

Florida
Support of Adoptive
Families Plan:
July 2010 – June 2015

Section 5 of the
Florida Child Abuse
Prevention and Permanency
Plan:
July 2010 – June 2015

2012 Biennial Revision

Together we can ensure that Florida's children are raised in healthy, safe, stable and nurturing family environments.



Florida Support of Adoptive Families Plan: July 2010 – June 2015
2012 Biennial Revision

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Part 1 – Introduction

In accordance with state law (§39.001, Florida Statutes), this five-year *Florida Support of Adoptive Families Plan: July 2010 – June 2015* provides for the support of families who have adopted from Florida’s child welfare system. The vision, mission, overarching goal and desired results of the plan are:

Vision

Florida’s highest priority is that children are raised in healthy, safe, stable, and nurturing families.

Mission

To serve as a blueprint that will be implemented to provide for the care, safety, and protection of all of Florida’s children in an environment that fosters healthy social, emotional, intellectual, and physical development.

Overarching Goal

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

Desired Result of Plan Implementation

Support of Adoptive Families – By June 30, 2015, the annual number of adopted children who are returned to foster care (regardless of when the adoption was finalized) will be reduced from the State Fiscal Year 2008-2009 number of 98.

The *Florida Support of Adoptive Families Plan: July 2010 – June 2015* was developed by the Office of Adoption and Child Protection, within the Executive Office of the Governor, with the assistance of the Child Abuse Prevention and Permanency Advisory Council, its membership agency and organization staff members and five workgroups with statewide representation. *Part 2* of this plan provides a status report on adoption support-related services in Florida. *Part 3* the continuum of programs and services necessary for a comprehensive approach to the support of adoptive families. *Part 4 – Plans of Action for the Support of Adoptive Families* encompasses three strategies and nine objectives to be implemented over the next five years. *Part 5* provides a glimpse of the work and plans of the 20 circuits for the next five years to support adoptive families. The full text of the circuit plans is provided in Appendix I (under separate cover).

Plan Strategies and Objectives for the Support of Adoptive Families

Support of Adoptive Families Strategy 1: Strengthen Florida Service Systems to Better Support Adoptive Families to Meet the Needs of Their Adopted Children and Youth. By June 30, 2015, the State of Florida will have implemented post adoption services that provide for mental health, emotional, physical and other needs of adoptive families.

Support of Adoptive Families Strategy 1 Objectives:

- 1.1 Information and Support for Adoptive Families.** By June 30, 2015, the State of Florida will have implemented fully the state adopted Customer Service Protocol for supporting families with adopted children.
[Leads: Department of Children and Families and Community Based Care Lead Agencies]
- 1.2 Adoption Competent Professionals.** By June 30, 2015, the State of Florida will have increased the number and accessibility of adoption competent mental health, education, and child welfare professionals, so that sufficient numbers are accessible as defined by each circuit.
[Leads: Department of Children and Families and Community Based Care Lead Agencies]
- 1.3 Post Adoption Services Counselors.** By June 30, 2015, the State of Florida will have increased the number of Post Adoption Services Counselors in Florida so that each Community Based Care Lead Agency has a sufficient number (a minimum of one full-time staff person) dedicated to responding to the needs and inquiries of adoptive families after finalization.
[Leads: Department of Children and Families and Community Based Care Lead Agencies]

Please Note: Post Adoption Services Counselors are staff persons designated to respond to the request and service needs of adoptive parents. The response to requests and service needs shall include, at a minimum, information and referrals, temporary case management, assistance with subsidy and Medicaid issues, and assistance in establishing and maintaining one or more adoptive parent support groups.

Support of Adoptive Families Strategy 2: Provide Information and Supports to Adoptive Families. By June 30, 2015, the State of Florida will have provided information and supports to Florida adoptive families on ways to build competence in meeting the needs of their adopted children and youth.

Support of Adoptive Families Strategy 2 Objectives:

- 2.1 Adoption Support Groups.** By June 30, 2015, the State of Florida will have increased the number and sustainability of quality adoptive parent and youth support groups so that each community has a local support group or, in rural communities, at least a quarterly newsletter or warm-line that informs adoptive parents of nearby support groups and upcoming educational opportunities and information related to the *Protective Factors*.
[Leads: Department of Children and Families and Community Based Care Lead Agencies]
- 2.2 Education Opportunities for Adoptive Parents.** By June 30, 2015, the State of Florida will have increased the number and accessibility of quality educational opportunities for adoptive parents that include education related to the *Protective Factors*, caring for the

needs of adoptive children, and supporting the needs of adoptive families.
[Leads: Department of Children and Families and Community Based Care Lead Agencies]

- 2.3 Faith-Based and Community-Based Efforts.** By June 30, 2015, the State of Florida will have provided information and resources to promote and build efforts by faith-based and community-based systems to provide family and community supports that would build the *Protective Factors* in Florida’s families.
[Lead: Office of Adoption and Child Protection, Executive Office of the Governor]

Support of Adoptive Families Strategy 3: Monitor and Evaluate Plan Implementation. By June 30, 2015, leadership of plan implementation will have monitored and annually assessed the progress and effectiveness of the plan-based initiatives.

Support of Adoptive Families Strategy 3 Objectives:

- 3.1 Instrumentation and Procedures Design.** By March 30, 2011, the State of Florida will have created procedures and instrumentation for use by the plan workgroups for monitoring and annually reviewing progress.
[Lead: Office of Adoption and Child Protection, Executive Office of the Governor]
- 3.2 Progress Monitoring.** By June 30, 2015, the State of Florida will have implemented an ongoing monitoring of plan implementation progress and used the findings to refine the action plans for future implementation.
[Lead: Office of Adoption and Child Protection, Executive Office of the Governor]
- 3.3 Annual Review and Assessment.** By June 30, 2015, the State of Florida will have implemented annual progress reviews and used the findings to refine the strategies and objectives for future implementation.
[Lead: Office of Adoption and Child Protection, Executive Office of the Governor]

Part 2 – Status of Support of Adoptive Families

Dissolutions of Adoptions

State Plan Desired Result 4, Support of Adoptive Families – By June 30, 2015, the annual number of adopted children who are returned to foster care (regardless of when the adoption was finalized) will be reduced from the State Fiscal Year 2008 – 2009 number of 98.

Data and summaries were provided by the Department of Children and Families to the Office of Adoption and Child Protection, Executive Office of the Governor in December 2011. These data and information have been aggregated in order to describe the status of adopted families in Florida. The current state performance information is based on the 12 month period from July 1, 2010 to June 30, 2011 (SFY 2010 – 2011), using the most recent available data for this plan.

The Department of Children and Families Office of Child Welfare submitted data provided by the Circuits on the number of children who were returned to foster care after finalized adoptions and the parental rights of the adoptive parents were terminated. The reasons for the dissolutions were also documented by the Circuits for each child. Six circuits (Circuits 5, 6, 12, 14, 16 and 17) reported no dissolutions, while last fiscal year, five circuits reported no dissolutions. Behavioral issues were reported as the most cited reason. A comprehensive analysis of each dissolution will assist the local circuits in assessing the effectiveness of their post adoption services programs. The two most prominent reasons for dissolutions of adoption were the adopted child's violent behaviors and mental health issues. Because these are so closely tied, many of the reported dissolutions cited both reasons. In those cases, the counts are provided for both. The dissolutions below include 48 children, seven sibling groups and 39 families.

An analysis of the reasons and circumstances for each dissolution needs to be conducted to assist the local post adoption services programs in determining if existing post adoption services are effective and if additional post adoption services are needed. Many adoptive parents do not request post adoption services for many months or even years rather than as soon as problems arise because some post adoption services may be perceived as ineffective or too cumbersome to access. The sooner effective services are implemented; the sooner stress can be reduced within an adoptive family. A research study published by the Evan B. Donaldson Adoption Institute in October 2010 supports the need for an ongoing analysis of the post adoption services in each community.

Table 1. Dissolutions by Circuit and Child-Related Reasons Cited

Circuit	Number of Dissolutions (Unduplicated Counts)	Reasons cited for the Dissolutions (Duplicated Counts)					
		Behavioral Issues	Mental Health Issues	Physical Health Issues	Juvenile Justice Issues	Safety of other Children	Other
Circuit 01	5	5	2			1	
Circuit 02	1	1	1			1	
Circuit 03	1	1				1	
Circuit 04	10	6	6		5	5	
Circuit 05	0						
Circuit 06	0						
Circuit 07	3	3	3		2	2	
Circuit 08	2	1	2		1	2	
Circuit 09	2	2	1				
Circuit 10	3	2	1		1	1	
Circuit 11	3					3	
Circuit 12	0						
Circuit 13	8	8	6		3	3	
Circuit 14	0						
Circuit 15	6	4	2		1	1	
Circuit 16	0						
Circuit 17	0						
Circuit 18	2	2	2				
Circuit 19	1	1	1		1	1	
Circuit 20	1	1	1				
Statewide	48	37	28		14	21	

Circuits also cited that there were dissolutions due to the inability of the adoptive parents to either care for or provide a safe home for the adopted child(ren), specifically the adoptive parents were afraid for their own safety and/or the safety of other children in the home. Of the dissolutions reported, fourteen were due to a family being unable to continue care for the child in their home and eight (17%) were due to abuse or neglect in the home by the adoptive parent. Last fiscal year there were eleven dissolutions or 26% due to abuse or neglect by the adoptive parent. These dissolutions must be analyzed closely to determine what post adoption services such as adoption competent family therapy and supportive in-home services may have been needed to assist these adoptive families.

Table 2. Dissolutions by Circuit and Adoptive Parent-Related Reasons Cited

Circuit	Number of Dissolutions (Unduplicated Counts)	Reasons cited for the Dissolutions (Duplicated Counts)		
		Parent unable to continue care (divorce, etc.)	Abuse or neglect by the adoptive parents	Other
Circuit 01	5			Adoptive parents had heart issues.
Circuit 02	1	1		
Circuit 03	1		1	
Circuit 04	10	4		Adoptive mom was Baker Acted.
Circuit 05	0			
Circuit 06	0			
Circuit 07	3	2		
Circuit 08	2			
Circuit 09	2		1	
Circuit 10	3	2	1	
Circuit 11	3		3	
Circuit 12	0			
Circuit 13	8	4		
Circuit 14	0			
Circuit 15	6		2	
Circuit 16	0			
Circuit 17	0			
Circuit 18	2			
Circuit 19	1	1		
Circuit 20	1			
Statewide	48	14	8	2

Status of Support of Adoptive Families

To assess the status of support of adoptive families, the Department of Children and Families Office of Child Welfare submitted data provided by the Circuits on the number of adoptive parent support groups, number of adoption competent mental health professionals and number of Post Adoption Services Counselors. These data were checked against the numbers submitted in the local five-year plans for the support of adoptive families. Where discrepancies were found between the two sets of information, the circuits were contacted to assist with providing the final numbers used below.

Support Groups

Adoptive parent and youth support groups provide opportunities for adoptive parents and youth to meet with other adoptive parents and youth who are struggling with similar challenges and concerns, generally meet once a month and are appropriate for the languages, cultures and needs of the participants in each community; receive support from umbrella organizations and qualified facilitators when appropriate (e.g., teen support groups) etc.

The twenty Circuits reported 44 adoptive parent support groups. Circuit 7 is the only Circuit without a support group as reported in December 2011. Support groups are easy to start but difficult to maintain over time. Circuit 7 has requested assistance from a national adoptive parent association to assist them with establishing the new support group. Several of the support groups include foster and adoptive parents in the support group. However, it is important to remember that because over 30

percent of the adoptions each year are by foster parents, a support group inclusive of both parent types is appropriate.

Table 3. Quantity of Adoptive Parent Support Groups by Circuit

Circuit	Number of Adoptive Parent Support Groups	Comments
Circuit 01	2	
Circuit 02	1	Quarterly newsletters are sent to all adoptive parents and a teen support group has been established.
Circuit 03	2	Both support groups are foster and adoptive parent support groups because these are all rural counties. Newsletters are sent out quarterly about post adoption services.
Circuit 04	3	Newsletters are sent with subsidy checks monthly or quarterly by the two Community Based Care Lead Agencies, Family Support Services and Kids First of Florida.
Circuit 05	4	Four of the five counties have adoptive parent support groups.
Circuit 06	2	Newsletters are sent quarterly about post adoption services.
Circuit 07	0	Adoptive Parent Support Group dissolved, will start a new parent and teen support group in January 2012.
Circuit 08	1	Newsletters are sent quarterly to adoptive parents.
Circuit 09	5	Flyers and email newsletters are sent quarterly to adoptive parents.
Circuit 10	2	
Circuit 11	4	Monthly newsletters are sent to adoptive parents and a Warmline is available with a response by an experienced adoptive parent.
Circuit 12	2	Both are foster and adoptive support groups.
Circuit 13	1	In addition, a teen support group is facilitated by a licensed mental health practitioner.
Circuit 14	1	In addition, quarterly newsletter is sent to all adoptive parents and a support group is being planned for the outlying rural counties.
Circuit 15	2	One group welcomes all members of the triad and is primarily focused on private adoptions.
Circuit 16	1	Newsletters are sent quarterly to adoptive parents.
Circuit 17	3	One group includes foster, adoptive and relative caregivers.
Circuit 18	2	Newsletters are sent quarterly to adoptive parents.
Circuit 19	2	Newsletters are sent quarterly to adoptive parents.
Circuit 20	4	Newsletters are sent quarterly to adoptive parents.
Statewide Total	44	

Nearly 17,000 children have been adopted from Florida’s child welfare system in the last five years. Research has shown that essential to family resilience are social connections, knowledge of parenting and of child and youth development, parental resilience, concrete support in times of need, and social and emotional competence of children. All of these could be made available to families through adoptive parent support groups. There are a total of 44 support groups across the State of Florida as of June 2011, which is three more support groups than reported last fiscal year. Another important improvement is that most of the Circuits, 11 out of 20 or 55%, are sending quarterly or monthly newsletters to all adoptive parents in order to engage and inform them about local post adoption events and new local post adoption services. All of the Post Adoption Services Counselors are connected to one of the support groups in their area and provide community resource persons as speakers for some of the support group meetings.

Adoption Competency

Adoption competent mental health professionals are mental health professionals who have completed the Rutgers *Adoption Competency* or an equivalent curriculum and provide educational and therapeutic services for adoptive families that focuses on strengthening relationships within the family unit and assist families in understanding the developmental stages of adoption and how adoption impacts each family member and the family as a unit. During the fiscal year, four of the fifteen trainers certified by Rutgers University were transferred to new positions. Therefore, another train the trainer class was scheduled for January 2012 to establish at least ten more trainers of this curriculum across the state. As soon as the train the trainer class is completed in late January, one or more classes will be planned for the spring and summer.

One hundred and forty-seven mental health professionals have completed the adoption competency training. All of the circuits have at least three adoption competent mental health professionals. The www.adoptflorida.org website now documents under “Support” the name and contact information by county for all of the licensed mental health professionals who have completed the adoption competency training. As stated above, more adoption competency trainers will be established this upcoming year with more classes planned to continue to increase the number of mental health professionals who are adoption competent.

Table 4. Quantity of Adoption Competent Mental Health Professionals by Circuit

Circuit	Quantity of Adoption Competent Mental Health Professionals	Comments
Circuit 01	4	A new class was completed in the fall, after the fiscal year ended and 12 more mental health professionals completed the training and will be counted for next year’s report.
Circuit 02	11	
Circuit 03	3	
Circuit 04	5	
Circuit 05	3	
Circuit 06	9	
Circuit 07	6	
Circuit 08	3	
Circuit 09	11	
Circuit 10	13	
Circuit 11	10	
Circuit 12	10	
Circuit 13	15	
Circuit 14	7	
Circuit 15	5	
Circuit 16	3	
Circuit 17	6	
Circuit 18	8	
Circuit 19	9	
Circuit 20	3	
Statewide	147	

Many of the mental health specialists who have completed the training have reported that they just “did not know what they did not know” and have become enthusiastic about the application of their more in-depth knowledge of the special needs resulting from trauma, loss of family and adoption. Again, nearly 17,000 children have been adopted from the child welfare system from 2005 – 2010.

Having a total of 147 adoption competent mental health professionals across the State of Florida as of June 2011 is still not sufficient to meet the needs of Florida’s adoptive families.

Post Adoption Services Counselors

A Post Adoption Services Counselor is a staff person designated to respond to the requests and service needs of adoptive parents and their families after adoption finalizations have occurred. The response to requests and service needs includes, at a minimum, information and referrals, assistance to investigators when an investigation involves an adoptive parent, temporary case management, assistance with subsidy and Medicaid issues and assistance in establishing and maintaining one or more adoptive parent support groups. This past fiscal year, all of the post adoption service programs focused on having a Post Adoption Services Counselor provide assistance to child protective investigators when an investigation involved an adoptive family. The assistance to investigators includes an assessment of the needs of the adopted child and adoptive family, local adoption competent services needed for the adoptive family and an opportunity to engage the adoptive parents in local adoptive parent support group activities. Across the state 29 counselors were identified by the circuits as providing these post adoption services. This is an increase of two positions from the previous year. The greatest improvement is the fact that seventeen of the 29 positions (highlighted green) or 59% are designated as full time Post Adoption Services Counselors, an increase of 12 of the 27 or 44% last fiscal year.

