



Senate

General Assembly

File No. 555

January Session, 2005

Substitute Senate Bill No. 1037

Senate, April 28, 2005

The Committee on Judiciary reported through SEN. MCDONALD of the 27th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

AN ACT CONCERNING REVISION OF CERTAIN DEPARTMENT OF CHILDREN AND FAMILIES STATUTES.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 17a-3 of the general statutes is repealed and the
2 following is substituted in lieu thereof (*Effective October 1, 2005*):

3 (a) The department shall plan, create, develop, operate or arrange
4 for, administer and evaluate a comprehensive and integrated
5 state-wide program of services, including preventive services, for
6 children and youth whose behavior does not conform to the law or to
7 acceptable community standards, or who are mentally ill, including
8 deaf and hearing impaired children and youth who are mentally ill,
9 emotionally disturbed, substance abusers, delinquent, abused,
10 neglected or uncared for, including all children and youth who are or
11 may be committed to it by any court, and all children and youth
12 voluntarily admitted to the department for services of any kind.
13 Services shall not be denied to any such child or youth solely because
14 of other complicating or multiple disabilities. The department shall

15 work in cooperation with other child-serving agencies and
16 organizations to provide or arrange for preventive programs,
17 including but not limited to teenage pregnancy and youth suicide
18 prevention, for children and youth and their families. The program
19 shall provide services and placements that are clinically indicated and
20 appropriate to the needs of the child or youth. In furtherance of this
21 purpose, the department shall: [(a)] (1) Maintain the Connecticut
22 Juvenile Training School and other appropriate facilities exclusively
23 for delinquents; [(b)] (2) develop a comprehensive program for
24 prevention of problems of children and youth and provide a flexible,
25 innovative and effective program for the placement, care and
26 treatment of children and youth committed by any court to the
27 department, transferred to the department by other departments, or
28 voluntarily admitted to the department; [(c)] (3) provide appropriate
29 services to families of children and youth as needed to achieve the
30 purposes of sections 17a-1 to 17a-26, inclusive, 17a-28 to 17a-49,
31 inclusive, and 17a-51; [(d)] (4) establish incentive paid work programs
32 for children and youth under the care of the department and the rates
33 to be paid such children and youth for work done in such programs
34 and may provide allowances to children and youth in [his] the custody
35 of the department; [(e)] (5) be responsible to collect, interpret and
36 publish statistics relating to children and youth within the department;
37 [(f)] (6) conduct studies of any program, service or facility developed,
38 operated, contracted for or supported by the department in order to
39 evaluate its effectiveness; [(g)] (7) establish staff development and
40 other training and educational programs designed to improve the
41 quality of departmental services and programs, [provided no social
42 worker trainee shall be assigned a case load prior to completing
43 training,] and may establish educational or training programs for
44 children, youth, parents or other interested persons on any matter
45 related to the promotion of the well-being of children, or the
46 prevention of mental illness, emotional disturbance, delinquency and
47 other disabilities in children and youth; [(h)] (8) develop and
48 implement aftercare and follow-up services appropriate to the needs of
49 any child or youth under [his] the care of the department; [(i)] (9)

50 establish a case audit unit to monitor each [region's] area office's
51 compliance with regulations and procedures; [(j)] (10) develop and
52 maintain a database listing available community service programs
53 funded by the department; [(k)] (11) provide outreach and assistance
54 to persons caring for children whose parents are unable to do so by
55 informing such persons of programs and benefits for which they may
56 be eligible; and [(l)] (12) collect data sufficient to identify the housing
57 needs of children served by the department and share such data with
58 the Department of Economic and Community Development. [; (m)]

