

Chapter 16

RESPONSE TO SPECIAL CONDITIONS REFERRALS

16-1. Purpose. This chapter provides requirements for the response to Special Conditions Referrals.

a. Definition. Special Conditions Referrals are concerns brought to the attention of the Department and require a response by the Department or a child welfare professional. These concerns **do not** include allegations of maltreatment and do not meet the acceptance criteria for a report of abuse, abandonment, or neglect; therefore, no investigation should commence. A special conditions referral can be generated independent of a report of abuse, abandonment, or neglect, or in conjunction with a report of abuse, abandonment, or neglect.

b. Types. There are four types of Special Conditions Referrals: Caregiver Unavailable, Child-on-Child Sexual Abuse, Foster Care Referral, and Parent in Need of Assistance.

(1) Special Conditions Referrals are assigned to child welfare professionals with different functions and responsibilities (Child Protective Investigator, Case Manager, or Licensing Specialist), based on the type of the referral.

(2) The child welfare professional will commence the referral in accordance with response times assigned by the Florida Abuse Hotline (Hotline) in accordance with CFOP 170-5, [Chapter 3 or as specified within this operating procedure](#).

(3) If a child welfare professional conducting the assessment of a Special Conditions Referral discovers information that constitutes reasonable cause to suspect that a child has been abused, abandoned, or neglected, a report must be made to the Hotline immediately. The Hotline personnel will evaluate the information provided and determine if the reported concerns meet the criteria for child abuse, neglect, or abandonment, thereby warranting a child protective investigation. If the information meets the criteria for acceptance as an allegation of abuse, abandonment, or neglect; the Hotline will generate a separate intake for investigation.

(4) If the need arises to remove the child from the custody of their parent(s) or legal guardian as a result of information obtained during the response to a Special Conditions Referral, a report should be made to the Hotline with a qualifying maltreatment of abuse, neglect, or abandonment.

(5) Special Conditions Referrals should be completed within thirty (30) days, unless there is a specific action outstanding which should be documented in the chronological notes.

16-2. Authority.

- a. Section 39.01(7), Florida Statutes (F.S.).
- b. Section 39.001(113), F.S.
- c. Section 39.201(1)(a), F.S.
- d. Section 39.307, F.S.
- e. Rule 65C-90.002, Florida Administrative Code (F.A.C.).
- f. Rule 65C-29.006, F.A.C.
- g. Rule 65C-29.007, F.A.C.

16-3. Classifications of Special Conditions Referrals (4 types).

a. Caregiver(s) Unavailable. Situations in which the parent(s), legal guardian(s), or caregiver(s) has been incarcerated, hospitalized, or has died and immediate plans must be made for the child(ren)'s care. This referral type also includes situations in which children are unable or unwilling to provide information about their parent(s), legal guardian(s), or caregiver(s).

(1) Caregiver Unavailable Special Conditions Referrals are assigned and responded to by a Child Protective Investigator (CPI).

(2) The CPI will contact the reporter and determine the need(s) of the child(ren) as well as the circumstances around the reason the caregiver(s) is/are unavailable.

(3) The CPI will contact any parent, caregiver, or legal guardian to make arrangements for the child's care.

(a) If the CPI discovers the child is the victim of abuse, neglect, or abandonment, a report must be made to the Hotline.

(b) If the CPI discovers no evidence of abuse, neglect, or abandonment, the parent or legal guardian will make arrangements for the child, and the Department will assist by offering any necessary services to support the parent or legal guardian's decision.

(4) If the CPI is unable to locate a parent or legal guardian, or if the parent or legal guardian is unable to make decisions for the child, the CPI will staff with a Supervisor to determine the need to generate a report of abuse, abandonment, or neglect and seek legal action.

(5) The CPI will complete the Special Conditions/Request for Assistance Assessment in Florida Safe Families Network (FSFN).

b. Child-on-Child Sexual Abuse. Situations of juvenile sexual abuse or inappropriate sexual behavior between two children.