Table 5. Quantity of Post Adoption Services Counselors by Circuit

Circuit	Quantity of Post Adoption Services Counselors	Comments
Circuit 01	2	The Children’s Home Society Adoption Support Team has two post adoption services counselors, a supervisor and a family support worker.
Circuit 02	1	A full time Post Adoption Services Counselor was hired this year.
Circuit 03	1	A full time post adoption services counselor was created this year and responds to all requests from families. Both handle Circuits 3 and 8.
Circuit 04	2	Community Based Care Lead Agency has a contract with two staff to provide post adoption services.
Circuit 05	1	A full time post adoption counselor left and a new full time post adoption services counselor was hired.
Circuit 06	1	Currently is part of the job duties of the adoption specialist.
Circuit 07	2	A full time post adoption services counselor for Community Partnership and part of the job duties for adoption specialist for Family Integrity Program.
Circuit 08	1	A full time Post Adoption Services Counselor was created this year and responds to all requests from families. Both handle Circuits 3 and 8.
Circuit 09	1	Full time post adoption services counselor.
Circuit 10	1	Currently is part of the job duties of the adoption specialist.
Circuit 11	3	One of these three positions is handling post adoption services full time.
Circuit 12	1	Currently is part of the job duties of adoption specialist.
Circuit 13	3	Sylvia Thomas Center has three full time staff.
Circuit 14	1	A full time post adoption services counselor was hired this year.
Circuit 15	1	Currently is part of the job duties of the adoption supervisor.
Circuit 16	1	Currently is part of the job duties of the adoption supervisor.
Circuit 17	1	Full time post adoption services counselor.
Circuit 18	3	Currently is part of the job duties of three adoption specialists.
Circuit 19	1	Currently is part of the job duties of the adoption supervisor.
Circuit 20	1	Currently is part of the job duties of the adoption specialist.
Statewide	29	17 of the 29 positions are designated as full time positions providing post adoption services.

With nearly 17,000 children adopted from foster care during the last five years, one or more full time designated Post Adoption Services Counselors in each circuit are critical for responding to the service needs of adoptive families post finalizations. The State of Florida and its partners are committed to providing a sufficient and accessible array of post adoption services in each circuit including information and referral services, temporary case management, assistance with assessments during investigations, assistance with subsidy and Medicaid issues and assistance in maintaining one or more adoptive parent support groups for the many adoptive families who face significant challenges as their adoptive children age and experience the various developmental milestones.

Part 3 – Continuum of Programs and Services

In the last five year, over 10,000 children have been adopted from Child Welfare in Florida. All of the families that have adopted these children as well as those who have come before, have taken on an awesome responsibility for raising children who have experienced profound trauma in their lives. It is incumbent upon the State of Florida and all of its partners to ensure that these families and these children have the emotional and physical supports necessary for their homes to be nurturing and stable, and capable of assisting with the healing that will be necessary for the lifetimes of these children and youth in order for them to grow into responsible and supportive adults.

Post-adoption support refers to services and assistance offered to families after the legal finalization of their adoption. Agencies have referred to these as “services to closed cases”. Although there is not an open case in dependency court or within an adoption agency, the on-going needs of the adopted child continue. The fundamental goal is to ensure that children remain stable in their adoptive families and that with supportive services and assistance there will be no adoption dissolutions. Post-adoption services are provided by lead agencies, sub-contractors, and/or fee-for-service staff members. Services identified to support the adoptive placement include: case management, financial assistance, medical coverage, education and counseling, support groups, respite care, and others.

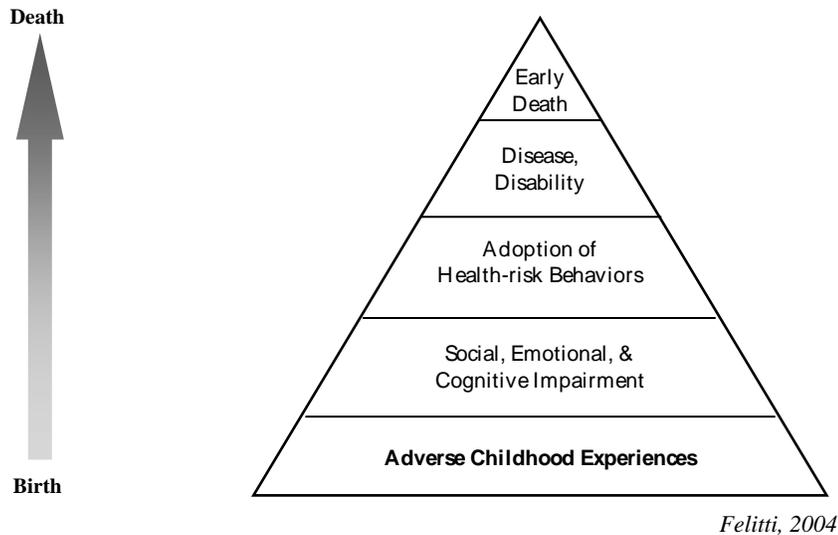
Adoptive parents and adoption practitioners have identified the need for a coordinated effort between child welfare, mental health, and educational professionals regarding the provision of post-adoption services for our children and their adoptive families. Research studies have provided data suggesting that adoptive parents and adoption practitioners identified a significant need for educational professionals to be knowledgeable about adoption issues. School issues (including academic performance, behavior management, educational supports, social skills, etc.) are a significant concern for adopted children. Adoptive families often struggle in advocating for children and navigating the school system.

Adverse Childhood Experiences

Recent research has identified the physical and mental conditions increasingly being associated with adverse childhood experiences, such as physical abuse, sexual abuse, and neglect. Neurologic imaging and traumatology studies have delineated the chronic physiologic and structural changes that occur after chronic stress and abuse (De Bellis, 2005; Elovathingal et al., 2006). Chronic stress and abuse are also associated with specific disease processes and poor mental health outcomes in adults. These adverse childhood experiences (ACES) have been associated with increased rates of teen pregnancy, promiscuity, depression, hallucinations, substance abuse, liver disease, chronic obstructive pulmonary disease, coronary artery disease, and identifiable permanent changes in brain structure and stress hormone function (Anda et al., 2002; Dube et al., 2003; Felitti et al., 1998; Middlebrooks et al., 2008). The National Research Council (1993) and others studied clinical conditions associated with abuse and neglect, including depression, posttraumatic stress disorder, and conduct disorders, all of which compound any direct physical injuries inflicted on individual children. Associated trauma and increased risk of low academic achievement, drug use, teen pregnancy, juvenile delinquency, and adult criminology were also noted. Strong and resilient families should be recruited to care for Florida’s children who have lost their homes and encountered an array of adverse childhood experiences through losing their homes and biological families by moving through child welfare, the court system, foster care and ultimately adoption.

The diagram below represents the proposed pathways from adversity (i.e. adverse childhood experiences) to disease and death based upon the research into adverse childhood experiences.

Diagram 1. Pathways from Adverse Childhood Experiences



A population-based analysis of over 17,000 middle-class American adults undergoing comprehensive, bio-psychosocial medical evaluations indicated that three common categories of addiction are strongly related in a proportionate manner to several specific categories of adverse experiences during childhood. This suggests that the basic cause of addiction may be predominately experience-dependent during childhood rather than substance-dependent. Adverse childhood experiences are surprisingly common among substance abusers. Addiction may be best viewed as an understandable, unconscious, compulsive use of psychoactive materials in response to stressful, harmful childhood experiences (Felitti, 2004). Our adoptive families will require much preparation and assistance in creating and sustaining homes for children who may have the predisposition to addictions as a result of their childhood experiences. It is incumbent upon the State of Florida and all of its partners to ensure these families and these children have the emotional and physical supports necessary for the lifetimes of these children and youth in order for them to grow into responsible and supportive adults.

The Protective Factors

Research conducted by the Center for the Study of Social Policy found that there are *Protective Factors* that make a difference for families. When families experience the stressors that are highly correlated with child maltreatment, some families maltreat their children and others do not. The Center found that in the homes that do not maltreat their children, although they are experiencing the same stressors, the difference in these homes is the presence of *Protective Factors*. These *Protective Factors* reduce the incidence of child abuse and neglect by providing parents with what they need in order to parent effectively, even under stress.

By building relationships with families, programs can recognize signs of stress and build families' protective factors with timely, effective help. The *Protective Factors* are:

- **Nurturing and Attachment** – A child’s social and emotional development is highly dependent on the quality of a young child’s primary relationships. How caregivers respond to children’s emotional expression profoundly influences how they learn to process, understand, and cope with such feelings as anger, happiness, and sadness. Promoting positive behavior and responses in children could strengthen parent-child relationships.
- **Knowledge of Parenting and of Child and Youth Development** – Extensive research links healthy child development to effective parenting. Children thrive when parents provide not only affection, but also respectful communication and listening, consistent rules and expectations, and safe opportunities that promote independence. Successful parenting fosters psychological adjustment, helps children succeed in school, encourages curiosity about the world, and motivates children to achieve.
- **Parental Resilience** – Parents who can cope with the stresses of everyday life, as well an occasional crisis, have resilience; they have the flexibility and inner strength necessary to bounce back when things are not going well. Multiple life stressors, such as a family history of abuse or neglect, health problems, marital conflict, or domestic or community violence—and financial stressors such as unemployment, poverty, and homelessness—may reduce a parent’s capacity to cope effectively with the typical day-to-day stresses of raising children.
- **Social Connections** – Parents with a social network of emotionally supportive friends, family, and neighbors often find that it is easier to care for their children and themselves. Most parents need people they can call on once in a while when they need a sympathetic listener, advice, or concrete support. Research has shown that parents, who are isolated, with few social connections, are at higher risk for child abuse and neglect.
- **Concrete Supports for Parents** – Partnering with parents to identify and access resources in the community may help prevent the stress that sometimes precipitates child maltreatment. Providing concrete supports may also help prevent the unintended neglect that sometimes occurs when parents are unable to provide for their children.
- **Social and Emotional Competence of Children** – Children’s emerging ability to interact positively with others, self regulate their behavior, and effectively communicate their feelings has a positive impact on their relationships with their family, other adults, and peers. Parents and caregivers grow more responsive to children’s needs and less likely to feel stressed or frustrated as children learn to tell parents what they need and how parental actions make them feel, rather than “acting out” difficult feelings.

Note: While this plan addresses ways to build the *Protective Factors* in Florida families through multiple avenues, it will be incumbent on the State’s natural and specialized service systems to ensure that accessible quality concrete supports are available for Florida families in times of need.

Having such resilience is a family characteristic that will be sought by our Florida systems that recruit adoptive parents. In addition, the *Protective Factors* will be incorporated into post-adoption support services and educational opportunities for adoptive parents to help them build and sustain the *Protective Factors* in themselves and in their families. The State of Florida will also provide information and resources to promote and build efforts by faith-based and community-based systems to provide family and community supports that will build the *Protective Factors* in Florida’s adoptive families.

Adoption Competence

Adoption competence training for mental health professionals is necessary to ensure that those providing therapeutic services have the basic knowledge and skills to effectively work with adopted children and to support their adoptive parents. Again, the goal is reduce the number of adoption dissolutions. The Department of Children and Families worked with Rutgers University to bring an adoption competency training and certification program to the State of Florida. Currently it is offered through St. Petersburg Community College and as a “Train the Trainer” program for consistency and professional credentialing. The train-the-trainer spans a 5 day period, totaling 42 hours. The training curriculum includes the following seven modules:

- The Psychology of Adoption
- Life Cycle Experiences and Developmental Stages of Adopted Children
- Issues in the Adoption of Older Children
- Attachment-Focused Therapy for Adoptive Families
- Family-Focused Therapy
- Management of Behavior Problems and Discipline for Traumatized Children
- Individual Therapy for Adopted Children, Teens and families

The early anecdotal findings from these sessions include the mental health professionals stating that they “didn’t know what they didn’t know” and that their practices and assessments will change on the basis of this new knowledge.

Based upon early results, adoption competence training will be made available over the course of the next five years for mental health professionals and for educators who would avail themselves of the training. Additionally, the Department of Children and Families will offer this training to its child welfare professionals, recognizing the need for their better understanding the issues confronting children who have been served in the Child Welfare system as well as the issues confronting the families who are caring for these children.

Adoption competence training for mental health and other professionals is necessary to ensure that those providing therapeutic and other services have the basic knowledge and skills to effectively work with adopted children and to support their adoptive parents.

The following criteria were developed by Casey Family Services to describe the prerequisites for adoption competence for a mental health, education or child welfare professional:

- Knowledge that adoption is one way to form a family and is a life-long process with remarkably universal experiences as well as unique individual feelings and perceptions.
- Recognition that parenting relationships and family connections are the single most therapeutic element in the life of a child over time.
- Ability to understand that there are common developmental challenges in the experience of adoption.
- Willingness to help families promote secure attachments and healthy relationships no matter what the developmental challenges.
- Ability to address adoption from a culturally competent family perspective: understanding the power of the triad of family relationships.

- Willingness to “balance the power” with adoptive families, collaborating with them as team players and colleagues toward the mutual goal of helping a child to heal.
- Willingness to avoid blaming adoptive parents for their children’s behaviors, reframe everyone’s goal as being “part of the solution”.
- Ability to help adoptive parents honor their child’s past and talk with their child about separation, loss and feelings about birth parents.
- Ability to support adoptive parents in assuming parental entitlement and authority, fully empowering them as decision-makers and “experts” when it comes to their child and family.
- Recognition of and respect for the characteristics and skills that make adoptive families successful and assist families in developing and practicing those skills.
- Willingness to work and provide in-home and outreach services to families that meet them “where they are”.
- Recognition that temporary out-of-home treatment may be essential (not a “failure” in the adoption) and that the focus is to work to keep the child and family connected and reunified as soon as possible.

These adoption competency prerequisites serve as a model in identifying topics for continued education and in establishing successful post-adoption programs. Professionals and adoptive parents greatly benefit from education and training related to adoption issues, with an emphasis on strategies for handling loss, grief, relationship building, and “acting out” behaviors. Continued parent training must be included as a post-adoption support to equip adoptive parents with the skills needed to meet the developing needs of children. Various types of parent training options include providing adoption resource centers, lending libraries, newsletters, annual adoption conferences, and ongoing training and workshops for parents.

Adopted children and their adoptive parents continue to need mental health services beyond the adoption finalization. Mental health services help children (and their adoptive families) cope with their childhood, foster care and adoption experiences, and the behavioral aftermath of these experiences. Services include individual counseling, family counseling, medication management, educational supports, and residential treatment. Intervention should be tailored to the specific emotional and behavioral needs of children in the child welfare system. Research studies have provided data suggesting that adoptive parents and adoption practitioners have a significant need for mental health practitioners to be knowledgeable about adoption issues. Mental health practitioners who are adoption competent will provide the most successful treatment. As the legal status and the responsibility of the child shifts to the adoptive family, the adoptive family should have the assistance, subsidy, and mental health coverage to access adoption competent services.

Adopted children are more likely than biological children to have special healthcare needs, such as moderate or severe health problems, learning disabilities, developmental delays or physical impairments, and other mental health difficulties. The results suggest that, even though adopted children may have poorer health than biological children, their parents may be doing more to ensure that they have needed health care and supportive environments. Post adoptive supportive services provide information, community and specialized supports, and referrals to assist these adoptive parents with addressing the special needs of their adopted children.

Post Adoption Supports

Successful post-adoption programs require the recognition that adoption is a life long process, the understanding that there will be life long challenges associated with adoption, and the commitment to all adoptive families that supportive assistance will be available when needed. Agencies should have in place:

- An intake process for families to return for needed services.
- A designated post adoption services counselor to respond to adopted children and families post-legal finalization.
- Systems to notify families of continued training, adoption workshops, and support group meetings.
- A resource guide that includes adoption information and service providers.

Every circuit and community based care agency providing adoption services should provide for support groups for their adoptive families. These support groups could be:

- Held in conjunction with a foster parent association or support group.
- Led by a parent or by an agency staff liaison.
- Operated through a contract with another program (but still connected to adoption).
- Supported by a newsletter, warm line, or website.

A secondary benefit of an adoption support group is that participation provides the venue for building social connections and relationships that could lead into opportunities for respite care. In addition to agencies, support groups and assistance can be offered by faith-based and community-based partners.

Florida's Task Force on Child Protection

In 2008, the Department of Children and Families convened a Task Force on Child Protection. In July 2008, the Task Force accepted the recommendations of its Permanency and Placement Stabilization Workgroup for proposed time frames changes to the case plan statutes and minimum standards for provision of post-adoption support services. These recommended minimum standards for provision of post-adoption support services include:

Minimum Standards for Provision of Post Adoption Services

- (1) A sufficient number of accessible adoptive parent support groups that meet at least once a month with a community based-care liaison assigned to each group to assist, when needed, in maintaining the groups over time. An adoptive parent support group for Spanish-speaking adoptive parents is necessary in some areas. In rural areas where there are insufficient numbers of adoptive families for a support group, a monthly or quarterly newsletter may be established and maintained.
- (2) At the time of finalization, the adoptive parents must be provided a letter or document that explains the process for accessing post-adoption services, including specific contact information when a family has questions or concerns about subsidy, Medicaid, or services.
- (3) One or more post-adoption services case managers are needed to temporarily assist adoptive parents. At a minimum, temporary case management is needed for emotional support, assistance in accessing services, including medical subsidy funds, changes to

subsidy or Medicaid and information and referral services. Beginning in September, cases providing post-adoption services will be documented in Florida Safe Families Network (the state data system) by the assigned case manager and reports of this workload will be available.

- (4) A process is in place to inform adoptive parents of training/educational opportunities occurring locally, in the state of Florida and nationally related to adoption or specific behavioral, mental health, or educational.
- (5) A process is established that allows a post-adoption case manager to assist a child protective investigator with an investigation that involves an adopted child. The assistance may include an assessment for services related to the needs of the child, other children in the family or the adoptive parents.
- (6) With the assistance of an adoption competent facilitator, adopted teen support groups may be established to assist adopted teens and teens waiting for adoption to discuss and handle adolescent issues related to the adoption process.