59 (b) The department shall prepare and submit biennially to the
60 General Assembly a five-year master plan. The master plan shall
61 include, but not be limited to: (1) The long-range goals and the current
62 level of attainment of such goals of the department; (2) a detailed
63 description of the types and amounts of services presently provided to
64 the department's clients; (3) a detailed forecast of the service needs of
65 current and projected target populations; (4) detailed cost projections
66 for alternate means of meeting projected needs; (5) funding priorities
67 for each of the five years included in the plan and specific plans
68 indicating how the funds are to be used; (6) a written plan for the
69 prevention of child abuse and neglect; (7) a comprehensive mental
70 health plan for children and adolescents, including children with
71 complicating or multiple disabilities; (8) a comprehensive plan for
72 children and youth who are substance abusers, developed in
73 conjunction with the Department of Mental Health and Addiction
74 Services pursuant to the provisions of sections 19a-2a and 19a-7; and
75 (9) an overall assessment of the adequacy of children's services in
76 Connecticut. The plan shall be prepared within existing funds
77 appropriated to the department. [; and (n) prepare a plan to keep
78 children who are convicted as delinquent and will be committed to the
79 Department of Children and Families and placed in the Connecticut
80 Juvenile Training School in such facility for at least one year after their
81 referral to the department, which plan shall include provisions for
82 development of a comprehensive approach to juvenile rehabilitation.]

83 Sec. 2. Section 17a-9 of the general statutes is repealed and the

84 following is substituted in lieu thereof (*Effective from passage*):

85 (a) The commissioner shall appoint, after consultation with the state
86 advisory council, and may remove in a like manner, two deputy
87 commissioners who shall be in the unclassified service. The deputy
88 commissioner for program services shall be a clinically competent
89 professional person experienced in one or more fields of children's
90 services and in the administration of such services, and shall be
91 responsible for the supervision of all clinical treatment and program
92 services of the department. The deputy commissioner of
93 administrative services shall have experience in business or
94 institutional administration and shall be responsible for the
95 organizational and general administrative services of the department.

96 [(b) The commissioner shall appoint, after consultation with the
97 state advisory council, and may remove in a like manner, six regional
98 administrators who shall be in the unclassified service. Each regional
99 administrator shall have skill and experience in the field of children's
100 services and in the administration of such services. Each regional
101 administrator shall be subject to the direction of the commissioner and
102 shall be responsible for the operation and administration of services
103 provided or funded by the department in the regions created by the
104 commissioner pursuant to subsection (a) of section 17a-30.]

105 [(c)] (b) The commissioner shall appoint, in accordance with chapter
106 67, after consultation with the state advisory council, and may remove
107 in like manner, such directors as [he] the commissioner deems
108 necessary, provided any director's title or duties may be changed as
109 the commissioner deems necessary after consultation with the state
110 advisory council.

111 [(d)] (c) The commissioner shall, in accordance with chapter 67 and
112 after consultation with the state advisory council, appoint the
113 administrative heads of all of the institutions and facilities transferred
114 to the department and such other institutions and facilities as now are
115 or hereafter may be established by or transferred to the department.
116 Such administrative heads shall have skill and experience in the

117 administration of children's services and shall manage their
118 institutions and facilities in accordance with the regulations and orders
119 of the commissioner.

120 Sec. 3. Section 17a-11 of the general statutes is repealed and the
121 following is substituted in lieu thereof (*Effective October 1, 2005*):

122 (a) The commissioner may, in the commissioner's discretion, admit
123 to the department on a voluntary basis any child or youth who, in the
124 commissioner's opinion, could benefit from any of the services offered
125 or administered by, or under contract with, or otherwise available to,
126 the department. Application for voluntary admission shall be made in
127 writing by the parent or guardian of a child under fourteen years of
128 age or by such person himself or herself if he or she is a child fourteen
129 years of age or older or a youth.

