, neglect or exploitation by a department employee, community-based provider, contractor or subcontractor (or a family or household member of any of these individuals is a subject of a report), the caller shall immediately inform the Hotline counselor that the report involves an employee with access to FSFN and the employee's access to the report needs to be restricted.

d. All Hotline staff shall make reports involving members of their own families to a Hotline supervisor.

e. At any point an individual has reason to believe that the Hotline did not restrict access to a report involving a department employee, community-based provider, contractor or subcontractor or a family or household member of any of these individuals at the time of the report intake, the individual shall immediately report these concerns to the OCW or APS program office at Headquarters.

#### 5-4. Report Processing and Required Notifications.

a. The Hotline shall accept reports that meet statutory criteria for maltreatment while the employee was acting in an official capacity (i.e., in the professional performance of their work duties) or while the employee is off-duty (i.e., in the role of a caregiver in their own home or as an "Other Person Responsible for a Child's Welfare") as defined in Florida Statute.

b. Hotline supervisors or their designee shall notify the appropriate manager or designee upon the acceptance of a report:

(1) For OCW and APS department employees, community-based providers, contractors and subcontractors working with children and vulnerable adults, the employee's Regional Managing Director or designee shall be notified.

(2) For SAMH department employees, community-based providers, contractors and subcontractors working in substance abuse or mental health treatment facilities, the Assistant Secretary for Substance Abuse and Mental Health or designee, the Director or designee of State Mental Health Treatment Facilities, and the applicable Hospital Administrator shall be notified.

c. The Hotline supervisor shall also send an email notification to the following individuals:

(1) Hotline Director;

(2) Hotline Deputy Director;

(3) Circuit or Regional Program Administrator of initial county assignment;

(4) Circuit or Regional Program Administrator of reassignment county (if different from initial county assignment);

(5) Assistant Secretary for Substance Abuse and Mental Health (for reports involving personnel at Substance Abuse or Mental Health treatment facilities); and,

(6) APS Statewide Program Director.

d. The email shall contain the following information:

- (1) Intake number;
- (2) Name of person who reassigned the report (if applicable);
- (3) County of reassignment (if applicable);
- (4) Individual who received reassigned report (if applicable);
- (5) Date and time of reassignment; and,
- (6) Reason for special handling.

#### 5-5. Management Responsibilities.

a. The appropriate Circuit, Regional or Headquarters manager shall review the report immediately upon receipt.

b. In all cases where the affected employee is the alleged perpetrator of the maltreatment, the employee must be removed from customer contact while the investigation is being conducted and management systems must designate the report as a restricted case or remove the security clearance that allows the individual access into FSFN by close of business the next working day. Legal counsel, human resources and the Office of Inspector General shall be involved as appropriate.

#### 5-6. Investigative Unit/Circuit and Regional Responsibilities.

a. Each Regional Managing Director or designee shall be readily available to receive "special handling" reports or provide a chain of command available to Hotline staff when not available to receive reports.

b. To maintain confidentiality, provide an objective assessment, and avoid the appearance of impropriety, the Circuit or Regional Program Administrator or Program Manager shall determine if the report needs to be reassigned to a different region or county.

c. If during the course of an investigation, it is learned that an employee meets the involvement criteria set forth in this chapter but it was not known at the on-set, the circuit shall implement the procedures of this chapter immediately.

d. If during the course of the investigation, the employee's role in the report changes, the appropriate circuit, regional or headquarters office supervisory chain of command shall be so informed.

e. Investigative activities shall be expedited to ensure a timely but thorough investigation.

f. The decision regarding when or if an employee may return to assigned duties shall be made at the discretion of the appropriate regional or headquarters office manager or their designee, or Hospital Administrator or their designee, with input from human resources, legal counsel and the assigned protective investigator and supervisor, as appropriate.

g. Region or headquarters office managers shall periodically request management systems to audit special handling cases and report any inappropriate access of the report prior to and after report closure.

## Chapter 6

### TCA/HARDSHIP EXEMPTION – SUBSTITUTE CARE REVIEW

6-1. Purpose. This chapter sets out the department's response to a review of a family's situation when the end of the eligibility period for temporary cash assistance has been reached.