The Office of Adoption and Child Protection, Executive Office of the Governor, recommends that these minimum standards recommendations be addressed by the Department of Children and Families with incentives for implementation by the community based care providers. Implementation would improve and streamline timeframes for the adoption of children. Additionally, implementation of these recommendations would better prepare parents to adopt the children waiting for forever families as well as better support those families after adoptions are finalized. This plan reflects five-year strategies to put these in place to support Florida's adoptive families.

Continuum of Programs and Services Necessary for a Comprehensive Approach to the Support of Adoptive Families

Adoptive parent and teen support groups – Small group opportunities for parents and teens that are accessible; configured and meeting as often as appropriate for the languages, cultures and needs of the participants in your communities; provision of support from umbrella organizations and qualified facilitators where appropriate (e.g., teen support groups); etc.

Education and training opportunities for adoptive parents – Education and training related to adoption issues, with an emphasis on strategies for handling loss, grief, relationship building, and “acting out” behaviors; skill-building to equip adoptive parents with the skills needed to meet the specific and developing needs of children (e.g., fetal alcohol, substance abuse, autism, etc.); providing adoption resource centers, lending libraries, newsletters, annual adoption conferences, and ongoing training and workshops for parents; etc.

Adoption competent education and mental health assistance services for adoptive families – Those providing education and therapeutic services have the basic knowledge and skills to effectively work with adoptive families and to empower adoptive parents and families to provide the environment necessary for ameliorating the effects of trauma (e.g., build relationships, improve relationships, develop nurturing and attachment, etc.); campaigns to recruit professionals to seek adoption competency; etc.

Case management services for adoptive parents and children – An intake process for families to return for needed services; designated case manager to respond to adopted children and families post-legal finalization; system to notify families of continued training, adoption workshops, and support group meetings, and resource guide that includes adoption-support information and service providers; etc.

Part 4 – Plans of Action for the Support of Adoptive Families

Three strategies and nine objectives comprise the plans of action for the support of adoptive families.

Support of Adoptive Families Strategy 1: Strengthen Florida Service Systems to Better Support Adoptive Families to Meet the Needs of Their Adopted Children and Youth. By June 30, 2015, the State of Florida will have implemented post adoption services that provide for mental health, emotional, physical and other needs of adoptive families.

Support of Adoptive Families Strategy 1 Objectives:

- 1.1 Information and Support for Adoptive Families.** By June 30, 2015, the State of Florida will have implemented fully the state adopted Customer Service Protocol for supporting families with adopted children.
[Leads: Department of Children and Families and Community Based Care Lead Agencies]
- 1.2 Adoption Competent Professionals.** By June 30, 2015, the State of Florida will have increased the number and accessibility of adoption competent mental health, education, and child welfare professionals, so that sufficient numbers are accessible as defined by each circuit.
[Leads: Department of Children and Families and Community Based Care Lead Agencies]
- 1.3 Post Adoption Services Counselors.** By June 30, 2015, the State of Florida will have increased the number of Post Adoption Services Counselors in Florida so that each Community Based Care Lead Agency has a sufficient number (a minimum of one full-time staff person) dedicated to responding to the needs and inquiries of adoptive families after finalization.
[Leads: Department of Children and Families and Community Based Care Lead Agencies]

Please Note: Post Adoption Services Counselors are staff persons designated to respond to the request and service needs of adoptive parents. The response to requests and service needs shall include, at a minimum, information and referrals, temporary case management, assistance with subsidy and Medicaid issues, and assistance in establishing and maintaining one or more adoptive parent support groups.

Support of Adoptive Families Strategy 2: Provide Information and Supports to Adoptive Families. By June 30, 2015, the State of Florida will have provided information and supports to Florida adoptive families on ways to build competence in meeting the needs of their adopted children and youth.

Support of Adoptive Families Strategy 2 Objectives:

- 2.1 Adoption Support Groups.** By June 30, 2015, the State of Florida will have increased the number and sustainability of quality adoptive parent and youth support groups so that each community has a local support group or, in rural communities, at least a quarterly newsletter or warm-line that informs adoptive parents of nearby support groups and upcoming educational opportunities and information related to the *Protective Factors*.
[Leads: Department of Children and Families and Community Based Care Lead Agencies]

2.2 Education Opportunities for Adoptive Parents. By June 30, 2015, the State of Florida will have increased the number and accessibility of quality educational opportunities for adoptive parents that include education related to the *Protective Factors*, caring for the needs of adoptive children, and supporting the needs of adoptive families.

[Lead: Department of Children and Families and Community Base Care Lead Agencies]

2.3 Faith-Based and Community-Based Efforts. By June 30, 2015, the State of Florida will have provided information and resources to promote and build efforts by faith-based and community-based systems to provide family and community supports that would build the *Protective Factors* in Florida's families.

[Lead: Office of Adoption and Child Protection, Executive Office of the Governor]

Support of Adoptive Families Strategy 3: Monitor and Evaluate Plan Implementation. By June 30, 2015, leadership of plan implementation will have monitored and annually assessed the progress and effectiveness of the plan-based initiatives.

Support of Adoptive Families Strategy 3 Objectives:

3.1 Instrumentation and Procedures Design. By March 30, 2011, the State of Florida will have created procedures and instrumentation for use by the plan workgroups for monitoring and annually reviewing progress.

[Lead: Office of Adoption and Child Protection, Executive Office of the Governor]

3.2 Progress Monitoring. By June 30, 2015, the State of Florida will have implemented an ongoing monitoring of plan implementation progress and used the findings to refine the action plans for future implementation.

[Lead: Office of Adoption and Child Protection, Executive Office of the Governor]

3.3 Annual Review and Assessment. By June 30, 2015, the State of Florida will have implemented annual progress reviews and used the findings to refine the strategies and objectives for future implementation.

[Lead: Office of Adoption and Child Protection, Executive Office of the Governor]

Crosswalks of the *Protective Factors* and Continuum of Programs and Services

As stated previously, the *Protective Factors* reduce the incidence of child abuse and neglect by providing parents with what they need in order to parent effectively, even under stress. This plan was intentional with creating strategies and objectives that were either low cost or no cost and could easily implement the *Protective Factors* to ensure that Florida's children are placed in safe, stable, and nurturing homes. As shown below, each strategy and objective supports at least two of the *Protective Factors*, with four objectives implementing all five. The **Support of Adoption Families Strategy 3: Monitor and Evaluate Plan Implementation** and objectives are not included in the crosswalk because the objectives support implementation of all of the strategies and objectives in the five-year plan. One could conclude that all levels are impacted because of the support role of this objective, or one could conclude that none of the levels should be checked because it provides only a supporting role in the effort.

Table 6. Crosswalk of Support of Adoptive Families Strategies and Objectives with the Protective Factors

Protective Factor	Support of Adoptive Families Strategies and Objectives					
	1. Strengthen Florida Service Systems to Better Support Adoptive Families to Meet the Needs of their Adopted Children and Youth.			2. Provide Information and Supports to Adoptive Families.		
	Information and Support for Adoptive Families	Adoption Competent Professionals	Post Adoption Services Counselors	Adoption Support Groups	Education Opportunities for Adoptive Parents	Faith-Based and Community-Based Efforts
Nurturing and Attachment	✓	✓	✓	✓	✓	✓
Knowledge of Parenting and of Child and Youth Development	✓	✓	✓	✓	✓	✓
Parental Resilience	✓	✓	✓	✓	✓	✓
Social Connections	✓	✓	✓	✓	✓	✓
Concrete Supports for Parents	✓	✓	✓	✓	✓	✓
Social and Emotional Competence of Children	✓	✓	✓	✓	✓	✓

Programs and services that support adoptive families can be illustrated as a continuum with six categories. This plan was intentional in ensuring that each category of the continuum of programs and services would be represented within the support of adoptive families strategies and objectives. As shown below, each program and service on the continuum is addressed by at least one objective. Two objectives address four of the categories. The **Support of Adoption Families Strategy 3: Monitor and Evaluate Plan Implementation** and its three objectives are not included in the crosswalk because the objectives support implementation of all of the strategies and objectives in the five-year plan. One could conclude that all levels are impacted because of the support role of this objective, or one could conclude that none of the levels should be checked because it provides only a supporting role in the effort.

Table 7. Crosswalk of Support of Adoptive Families Strategies and Objectives with the Continuum of Programs and Services Necessary for a Comprehensive Approach to the Support of Adoptive Families

Promotion of Adoption Continuum of Programs and Services	Support of Adoptive Families Strategies and Objectives					
	1. Strengthen Florida Service Systems to Better Support Adoptive Families to Meet the Needs of their Adopted Children and Youth.			2. Provide Information and Supports to Adoptive Families.		
	Information and Support for Adoptive Families	Adoption Competent Professionals	Post Adoption Services Counselors	Adoption Support Groups	Education Opportunities for Adoptive Parents	Faith-Based and Community-Based Efforts
Adoptive parent and youth support groups	✓			✓	✓	✓
Education and training opportunities for adoptive parents	✓			✓	✓	✓
Adoption competent education and mental health assistance services for adoptive families	✓	✓				
Case management services for adoptive parents and children			✓			

**Plans of Action for Support of Adoptive Families Strategy 1:
Strengthen Florida Service Systems to Better Support Adoptive Families to Meet the
Needs of Their Adopted Children and Youth.**

Support of Adoptive Families Strategy 1: Strengthen Florida Service Systems to Better Support Adoptive Families to Meet the Needs of Their Adopted Children and Youth.

By June 30, 2015, the State of Florida will have implemented post adoption services that provide for mental health, emotional, physical and other needs of adoptive families.

Support of Adoptive Families Strategy 1 Objectives:

- 1.1 Information and Support for Adoptive Families.** By June 30, 2015, the State of Florida will have implemented fully the state adopted Customer Service Protocol for supporting families with adopted children.
[Leads: Department of Children and Families and Community Based Care Lead Agencies]
- 1.2 Adoption Competent Professionals.** By June 30, 2015, the State of Florida will have increased the number and accessibility of adoption competent mental health, education, and child welfare professionals, so that sufficient numbers are accessible as defined by each circuit.
[Leads: Department of Children and Families and Community Based Care Lead Agencies]
- 1.3 Post Adoption Services Counselors.** By June 30, 2015, the State of Florida will have increased the number of Post Adoption Services Counselors in Florida so that each Community Based Care Lead Agency has a sufficient number (a minimum of one full-time staff person) dedicated to responding to the needs and inquiries of adoptive families after finalization.
[Leads: Department of Children and Families and Community Based Care Lead Agencies]

Please Note: Post Adoption Services Counselors are staff persons designated to respond to the request and service needs of adoptive parents. The response to requests and service needs shall include, at a minimum, information and referrals, temporary case management, assistance with subsidy and Medicaid issues, and assistance in establishing and maintaining one or more adoptive parent support groups.

Support of Adoptive Families Objective 1.1: Information and Support for Adoptive Families

1.1. Information and Support for Adoptive Families. By June 30, 2015, the State of Florida will have implemented fully the state adopted Customer Service Protocol for supporting families with adopted children.

[Leads: Department of Children and Families and Community Based Care Lead Agencies]

Types of Support of Adoptive Families Approaches:

- Adoptive Parent and Youth Support Groups
- Education and Training Opportunities for Adoptive Parents
- Adoption Competent Education and Mental Health Assistance Services for Adoptive Families
- Case Management Services for Adoptive Parents and Children

Socio-Ecological Model Level(s) Influenced by this Objective:

- Societal Level
- Relationship Level
- Community Level
- Individual Level

Protective Factors to be built by the Objective:

- Nurturing and Attachment
- Knowledge of Parenting and of Child and Youth Development
- Parental Resilience
- Social Connections
- Concrete Supports for Parents
- Social and Emotional Competence of Children

Please Note: The plan of action for this objective mirrors that of the **Promotion of Adoption Objective 2.3** and **Support of Adoptive Families Objective 1.1**. The implementation of this plan of action is designed to accomplish both objectives in concert with one another.

Plan of Action for Information and Support for Adoptive Families

Support of Adoptive Families Objective 1.1: Information and Support for Adoptive Families. By June 30, 2015, the State of Florida will have implemented fully the state adopted Customer Service Protocol for supporting families with adopted children.					
Action Steps	Measures/Benchmarks	Lead(s)	Potential Partner Organizations	Begin Date	End Date
1.1.1 Incorporate the state adopted Customer Service Protocol into the contracts with Community Based Care Lead Agencies.	1.1.1.1 By July 30, 2010, the Department of Children and Families will have negotiated use of the Customer Service Protocol in contracts with 100 percent of Community Based Care Lead Agencies.	Department of Children and Families Community Based Care Lead Agencies	<ul style="list-style-type: none"> • Department of Children and Families • Department of Children and Families, State Office Staff, as Appropriate • Other Partners as Appropriate 	07/01/2010	07/30/2010
	1.1.1.2 By June 30, 2012, and annually thereafter, 100 percent of Community Based Care Lead Agencies will have incorporated the entire state adopted Customer Service Protocol into their contracts.			04/02/2012 04/01/2013 04/01/2014 04/01/2015	06/29/2012 06/28/2013 06/30/2014 06/30/2015
1.1.2 Provide two workshops on the Customer Service Protocol; and evaluation methodology as part of regional training.	1.1.2.1 By July 30, 2010, the first workshop in Regional Training will have been completed.	Department of Children and Families, Office of Child Welfare, Adoption Contract Manager	<ul style="list-style-type: none"> • Adoption Specialists • Community Based Care Agencies • Department of Children and Families • Post Adoption Services Counselors • Other Partners as Appropriate 	07/01/2010	07/30/2010
	1.1.2.2 By August 31, 2010, the second workshop will have been conducted at the 2010 Dependency Summit.			08/02/2010	08/31/2010
1.1.3 Provide technical assistance to circuits based on evaluation review.	1.1.3 By August 31, 2012, and annually thereafter, the Department of Children and Families Adoption Program Manager will have provided technical assistance to 100 percent of circuits requiring it.	Department of Children and Families, Office of Child Welfare	<ul style="list-style-type: none"> • Adoption Specialists • Community Based Care Agencies • Department of Children and Families • Post Adoption Services Counselors • Other Partners as Appropriate 	09/01/2011 09/03/2012 09/02/2013 09/01/2014	08/31/2012 08/30/2013 08/29/2014 08/31/2015

Support of Adoptive Families Objective 1.2: Adoption Competent Professionals

1.2. Adoption Competent Professionals. By June 30, 2015, the State of Florida will have increased the number and accessibility of adoption competent mental health, education, and child welfare professionals, so that sufficient numbers are accessible as defined by each circuit.

[Leads: Department of Children and Families and Community Based Care Lead Agencies]

Types of Support of Adoptive Families Approaches:

- Adoptive Parent and Youth Support Groups
- Education and Training Opportunities for Adoptive Parents
- Adoption Competent Education and Mental Health Assistance Services for Adoptive Families
- Case Management Services for Adoptive Parents and Children

Socio-Ecological Model Level(s) Influenced by this Objective:

- Societal Level
- Relationship Level
- Community Level
- Individual Level

Protective Factors to be built by the Objective:

- Nurturing and Attachment
- Knowledge of Parenting and of Child and Youth Development
- Parental Resilience
- Social Connections
- Concrete Supports for Parents
- Social and Emotional Competence of Children

Plan of Action for Adoption Competent Professionals

Support of Adoptive Families Objective 1.2: Adoption Competent Professionals. By June 30, 2015, the State of Florida will have increased the number and accessibility of adoption competent mental health, education, and child welfare professionals, so that sufficient numbers are accessible as defined by each circuit.					
Action Steps	Measures/Benchmarks	Lead(s)	Potential Partner Organizations	Begin Date	End Date
1.2.1 Provide adoption competency training to mental health professionals.	1.2.1.1 By June 30, 2011, the Department of Children and Families will have developed a statewide plan to reach appropriate saturation, based upon adoptive family populations as defined by each circuit.	Department of Children and Families, Office of Child Protection	<ul style="list-style-type: none"> • Adoption Competency Trainers • Department of Children and Families, Children’s Mental Health Office • Faith-Based and Community-Based Systems • Post Adoption Services Counselors • Department • Other Partners as Appropriate 	07/01/2010	06/30/2011
	1.2.1.2 By June 29, 2012, and annually thereafter, the plan will have been implemented as measured by training registrations and attendance sign in sheets.			07/01/2011	06/29/2012
1.2.2 Provide adoption competency training to education professionals.	1.2.2.1 By June 30, 2011, the Department of Children and Families will have developed a statewide plan to reach appropriate saturation, based upon adoptive family populations as defined by each circuit.	Department of Children and Families, Office of Child Protection	<ul style="list-style-type: none"> • Adoption Competency Trainers • Department of Education • Faith-Based and Community-Based Systems • Florida Association of District School Superintendents • Post Adoption Services Counselors • Other Partners as Appropriate 	07/01/2010	06/30/2011
	1.2.2.2 By June 29, 2012, and annually thereafter, the plan will have been implemented as measured by training registrations and attendance sign in sheets.			07/01/2011	06/29/2012