(1) Child-on-Child Sexual Abuse Special Conditions Referrals are assigned and responded to by a CPI.

(2) The CPI will notify law enforcement and will subsequently work with law enforcement and the Child Protection Team to determine if forensic interviews are necessary.

(3) If the child-on-child sexual abuse incident occurred in a licensed setting (e.g., daycare, school, foster home, group home, residential facility, etc.), the CPI must conduct an on-site assessment, unless prohibited by law enforcement.

(4) The CPI responsible will conduct private, face-to-face interviews with the alleged child victim(s), the child with sexualized behavior, other children at risk, and the caregiver(s). The CPI will:

(a) Determine whether any of the child interviews should be conducted at the home or another location, such as the child's school.

(b) Gather the caregiver(s)'s account.

(c) Assess where the child with sexualized behaviors learned this behavior. The CPI will immediately contact the Hotline to generate a new intake if the child discloses the sexualized behavior was learned from an adult or caregiver.

(d) As necessary, explore and discuss the suggestions to ensure the safety of the child or remedy any problems.

(e) Conduct an inspection of the home, as necessary.

(f) Conduct any collateral interviews necessary to complete the assessment.

(5) If the Child-on-Child Sexual Abuse occurs in a licensed foster home or group home:

(a) When the Hotline intake is received, the CPI assigned will consult with the licensing agency to determine the licensing agency's role, if any, in conducting a joint response with the child(ren) and caregiver(s). The CPI will take the lead with interviews. The following are the options:

1. The CPI will conduct the interviews alone.

2. The CPI and licensing specialist will conduct joint interviews.

3. A joint interview may include a case manager, a placement specialist, a clinical professional, and/or any other child welfare professional.

(b) The child placing agency will assign a licensing specialist to review the provider record. Whenever possible, the child placing agency's licensing specialist should complete the record review and communicate the information learned to the child welfare professional(s) responsible for conducting interviews before the interviews occur. If the information is not provided prior to the interview, it must be provided within two business days.

(c) The CPI will notify the regional licensing authority immediately when the report is received.

(d) The CPI, and when appropriate other coordinating child welfare professionals, will conduct private, face-to-face interviews with the alleged child victim(s), the child with sexualized behavior, other children in the home, and the caregiver(s). The professional(s) responsible for conducting the interviews will:

1. Determine whether any of the child interviews should be conducted at the foster home or group home or another location, such as the child's school.

2. Determine if there is a Child Placement Agreement.

3. Gather the caregiver(s)'s account.

4. As necessary, explore and discuss the caregiver(s)'s plan or suggestions to ensure the safety of the child or remedy any problems.

5. Conduct an inspection of the home, as necessary.

6. Conduct any collateral interviews necessary to complete the assessment.

(e) The CPI will collaborate with the regional licensing authority and licensing agency in developing recommended actions if there are any safety or supervision concerns.

(f) The CPI and child placing agency's licensing specialist will meet with the caregiver(s) to discuss the results of the assessment and any necessary follow-up actions. The possible outcomes include:

1. The referral or report is closed and there is no basis for any intervention.

2. There will be follow-up supports and services provided to the caregiver(s) and/or services provided to the child.

3. A written corrective action plan is developed in collaboration with the caregiver, supervising agency, and approved by the regional licensing authority. The corrective action plan shall be documented on the Corrective Action Plan for Licensed Caregivers (Attachment 1 to this chapter) and uploaded into FSFN.

4. A Child Placement Agreement per CFOP 170-11, [Chapter 4](#), is created or modified.

(6) If it is determined that Child-on-Child Sexual Abuse has occurred due to inadequate supervision of a child with known behaviors, a new report will be made to the Hotline.

(7) The CPI will complete the assessment of Child-on-Child Sexual Abuse within 30 calendar days of the intake.