130 (b) A child or youth voluntarily admitted to the department shall be
131 deemed to be within the care of the commissioner until such admission
132 is terminated. The commissioner shall terminate the admission of any
133 child or youth voluntarily admitted to the department within ten days
134 after receipt of a written request for termination from a parent or
135 guardian of any child under fourteen years of age or from a child if
136 such child is fourteen years of age or older, or youth, unless prior to
137 the expiration of that time the commissioner has sought and received
138 from the Superior Court an order of temporary custody as provided by
139 law. The commissioner may terminate the admission of any child or
140 youth voluntarily admitted to the department after giving reasonable
141 notice in writing to the parent or guardian of any child under fourteen
142 years of age and to a child fourteen years of age or older, and to any
143 youth. Any child or youth admitted voluntarily to the department may
144 be placed in, or transferred to, any resource, facility or institution
145 within the department or available to the commissioner except the
146 Connecticut Juvenile Training School, provided the commissioner shall
147 give written notice to such child or youth and to the parent or
148 guardian of the child of the commissioner's intention to make a
149 transfer at least ten days prior to any actual transfer, unless written

150 notice is waived by those entitled to receive it, or unless an emergency
151 commitment of such child or youth is made pursuant to section 17a-
152 502.

153 (c) Not more than one hundred twenty days after admitting a child
154 or youth on a voluntary basis, the department shall petition the
155 probate court for the district in which a parent or guardian of the child
156 or youth resides for a determination as to whether continuation in care
157 is in the child's or youth's best interest and, if so, whether there is an
158 appropriate case service or permanency plan. A case service plan shall
159 be required for all children and youth receiving services voluntarily
160 from the department who are not in an out-of-home placement. A
161 permanency plan shall be required for all children and youth
162 voluntarily admitted to the department and placed by the department
163 in a foster home licensed pursuant to section 17a-114 or a facility
164 licensed pursuant to section 17a-145 or 17a-154. Upon receipt of such
165 application, the court shall set a time and place for hearing to be held
166 within thirty days of receipt of the application, unless continued by the
167 court for cause shown. The court shall order notice of the hearing to be
168 given by regular mail at least five days prior to the hearing to the
169 Commissioner of Children and Families, and by certified mail, return
170 receipt requested, at least five days prior to the hearing to the parents
171 or guardian of the child and the minor, if over twelve years of age. If
172 the whereabouts of the parent or guardian are unknown, or if delivery
173 cannot reasonably be effected, then notice shall be ordered to be given
174 by publication. In making its determination, the court shall consider
175 the items specified in subsection (d) of this section. The court shall
176 possess continuing jurisdiction in proceedings under this section.

177 (d) (1) Ten months after admitting a child or youth on a voluntary
178 basis and annually thereafter if the child or youth remains in the
179 custody of the commissioner and remains placed in a foster home
180 licensed pursuant to section 17a-114 or a facility licensed pursuant to
181 section 17a-145 or 17a-154, the commissioner shall file a motion for
182 review of a permanency plan. A hearing on such motion shall be held
183 not later than thirty days after the filing of such motion. The court shall

184 provide notice to the child or youth and such child's or youth's parent
185 or guardian of the time and place of the hearing on such motion not
186 less than ten days prior to the date of such hearing.

187 (2) At a permanency hearing held in accordance with the provisions
188 of subdivision (1) of this subsection, the court shall approve a
189 permanency plan that is in the best interests of the child or youth and
190 takes into consideration the child's or youth's need for permanency.
191 The health and safety of the child or youth shall be of paramount
192 concern in formulating such plan. At such hearing, the court shall
193 consider among other things: (A) The appropriateness of the
194 department's plan for service to the child or youth and his or her
195 family; (B) the treatment and support services that have been offered
196 and provided to the child or youth to strengthen and reunite the
197 family; (C) if return home is not likely for the child or youth, the efforts
198 that have been made or should be made to evaluate and plan for other
199 modes of care; and (D) any further efforts which have been or will be
200 made to promote the best interests of the child or youth.