Support of Adoptive Families Objective 1.2: Adoption Competent Professionals. By June 30, 2015, the State of Florida will have increased the number and accessibility of adoption competent mental health, education, and child welfare professionals, so that sufficient numbers are accessible as defined by each circuit.					
Action Steps	Measures/Benchmarks	Lead(s)	Potential Partner Organizations	Begin Date	End Date
1.2.3 Provide adoption competency training to adoption specialists and other child welfare and juvenile justice professionals.	1.2.3.1 By June 30, 2011, the Department of Children and Families will have developed a statewide plan to reach appropriate saturation, based upon adoptive family populations as defined by each circuit.	Department of Children and Families, Office of Child Protection Community Based Care Lead Agencies	<ul style="list-style-type: none"> Adoption Competency Trainers Child Welfare Professionals Community Based Care Agencies Department of Children and Families Department of Juvenile Justice Faith-Based and Community-Based Systems Guardian ad Litem Post Adoption Services Counselors Other Partners as Appropriate 	07/01/2010	06/30/2011
	1.2.3.2 By June 29, 2012, and annually thereafter, the plan will have been implemented as measured by training registrations and attendance sign in sheets.			07/01/2011 07/02/2012 07/01/2013 07/01/2014	06/29/2012 06/28/2013 06/30/2014 06/30/2015
1.2.4 Establish a statewide Adoption Competency Advisory Committee to annually review and update, enhance, and revise as appropriate the curriculum based on emerging research.	1.2.4.1 By October 31, 2010, the Department of Children and Families will have established Adoption Competency Advisory Committee.	Department of Children and Families, Office of Child Protection	<ul style="list-style-type: none"> Adoption Competency Trainers Adoption Information Center Department of Children and Families, Children's Mental Health Office Faith-Based and Community-Based Systems North American Council on Adoptable Children Post Adoption Services Counselors Other Partners as Appropriate 	07/01/2010	10/31/2010
	1.2.4.2 By June 30, 2011, and annually thereafter, the adoption competency curricula will have been reviewed, updated and enhanced (as warranted) as measured by: minutes of meetings, committee attendance, and revised curricula as appropriate.			09/01/2010 07/01/2011 07/02/2012 07/01/2013 07/01/2014	06/30/2011 06/29/2012 06/28/2013 06/30/2014 06/30/2015
1.2.5 Provide training and technical assistance to certified adoption competency trainers via quarterly conference calls.	1.2.5 By June 30, 2011, and annually thereafter, the Department of Children and Families will have provided training and technical assistance to certified adoption competency trainers via quarterly conference calls as measured by: minutes of conference calls and attendance lists.	Department of Children and Families, Office of Child Protection	<ul style="list-style-type: none"> Adoption Competency Advisory Committee Adoption Competency Trainers Faith-Based and Community-Based Systems Other Partners as Appropriate 	07/01/2010 07/01/2011 07/02/2012 07/01/2013 07/01/2014	06/30/2011 06/29/2012 06/28/2013 06/30/2014 06/30/2015

Support of Adoptive Families Objective 1.3: Post Adoption Services Counselors

1.3. Post Adoption Services Counselors. By June 30, 2015, the State of Florida will have increased the number Post Adoption Services Counselors in Florida so that each Community Based Care Lead Agency has a sufficient number (a minimum of one full-time staff person) dedicated to responding to the needs and inquiries of adoptive families after finalization.

[Leads: Department of Children and Families and Community Based Care Lead Agencies]

Types of Support of Adoptive Families Approaches:

- Adoptive Parent and Youth Support Groups
- Education and Training Opportunities for Adoptive Parents
- Adoption Competent Education and Mental Health Assistance Services for Adoptive Families
- Case Management Services for Adoptive Parents and Children

Socio-Ecological Model Level(s) Influenced by this Objective:

- Societal Level
- Relationship Level
- Community Level
- Individual Level

Protective Factors to be built by the Objective:

- Nurturing and Attachment
- Knowledge of Parenting and of Child and Youth Development
- Parental Resilience
- Social Connections
- Concrete Supports for Parents
- Social and Emotional Competence of Children

Please Note: Post Adoption Services Counselors are staff persons designated to respond to the request and service needs of adoptive parents. The response to requests and service needs shall include, at a minimum, information and referrals, temporary case management, assistance with subsidy and Medicaid issues, and assistance in establishing and maintaining one or more adoptive parent support groups.

Plan of Action for Post Adoption Services Counselors

<p>Support of Adoptive Families Objective 1.3: Post Adoption Services Counselors. By June 30, 2015, the State of Florida will have increased the number of Post Adoption Services Counselors in Florida so that each Community Based Care Lead Agency has a sufficient number (a minimum of one full-time staff person) dedicated to responding to the needs and inquiries of adoptive families after finalization. <i>Note:</i> Post Adoption Services Counselors are staff persons designated to respond to the request and service needs of adoptive parents. The response to requests and service needs shall include, at a minimum, information and referrals, temporary case management, assistance with subsidy and Medicaid issues, and assistance in establishing and maintaining one or more adoptive parent support groups.</p>					
Action Steps	Measures/Benchmarks	Lead(s)	Potential Partner Organizations	Begin Date	End Date
1.3.1 Annually provide training to lead agencies and Post Adoption Services Counselors on post adoption services, including the Customer Service Protocol and documentation in Florida's Florida Safe Families Network (FSFN) of services provided to adoptive families after finalized adoptions.	1.3.1 By June 30, 2011, and annually thereafter, the Department of Children and Families will have provided training to lead agencies and Post Adoption Services Counselors as measured by: monthly reports of trainings completed and attendance sign-in sheets.	Department of Children and Families, Office of Child Protection	<ul style="list-style-type: none"> Adoption Information Center Adoption Specialists Community Based Care Lead Agencies Faith-Based and Community-Based Systems Post Adoption Services Counselors Other Partners as Appropriate 	07/01/2010 07/01/2011 07/02/2012 07/01/2013 07/01/2014	06/30/2011 06/29/2012 06/28/2013 06/30/2014 06/30/2015
1.3.2 Provide adoption competency training (i.e., pre-service and in-service) to Post Adoption Services Counselors.	1.3.2 By June 30, 2011, and annually thereafter, the Department of Children and Families will have provided training to lead agencies and Post Adoption Services Counselors as measured by: annual documentation of the curriculum and attendance at the training sessions.	Department of Children and Families, Office of Child Protection	<ul style="list-style-type: none"> Adoption Competency Trainers Community Based Care Lead Agency staff and providers Faith-Based and Community-Based Systems Post Adoption Services Counselors Other Partners as Appropriate 	07/01/2010 07/01/2011 07/02/2012 07/01/2013 07/01/2014	06/30/2011 06/29/2012 06/28/2013 06/30/2014 06/30/2015
1.3.3 Conduct monthly conference calls with Post Adoption Services Counselors or designees.	1.3.3 By June 30, 2011, and annually thereafter, the Department of Children and Families will have conducted monthly conference calls with Post Adoption Services Counselors as measured by: minutes of monthly conference calls and attendance on the calls.	Department of Children and Families, Office of Child Protection Community Based Care Lead Agencies	<ul style="list-style-type: none"> Adoption Information Center Adoption Specialists Community Based Care Agencies Faith-Based and Community-Based Systems Post Adoption Services Counselors Other Partners as Appropriate 	07/01/2010 07/01/2011 07/02/2012 07/01/2013 07/01/2014	06/30/2011 06/29/2012 06/28/2013 06/30/2014 06/30/2015

Support of Adoptive Families Objective 1.3: Post Adoption Services Counselors. By June 30, 2015, the State of Florida will have increased the number of Post Adoption Services Counselors in Florida so that each Community Based Care Lead Agency has a sufficient number (a minimum of one full-time staff person) dedicated to responding to the needs and inquiries of adoptive families after finalization.

Note: Post Adoption Services Counselors are staff persons designated to respond to the request and service needs of adoptive parents. The response to requests and service needs shall include, at a minimum, information and referrals, temporary case management, assistance with subsidy and Medicaid issues, and assistance in establishing and maintaining one or more adoptive parent support groups.

Action Steps	Measures/Benchmarks	Lead(s)	Potential Partner Organizations	Begin Date	End Date
1.3.4 Create, maintain and disseminate current lists of Post Adoption Services Counselors with accurate contact information.	1.3.4 By June 30, 2011, and annually thereafter, the Department of Children and Families will have documented the creation, maintenance and dissemination of current lists (with dates of updates) of Post Adoption Services Counselors by county and Community Based Care agency and locations of dissemination. For example: <ul style="list-style-type: none"> • Adoption Information Center’s website • Support of Adoptive Families group facilitators • <i>Explore Adoption</i> website • Local offices that provide for adoption and adoption support 	Department of Children and Families, Office of Child Protection Community Based Care Lead Agencies	<ul style="list-style-type: none"> • Adoption Information Center • Community Based Care Adoption Specialists • Faith-Based and Community-Based Systems • Post Adoption Services Counselors • Other Partners as Appropriate 	07/01/2010 07/01/2011 07/02/2012 07/01/2013 07/01/2014	06/30/2011 06/29/2012 06/28/2013 06/30/2014 06/30/2015

**Plans of Action for Support of Adoptive Families Strategy 2:
Provide Information and Supports to Adoptive Families**

Support of Adoptive Families Strategy 2: Provide Information and Supports to Adoptive Families. By June 30, 2015, the State of Florida will have provided information and supports to Florida adoptive families on ways to build competence in meeting the needs of their adopted children and youth.

Support of Adoptive Families Strategy 2 Objectives:

- 2.1 Adoption Support Groups.** By June 30, 2015, the State of Florida will have increased the number and sustainability of quality adoptive parent and youth support groups so that each community has a local support group or, in rural communities, at least a quarterly newsletter or warm-line that informs adoptive parents of nearby support groups and upcoming educational opportunities and information related to the *Protective Factors*.
[Leads: Department of Children and Families and Community Based Care Lead Agencies]
- 2.2 Education Opportunities for Adoptive Parents.** By June 30, 2015, the State of Florida will have increased the number and accessibility of quality educational opportunities for adoptive parents that include education related to the *Protective Factors*, caring for the needs of adoptive children, and supporting the needs of adoptive families.
[Lead: Department of Children and Families and Community Based Care Lead Agencies]
- 2.3 Faith-Based and Community-Based Efforts.** By June 30, 2015, the State of Florida will have provided information and resources to promote and build efforts by faith-based and community-based systems to provide family and community supports that would build the *Protective Factors* in Florida's families.
[Lead: Office of Adoption and Child Protection, Executive Office of the Governor]

Support of Adoptive Families Objective 2.1: Adoption Support Groups

2.1. Adoption Support Groups. By June 30, 2015, the State of Florida will have increased the number and sustainability of quality adoptive parent and youth support groups so that each community has a local support group or, in rural communities, at least a quarterly newsletter or warm-line that informs adoptive parents of nearby support groups and upcoming educational opportunities and information related to the *Protective Factors*.

[Leads: Department of Children and Families and Community Based Care Lead Agencies]

Types of Support of Adoptive Families Approaches:

- Adoptive Parent and Youth Support Groups
- Education and Training Opportunities for Adoptive Parents
- Adoption Competent Education and Mental Health Assistance Services for Adoptive Families
- Case Management Services for Adoptive Parents and Children

Socio-Ecological Model Level(s) Influenced by this Objective:

- Societal Level
- Relationship Level
- Community Level
- Individual Level

Protective Factors to be built by the Objective:

- Nurturing and Attachment
- Knowledge of Parenting and of Child and Youth Development
- Parental Resilience
- Social Connections
- Concrete Supports for Parents
- Social and Emotional Competence of Children

Plan of Action for Adoption Support Groups

Support of Adoptive Families Objective 2.1: Adoption Support Groups. By June 30, 2015, the State of Florida will have increased the number and sustainability of adoptive parent and youth support groups so that each community has a local support group or, in rural communities, at least a quarterly newsletter or warm-line that informs adoptive parents of nearby support groups and upcoming educational opportunities and information related to the <i>Protective Factors</i> .					
Action Steps	Measures/ Benchmarks	Lead(s)	Potential Partner Organizations	Begin Date	End Date
2.1.1 Provide training on strategies for establishing new adoptive parent and youth support groups.	2.1.1.1 By June 30, 2011, and annually thereafter, training will have been provided to potential facilitators and members of adoptive parent and youth support groups as measured by monthly reports of training that includes attendance information.	Department of Children and Families, Office of Child Protection	<ul style="list-style-type: none"> Adoption Support Group Facilitators and Members Community Based Care Lead Agencies Faith-Based and Community-Based Systems North American Council on Adoptable Children Other Partners as Appropriate 	07/01/2010	06/30/2011
	2.1.1.2 By June 30, 2011, and annually thereafter, training will have been provided to the circuits and community-based care lead agencies as measured by monthly reports of training that includes attendance information.			07/01/2011	06/29/2012
2.1.2 Provide training to address maintaining support groups over time and responding to their educational needs.	2.1.2.1 By June 30, 2011, and annually thereafter, training will have been provided to potential facilitators and members of adoptive parent and youth support groups as measured by monthly reports of training that includes attendance information.	Department of Children and Families, Office of Child Protection Community Based Care Lead Agencies	<ul style="list-style-type: none"> Adoption Support Group Facilitators and Members Community Based Care Agencies Faith-Based and Community-Based Systems North American Council on Adoptable Children Ounce of Prevention Fund of Florida, Prevent Child Abuse Florida Circle of Parents Other Partners as Appropriate 	07/01/2010	06/30/2011
	2.1.2.2 By June 30, 2011, and annually thereafter, training will have been provided to the circuits and community-based care lead agencies as measured by monthly reports of training that includes attendance information.			07/01/2011	06/29/2012

Support of Adoptive Families Objective 2.1: Adoption Support Groups. By June 30, 2015, the State of Florida will have increased the number and sustainability of adoptive parent and youth support groups so that each community has a local support group or, in rural communities, at least a quarterly newsletter or warm-line that informs adoptive parents of nearby support groups and upcoming educational opportunities and information related to the *Protective Factors*.

Action Steps	Measures/ Benchmarks	Lead(s)	Potential Partner Organizations	Begin Date	End Date
2.1.3 Explore feasibility of resources and opportunities to communicate and share information with adoptive families on a regular basis in areas (e.g., rural) where support groups are difficult to host and sustain.	2.1.3.1 By June 30, 2011, a communication plan will have been developed including all connection methods (example newsletter and website).	Department of Children and Families, Office of Child Protection Community Based Care Lead Agencies	<ul style="list-style-type: none"> • Adoption Information Center • Community Based Care Agencies • Faith-Based and Community-Based Systems • Other Partners as Appropriate 	09/01/2010	06/30/2011
2.1.4 Conduct quarterly conference calls with adoptive parent and youth support group facilitators and interested members.	2.1.4 By June 30, 2011, and annually thereafter, quarterly reports of conference calls will have been completed and include participant information.	Department of Children and Families, Office of Child Protection Community Based Care Lead Agencies	<ul style="list-style-type: none"> • Adoption Information Center • Adoptive Parent Support Group Facilitators • Adopted Youth Support Group Facilitators • Faith-Based and Community-Based Systems • Other Partners as Appropriate 	08/01/2010 07/01/2011 07/02/2012 07/01/2013 07/01/2014	06/30/2011 06/29/2012 06/28/2013 06/30/2014 06/30/2015

Support of Adoptive Families Objective 2.2: Education Opportunities for Adoptive Parents

2.2. Education Opportunities for Adoptive Parents. By June 30, 2015, the State of Florida will have increased the number and accessibility of quality educational opportunities for adoptive parents that include education related to the *Protective Factors*, caring for the needs of adoptive children, and supporting the needs of adoptive families.

[Lead: Department of Children and Families and Community Based Care Lead Agencies]

Types of Support of Adoptive Families Approaches:

- Adoptive Parent and Youth Support Groups
- Education and Training Opportunities for Adoptive Parents
- Adoption Competent Education and Mental Health Assistance Services for Adoptive Families
- Case Management Services for Adoptive Parents and Children

Socio-Ecological Model Level(s) Influenced by this Objective:

- Societal Level
- Relationship Level
- Community Level
- Individual Level

Protective Factors to be built by the Objective:

- Nurturing and Attachment
- Knowledge of Parenting and of Child and Youth Development
- Parental Resilience
- Social Connections
- Concrete Supports for Parents
- Social and Emotional Competence of Children

Plan of Action for Education Opportunities for Adoptive Parents

Support of Adoptive Families Objective 2.2: Education Opportunities for Adoptive Parents. By June 30, 2015, the State of Florida will have increased the number and accessibility of quality educational opportunities for adoptive parents that include education related to the <i>Protective Factors</i> , caring for the needs of adoptive children, and supporting the needs of adoptive families.					
Action Steps	Measures/Benchmarks	Lead	Potential Partner Organizations	Begin Date	End Date
2.2.1 Provide educational opportunities for adoptive parents at least twice a year in conjunction with the two statewide adoption conferences required as a part of the contract with Adoption Information Center.	2.2.1 By June 30, 2011 and annually thereafter, at least two training sessions per year will have been conducted as measured by the agendas and attendance records.	Department of Children and Families, Office of Child Protection	<ul style="list-style-type: none"> Adoption Information Center Facilitators of the Parent Support Groups Faith-Based and Community-Based Systems Post Adoption Services Counselors Other Partners as Appropriate 	12/01/2010 07/01/2011 07/02/2012 07/01/2013 07/01/2014	06/30/2011 06/29/2012 06/28/2013 06/30/2014 06/30/2015
2.2.2 Create and distribute materials of local and statewide educational opportunities for adoptive parents, including topic-focused trainings such as Fatherhood.	2.2.2 By June 30, 2011, and annually thereafter, copies of videotapes and lists of locations for the videotapes will be available. For example: <ul style="list-style-type: none"> Adoption Information Center website Support of Adoptive Families group facilitators. <i>Explore Adoption</i> website Local offices that provide for adoption and adoption support. 	Department of Children and Families, Office of Child Protection	<ul style="list-style-type: none"> Adoption Information Center Community Based Care Lead Agencies Evidence-based Parenting Programs Workgroup Facilitators of the Parent Support Groups Faith-Based and Community-Based Systems Healthy Start Parent Education Committee Post Adoption Services Counselors Other Partners as Appropriate 	12/01/2010 07/01/2011 07/02/2012 07/01/2013 07/01/2014	06/30/2011 06/29/2012 06/28/2013 06/30/2014 06/30/2015

Support of Adoptive Families Objective 2.2: Education Opportunities for Adoptive Parents. By June 30, 2015, the State of Florida will have increased the number and accessibility of quality educational opportunities for adoptive parents that include education related to the *Protective Factors*, caring for the needs of adoptive children, and supporting the needs of adoptive families.