(8) Documentation of the Child-on-Child Sexual Abuse Assessment in FSFN should include an assessment of the incident, outcome of assessment, actions taken during the response, and recommended services/treatment along with the family's level of compliance with recommended services.

c. Foster Care Referral. Foster Care Referrals are concerns reported to the Hotline related to the care provided to a child in an out-of-home placement, agency-licensed foster home, group home, or emergency shelter; or concerns related to a child's safety, permanency or well-being for families under protective supervision that do not meet the criteria for acceptance of a report of abuse, abandonment, or neglect. These referrals may include placement disruptions and case plan or safety plan violations. These referrals contain no allegations of abuse, neglect, or abandonment, but may require a plan modification. The intent of the Foster Care Referral in such cases is to serve as notification to the child welfare professional to re-assess the child's safety, permanency, and well-being. These are generally licensing or regulatory infractions or complaints. Foster Care Referrals may include situations which involve the caregiver from whom the child was removed, which impact child safety, yet occur while the child is in an active out-of-home care placement. Foster Care Referrals may also be accepted on individuals over the age of 18 who are placed in the home through extended foster care.

(1) Foster Home and Group Home licensing violations reported directly to the regional program office, Community-Based Care Lead Agency (CBC) and their subcontractor (if any), or licensing supervising agency will be reported immediately to the Hotline.

(2) The Hotline will complete a second level review of all Foster Care Referrals to assess for abuse, abandonment, and or neglect and ensure the Foster Care Referral has been correctly coded, prior to assignment to the appropriate receiving unit.

(3) The CPI receiving unit will assign the Foster Care Referral to the appropriate child welfare professional and notify the Regional Managing Director or his/her designee.

(a) If the Foster Care Referral alleges licensing violations in a group home licensed by the Department (as identified on the provider licensing page), the Foster Care Referral will be assigned to the regional licensing authority.

(b) If the Foster Care Referral alleges licensing violations in a licensed foster home setting; concerns within a relative or non-relative placement setting; or potential case plan violations, safety plan violations, or placement disruptions, the Foster Care Referral will be assigned to the CBC designated point of contact.

1. The CPI receiving unit shall notify the regional licensing authority of all Foster Care Referrals assigned to the CBC at time of assignment.

2. The CBC designated point of contact will notify CBC executive leadership and assign the foster care referral to the appropriate child welfare professional.

(c) Foster Care Referrals will be commenced and assessed by a licensing specialist or child welfare professional employed by or contracted through the CBC. A CPI will not be assigned to a Foster Care Referral as the primary responder but may provide assistance as needed or requested.

(4) If it is determined that the home or facility is not licensed by the Department AND does not have an active placement of a child in the Department's custody, the assigned child welfare professional will contact the appropriate licensing authority and notify them of the concerns. This notification should be documented in the chronological notes and narrative outcome tab in FSFN, and the referral closed.

(5) The assigned child welfare professional will initiate the assessment by reviewing all prior abuse, neglect, or abandonment reports within FSFN; all prior Foster Care Referrals; and all records contained within the licensing file including, but not limited to, prior Corrective Action Plans and licensing violations, in order to complete a full review of the child's history as well as the foster parent's licensing history as part of the assessment.

(6) The child welfare professional will respond to the home within 72 hours to assess the concerns in the referral. For Foster Care Referrals that involve actions toward a child under the Department's supervision, the child welfare professional will make face-to-face contact with and interview all children within the home or setting.

(7) If a child welfare professional conducting the assessment of a Foster Care Referral discovers information that constitutes reasonable cause to suspect that a child has been abused, abandoned, or neglected, a report must be made to the Hotline immediately.

(8) For a Foster Care Referral involving a group home or foster home, a staffing will occur within five business days from receipt of the referral and shall include the supervising licensing agency, CBC, and regional licensing authority to determine actions to remedy the violation. Each staffing should assess whether a placement hold on the foster home or group home license should occur until licensing concerns are resolved.

(a) If no violation has occurred, the responding child welfare professional will assess for any needs or services and make referrals as necessary.

(b) If the remedy includes a Corrective Action Plan, the regional licensing authority shall notify the Regional Managing Director or his/her designee and the Office of General Counsel to review and approve the Corrective Action Plan.