6-2. Scope. This chapter is applicable to all regional/circuit Family Safety and Economic Self-Sufficiency (ESS) staff.

6-3. Authority. A review for a hardship extension for minor children in a participating family that has reached the end of eligibility is authorized pursuant to section [414.105\(1\)\(e\)](#), Florida Statutes (F.S.).

6-4. Definitions.

a. TCA. "Temporary Cash Assistance" program. The goal of the program is to emphasize work, self-sufficiency and personal responsibility. The program strives to meet the transitional needs of program participants who need short-term assistance by providing time limited cash assistance to meet some immediate need while moving from welfare to work.

b. Hardship Exemption. A hardship exemption is defined as extraordinary barriers that potentially qualify a participant to receive an exemption to the TCA requirements. Criteria for hardship exemptions include the following:

(1) Diligent participation in activities, combined with extraordinary barriers to employment, including the conditions that may result in an exemption to work requirements.

(2) Diligent participation in activities and a need by teen parents for an exemption in order to have 24 months of eligibility after receiving a high school diploma or its equivalent.

(3) Diligent participation in activities, combined with inability to find employment.

(4) Significant barriers to employment, combined with a need for additional time.

(5) A review and recommendation from Family Safety staff for an extension of assistance for a minor child of the participating family, based on the determination that the termination of cash assistance would be likely to result in the child being placed into emergency shelter or foster care.

6-5. Requirements.

a. Family Safety staff will be responsible for reviewing and assessing the risk of a child being placed into emergency shelter or foster care as a result of the termination of the family's temporary cash assistance.

b. The department's public assistance specialists and Welfare Transition Program contracted case managers (local CareerSource Agencies) will use statutory criteria to recommend participants for a hardship exemption. If the participant was denied an

exemption, a Substitute Care Review will be requested.

c. The review will be conveyed through each region's Economic Self-Sufficiency program office to the region's Family Safety program office. The review will involve three elements:

(1) Financial Management Review (form [CF-ES 2091](#), available in DCF Forms)  
– to be completed by Economic Self-Sufficiency.

(2) Participant Case Summary (form [CF-ES 2087](#), available in DCF Forms)  
– to be completed by Economic Self-Sufficiency.

(3) Substitute Care Review (form [CF-ES 2089](#), available in DCF Forms)  
– to be completed by Family Safety.

d. Family Safety will conduct the assessments in cases in which a child may require continuation of cash assistance. The assessment consists of the following:

(1) Review of child maltreatment history.

(2) Review of provider history.

(3) Documentation of extended family/support system.

(4) Consultation with respective family support or case management staff who may currently be working with the family.

e. Family Safety staff will review these factors and will provide a recommendation whether or not to continue cash assistance for the child through a protective payee.

## Chapter 7

### FUNERAL ARRANGEMENTS FOR CHILDREN IN FOSTER CARE

7-1. Purpose. This chapter establishes guidelines for the provision of funeral arrangements at no cost to the Department for children who die while in the Department's custody or in the care of its designee, and for young adults who die while in the Extended Foster Care, Postsecondary Education Services and Support, or Aftercare programs.

7-2. Scope. This chapter is applicable in all cases where existing resources are not available to pay for funerals and final expenses of a child who dies while in the Department's custody or in the care of the Department's designee, or a young adult who dies while in the Extended Foster Care, Postsecondary Education Services and Support, or Aftercare programs.

7-3. Explanation of Terms. For purposes of this operating procedure, the following definitions will apply:

a. "Child" means any unmarried person under the age of 18 years who has not been emancipated by order of the court and who has been found to be dependent and is in the Department's custody or in the care of the Department's designee. This includes children in shelter status who have not yet been adjudicated.

b. "Designee" means a person, contractual provider or other agency or entity named by the Department.

c. "Department" means the State of Florida Department of Children and Families.

d. "Member(s)" means the members of the Florida Cemetery, Cremation, and Funeral Association ("FCCFA") and their respective funeral establishment.

e. "Young adult" means an individual who has attained 18 years of age but who has not attained 21 years of age (or 22, if disabled), who is in Extended Foster Care, and/or an individual who has attained 18 years of age but who has not attained 23 years of age, who is in the Road to Independence programs, including Postsecondary Education Services and Support and Aftercare.