Action Steps	Measures/Benchmarks	Lead	Potential Partner Organizations	Begin Date	End Date
2.2.3 Identify educational needs of adoptive parents.	2.2.3.1 By June 30, 2011, and annually thereafter, the educational needs of adoptive parents will have been identified. 2.2.3.2 By June 29, 2012, and annually thereafter, strategies and recommendations for meeting the educational needs of adoptive parents will have been developed and shared with the circuits, community based care lead agencies, post adoption services counselors, and parent support groups.	Department of Children and Families, Office of Child Protection	<ul style="list-style-type: none"> • Adoption Competency Advisory Committee • Adoptive Parents Circle of Parents • Community Based Care Lead Agencies • Facilitators of the Parent Support Groups • Post Adoption Services Counselors • Other Partners as Appropriate 	07/01/2010 07/01/2011 07/02/2012 07/01/2013 07/01/2014 07/01/2011 07/02/2012 07/01/2013 07/01/2014	06/30/2011 06/29/2012 06/28/2013 06/30/2014 06/30/2015 06/29/2012 06/28/2013 06/30/2014 06/30/2015
2.2.4 Provide training and technical assistance on a regular basis about educational opportunities in their areas that would be of benefit for adoptive families.	2.2.4 By June 29, 2012, and annually thereafter, communications about educational opportunities will have been implemented as measured by documentation and annual reporting.	Department of Children and Families, Office of Child Protection	<ul style="list-style-type: none"> • Adoption Information Center • Community Based Care Lead Agencies • Faith-Based and Community-Based Systems • Post Adoption Counselors • Other Partners as Appropriate 	07/01/2011 07/02/2012 07/01/2013 07/01/2014	06/29/2012 06/28/2013 06/30/2014 06/30/2015

Support of Adoptive Families Objective 2.2: Education Opportunities for Adoptive Parents. By June 30, 2015, the State of Florida will have increased the number and accessibility of quality educational opportunities for adoptive parents that include education related to the *Protective Factors*, caring for the needs of adoptive children, and supporting the needs of adoptive families.

Action Steps	Measures/Benchmarks	Lead	Potential Partner Organizations	Begin Date	End Date
2.2.5 Disseminate adoption competency curricula that can be provided to adoptive parents as a part of post adoption services.	2.2.5 By June 30, 2011, and annually thereafter, the printed version of the adoption competency curricula will have been provided to each lead agency post adoption services counselor or designee.	Department of Children and Families, Office of Child Protection	<ul style="list-style-type: none"> • Adoption Information Center • Children’s Home Society • Faith-Based and Community-Based Systems • Other Support of Adoptive Families Providers, as Appropriate • Post Adoption Services Counselors • Sylvia Thomas Center • Other Adoption Providers as Appropriate • Other Partners as Appropriate 	07/01/2010 07/01/2011 07/02/2012 07/01/2013 07/01/2014	06/30/2011 06/29/2012 06/28/2013 06/30/2014 06/30/2015

Support of Adoptive Families Objective 2.3: Faith-Based and Community-Based Efforts

2.3. Faith-Based and Community-Based Efforts. By June 30, 2015, the State of Florida will have provided information and resources to promote and build efforts by faith-based and community-based systems to provide family and community supports that would build the *Protective Factors* in Florida's families.

[Lead: Office of Adoption and Child Protection, Executive Office of the Governor]

Types of Support of Adoptive Families Approaches:

- Adoptive Parent and Youth Support Groups
- Education and Training Opportunities for Adoptive Parents
- Adoption Competent Education and Mental Health Assistance Services for Adoptive Families
- Case Management Services for Adoptive Parents and Children

Protective Factors that should be Built/Supported by this Objective:

- Nurturing and Attachment
- Knowledge of Parenting and of Child and Youth Development
- Parental Resilience
- Social Connections
- Concrete Supports for Parents
- Social and Emotional Competence of Children

Tactics:

2.3.1 Educational Conferences, Summits. By June 30, 2015, the State of Florida will have held annual statewide Faith-Based and Community-Based Educational Conferences, Regional Summits, and Webinars to engage faith and community leaders.

2.3.2 Best Practices. By June 30, 2015, the State of Florida will have created and implemented a review team to continue to research and report on best and promising practices state and nationwide to help circuits with their initiatives.

Please Note: The plan of action for this objective mirrors that of the **Prevention Objective 1.6, Promotion of Adoption Objective 2.1,** and **Support of Adoptive Families Objective 2.3.** The implementation of this plan of action is designed to accomplish all three objectives in concert with one another.

Plan of Action for Faith-Based and Community-Based Efforts, Educational Conferences, Summits, and Webinars

Prevention Objective 2.3, Tactic 2.3.1: Faith-Based and Community-Based Efforts, Educational Conferences, Summits, and Webinars. By June 30, 2015, the State of Florida will have held annual statewide Faith-Based and Community-Based Educational Conferences, Regional Summits, and Webinars to engage faith and community leaders.					
Action Steps	Measures/Benchmarks	Lead	Potential Partner Organizations	Begin Date	End Date
2.3.1.1 Create a Faith-Based and Community-Based Education Committee to coordinate and plan statewide summits or webinars and provide support in the engagement of faith and community leaders with local congregations.	2.3.1.1 By February 28, 2012, the Faith-Based and Community-Based Summit Committee will have been created.	Office of Adoption and Child Protection, Executive Office of the Governor	<ul style="list-style-type: none"> • Child Welfare Providers • Community Based Care Lead Agencies • Community-Based Organizations • Florida Faith-Based and Community-Based Advisory Council • Faith-Based Organizations • Heart Galleries • Partners for Promise, Department of Children and Families • Private Organizations • State Agency's Faith-Based and Community-Based Liaison • Other Partners as Appropriate 	07/01/2011	02/28/2012
2.3.1.2 Partner with an existing statewide summit and provide a faith-based and community-based panel workshop.	2.3.1.2 By December 31, 2012, and annually thereafter, the Faith Based Educational Summit will have been held.	Faith-Based and Community-Based Summit Committee	<ul style="list-style-type: none"> • Office of Adoption and Child Protection, Executive Office of the Governor • Florida Faith-Based and Community-Based Advisory Council • State Agency's Faith-Based and Community-Based Liaison • Other Partners as Appropriate 	01/01/2012 01/01/2013 07/01/2014	12/31/2012 12/31/2013 12/31/2014

Prevention Objective 2.3, Tactic 2.3.1: Faith-Based and Community-Based Efforts, Educational Conferences, Summits, and Webinars. By June 30, 2015, the State of Florida will have held annual statewide Faith-Based and Community-Based Educational Conferences, Regional Summits, and Webinars to engage faith and community leaders.					
Action Steps	Measures/Benchmarks	Lead	Potential Partner Organizations	Begin Date	End Date
2.3.1.3 Partner with state agencies to create regional faith-based and community-based summits.	2.3.1.3 By December 31, 2013, and annually thereafter, regional summits will have been held.	Faith-Based and Community-Based Summit Committee	<ul style="list-style-type: none"> Office of Adoption and Child Protection, Executive Office of the Governor Florida Faith-Based and Community-Based Advisory Council State Agency's Faith-Based and Community-Based Liaison Other Partners as Appropriate 	01/01/2013 01/01/2014	12/31/2013 12/31/2014

Plan of Action for Faith-Based and Community-Based Efforts, Best Practices

Prevention Objective 2.3, Tactic 2.3.2: Faith-Based and Community-Based Efforts, Best Practices. By June 30, 2015, the State of Florida will have created and implemented a review team to continue to research and report on best and promising practices state and nationwide to help circuits with their initiatives.					
Action Steps	Measures/Benchmarks	Lead	Potential Partner Organizations	Begin Date	End Date
2.3.2.1 Create a Best Practices Review Team.	2.3.2.1 By July 31, 2014, the Best Practices Review Team will have been created.	Office of Adoption and Child Protection, Executive Office of the Governor	<ul style="list-style-type: none"> Child Welfare Providers Community Based Care Lead Agencies Community-Based Organizations Faith-Based Organizations Heart Galleries Private Organizations State Agency's Faith-Based and Community-Based Liaison Other Partners as Appropriate 	01/01/2013	07/31/2014
2.3.2.2 Design a research and distribution methodology.	2.3.2.2 By December 31, 2014, the methodology will have been designed.	Best Practices Review Team	<ul style="list-style-type: none"> Office of Adoption and Child Protection, Executive Office of the Governor State Agency's Faith-Based and Community-Based Liaison Other Partners as Appropriate 	07/31/2014	12/31/2014

Prevention Objective 2.3, Tactic 2.3.2: Faith-Based and Community-Based Efforts, Best Practices. By June 30, 2015, the State of Florida will have created and implemented a review team to continue to research and report on best and promising practices state and nationwide to help circuits with their initiatives.

Action Steps	Measures/Benchmarks	Lead	Potential Partner Organizations	Begin Date	End Date
<p>2.3.2.3 Conduct the research and develop the report and update annually.</p>	<p>2.3.2.3 By June 30, 2015, findings will have been posted on the website and communicated to distribution list that includes the Adoption Information Center, faith and community partners, local circuit teams, and liaisons from state agencies, etc.</p>	<p>Best Practices Review Team</p>	<ul style="list-style-type: none"> • Adoption Information Center • Office of Adoption and Child Protection, Executive Office of the Governor • State Agency’s Faith-Based and Community-Based Liaison • Other Partners as Appropriate 	<p>07/01/2014</p>	<p>06/30/2015</p>
<p>2.3.2.4 Implement the distribution methodology of the report.</p>	<p>2.3.2.4 By June 30, 2015, reports will have been distributed statewide to help circuits, with the areas in most need being targeted.</p>	<p>Best Practices Review Team</p>	<ul style="list-style-type: none"> • Adoption Information Center • Best Practices Review Team • Office of Adoption and Child Protection, Executive Office of the Governor • State Agency’s Faith-Based and Community-Based Liaison • Other Partners as Appropriate 	<p>07/01/2014</p>	<p>06/30/2015</p>

Plans of Action for Support of Adoptive Families Strategy 3: Monitor and Evaluate Plan Implementation

Support of Adoptive Families Strategy 3: Monitor and Evaluate Plan Implementation. By June 30, 2015, leadership of plan implementation will have monitored and annually assessed the progress and effectiveness of the plan-based initiatives.

Support of Adoptive Families Strategy 3 Objectives:

- 3.1 Instrumentation and Procedures Design.** By March 30, 2011, the State of Florida will have created procedures and instrumentation for use by the plan workgroups for monitoring and annually reviewing progress.
[Lead: Office of Adoption and Child Protection, Executive Office of the Governor]
- 3.2 Progress Monitoring.** By June 30, 2015, the State of Florida will have implemented an ongoing monitoring of plan implementation progress and used the findings to refine the action plans for future implementation.
[Lead: Office of Adoption and Child Protection, Executive Office of the Governor]
- 3.3 Annual Review and Assessment.** By June 30, 2015, the State of Florida will have implemented annual progress reviews and used the findings to refine the strategies and objectives for future implementation.
[Lead: Office of Adoption and Child Protection, Executive Office of the Governor]

Support of Adoptive Families Objective 3.1: Instrumentation and Procedures Design

3.1. Instrumentation and Procedures Design. By March 30, 2011, the State of Florida will have created procedures and instrumentation for use by the plan workgroups for monitoring and annually reviewing progress.

[Lead: Office of Adoption and Child Protection, Executive Office of the Governor]

Because this is an objective that supports implementation of all of the strategies and objectives in the five-year plan, the standard format for identifying the areas of the continuum, the levels of the socio-ecological model and the protective factors addressed is not included. One could conclude that all levels are impacted because of the support role of this objective, or one could conclude that none of the levels should be checked because it provides only a supporting role in the effort.

It is elected that the efforts taken to accomplish each plan objective will be monitored and assessed annually in order to address both implementation and effectiveness. This will entail two levels of oversight and study. One is the **monitoring** of the ongoing progress of the implementation of the plan. It is important that all of the planning and implementing partners be actively involved on a regular basis to discuss their efforts and determine how, collectively, they are taking action as a continuous process. This will provide opportunities to determine and celebrate the producing of measurable improvement in the well-being of Florida's communities and in the performance of the actions contributing to these results. The second is the **annual review of progress** with a focus on the summary accomplishments of the process as well as what results or changes have been noted as a result of the work each year. See Appendix G for an example of an annual review.

During the first year of plan implementation, the lead partners for each objective (CAPP Plan Leaders) will be involved in designing the final monitoring tool to be used. Skilled evaluators in private practice and affiliated with Florida universities will be tapped to provide assistance with this effort. Instrumentation and procedures will be developed that will lend themselves to serving as a management tool for the leadership and partners for each of the plan objectives. Below is the plan of action for the development of the monitoring and evaluation instrumentation and procedures.

Plan of Action for Instrumentation and Procedures Design

Support of Adoptive Families Objective 3.1: Instrumentation and Procedures Design. By March 30, 2011, the State of Florida will have created procedures and instrumentation for use by the plan workgroups for monitoring and annually reviewing progress.					
Action Steps	Measures/ Benchmarks	Lead	Potential Partner Organizations	Begin Date	End Date
3.1.1 Form an Evaluation Design Team.	3.1.1 By August 31, 2010, the Evaluation Design Team will have been created.	Office of Adoption and Child Protection, Executive Office of the Governor	<ul style="list-style-type: none"> • CAPP Plan Leaders • Professional Evaluators • Universities/Colleges • Other Partners as Appropriate 	07/01/2010	08/31/2010

Support of Adoptive Families Objective 3.1: Instrumentation and Procedures Design. By March 30, 2011, the State of Florida will have created procedures and instrumentation for use by the plan workgroups for monitoring and annually reviewing progress.

Action Steps	Measures/ Benchmarks	Lead	Potential Partner Organizations	Begin Date	End Date
<p>3.1.2 Develop the procedures for instrumentation for the ongoing monitoring system.</p> <p>3.1.3 Develop the instrumentation for the ongoing monitoring system.</p> <p>3.1.4 Test the instruments and procedures.</p> <p>3.1.5 Revise and finalize instruments and procedures as appropriate.</p> <p>3.1.6 Distribute the instruments and procedures to the CAPP Plan Leaders.</p>	<p>3.1.2 – 3.1.6 By December 31, 2010, the procedures and instrumentation for monitoring progress will have been completed and distributed to the CAPP Plan Leaders.</p>	<p>Evaluation Design Team</p>	<ul style="list-style-type: none"> • CAPP Plan Leaders • Office of Adoption and Child Protection, Executive Office of the Governor • Professional Evaluators • Universities/Colleges • Other Partners as Appropriate 	<p>09/01/2010</p>	<p>12/31/2010</p>
<p>3.1.7 Develop the procedures for instrumentation for the annual review.</p> <p>3.1.8 Develop the instrumentation for the annual review.</p> <p>3.1.9 Test the instruments and procedures.</p> <p>3.1.10 Revise and finalize instruments and procedures as appropriate.</p> <p>3.1.11 Distribute the instruments and procedures to the CAPP Plan Leaders.</p>	<p>3.1.7 – 3.1.11 By March 30, 2011, the procedures and instrumentation for annual reviews will have been completed and distributed to the CAPP Plan Leaders.</p>	<p>Evaluation Design Team</p>	<ul style="list-style-type: none"> • CAPP Plan Leaders • Office of Adoption and Child Protection, Executive Office of the Governor • Professional Evaluators • Universities/Colleges • Other Partners as Appropriate 	<p>09/01/2010</p>	<p>03/30/2011</p>

Support of Adoptive Families Objective 3.2: Progress Monitoring

3.2. Progress Monitoring. By June 30, 2015, the State of Florida will have implemented an ongoing monitoring of plan implementation progress and used the findings to refine the action plans for future implementation.

[Lead: Office of Adoption and Child Protection, Executive Office of the Governor]

Because this is an objective that supports implementation of all of the strategies and objectives in the five-year plan, the standard format for identifying the areas of the continuum, the levels of the socio-ecological model and the protective factors addressed is not included. One could conclude that all levels are impacted because of the support role of this objective, or one could conclude that none of the levels should be checked because it provides only a supporting role in the effort.

While the monitoring and evaluation instrumentation and procedures are being developed, a statewide learning community will be formed. The participants will serve as the key informants throughout the plan implementation period. Leadership and other partners for each plan objective will be invited to serve as active members of the statewide support of adoptive families learning community. There will be at least one representative from each plan objective. They will serve as the leads for conducting performance reviews at the objective level and for informing and advising the learning community at the state level. At this time we will call them CAPP Plan Leaders. However, these leaders could appoint designees to stand in their stead.

Objective Level

A lead will be identified for each of the six (6) objectives for the first two (2) Support of Adoptive Families plan strategies. Each CAPP Plan Leader will assume the responsibility for convening the workgroup partners for the initiative on a regularly scheduled basis. The purpose of these meetings (either in person or via conference call) will be to prepare a performance report that covers such areas as:

- The customers or recipients reached or served by the initiative during the period.
- How well have we implemented the action plan? What has worked well? What has not? What should we do about it? [This is not a blow by blow of everything the workgroup has done, but a more strategic look at whether or not what needed to happen did happen; why or why not.]
- How successful have we been in engaging our partners? Is anyone missing and if so, what should we do about it?
- What do we need to do in this next period to continue our stellar performance or make it even better? What will we do and who will do it?