1. The regional licensing authority will monitor the Corrective Action Plan until all corrective action items are resolved.

2. If the regional licensing authority has concerns at any point during the monitoring of the Corrective Action Plan, these concerns shall be elevated to the Regional Managing Director.

3. If a hold is initiated, the regional licensing authority in consultation with the Regional Managing Director must review and approve the decision to lift the placement hold prior to additional children being placed in the home.

(c) If the remedy is to begin the revocation process, the regional licensing authority shall place the home on hold and coordinate with the Office of General Counsel.

(9) FSFN Documentation for Foster Care Referrals. All actions must be documented in FSFN within two business days to comply with documentation policy. The response to a Foster Care Referral and any necessary actions resulting from such must be documented in FSFN in the Assessment Summary. Each referral must include a minimum of the following information:

(a) Summary of contact with the family or Child Caring Provider.

(b) Assessment of prior history, previous and/or current Corrective Action Plans, and assessment of concerns identified through the Foster Care Referral.

(c) Plan to follow up, including who is responsible for the follow-up action.

(d) Documentation of all consultations and/or staffings with the region licensing staff, Office of General Counsel, and all other participants, with the outcomes of those consultations and/or staffings.

(e) Documentation of the outcome decision to include:

1. Justification that the assessment did not result in a Corrective Action Plan.

2. Development of a formal Corrective Action Plan; any Corrective Action Plans developed shall be documented on Corrective Action Plan for Licensed Caregivers (Attachment 1 to this chapter) and uploaded into FSFN.

3. Decision to initiate a revocation, along with appropriate documentation to justify the revocation.

4. All recommended actions or services.

(10) The regional program office will be responsible for oversight, monitoring, and reporting of Foster Care Referrals.

(a) A monthly listing of Foster Care Referrals shall be developed and monitored with status, outcomes, and any necessary follow-up regarding Corrective Action Plans and revocations.

(b) The regional program office will send the monthly listing of Foster Care Referrals to the Regional Managing Director and the Office of Child Welfare, along with corresponding Corrective Action Plans, outcomes, and any other necessary documentation for continuous monitoring.

(c) The Office of Child Welfare will be responsible for reviewing all Foster Care Referral outcomes, identifying concerns or trends, and reporting such concerns and trends to the Assistant Secretary for Child Welfare and utilizing information to inform practice and policy.

d. Parent Needs Assistance. Any call received from a parent or legal custodian seeking assistance for himself or herself which does not meet the criteria for being a report of child abuse, abandonment, or neglect may be accepted by the Hotline for response to ameliorate a potential future risk of harm to a child.

(1) The CPI receiving unit will assign the Parent Needs Assistance Special Conditions Referral according to local established protocols.

(2) The assigned child welfare professional or contracted provider will review all of the family's history with the Department in FSFN and any available criminal history.

(3) If the family has prior history with the Department, contact will be made with the CPI or CPI Supervisor for the most recent investigation, if within the past 12 months, to discuss the prior involvement and history of the family.

(4) The child welfare professional or contracted provider will contact the parent and any collateral sources available and obtain history and information around the current crisis.

(5) The child welfare professional or contracted provider will assess the family's needs and provide information and referrals.

(a) If the current crisis is related to the parent or child's mental health, the assigned child welfare professional or contracted provider will consult with a Behavioral Health Specialist, which may include the individual's existing therapist or behavioral health provider.

(b) A multi-disciplinary staffing is required when intervention is not available or accepted at a level necessary to resolve the crisis that resulted in the Parent Needs Assistance referral.

(c) If a child welfare professional responding to a Parent Needs Assistance referral discovers information that constitutes reasonable cause to suspect that a child has been abused, abandoned, or neglected, a report must be made to the Hotline immediately.

(6) All actions must be documented in FSFN within two business days.

(7) The response to the Parent Needs Assistance referral must be documented in the Special Conditions Assessment Summary within FSFN.

(8) The Parent Needs Assistance Assessment should be completed in FSFN within the timeframe required by the region but not greater than 30 calendar days.