201 (3) The permanency plan pursuant to subdivision (2) of this
202 subsection may include the goal of (A) placement of the child or youth
203 with the parent or guardian, (B) transfer of guardianship, (C) long-
204 term foster care with a relative licensed as a foster parent or certified as
205 a relative caregiver, (D) termination of parental rights and adoption, or
206 (E) such other planned permanent living arrangement ordered by the
207 court provided the commissioner has documented a compelling reason
208 why it would not be in the best interest of the child or youth for the
209 permanency plan to include the goals in subparagraphs (A) to (D),
210 inclusive, of this subdivision. Such other planned permanent living
211 arrangement may include, but not be limited to, placement of a child
212 or youth in an independent living program or long-term foster care
213 with an identified foster parent.

214 (4) At a permanency hearing, the court shall review the status of the
215 child or youth and the progress being made to implement the
216 permanency plan, determine a timetable for attaining the permanency

217 prescribed by the plan and determine whether the commissioner has
218 made reasonable efforts to achieve the permanency plan. At the
219 conclusion of the hearing, the court may: (A) Direct that the services
220 being provided, or the placement of the child or youth and
221 reunification efforts, be continued if the court, after hearing,
222 determines that continuation of the child or youth in services or
223 placement is in the child's or youth's best interests, or (B) direct that the
224 child's or youth's services or placement be modified to reflect the
225 child's or youth's best interest.

226 (e) The commissioner shall adopt regulations in accordance with
227 chapter 54 describing the documentation required for voluntary
228 admission and for informal administrative case review, upon request,
229 of any denial of an application for voluntary admission.

230 (f) Any person aggrieved by a decision of the commissioner denying
231 voluntary services may appeal such decision through an
232 administrative hearing held pursuant to chapter 54.

233 (g) Notwithstanding any provision of sections 17a-1 to 17a-26,
234 inclusive, and 17a-28 to 17a-49, inclusive, to the contrary, any person
235 already under the care and supervision of the Commissioner of
236 Children and Families who has passed such person's eighteenth
237 birthday but has not yet reached such person's twenty-first birthday,
238 may be permitted to remain voluntarily under the supervision of the
239 commissioner, provided said commissioner, in said commissioner's
240 discretion, determines that such person would benefit from further
241 care and support from the Department of Children and Families.

242 (h) Upon motion of any interested party in a Probate Court
243 proceeding under this section, the probate court of record may transfer
244 the file for cause shown to a probate court for a district other than the
245 district in which the initial or permanency hearing was held. The file
246 shall be transferred by the probate court of record making copies of all
247 recorded documents in the court file, certifying each of them, and
248 delivering the certified copies to the probate court to which the matter
249 is transferred.

250 Sec. 4. Section 17a-22b of the general statutes is repealed and the
251 following is substituted in lieu thereof (*Effective from passage*):

252 (a) Each community collaborative shall, within available
253 appropriations, (1) complete a local needs assessment which shall
254 include objectives and performance measures, (2) specify the number
255 of children and youth requiring behavioral health services, (3) specify
256 the number of children and youth actually receiving community-based
257 and residential services and the type and frequency of such services,
258 and (4) complete an annual self-evaluation process and a review of
259 discharge summaries. Each community collaborative shall submit its
260 local needs assessment to the Commissioner of Children and Families
261 and the Commissioner of Social Services.

262 (b) The [regional] area offices of the Department of Children and
263 Families shall contract with lead service agencies, within available
264 appropriations, to coordinate the care of all children and youth
265 enrolled in Connecticut Community KidCare residing within their
266 designated catchment areas, including children and youth with
267 complex behavioral health service needs. The lead service agencies
268 shall employ or subcontract for the employment of care coordinators to
269 assist families in establishing and implementing individual service
270 plans for children and youth with complex behavioral health service
271 needs and to improve clinical outcomes and cost effectiveness. Parents
272 shall be afforded a choice of contracted providers for authorized
273 services.