The final reporting areas will be addressed and defined by the work on **Support of Adoptive Families Objective 3.1**. These reports will be used to plan mid-course adjustments in order to maintain stellar implementation or improve performance as appropriate. They will also be used as the basis for the conversation with the statewide learning community.

State Level

This learning community will be involved in regularly scheduled conference calls. These will be held at least quarterly and more often if the community decides to do so. During the calls, participants will be asked to:

- Report on the status of implementation for each objective.
- Share successes.
- Share barriers to implementation and solutions generated if applicable.
- Brainstorm new or possible solutions.

The final discussion areas will be addressed and defined by the work on **Support of Adoptive Families Objective 3.1** Instrumentation and Procedures Design. These state level reports will be used to assist with planning for mid-course adjustments in order to maintain stellar implementation or improve performance as appropriate.

Additionally, spokespersons for the learning community will be identified. Reports will be prepared based upon the state level meetings. These reports will be presented and discussed with the Child Abuse Prevention and Permanency Advisory Council as a standing agenda item at the Advisory Council meetings during the five-year period.

Plan of Action for Progress Monitoring

Prevention Objective 3.2: Progress Monitoring: By June 30, 2015, the State of Florida will have implemented an ongoing monitoring of plan implementation progress and used the findings to refine the action plans for future implementation.					
Action Steps	Measures/ Benchmarks	Lead	Potential Partner Organizations	Begin Date	End Date
3.2.1 Identify leads or key informants for each objective. 3.2.2 Form the statewide learning community.	3.2.1 – 3.2.2 By December 30, 2012, the statewide learning community will have been appointed.	Office of Adoption and Child Protection, Executive Office of the Governor	<ul style="list-style-type: none"> • CAPP Plan Leaders • Professional Evaluators • Universities/Colleges • Other Partners as Appropriate 	07/01/2010	12/30/2012
3.2.3 Leads will regularly submit monitoring reports to the Office of Adoption and Child Protection.	3.2.3.1 By October 31, 2010, quarterly thereafter, the leads for each objective will have submitted monitoring reports. 3.2.3.2 By January 30, 2012, and biannually thereafter, the leads for each objective will have submitted monitoring reports.	CAPP Plan Leaders	<ul style="list-style-type: none"> • Statewide Learning Community • Workgroup Partners • Other Partners as Appropriate 	07/01/2010 10/01/2010 01/01/2011 03/01/2011	10/31/2010 01/31/2011 03/31/2011 07/30/2011
3.2.4 Conduct meetings of the statewide learning community.	3.2.4 By June 30, 2015 the learning community will have held meetings and informed future plan implementation.	Office of Adoption and Child Protection, Executive Office of the Governor	<ul style="list-style-type: none"> • CAPP Plan Leaders • Other Partners as Appropriate 	07/01/2010	06/30/2015
3.2.5 Give status update presentations at the meetings of the Child Abuse Prevention and Permanency Advisory Council.	3.2.5 At the Child Abuse Prevention and Permanency Advisory Council meetings, a status update will have been discussed.	CAPP Plan Leaders	<ul style="list-style-type: none"> • Statewide Learning Community • Workgroup Partners • Other Partners as Appropriate 	07/01/2010	06/30/2015

Support of Adoptive Families Objective 3.3: Annual Review and Assessment

3.3. Annual Review and Assessment. By June 30, 2015, the State of Florida will have implemented annual progress reviews and used the findings to refine the strategies and objectives for future implementation.

[Lead: Office of Adoption and Child Protection, Executive Office of the Governor]

Because this is an objective that supports implementation of all of the strategies and objectives in the five-year plan, the standard format for identifying the areas of the continuum, the levels of the socio-ecological model and the protective factors addressed is not included. One could conclude that all levels are impacted because of the support role of this objective, or one could conclude that none of the levels should be checked because it provides only a supporting role in the effort.

The annual reporting procedures will be developed as a result of implementation of **Support of Adoptive Families Objective 3.1** Instrumentation and Procedures Design. Once this is completed, it will be shared with each of the CAPP Plan Leaders during a statewide learning community meeting. At least annually, the instrument will be completed for each objective by the CAPP Plan Leader and discussed at the statewide learning community meeting. The individual reports and the results of the discussion will be codified into an annual report that will be delivered to the Office of Adoption and Child Protection, Executive Office of the Governor and to the Child Abuse Prevention and Permanency Advisory Council. This information will also be provided to a workgroup that will conduct a “turn the curve” exercise to monitor and discuss population level changes and future direction. The product of these exercises will be made available to the Children and Youth Cabinet of Florida.

Plan of Action for Annual Review and Assessment

Prevention Objective 3.3: Annual Review and Assessment. By June 30, 2015, the State of Florida will have implemented annual progress reviews and used the findings to refine the strategies and objectives for future implementation.					
Action Steps	Measures/ Benchmarks	Lead	Potential Partner Organizations	Begin Date	End Date
3.3.1 Conduct a turn the curve population accountability session.	3.3.1 – 3.3.3 By June 30, 2015, the turn the curve workgroup will have provided an annual report to the Children and Youth Cabinet of Florida.	Office of Adoption and Child Protection, Executive Office of the Governor	<ul style="list-style-type: none"> • CAPP Plan Leaders • Turn the Curve Workgroup • Statewide Learning Community • Workgroup Partners • Other Partners as Appropriate 	07/01/2010	06/30/2015
3.3.2 Prepare an annual turn the curve report.					
3.3.3 Provide the annual report to the Children and Youth Cabinet of Florida.					

Prevention Objective 3.3: Annual Review and Assessment. By June 30, 2015, the State of Florida will have implemented annual progress reviews and used the findings to refine the strategies and objectives for future implementation.

Action Steps	Measures/ Benchmarks	Lead	Potential Partner Organizations	Begin Date	End Date
<p>3.3.4 Draft the annual report.</p> <p>3.3.5 Deliver the annual report to the Office of Adoption and Child Protection, Executive Office of the Governor and Legislature.</p> <p>3.3.6 Deliver the annual report to the Child Abuse Prevention and Permanency Advisory Council.</p>	<p>3.3.4 – 3.3.6 By December 30, 2011, and annually thereafter, the annual report of progress will have been published in the Office of Adoption and Child Protection, Executive Office of the Governor Annual Report to the Executive Office of the Governor and Legislature.</p>	Office of Adoption and Child Protection, Executive Office of the Governor	<ul style="list-style-type: none"> • CAPP Plan Leaders • Statewide Learning Community • Workgroup Partners • Other Partners as Appropriate 	<p>10/01/2011 12/30/2011</p> <p>10/01/2012 12/31/2012</p> <p>10/01/2013 12/31/2013</p> <p>10/03/2014 12/31/2014</p>	
<p>3.3.7 Update the state plan.</p>	<p>3.3.7 By June 30, 2012, and annually thereafter, the annual report of progress will have been submitted to update the state plan.</p>	Office of Adoption and Child Protection, Executive Office of the Governor	<ul style="list-style-type: none"> • CAPP Plan Leaders • Statewide Learning Community • Workgroup Partners • Other Partners as Appropriate 	<p>01/03/2012 06/30/2012</p> <p>01/03/2013 06/30/2013</p> <p>01/06/2014 06/30/2014</p> <p>01/05/2015 06/30/2015</p>	
<p>3.3.8 Review the monitoring reports.</p> <p>3.3.9 Review the annual reports.</p> <p>3.3.10 Prepare the biennial update to the state plan.</p>	<p>3.3.8 – 3.3.10 By June 30, 2012, and biennially thereafter, the state plan will have been revised as appropriate based on changing needs and program evaluation results.</p>	Office of Adoption and Child Protection, Executive Office of the Governor	<ul style="list-style-type: none"> • CAPP Plan Leaders • Statewide Learning Community • Workgroup Partners • Other Partners as Appropriate 	<p>01/03/2012 06/30/2012</p> <p>01/03/2013 06/30/2013</p> <p>01/06/2014 06/30/2014</p> <p>01/05/2015 06/30/2015</p>	

Part 5 - Overview of the Circuit Plans for the Support of Adoptive Families

Summary of Local Plans – Support of Adoptive Families

The following summaries and tables are based on the Circuit Support of Adoptive Families Plans: July 2010 – June 2015. This section provides summaries of the plans’:

- Local priority needs
- Planned objectives and strategies
- Barriers to plan implementation
- Recommendations for changes in policy and legislation.

Local Plan Priority Needs by Circuit and County

Table 8. Local Plan Priority Needs by Circuit and County

Local Plan Priorities					
Circuit	County	Priority 1	Priority 2	Priority 3	Priority 4
1	Escambia Santa Rosa Okaloosa Walton	Improve availability and access to adoption competent mental health and education services.	Increase adoption support services for special needs adoptive families.		
2	Leon Gadsden Wakulla Jefferson Franklin Liberty	Post-adoptive families in need of supports and services.	Creation of adoptive parent support groups.	Improve availability and access to adoption competent mental health and education services.	Improve availability of post adoption services counselors.
3	Columbia Dixie Lafayette Hamilton Madison Suwannee Taylor	Increase availability of Adoption Competent Services.	Increase number of adoptive parent and teen adoptee support groups/services.		
4	Duval Nassau	Increase the number of adoption competent child welfare professionals.	Increase pre-adoption counseling and education for prospective adoptive parents and their families.		
4	Clay	Respite care for children of adoptive parents.	Strong Clay County Adoption Support Group.		
5	Citrus Hernando Lake Marion Sumter	Needs for support groups for both adoptive parents and adopted youth in all counties.	Create support plans for families that are adopting youth from the foster care system.	Expand post adoptive services to meet the needs of families.	Increase opportunities for adopted parents to receive on-going training to address needs that arise throughout the life of the child.
6	Pasco Pinellas	Improve access to case management services and support.	Improve availability and access to adoption competent mental health and education services.	Increase availability of appropriate support groups for parents and youth.	

Local Plan Priorities					
Circuit	County	Priority 1	Priority 2	Priority 3	Priority 4
7	Volusia	Increase community services for children with specialized diagnosis (fetal alcohol syndrome and autism).		Increase awareness and training for adoptive parents of youth who were abused, abandoned, and/or neglected who display extreme behavioral/mental health issues for Volusia, Flagler, Putnam, and St. John's Counties.	
7	Flagler St. Johns Putnam	Increase community services for children with specialized diagnosis (fetal alcohol syndrome and autism).	Expand adoption support groups in Flagler, Putnam, and St. John's County to include teen support group in Circuit 7.	Increase awareness and training for adoptive parents of youth who were abused, abandoned, and/or neglected who display extreme behavioral/mental health issues for Volusia, Flagler, Putnam, and St. John's Counties.	
8	Alachua Baker Bradford Gilchrist Levy Union	Increase availability of Adoption Competent Services.	Increase number of adoptive parent and teen adoptee support groups/services.		
9	Orange Osceola	Increase availability of appropriate support groups for parents and youth.			
10	Hardee Highlands	Increase the number of adoptive parents who have received training and education so that they can better manage behavioral and/or mental health care, emotional regulatory healing and access local support groups for trainings and support.	Increase the number of adoption competent mental health professionals to meet the mental health needs of the children and help them transition into a permanent adoptive home.		
10	Polk	Increase the number of adoptive parents who have received training and education so that they can better manage behavioral and/or mental health issues. Encourage families to become involved in local support groups which offer additional training opportunities.	Increase the number of adoption competent mental health professionals to meet the mental health needs of the children and help them transition into a permanent adoptive home.		
11	Miami-Dade	Develop adoption competent therapists.	Increase availability of adoption support groups for parents and youth.	Provide adoption training for parents who have a child placed with them for adoption.	Provide post adoption training for adoptive parents.
11	Miami-Dade	Priority 5 Provide post adoption case management services.	Priority 6 Develop and provide an adoptive parent handbook.	Priority 7 Develop an evening and weekend hotline for adoptive parents.	

Local Plan Priorities					
Circuit	County	Priority 1	Priority 2	Priority 3	Priority 4
12	Manatee Sarasota DeSoto	Improve availability and access to adoption competent mental health and education services.	Increase availability of appropriate support groups for parents and youth.	Expand training opportunities for adoptive parents.	
13	Hillsborough	Create multiple and diverse opportunities for adoptive families to gain access to information and services.	Improve availability and access to adoption competent mental health and education services.	Implement a Faith Based support network for Adoptive Families.	
14	Bay Calhoun Gulf Holmes Jackson Washington	Increase Post Adoptive Services for families throughout Circuit 14.			
15	Palm Beach	Adoptive parents are provided with services and supports that will enhance their abilities to parent their adoptive children.			
16	Monroe	<i>Information not provided</i>			
17	Broward	Adoptive families in Broward County need support services, and increased awareness of how to access these services, after adoption finalization.	Adoptive families in Broward County need access to adoption competent services and providers after adoption finalization.		
18	Brevard Seminole	Improve availability and accessibility to adoption competent mental health professionals.	Increase availability and accessibility of adoptive families and teen support groups in Circuit 18.	Improve adoptive parents' ability to navigate the Medicaid system.	
19	Indian River Martin Okeechobee	Develop an array of county- specific mental health and educational supports for adoptive families.	Increase the number of new adoptive families seeking post adoptive support services before a crisis occurs.		
19	St. Lucie	Increase in the variety of county- specific mental health and educational supports for adoptive families.	Increase the number of new adoptive families seeking post adoptive support services before a crisis occurs.		
20	Charlotte Collier Glades Hendry Lee	To increase the supports available for adoptive families.	Increase Post-Adoption Support Groups, which provide Adoptive families with opportunities to network amongst each other, as well as receive training and educational materials specific to the needs of children who have experienced abuse, neglect or abandonment.	Increase community partners to provide enrichment opportunities for adoptive children.	

Local Plan Strategies and Objectives by Circuit and County

Table 9. Local Plan Strategies and Objectives by Circuit and County

Circuit	Counties	Strategy	Objective
1	Escambia Santa Rosa Okaloosa Walton	<i>Strategy 1</i> By June 30, 2015, Circuit 1 will have at least five adoption competent mental health therapist in Escambia and Okaloosa Counties and at least two in Santa Rosa and Walton Counties.	Objective 1.1 The adoption competent trainers will train in each of the four counties community mental health centers and at minimum of five therapists in each county will be certified by June 30, 2015.
1	Escambia Santa Rosa Okaloosa Walton	<i>Strategy 2</i> By June 30, 2015 Adoptive respite services will be available throughout the Circuit.	Objective Develop county-level strategies to engage local churches and community organizations in Circuit 1 to help support adoptive families through respite and adoption support information programs.
2	Leon Gadsden Wakulla Jefferson Franklin Liberty	<i>Strategy 1</i> By June 30, 2015, Circuit 2 adoptive families will have the enhanced capacity to provide a safe, stable, nurturing environment for children who have obtained permanency through adoption.	Objective 1.1 Facilitate the coordination of support activities. Objective 1.2 Increase adoptive parent resources and distribution of information. Objective 1.3 Increase training and educational opportunities for adoptive families. Objective 1.4 Explore establishing adoptive parent and teen support groups. Objective 1.5 Plan for the provision of in-home behavioral and therapeutic services. Objective 1.6 Establish a network of adoption competent providers, professionals, and parents.
3	Columbia Dixie Lafayette Hamilton Madison Suwannee Taylor	<i>Strategy 1</i> By June 30, 2015, Circuit 3 will support successful adoptions with improved help from adoption competent counselors and group supports. (Note: CHS will administer a survey to adoptive families to assess their needs and will base the type of services provided on the results of the needs assessment. It is also important to note that CHS has found that many adoptive families are not interested in services and they just want to resume a normal family life after the adoption is finalized)	Objective 1.1 Maintain trained workforce and Increase number of professionals trained by Rutgers program for Adoption Competency Certification Training.
4	Clay ONLY	<i>Strategy 1</i> By June 30, 2015; Circuit 4 Clay Co. will have enhanced parental supports for adoptive families incorporating the Protective Factors.	Objective 1 By 30 June, 2015, respite care will be available for all adoptive parents when needed.
4	Clay ONLY	<i>Strategy 2</i> By June 30, 2015; Circuit 4 Clay Co. will have increased knowledge and use of the Protective Factors in support for adoptive families.	Objective 2.1 By June 30, 2015; Circuit 4 Clay Co. will have incorporated the Protective Factors into a support group for adoptive families.
4	Duval ONLY	<i>Strategy 1.2</i> By June 30, 2015; Circuit 4 – DUVAL CO. will have increased the number of adoption competent child welfare workers to address the special needs of adoptive families.	Objective 1.2.1 By June 2015, Circuit 4 – DUVAL CO. will have increased the number of adoption competent child welfare workers providing services to adoptive families. Objective 1.2.2 By June 2015, Circuit 4 – DUVAL CO. will have expanded pre-adoption education to include the Protective Factors for prospective adoptive parents and their families.

