



State of Florida
Department of Children and Families

Rick Scott
Governor

Mike Carroll
Secretary

DATE: September 21, 2015

TO: Community Based Care Lead Agency CEO's
Regional Managing Directors

THROUGH: Vicki Abrams, Assistant Secretary for Operations
Janice Thomas, Assistant Secretary for Child Welfare

FROM: Traci Leavine, Director of Child Welfare Practice

SUBJECT: Required Relative Notifications upon Removal of a Child from a Parent
Effective Date: September 29, 2015

PURPOSE: The purpose of this memorandum is twofold. The first purpose is to inform you of the required relative notifications when a child has been removed from a parent mandated by Sec. 471. [42 U.S.C. 671] (29)(A-C) of the Social Security Act, as further amended, and implemented under Public Law 113-183, Section 200.

The second purpose is to provide you with (1) a template of a letter containing the required notification elements which child protective investigators and case managers may use when notifying adult relatives of a child's removal from the parental home; and, (2) a template of a 'Relative Notification Request' form which may be used to document a relative's interest in being considered a placement option for the child and the relative's desire to be kept informed about future court proceedings and hearings.

BACKGROUND: Sections 39.301(14)(b) and 39.502(19), F.S., already authorizes notification of relatives to proceedings and hearings if the relative submits a request to be notified in writing. The department is only required to take action after having been contacted by the relative.

Federal legislation now places additional responsibility for timely relative notification upon state agencies. A state must apply due diligence in identifying and notifying adult relatives that a child has been removed from a parent. The essential elements of the notification process are:

- (1) The relative must be notified within 30 days of the child's removal from the parent.

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Mission: Work in Partnership with Local Communities to Protect the Vulnerable, Promote Strong and Economically Self-Sufficient Families, and Advance Personal and Family Recovery and Resiliency

- (2) Notifications must be sent to the following relatives except if the individual has been a party to family or domestic violence:
- Grandparents
 - All parents of a sibling of the removed child, where such parent has legal custody of the sibling
 - Other adult relatives (including any other adult relative suggested by the parent)
- (3) The notification must inform the relative of how they can participate in the care and supervision of the child:
- Request consideration as a placement option
 - Provided information on becoming licensed as a foster home or receive Relative Caregiver funds
 - Provided information on additional services and supports to care for a child in their home
 - Encouragement to maintain family connections through regular contact and visitation with the child
- (4) The relative's right to request notification of all future court proceedings and hearings.

ACTION REQUIRED: Please share this memorandum with all child protective investigators and case managers and ensure the following actions are continued or initiated by September 29, 2015.

1. Requests initiated by relatives for notification of future court proceedings and hearings involving non-removal, in-home dependency action should continue to be honored as directed by ss. 39.301(14)(b) and 39.502(19), F.S.
2. Notification of relatives within 30 days of a child's removal from a parent must be accomplished by use of the attached templates (Notification Letter and Relative Notification Request form) or a comparable, agency developed template or form.
3. The responsibility for notifying relatives will be delegated as follows:
 - Removal at Present or Impending Danger - CPI
 - Open case management case – Case Manager

CONTACT INFORMATION: If you have any questions, please contact Alissa Cross, Safety Manager, Office of Child Welfare, at (850)717-4653 or via e-mail at Alissa.Cross@myflfamilies.com.

Attachments

cc: David Fairbanks, Deputy Secretary



Administrative Support Center
901 N. Lake Destiny Rd, Suite 400
Maitland, FL 32751
EmbraceFamilies.org

NOTIFICATION OF REMOVAL OF A CHILD

Date:

Re: _____

Name of Child/ren

Name

Address

City, ST Zip Code

Dear _____,

On _____ (date of hearing), _____ (name of child/ren) was removed from his/her parent and placed in the temporary legal custody of the Department.

As a relative of the above named child, or the parent with legal custody of a sibling of the sheltered child, you have the right to be considered as a placement option.

For the child to be placed in your home, the Department will need to complete background screening on you and all members of your household. We will also conduct a home study to ensure your ongoing commitment and ability to care for all children placed with you.

If a child is placed with you, you may opt to receive financial assistance by becoming a licensed foster placement or by receiving relative caregiver funds and Medicaid to help support the children placed in your home. Child care and/or other services (i.e. counseling for the child, etc.) may also be offered to you at reduced rates or free of charge.

All relatives are encouraged to provide emotional support to children in care by keeping in touch with the child regardless of where or with whom the child is placed. Emotional support in the form of regular communication and contact (i.e. phone calls and/or scheduled visitations, etc.) are essential to preserving the child's family connections.

Finally, relatives are entitled to be notified of all court proceedings and hearings regardless of whether or not a child is placed in their home.

To assist us in considering you as a placement option or to simply begin receiving notifications of future court proceedings/hearings, please return the enclosed 'Relative Notification Request' form to the case manager listed at the top of the form. If you are aware of other family members who might be a placement resource or who should be notified of the child's removal, please provide us with that information.

Thank you!



RELATIVE NOTIFICATION REQUEST

Child Protective Investigator

Case Manager

Name: _____

Name: _____

Address: _____

Address: _____

Email: _____

Email: _____

Phone: _____

Phone: _____

The following child/ren have been removed from the home of their parent:

1. _____
2. _____
3. _____
4. _____
5. _____

Name of Adult Relative: _____

Address: _____

Email: _____

Phone: _____

I am related to one or more of the above children (please identify):

1. _____
2. _____
3. _____
4. _____
5. _____

I am the child's (please circle relationship):

1. Grandparent
2. Parent with legal custody of a sibling to the child in care
3. Adult Relative (please describe how related to child/ren: _____

Please mark all that apply:

- I am interested in having the above named child/ren placed with me.
- I want to receive notification of future court proceedings and hearings
- I am not interested in being considered as a placement option or in receiving notice of court proceedings but here is the name/address/phone # of a relative(s) who may be interested:

Name of Relative: _____

Address: _____

Phone: _____

Please return this form to the Case Manager listed above.