

Chapter 6

NORMALCY

6-1. Purpose. This chapter describes the Department's policies and procedures regarding the concept of normalcy. It is the policy of the Department to fully support the efforts of caregivers, providers, and Lead Agencies to ensure that children in our care have the opportunity to fully participate in activities in their schools, neighborhoods, and communities.

6-2. Explanation of Reasonable and Prudent Parent Standard. In accordance with s. [39.4091](#), F.S., "reasonable and prudent parent standard" means the standard characterized by careful and sensible parental decisions that maintain the child's health, safety, and best interests while at the same time encouraging the child's emotional and developmental growth, that a caregiver shall use when determining whether to allow a child in out-of-home care to participate in extracurricular, enrichment, and social activities.

6-3. Normalcy Overview.

a. A child's right to live a healthy, normal childhood is paramount. The Youth in Foster Care Rights and Expectations brochure (<https://www.myflfamilies.com/sites/default/files/2022-12/10-28-Foster-Rights-and-Expectations.pdf>) is provided to children who are placed in out-of-home care.

b. A reasonable and prudent parent standard will be applied to decisions regarding a child's participation in normal childhood activities.

c. Out-of-home caregivers shall be supported in their decision making as outlined in this chapter.

d. Normalcy focuses on enabling opportunities for social development, recreation, extra-curricular, academic growth, and positive life experiences based on a child's desires and developmental, emotional, physical, and other needs. Caregivers are empowered to make decisions using a reasonable and prudent parent standard. Guidelines aimed at also increasing normalcy for caregivers are addressed in Chapter 7 and Chapter 8 of this operating procedure.

e. Decisions shall not contradict any existing court order or care precaution plan.

f. While caregivers have authority to make decisions about the normal activities of foster children in their care, the caregiver needs to consider known parental wishes and concerns in these decisions.

g. The assigned child welfare professional will make diligent efforts to keep the parent(s) and/or guardian informed and involved, including the resolution of differences between the caregiver and parent.

6-4. Overnight / Planned Activities and Outings.

a. The out-of-home caregiver must determine that the activity or outing is safe and appropriate in accordance with the reasonable and prudent parent standard.

b. Children shall be encouraged to participate in normal school, community, or social activities and outings such as employment, school field trips, dating, camping trips, and activities with friends, school, and church groups as appropriate for the child based upon a reasonable and prudent parent standard.

c. Background screening is not required for the child's participation in normal childhood activities and outings like sleepovers with friends, participation in school lock-ins, or team sports.

d. The caregiver may take children placed in their care on vacations and must inform the assigned child welfare professional in advance of the travel. Travel must be in accordance with any existing court orders.

e. The caregiver shall notify the assigned child welfare professional in advance of overnight stays exceeding three (3) nights. Examples of such stays include sleep away camps and school trips.

f. The assigned child welfare professional shall make efforts to accommodate planned activities for the child's participation by assisting in coordination with the family and court, particularly as related to scheduled visitation.

NOTE: See also Chapter 7 (Babysitting and Overnight Care) and Chapter 8 (Out of Town Travel / Vacation) of this operating procedure.

6-5. Social Media / Computer Usage / Cell Phones.

a. Children are permitted to participate in social media, computer usage, and have a cell phone as long as permission has been given by the caregiver.

b. Caregivers shall apply the reasonable and prudent parent standard to decision-making regarding social media usage. Caregivers should be sensitive to the risks of the various forms of social media.

c. Children have the right to self-disclose information about themselves on social media. Caregivers should educate children regarding the potential impact and ramifications of disclosures of a private and personal nature that may put themselves, family members, friends, and acquaintances at risk for bullying, cyberstalking, and emotional or physical harm.

d. Caregivers are permitted to post pictures on social media including children placed in their care. Caregivers may not use the child's last name or references that may identify the child as residing in out-of-home care.

6-6. Driving.

a. Caregivers and child welfare professionals shall assist children in finding and enrolling in a driver's education program.

b. Support of the child's efforts to learn how to drive a car, obtain a learner's permit and/or driver's license shall be based upon the child's age, maturity, and access to insurance.

c. The Keys to Independence program is a resource available to assist caregivers, youth, and child welfare professionals to maximize children's access to learners' permits, driving education, drivers' licenses, and auto insurance. Information related to the Keys to Independence program can be found on their website at: keystoindependencefl.com

6-7. Right to Privacy.

a. All youth in care have the right to be given a space that is private and to store personal belongings safely and securely.

b. Proper care should be taken when closed circuit television (CCTV) or video camera surveillance is used to ensure its use is appropriate and does not violate a youth's right to privacy. It is reasonable to expect that a youth could fully disrobe in private, without concern for being recorded or viewed by another, in a location such as a bedroom or bathroom or any other area deemed as private by the child or caregiver.

c. Cameras placed in bedrooms, bathrooms, or toileting areas are prohibited.

(1) Baby monitors, to include those with cameras, are permitted in bedrooms when used for the age and/or developmental stage the device is intended for based on the manufacturer's instructions.

(2) Baby monitors with cameras may be placed in the bedroom of the child who presents with a severe medical condition when the Lead Agency documents the approval of an assessment that was completed by the child welfare professional in conjunction with the caregiver.

(3) The approval and assessment shall be documented in the Comprehensive Child Welfare Information System.

(4) When a baby monitor with a camera is used in a bedroom, at no time shall the monitor face in a direction that would violate the child's privacy. This shall include, but is not limited to, being able to view the child during diaper changing or bathing.

d. Surveillance equipment is permitted and anyone affected by the use of surveillance equipment should be made aware of its existence by the clear and obvious manner in which it is installed or by a written notice conspicuously posted on the premises.

e. Prior to the use of any cameras, the department should be informed where any cameras will be positioned along with a diagram showing their position, why they are in use and when, who is responsible for the camera(s), and what happens to the footage. The surveillance system is not to be used in place of direct supervision by a staff member or caregiver. The information should be kept securely, and the information recorded by the system should only be used for the express purpose for which it is intended.

f. Surveillance systems should have the capacity to store footage for at least 14 days before rewriting or deleting. Video footage recorded on an external disc, USB thumb drive, or video home system (VHS) shall always be locked and secured and only accessed by authorized staff. This includes the transmission of footage digitally.

g. The child welfare professional or Department licensing staff member shall work with the caregiver or residential care provider to create an agreement which discusses prudent use of any video surveillance, including the use of baby monitors for children older than the device's recommended age.

h. CCTV footage is subject to review by the Department and access to view footage must be granted within 24 hours upon request.

NOTE: See Chapter 4 (Child Placement Agreements for Care Precautions and Behavior Management Plans) of this operating procedure regarding privacy for care precaution plans.