Circuit	Counties	Strategy	Objective
5	Citrus Hernando Lake Marion Sumter	<i>Strategy 1</i> By June 30, 2015, Circuit 5 will have a network of on-going support groups for adoptive parents and adopted youth to adequately meet the needs of interested adoptive parents and youth.	Objective 1.1 Continue to expand the availability of support groups for adoptive parents. Objective 1.2 Develop support groups for adopted youth.
5	Citrus Hernando Lake Marion Sumter	<i>Strategy 2</i> By June 30, 2015, practitioners in Circuit 5 will have strong skills in engaging families and utilizing Family Finders and Family Team Conferencing to assist extended family members who are adopting a child from foster care in developing effective support plans.	Objective 2.1 Strengthen the skills of case managers and Family Team Conferencing Facilitators in effectively using Family Finding and Family Team Conferencing for these caregivers.
5	Citrus Hernando Lake Marion Sumter	<i>Strategy 3</i> By June 30, 2015, Circuit 5 will have a more comprehensive array of post adoptive services for adopting families.	Objective 3.1 Ensure the post adoptive services are readily available for all families who request them.
5	Citrus Hernando Lake Marion Sumter	<i>Strategy 4</i> By June 30, 2015, Circuit 5 will have increased opportunities for adoptive parents to obtain on-going training to help them meet the needs of their children.	Objective 4.1 Create new and/or enhance current opportunities to specifically address needs identifies by parents.
6	Pasco Pinellas	<i>Strategy 1</i> By June 30, 2015 Circuit 6 will ensure post adoptive families are provided adoption competent services, support and education.	Objective 1.1 Create a case management system for adoptive families that is accessible, effective and supportive. Objective 1.2 Ensure community mental health providers are adoption competent. Objective: 1:3 Support and creation of adoption support groups and networks. Objective: 1.4 Ongoing accessible educational opportunities for adoptive families. Objective: 1.5 Case managers and Child protective Investigators will have improved knowledge and skills regarding adoption issues
7	Flagler Putnam St. Johns Volusia	<i>Strategy 1</i> By June 30, 2015, Circuit 7 will engage a local agency or medical provider to increase the availability of services to children with Autism and/or Fetal Alcohol Syndrome in general or specifically to assist post adoptive families who have adopted children with these medical diagnoses.	Objective 1.1 Build community awareness of the issue to gain collaboration and a lead agency. Objective 1.2 Develop community support and collaboration. Objective 1.3 Support the lead agency with seeking grant opportunities to support the initiative.
7	Flagler Putnam St. Johns Volusia	<i>Strategy 2</i> By June 30, 2015, Circuit 7 will develop and coordinate a support system for adoptive parents and teens in Volusia, Flagler, Putnam, and St. John's County.	Objective 1.1 Establish a support system for adoptive families in Flagler, Putnam, and St. Johns Counties. Objective 1.2 Establish a support system for adoptive teens in Circuit 7.
7	Flagler Putnam St. Johns Volusia	<i>Strategy 3</i> By June 30, 2015, Circuit 7 will enhance training and support for adoptive families.	Objective 1.1 Develop a method for adoptive parents and youth to have access to trainings that will address any issues that may arise post adoption.

Circuit	Counties	Strategy	Objective
8	Alachua Baker Bradford Gilchrist Levy Union	<i>Strategy 1</i> By June 30, 2015, Circuit 8 will support successful adoptions with improved help from adoption competent counselors and group supports. (Note: CHS will administer a survey to adoptive families to assess their needs and will base the type of services provided on the results of the needs assessment. It is also important to note that CHS has found that many adoptive families are not interested in services and they just want to resume a normal family life after the adoption is finalized).	Objective 1.1 Maintain trained workforce and Increase number of professionals trained by Rutgers program for Adoption Competency Certification Training.
9	Orange and Osceola	<i>Strategy 1</i> By June 30, 2015, Circuit 9 will implement adoptive support initiatives to engage families in building protective factors identified in the Family Strengthening Initiative.	Objective 1.1 Build mentors for pre-adoptive parents to be connected to seasoned adoptive families for support. Objective 1.2 Have an adopted teen support group that coincides with the adoptive parent support group.
10	Hardee Highlands Polk	<i>Strategy 1</i> By June 30, 2015, Circuit 10 will increase the number of adoptive parents who have received training and education so that they will have a better understanding of the impact of trauma and emotional regulation.	Objective 1.1 Increase the promotion of training and educational opportunities. Objective 1.2 Increase the number and type of trainings available to adoptive families.
10	Hardee Highlands Polk	<i>Strategy 2</i> Circuit 10 will increase the number of adoption competent mental health providers and the opportunities for families to receive services through adoption competent providers.	Objective 1.1 Increase the number of adoption competent trainings offered to mental health providers. Objective 1.2 Increase the awareness of these services.
11	Miami-Dade	<i>Strategy 1</i> Currently there are no adoption competent therapists that provide services under Medicaid, to meet the needs of the Miami Dade adoption community. By June 30, 2015, Circuit 11 will have an adequate number of adoption competent therapists that are covered by Medicaid, to meet the needs of the Miami-Dade adoption community.	Objective 1 Insure adequate participation from the Miami-Dade therapeutic community to develop this expertise for our adoptive families.
11	Miami-Dade	<i>Strategy 2</i> By June 30, 2015, Circuit 11 will have an adequate number of adoption support groups throughout the community to meet the needs of adoptive parents and children.	Objective 2 Increase availability of adoption support groups for parents and youth.
11	Miami-Dade	<i>Strategy 3</i> By June 30, 2015, Circuit 11 will have a program of adoption training provided throughout our community to meet the needs of adoptive parents and their prospective children.	Objective 3 Provide adoption training for parents who have a child placed with them for adoption.
11	Miami-Dade	<i>Strategy 4</i> By June 30, 2015, Circuit 11 will have a program of post-adoption training provided throughout our community to meet the needs of post-adoptive parents and their children.	Objective 4 Provide post-adoption training for parents who have a child placed with them for adoption.
11	Miami-Dade	<i>Strategy 5</i> By June 30, 2015, Circuit 11 will provide post adoption case management services.	Objective 5 Provide post-adoption case management services for adoptive parents and children.

Circuit	Counties	Strategy	Objective
11	Miami-Dade	<i>Strategy 6</i> By June 30, 2015, Circuit 11 will have developed and distributed an adoptive parent handbook to all current and prospective adoptive parents.	Objective 6 Develop and provide an adoptive parent handbook.
11	Miami-Dade	<i>Strategy 7</i> By June 30, 2015, Circuit 11 will have operational an evening and weekend hotline to specifically meet the needs of adoptive parents in Miami-Dade County.	Objective 7 Develop an evening and weekend hotline for adoptive parents.
12	Manatee Sarasota DeSoto	<i>Strategy 1</i> By June 30, 2015, Circuit 12 will expand the number of providers that are trained in the Adoption Competency model and expand the training opportunities available to adoptive parents.	Objective 1.1 Train and implement the Adoption Competency model in an effort to increase the number of providers trained and able to work with adoptive families in this model. Objective 1.2 Expand the training opportunities for adoptive parents through partnering with the Foster Parent Associations, making PAIRS training more accessible, and increasing the number of adoptive parents attending DCF/CBC adoption focused conferences.
12	Manatee Sarasota DeSoto	<i>Strategy 2</i> By June 30, 2015, Circuit 12 will develop a committee, to include formal and informal participants, who will focus on issues affecting adoptive families and identifying needs/solutions to gaps in services.	Objective 2.1 Establish a committee that will include formal and informal participants that will focus on issues affecting adoptive families and identify needs/solutions to gaps in services.
13	Hillsborough	<i>Strategy 1</i> By June 30, 2015, Circuit 13 will develop and implement a web based information site for adoptive families.	Objective 1.1 Develop a comprehensive survey tool to determine the baseline of available services in Hillsborough County. Objective 1.2 Develop a comprehensive survey tool for post adoptive families to identify needs and future potential needs. Objective 1.3 Establish a maintenance plan to ensure consistent and accurate information is posted. Objective 1.4 Design and launch a website devoted to resources and information for Hillsborough County families. Objective 1.5 Create a multimedia marketing and plan to ensure information is available through various media. (Print, video, displays in public places, etc.)
13	Hillsborough	<i>Strategy 2</i> By June 30, 2015, Circuit 13 will increase the number of Adoption Competent Services (including mental health, behavioral, paraprofessional and case management) available to families.	Objective 2.1 Identify service providers that accept Medicaid or who are willing to become Medicaid eligible and are willing to participate in the adoption competency certification process. Objective 2.2 Collaborate with The Sylvia Thomas Center and St. Petersburg College to merge Adoption Competency Certifications. Objective 2.3 Provide Adoption Competency Training tracks in multiple areas around the county.
13	Hillsborough	<i>Strategy 3</i> By June 30, 2015, Circuit 13 will implement a Faith Based support network for Adoptive Families.	Objective 3.1 Partner with five faith-based and community-based systems to develop and implement strategies and programs that provide organized support to adoptive families in Hillsborough County by 2015.

Circuit	Counties	Strategy	Objective
14	Bay Calhoun Gulf Holmes Jackson Washington	<i>Strategy 1</i> By June 30, 2015, Circuit 14 adoptive families will have the enhanced capacity to provide a safe, stable, nurturing environment for children who have obtained permanency through Adoption.	Objective 1.1 Training/Education opportunities for Adoptive Parents. Objective 1.2 Circuit 14 will participate in the training of mental health professionals in the Adoption Competent Mental Health Certification process. Objective 1.3 Adoptive Parent and Teen Support Groups will be established.
15	Palm Beach	<i>Strategy 1</i> By June 30, 2015, Circuit 15 will have a formalized adoption support system.	Objective 1.1 Update the adoption services handbook to include details on all available support options in the circuit. Objective 1.2 Develop a central tracking system for adoption support activities. Objective 1.3 Ensure information is distributed at key points during the adoptive process.
15	Palm Beach	<i>Strategy 2</i> By June 30, 2015, Circuit 15 will have certified adoption competent providers.	Objective 2.1 By June 30, 2011, there will be 12 adoption competent providers in the circuit.
15	Palm Beach	<i>Strategy 3</i> By June 30, 2015, Circuit 15 will have implemented a trauma informed system of care.	Objective 3.1 By June 30, 2011, all staff working with dependent children will be completely trained in Trauma Informed Care.
16	Monroe (Seven labeled strategies were taken directly from Circuit 11's plan)	Miami-Dade County, Circuit 11, providing support to Monroe County Circuit 16 <i>Strategy 1</i> Currently there are no adoption competent therapists that provide services under Medicaid, to meet the needs of the Miami Dade adoption community. By June 30, 2015, Circuit 11 will have an adequate number of adoption competent therapists that are covered by Medicaid, to meet the needs of the Miami-Dade adoption community.	Objective 1 Insure adequate participation from the Miami-Dade therapeutic community to develop this expertise for our adoptive families.
16	Monroe	Miami-Dade County, Circuit 11, providing support to Monroe County Circuit 16 <i>Strategy 2</i> By June 30, 2015, Circuit 11 will have an adequate number of adoption support groups throughout the community to meet the needs of adoptive parents and children.	Objective 2 Increase availability of adoption support groups for parents and youth.
16	Monroe	Miami-Dade County, Circuit 11, providing support to Monroe County Circuit 16 <i>Strategy 3</i> By June 30, 2015, Circuit 11 will have a program of adoption training provided throughout our community to meet the needs of adoptive parents and their prospective children.	Objective 3 Provide adoption training for parents who have a child placed with them for adoption.
16	Monroe	Miami-Dade County, Circuit 11, providing support to Monroe County Circuit 16 <i>Strategy 4</i> By June 30, 2015, Circuit 11 will have a program of post-adoption training provided throughout our community to meet the needs of post-adoptive parents and their children.	Objective 4 Provide post-adoption training for parents who have a child placed with them for adoption.

Circuit	Counties	Strategy	Objective
16	Monroe	Miami-Dade County, Circuit 11, providing support to Monroe County Circuit 16 <i>Strategy 5</i> By June 30, 2015, Circuit 11 will provide post adoption case management services.	Objective 5 Provide post-adoption case management services for adoptive parents and children.
16	Monroe	Miami-Dade County, Circuit 11, providing support to Monroe County Circuit 16 <i>Strategy 6</i> By June 30, 2015, Circuit 11 will have developed and distributed an adoptive parent handbook to all current and prospective adoptive parents.	Objective 6 Develop and provide an adoptive parent handbook.
16	Monroe	Miami-Dade County, Circuit 11, providing support to Monroe County Circuit 16 <i>Strategy 7</i> By June 30, 2015, Circuit 11 will have operational an evening and weekend hotline to specifically meet the needs of adoptive parents in Miami-Dade County.	Objective 7 Develop an evening and weekend hotline for adoptive parents.
16	Monroe	<i>Information not provided</i>	Objective 1 Offer three month post placement supervision through WHFS Neighborhood Center that will include: <ul style="list-style-type: none"> • Counseling • Support • Aftercare services
16	Monroe	<i>Information not provided</i>	Objective 2. Provide Support Groups for post adoption families: <ul style="list-style-type: none"> • In all three WHFS locations • Mentoring services
16	Monroe	<i>Information not provided</i>	Objective 3 “Magic Wand” Provide wrap around services for adoption disruption prevention: <ul style="list-style-type: none"> • Monthly support groups for adopted children • More specific training for parenting classes • Mentoring available by seasoned adoptive parents
17	Broward	<i>Strategy 1</i> By June 30, 2015, Circuit 17 will increase awareness and accessibility to post adoptive supports and services.	Objective 1.1 Adoptive families in Broward County will be supported through post adoption services. Objective 1.2 Adoptive families will gain an increased awareness of all available services in the Circuit. Objective 1.3 Adoptive families will gain access and availability to adoption competent service providers and support services after finalization.
18	Brevard Seminole	<i>Strategy 1</i> By June 30, 2015, Circuit 18 will have developed a pool of adoption competent mental health professionals.	Objective 1.1 Increase the number of adoption competent trainers. Objective 1.2 Train adoption competency to local mental health professionals. Objective 1.3 Develop a listing of adoption competent mental health professionals.
18	Brevard Seminole	<i>Strategy 2</i> By June 30, 2015, Circuit 18 will explore the possibility of creating and maintaining adoption support groups for parents and teenagers.	Objective 2.1 Increase attendance and awareness of current adoption support groups. Objective 2.2 Explore funding options for creation of a Seminole County support group. Objective 2.3 Advertise & hire a facilitator position for a Seminole County support group. Objective 2.4 Identify meeting location and advertise the Seminole County support group.

Circuit	Counties	Strategy	Objective
18	Brevard Seminole	<i>Strategy 3</i> By June 30, 2015, Circuit 18 will implement a procedure to assist adoptive parents with the Medicaid system.	Objective 3.1 Ensure continuous Medicaid coverage for all children who are adopted out of foster care.
19	Indian River Martin St. Lucie Okeechobee	<i>Strategy 1</i> By June 30, 2015, Circuit 19 will establish and implement a County-specific support structure for current adoptive parents and prospective adoptive parents.	Objective 1.1 Develop outline/model of desired support structure by December 2013. Objective 2.1 Implement support services in each county by December 2015.
20	Charlotte Collier Glades Hendry Lee	<i>Strategy 1</i> By June 30, 2015, Circuit 20 will provide support and training to adoptive families.	<i>Information not provided</i>
20	Charlotte Collier Glades Hendry Lee	<i>Strategy 2</i> By June 30, 2015, Circuit 20 will increase Post-Adoption Support Groups, which provide Adoptive families with opportunities to network amongst each other, as well as receive training and educational materials specific to the needs of children who have experienced abuse, neglect or abandonment.	<i>Information not provided</i>
20	Charlotte Collier Glades Hendry Lee	<i>Strategy 3</i> By June 30, 2015, Circuit 20 will increase community partners to provide enrichment opportunities for adoptive children.	<i>Information not provided</i>

Anticipated Barriers for Local Plan Implementation by Circuit and County

Table 10. Anticipated Barriers for Local Plan Implementation by Circuit and County

Circuit	Barriers to the Support of Adoptive Families in the Circuit
<p>1 Escambia Santa Rosa Okaloosa Walton</p>	<ul style="list-style-type: none"> Funding restrictions may be a barrier to obtaining adoptive competent training opportunities for local mental health professionals and sources of funding for respite care payments.
<p>2 Leon Gadsden Wakulla Jefferson Franklin Liberty</p>	<ul style="list-style-type: none"> Liability and legal issues exist which create difficulties in securing adequate locations at which to host adoptive parent support groups. Some children that become legally free for adoption ultimately do not wish to be adopted. There is a lack of adequate funds and resources to provide services after a case is closed. Generally, there is a lack of specialized and affordable services within the community to sustain the child(ren) with the adoptive parents, particularly in the outlying areas. Adopted children often require specialized mental health services. Once the adoption is finalized, many children are unable to receive those services due to gaps in what is covered under Medicaid.
<p>3 Columbia Dixie Lafayette Hamilton Madison Suwannee Taylor</p> <p>8 Alachua Baker Bradford Gilchrist Levy Union</p>	<ul style="list-style-type: none"> Funding for staff and resources to accomplish goals. The large geographical area within which the resources are currently spread.
<p>4 Duval Nassau Clay</p>	<ul style="list-style-type: none"> Limited funding for staff. Referrals have increased but not in proportion to staff available to address needs. Need more adoption competent post adoption staff to address family concerns. Limited pre-adoption counseling is being provided and lack of manpower is a barrier to providing this much need service. Lack of manpower is also a barrier for creating and facilitating gender specific teen groups which are very helpful.
<p>5 Citrus Hernando Lake Marion Sumter</p>	<ul style="list-style-type: none"> In a rural area such as Circuit 5 it is difficult to balance access to services such as support groups. Providers desire to organize support groups in location and at times that are convenient for the intended audiences. Yet, the effective use of staff and resources require groups to also be in places with the potential to attract a minimum number of participants. Adoptive parents also need to have consistency in when these groups are offered so they can attend when their schedule allows. Additionally, barriers identified in 2009- 2010 plan still remain. <ul style="list-style-type: none"> On-going need for additional financial resources and subsequent services. Geography and transportation to available services. Lack of behavioral health services that some children need. Medicaid does not pay for the required therapy and it is very expensive for families to afford. The economy may cause more stress on adoptive families requiring them to seek more support services. This situation has only increased since development of the current plan.
<p>6 Pasco Pinellas</p>	<ul style="list-style-type: none"> Isolation of adoptive families in the community Lack of education in community partners regarding adoption issues Lack of state funding for adoptive special needs children for mental health treatment. Lack of respite for adoptive families