7-4. General. The purpose of this chapter is to ensure culturally appropriate funeral arrangements are made and carried out for children and young adults who die while in the custody of the Department or the care of its designee and who do not have family members, a client welfare trust fund, or other resources to pay the cost of funeral and burial arrangements. The Florida Cemetery, Cremation and Funeral Association (FCCFA) historically has aided the Department in identifying funeral homes that may be able to assist with services for those families who cannot afford a funeral.

a. The FCCFA does not directly provide funding for the service or burial of a child or young adult.

b. The FCCFA attempts to locate members of its association who are able to provide low or no-cost services to the families in need of assistance within the scope of this operating procedure. In some instances, the FCCFA may not be able to identify a

member in the vicinity of the deceased who is able to provide low or no-cost services.

#### 7-5. Procedure.

a. Any time a child or young adult who is in the custody of the Department or the care of its designee dies, the case manager or case manager supervisor of the deceased child or young adult shall immediately notify the biological parent of the death of the child or young adult. In cases that involve a child whose parents' rights have been terminated, the case manager and case manager supervisor shall decide on a case-by-case basis whether to notify the biological parent.

b. The deceased child or young adult's case manager or supervisor shall determine whether the family has the resources to pay the funeral expenses as soon as possible. Immediately upon determining whether the family has the resources, the respective regional Family and Community Services Director or designee will be contacted and provided with this information.

c. If the parents or caregivers do not have the necessary financial resources, the respective regional Family and Community Services Director or designee shall call the FCCFA office in Tallahassee at (800) 226-3332 during regular working hours. Regular working hours of the FCCFA are Monday through Thursday 8:00 a.m. – 5:00 p.m. and Friday 8:00 a.m. – 3:00 pm. On weekends or after hours a message can be left at the main number, or an e-mail can be sent to [jbrewton@executiveoffice.org](mailto:jbrewton@executiveoffice.org) and the FCCFA will make contact the next business day.

d. FCCFA will send the FCCFA Foster Child Funeral Program form to the respective regional Family and Community Services Director or designee. Once the form is completed and received by the FCCFA office in Tallahassee, the FCCFA will begin to identify members of FCCFA that are:

- (1) In close proximity to the deceased foster child or young adult; and,
- (2) Able to provide low or no-cost services to the family.

e. Once an FCCFA member is identified and is able to provide such services, the FCCFA will provide the contact information of the case worker to the funeral establishment(s) that has offered to assist. From that point forward, the case worker or agency coordinator and the funeral establishment will coordinate the remainder of the process, including but not limited to the release of the body, funeral arrangements and burial/cremation information.

f. Family participation in such activities as providing clothing, scheduling of services and provision of clergy will be coordinated with the local funeral director through the regional Family and Community Services Director or designee. If the religious affiliation of the biological parents is unknown and cannot be reasonably determined, the religious affiliation of the foster parents may be used in the selection of the clergy.

g. The Office of Child Welfare shall ensure that the FCCFA's executive director is provided with an updated listing of the regional Family and Community Services directors.

h. If the Department, designee, or family member of the deceased child or young adult has already begun speaking with a funeral establishment(s) about any arrangements for death prior to contacting the FCCFA, the FCCFA has the right to decline all assistance within the scope of this operating procedure.



Chapter 8  
(Draft Pending)

## Chapter 9

## COMMUNITY-BASED CARE LEAD AGENCY DIRECT SERVICES EXEMPTION PROCESS

9-1. Purpose. This chapter provides a formalized process for a Community-Based Care Lead Agency to request an exemption from the statutorily required 35 percent threshold for direct provision of child welfare services and Department review of same.

9-2. Legal Authority. Section [409.988](#), Florida Statutes (F.S.).