Circuit	Barriers to the Support of Adoptive Families in the Circuit
<p>7 Flagler Putnam St. Johns Volusia</p>	<ul style="list-style-type: none"> • The medical/dental providers do not have an increase in payment for services through Medicaid. Thus, there are limited providers within the community who accept this form of insurance. Those who do accept Medicaid are overcapacity and must turn down new Medicaid clients. • The attorneys utilized for this service charge the amount Department of Children and Families is allowed to reimburse totaling \$1000 for each child. • Children who are diagnosed with a disability defined by the Agency for Persons with Disability (APD) after the adoption is final are placed on a waiting list for Med Waiver with other children. However, only those children currently in out-of-home care are given priority if APD opens enrollment prior to finalization. • The Adoption Support groups are only held in Volusia County. Need to expand locations to services all of Circuit 7. • There is no affordable respite care designated for adopted children. Most adoptive parents are unable to pay the cost for group homes and/or residential treatment. The demand is high and has created a strain, both financially and number of beds available, to meet the needs of these children through the Substance Abuse and Mental Health (SAMH) office. Thus, children are being removed from the family by the request of the parents and placed back into the dependency system.
<p>9 Orange Osceola</p>	<ul style="list-style-type: none"> • Funding for post adoption support services, lack of funds for respite care.
<p>10 Hardee Highlands Polk</p>	<ul style="list-style-type: none"> • The quantity and accessibility of adoption competent mental health professionals in our circuit is limited.
<p>11 Miami-Dade</p>	<ul style="list-style-type: none"> • Adoption support groups – barriers include: <ul style="list-style-type: none"> • Communication – no computerized e-mail, regular address or phone lists available for communicating with the adoptive families and privacy issues relating to releasing this information to community groups. • Effective leadership – groups without effective leadership do not provide viable support to their members. • System wide support for developing and maintaining adoption support groups. • Adoption competent therapists – identifying professionals in the community who will participate in becoming certified. Also, how to pay for parent and other family participants. In the current economy, the \$75 – 150 needed for counseling in one of the first items cut from a family’s budget. • All proposed activities require some financial resources. A barrier may be the lack of available financial support, particularly if grantors cannot be found that are interested in assisting with the particular activity. Also, many of the people involved in these community efforts are not skilled in grant writing.
<p>12 DeSoto Manatee Sarasota</p>	<ul style="list-style-type: none"> • Lack of adequate funds & resources to support adoptive families after adoption is finalized. • Lack of community services to assist adoptive families. • Lack of resources, including respite providers, reactive attachment providers, local mental health providers and residential treatment services. • Limited number of adoption competent mental health & educational professionals. • Inadequate Medicaid coverage and provider network for dental & medical services. • Current economy adds stress to adoptive families & increases need for supports. • Medicaid reimbursement levels that limit provider participation. • Children with diagnoses after adoption are placed on Medical Waiver waiting list, but only those children currently in out-of-home care are given priority if Agency with Persons with Disabilities opens enrollment. • Lack of awareness of full range of available supports & services. • Limited funding for post-adoption services, especially for those adopting through private & international sources. • Contact with service providers at point of crisis rather than earlier. • Adoptive family receptiveness to support services.
<p>13 Hillsborough</p>	<ul style="list-style-type: none"> • A barrier in providing comprehensive post adoption support is the lack of adequate tracking regarding disruptions and dissolutions. Although the number of dissolutions was provided, as was the stated cause, more detailed information is needed to understand the issues surrounding a failed adoption. Our plan addresses this somewhat in that we will design and implement a survey to be distributed to families receiving a Maintenance Adoption Subsidy every year. However, surveys are only effective as they are returned. Requiring the courts to submit data when an adoption is dissolved would garner the information needed.
<p>14 Bay Calhoun Gulf Holmes Jackson Washington</p>	<ul style="list-style-type: none"> • It is important for this plan to serve as a Circuit 14 community plan and be acknowledged and respected as such. The efforts identified, strategies put in place to achieve the efforts, and needs identified are those of the individuals with a vested interest in the local community. Members of the planning team and those taking active leads know the needs of Circuit 14 and their continued involvement and ideas to achieve the efforts must be supported by leadership outside of Circuit 14. • As with most plans and/or projects momentum comes and goes at periodic times during the process. It is of utmost importance that the efforts identified and actions to be taken are closely monitored to ensure continued progress by all involved. Losing momentum could mean jeopardizing or delaying much needed efforts in Circuit 14. The Department, through partnership with community providers and active circuit planning team members must commit to the sustainability of this plan to achieve best outcomes for the Circuit 14 community. Based on the current relationship within the Circuit 14 community and those committed to this plan this goal is achievable.

Circuit	Barriers to the Support of Adoptive Families in the Circuit
<p>15 Palm Beach</p>	<ul style="list-style-type: none"> • There are no anticipated barriers to the goal of developing a comprehensive adoption support system in the circuit. There are already several providers of these services, albeit, informal in nature. Child and Family Connections only began subcontracting for specific services this fiscal year. The only potential barrier lies in filling any identified service gaps. Since these services are largely informal and not funded through state child welfare dollars, we may be limited in our ability to diversify services and fill gaps. • Certification in adoption competency and trauma informed care are only limited by the potential for other training or operational priorities that mental health providers and case management staff may need to respond to.
<p>16 Monroe</p>	<ul style="list-style-type: none"> • Adoption support groups – barriers include: <ul style="list-style-type: none"> • Communication – no computerized e-mail, regular address or phone lists available for communicating with the adoptive families and privacy issues relating to releasing this information to community groups. • Effective leadership – groups without effective leadership do not provide viable support to their members. • System wide support for developing and maintaining adoption support groups. • Adoption competent therapists – identifying professionals in the community who will participate in becoming certified. Also, how to pay for parent and other family participants. In the current economy, the \$75 – 150 needed for counseling is one of the first items cut from a family’s budget. • All proposed activities require some financial resources. A barrier may be the lack of available financial support, particularly if grantors cannot be found that are interested in assisting with the particular activity. Also, many of the people involved in these community efforts are not skilled in grant writing.
<p>17 Broward</p>	<ul style="list-style-type: none"> • We currently rely on FSFN for our reporting and data capture, however FSFN is not designed to measure all areas of interest, such as families who respond to recruitment efforts, the types of efforts that yield the most valuable responses, and any cost benefit analysis. Circuit 17 does not have any such database either.
<p>18 Brevard Seminole</p>	<ul style="list-style-type: none"> • Barriers related to supporting adoptive families: For adoptive families who need support that reside outside the county in which they adopted, a barrier can be linkages to adequate supports and services. A statewide directory of such adoption specific and adoption competent resources could assist in the integration of statewide resources. • Adoptive families may fear retaliation or feel stigmatized by accessing resources from the agency in which they adopted the child.
<p>19 Indian River Martin St. Lucie Okeechobee</p>	<ul style="list-style-type: none"> • Supports are limited and adoptive parent’s understanding of needs for support (until a crisis occurs) appears limited as well. The challenge we face is developing supports, and recognition of the need for the supports, simultaneously.
<p>20 Charlotte Collier Glades Hendry Lee</p>	<ul style="list-style-type: none"> • Funding needed for the purchase of supportive services, specifically for the expansion of mental health, including residential care, and orthodontic care. • Funding needed for the purchase of educational services, which are above and beyond the requirements of the school board, but necessary for the children who are being adopted, to include tutorial services. • Funding needed for the purchase of supportive services for the adoptive parents, specifically relationship and family counseling. • Funding for a paid Volunteer Coordinator position to maintain adoption support groups. • Documentation of the need: Surveys and subsidy questionnaires have been received from adoptive families, which document their needs.

Local Planning Team Recommendations for State Level and Legislative Action

Table 11. Local Planning Team Recommendations for State Level and Legislative Action

Circuit	State Level and/or Legislative Action Recommendations from the Circuits
<p>1 Escambia Santa Rosa Okaloosa Walton</p>	<ul style="list-style-type: none"> • College tuition waiver eligibility prior to May 5, 1997 finalization date. • MAS through high school graduation regardless of age. • Medicaid eligibility through high school and college.
<p>2 Leon Gadsden Wakulla Jefferson Franklin Liberty</p>	<ul style="list-style-type: none"> • Increase funding for post adoption services • Continue to fund Adoption Competency training at the State level for local providers • Increase the network of specialized providers who accept Medicaid
<p>3 Columbia Dixie Lafayette Hamilton Madison Suwannee Taylor</p> <p>8 Alachua Baker Bradford Gilchrist Levy Union</p>	<ul style="list-style-type: none"> • Funds are needed for post adoption services, preventative and proactive services, vs. reactive when they are calling for help. • Clearer Florida Administrative Code direction regarding the requirement of psychological evaluations for subsidy (interpretation of the current code requirements varies based on location/circuits), specifically for children 3 and under. For children too young to be adequately diagnosed by way of a psychological evaluation, requiring such as a prerequisite to subsidy may be a source of unnecessary delay and ineffective use of resources. Additionally, a way to review eligibility for children who may have delayed reactions to earlier childhood trauma (after finalization) would be helpful.
<p>4 Duval Nassau Clay</p>	<ul style="list-style-type: none"> • Statutes re: Pre-adoptive Case Plan should include Adoption 101 in addition to MAPP classes. This has been a recommendation of several caseworkers. However there must be legislative and judicial support of this change before it will be embraced.
<p>5 Citrus Hernando Lake Marion Sumter</p>	<ul style="list-style-type: none"> • As noted, the adoption competent educational and mental health services in the service area that we currently do not have resources. We believe that state should assist in this service area by: <ul style="list-style-type: none"> • Provide opportunities/training/incentives for therapist to become skilled in dealing with severe issues many of the children face. • Address Medicaid issues related to behavioral therapy. • Additionally, as noted in current plan, parents adopting children from the foster care system must be able to access subsidies for needs that may arise throughout the life of the child.
<p>6 Pasco Pinellas</p>	<ul style="list-style-type: none"> • Legislative action that supports adoptive parents who need mental health treatment for their children • Funding increases • Special Conditions as removal factor to enable an adoptive child to re-enter the foster care system when the community mental health system can no longer support the placement
<p>7 Flagler Putnam St. Johns Volusia</p>	<ul style="list-style-type: none"> • Recommend the Florida Administrative Code 65C-16 re-drafted to elaborate on the specific types of services to meet the requirements related to educational and mental health. • The medical/dental providers do not have an increase in payment for services through Medicaid. Thus, there are limited providers within the community who accept this form of insurance. Those who do accept Medicaid are overcapacity and must turn down new Medicaid clients. Recommend the legislature increase Medicaid fees for medical and dental providers thus increasing the capacity for Medicaid eligible children. • Children who are diagnosed with a disability defined by the Agency for Persons with Disability (APD) after the adoption is final are placed on a waiting list for Med Waiver with other children. However, only those children currently in out-of-home care are given priority if APD opens enrollment. Recommend the legislature change the rules governing APD enrollment to give priority to post adopted children as well. • There is no affordable respite care designated for adopted children. Most adoptive parents are unable to pay the cost for group homes and/or residential treatment. The demand is high and has created a strain, both financially and number of beds available, to meet the needs of these children through the Substance Abuse and Mental Health (SAMH) office. Thus, children are being removed from the family by the request of the parents and placed back into the dependency system. Recommend the legislature support funding residential treatment for adopted children through Medicaid and short term residential treatment should be more widely available to adopted children in crisis.

Circuit	State Level and/or Legislative Action Recommendations from the Circuits
9 Orange Osceola	<ul style="list-style-type: none"> An increase in non-recurring adoption expenses to help pay for travel for out of state or out of district families would help expand the number of families available to adopt. Current non-recurring adoption expenses are utilized primarily for legal fees. Increase the amount of time FDLE's in which FDLE's are considered current from 90 days to 6months or even a year, doing one every 90 days slows the process, is not effective and is costly. Local law enforcement checks 30 days prior to the adoption placement should be sufficient.
10 Hardee Highlands Polk	<ul style="list-style-type: none"> It is recommended that the Appeal process becomes more of a priority to achieve permanency more timely. Also, recommended that subsidy continues for children who are 18 and are full-time high school students for at least 1 year to meet educational goals and to be more supportive of the family.
11 Miami-Dade	<ul style="list-style-type: none"> Revise the adoption subsidy payment system to allow for adjustments to the subsidy both up and down to accommodate the needs of the adoptive family. Example: right now no consideration is give to the high cost of child care, particularly for children ages birth to five, which is covered through the Early Learning Coalition subsidizes until the adoption is finalized. Other states provide a higher subsidy for those years recognizing the tremendous expense this represents for adoptive families, particularly single parent adoptions. Once the child enters public school full time, the subsidy is reduced. Amend the Medicaid State Plan to allow payment for adoptive family counseling for the parents and other family members of children adopted through the dependency system. Funding for many of these initiatives that are common to several circuits would be best managed through grant writing and applications on the state level. Adoption subsidies should be extended past the 18th birthday if the student is actively attending high school until graduation or age 23. Adoption subsidies should continue with the adopted child and new guardian in the event of the death of the adoptive parent(s) without the requirement of a second adoption.
12 DeSoto Manatee Sarasota	<ul style="list-style-type: none"> Designation as a priority population for residential mental health services for adopted children. Extend assistance beyond 18th birthday to increase older teen adoptions Increase funding for post-placement services for adoptive families Review and revise Florida Statute to add additional safety nets and access to services for adoptive families
13 Hillsborough	<ul style="list-style-type: none"> The committee's recommendation to be considered by the legislature is to require the courts to submit pertinent data for analysis by the DCF Program Office.
14 Bay Calhoun Gulf Holmes Jackson Washington	<ul style="list-style-type: none"> To ensure accurate reporting of information related to actual adoption information specific to each Circuit a focus should be placed on data integrity and functioning in the Florida Safe Families Network System. To enhance adoption support a dedicated position should be developed within Circuit 14.
15 Palm Beach	<ul style="list-style-type: none"> The only recommendation is to allow for adoption support services to be funded out of the Mental Health Services Wrap funds. The ability to use these funds for this purpose will be valuable in building a comprehensive adoption support system.
16 Monroe	<ul style="list-style-type: none"> Revise the adoption subsidy payment system to allow for adjustments to the subsidy both up and down to accommodate the needs of the adoptive family. Example: right now no consideration is give to the high cost of child care, particularly for children ages birth to five, which is covered through the Early Learning Coalition subsidizes until the adoption is finalized. Other states provide a higher subsidy for those years recognizing the tremendous expense this represents for adoptive families, particularly single parent adoptions. Once the child enters public school full time, the subsidy is reduced. Amend the Medicaid State Plan to allow payment for adoptive family counseling for the parents and other family members of children adopted through the dependency system. Funding for many of these initiatives that are common to several circuits would be best managed through grant writing and applications on the state level. Adoption subsidies should be extended past the 18th birthday if the student is actively attending high school until graduation or age 23. Adoption subsidies should continue with the adopted child and new guardian in the event of the death of the adoptive parent(s) without the requirement of a second adoption.
17 Broward	<ul style="list-style-type: none"> Much like the very successful 'Explore Adoption' initiative from the Governor's office, the State can consider providing a statewide database that allows for meaningful analysis of responses to recruitment.
18 Brevard Seminole	<ul style="list-style-type: none"> Pass language that allows Lead Agencies to carry forward retained earnings from one year to the next to ensure a consistent program. This also ensures state funds can be used to augment shortfalls in MAS funding.

Circuit	State Level and/or Legislative Action Recommendations from the Circuits
<p>19 Indian River Martin St. Lucie Okeechobee</p>	<ul style="list-style-type: none"> • A legislative action should be presented in reference to the Federal Government eliminating the AFDC calculation in determining adoption assistance. The Fostering Connections and Increasing Adoptions Act of 2008 began a gradual elimination of the AFDC link, beginning on October 1, 2009. By 2018, regardless of the child's birthparent's income, all children adopted from foster care who meet the special needs definitions will be IV-E eligible. Between now and 2018, eligibility will be phased in by age: • At the Treasure Coast Legislative Summit held in 2009, it was discussed that following the first year of The Fostering Connections and Increasing Adoptions Act of 2008, a review of how it affected/benefited children in Circuit 19 could be conducted. • A study entitled, "<i>Raising Cut-Off: The Empirical Case for Extending Adoption and Guardianship Subsidies from Age 18 to 21</i>" was conducted through the American University in an effort to discover whether differences in cutoff ages for federal support are likely to dis-incentivize permanency. It compared the number adoptions from foster care in the states that extend adoption subsidies to age 21 to the number of adoption in states that choose not to extend the subsidies and found that states that extend subsidies create more adoptions for foster children than states that do not. Based on the information provided, we believe that legislative action would provide additional incentive to adoption of older children.
<p>20 Charlotte Collier Glades Hendry Lee</p>	<ul style="list-style-type: none"> • Develop a network of providers who will give adoptive families preferential treatment and have knowledge specific to adoption related issues. • Extended Medicaid benefits through the adoptive youths' 21st birthday. • An adoption subsidy which is the same amount as the foster care board rate. • Child care services (post finalization) for children up to school age. • More service providers who accept Medicaid, specifically dental and orthodontic providers. • Paid respite services for adoptive families.