9-3. Scope. Statute provides that “the lead agency shall directly provide no more than 35 percent of all child welfare services provided unless it can demonstrate a need, within the lead agency’s geographic service area, to exceed this threshold” (section [409.988\(1\)\(j\)](#), F.S.). This chapter outlines the process the Department will use to approve or deny a request for an exemption from the 35 percent threshold.

9-4. Procedure.

a. Memorandum Detailing the Justification of Need. If a Lead Agency requires an exemption from the 35 percent threshold in order to facilitate better service provision and be in the best interest of children and families in that lead agency’s geographic service area, the lead agency shall submit a memorandum detailing the justification of need to:

(1) In a geographic service area with a local community alliance, the Department’s contract manager and the local community alliance.

(2) In a geographic services area without a local community alliance, the Department’s contract manager. In this instance, in order to comply with section [409.988\(1\)\(j\)](#), F.S., the Department will convene a local committee of representatives from each of the following:

- (a) The Department of Children and Families;
- (b) The county government;
- (c) The local school district;
- (d) The county United Way;
- (e) The county sheriff’s office;
- (f) The Circuit Court corresponding to the county;
- (g) The county Children’s Services Council, if one exists;
- (h) The Guardian ad Litem’s office; and,
- (i) The Managing Entity, unless the Lead Agency is also the Managing Entity.

(3) A memorandum detailing the justification of need must include:

(a) A narrative description of reasons for requesting an exemption from the 35 percent direct service provision threshold, to include:

1. Services the Lead Agency proposes to provide directly;
2. Current sub-contracted services and the entities who perform these services for the Lead Agency; and,
3. Any attempts the Lead Agency has made to avoid or reduce the need to exceed the 35 percent threshold.

(b) The current percentage of child welfare services provided by the Lead Agency as calculated by the Child Welfare Services Calculation Template (form CF-FSP [5457](#), available in DCF Forms).

(c) The proposed percentage of child welfare services provided by the Lead Agency as calculated by the Child Welfare Services Calculation Template (form CF-FSP [5457](#), available in DCF Forms).

(d) Any collateral information important to the review and approval process.

(e) Any feedback or responses from community stakeholders the Lead Agency has already gathered.

(4) Submission of all materials outlined in (3) will begin the review process.

b. Local Community Alliance or Local Justification of Need Committee.

(1) Once a memorandum is received by the local community alliance or local committee (convened as needed), that entity shall review the memorandum and any collateral information submitted and formulate a recommendation (based on the internal procedures of that body) to the Department whether to approve or deny the Lead Agency's request for exemption from the 35 percent threshold. An explanation of the recommendation and supporting documentation shall be included.

(2) The local community alliance or local committee may request additional documentation from the Lead Agency to assist in the process. Further, the Lead Agency may be required to explain its memorandum or respond to questions. The review and recommendation process shall be completed within 20 business days of the submission of all materials in (3) and any additional documents requested unless the Department authorizes additional time for the submission of the recommendation.

(3) Once finalized, the written recommendation must be submitted to the Department's contract manager.

c. Department Process.

(1) Once a local community alliance or local committee has submitted a written recommendation, Department contract staff will review the recommendation as well as the previously submitted memorandum of justification and any collateral information submitted. The

Department will also discuss any issues and develop a plan to address any new requirements created by approval of the Lead Agency's request to providing direct services in excess of the 35 percent threshold.

(2) If Department contract staff determines the process has been followed and there are no outstanding issues or questions, the Department contract manager will submit the materials and schedule a meeting with the Assistant Secretary for Child and Family Well-Being or designee to discuss the recommendation. This meeting must take place within 10 business days of the submission of the written recommendation to the Department contract manager by the local community alliance or local committee.

(3) Upon review of all submitted materials, the Assistant Secretary for Child and Family Well-Being or designee may request additional information in support of the request prior to rendering a final decision.

d. Final Decision. Once the Assistant Secretary for Child and Family Well-Being or designee has held a meeting with the Department contract manager and reviewed the recommendation and all submitted materials, the Assistant Secretary for Child and Family Well-Being or designee will draft and provide an official approval or denial letter from the Secretary or designee to the Lead Agency, and representative of the local community alliance or local committee.