274 (c) Each community collaborative may establish the number of
275 members and the type of representatives to ensure that the
276 membership of such collaborative is appropriately balanced. The chief
277 elected officers of municipalities served by a community collaborative
278 may designate a member to serve as a representative of the chief
279 elected officials. A community collaborative, at a minimum, shall
280 consist of representatives from the local or regional board of education,
281 special education program, youth services bureau, local departments
282 of social services and public health, representatives from private

283 organizations serving children and youth and a substantial number of
284 parents of children and youth with behavioral health needs. A
285 community collaborative shall participate in the [regional] area
286 advisory councils established under section 17a-30, provide outreach
287 to community resources, coordinate behavioral health services by
288 forming, with the consent of the family, child specific teams for
289 children and youth with complex behavioral health service needs,
290 conduct community need assessments to identify service gaps and
291 service barriers, identify priority investment areas for the state and
292 lead service agencies and provide public education and support. A
293 community collaborative shall establish a governance structure,
294 determine membership and identify or establish a fiscal agent.

295 (d) The Commissioner of Children and Families and the
296 Commissioner of Social Services shall, within available appropriations,
297 provide or arrange for the administrative services necessary to operate
298 Connecticut Community KidCare.

299 Sec. 5. Section 17a-22d of the general statutes is repealed and the
300 following is substituted in lieu thereof (*Effective from passage*):

301 The Commissioner of Children and Families may, within available
302 appropriations, provide financial assistance for the establishment of an
303 organization, with local chapters in each [region] area served by the
304 Department of Children and Families, that shall provide family-to-
305 family support and family advocates for children, youth and their
306 families, and when requested by the family, assist the family with the
307 individual service plan process and otherwise encourage active family
308 participation in treatment and Connecticut Community KidCare
309 planning. Such organization shall assure that families have input into
310 the development and implementation of their individual service plans,
311 including those established pursuant to section 17a-127, and into
312 policy and planning for, and the implementation and evaluation of,
313 Connecticut Community KidCare.

314 Sec. 6. Section 17a-22e of the general statutes is repealed and the
315 following is substituted in lieu thereof (*Effective from passage*):

316 On and after October 1, 2002, the Commissioners of Children and
317 Families and Social Services shall submit quarterly reports concerning
318 the implementation of Connecticut Community KidCare to the joint
319 standing committees of the General Assembly having cognizance of
320 matters relating to human services, public health and education. Not
321 later than January 1, 2004, and annually thereafter, the commissioners
322 shall submit a report to said joint standing committees concerning (1)
323 the number, ages, sex and race of children and youth in out-of-state
324 residential facilities, (2) the number, ages, sex and race of children and
325 youth in in-state residential facilities, (3) the number, ages, sex and
326 race of children and youth in nonresidential treatment, (4) annual
327 public funds expended for out-of-state placements, the sources of such
328 funds and the average cost per child and youth of such out-of-state
329 placement, (5) annual public funds expended for in-state residential
330 placements, the sources of such funds and the average cost per child
331 and youth of such in-state residential placement, (6) annual public
332 funds expended for nonresidential treatment by type of service
333 provided, the sources of such funds and the average cost per child and
334 youth of such nonresidential treatment, (7) the average length of stay
335 in out-of-state and in-state placements, (8) the number, ages, sex and
336 race of children and youth placed in out-of-home treatment compared
337 to the total number of children and youth in each [region] service
338 delivery area of the state, and (9) expenditures made during each
339 reporting period.

340 Sec. 7. Section 17a-30 of the general statutes is repealed and the
341 following is substituted in lieu thereof (*Effective from passage*):

342 (a) The commissioner shall create [regions consistent with the
343 subdistricts established by the council on human services pursuant to
344 subsection (a) of section 4-60n of the general statutes, revision of 1958,
345 revised to 1975,] distinct service areas and shall create in each such
346 [region a regional] area, an area advisory council to advise the
347 commissioner and the area director on the development and delivery
348 of services of the department in that [region] area and to facilitate the
349 coordination of services for children, youth and their families in the

350 [region] area.

351 (b) Each [regional] area advisory council shall consist of no more
352 than twenty-one persons, a majority of whom shall be persons who
353 earn less than fifty per cent of their salaries from the provision of
354 services to children, youth and their families, and the balance
355 representative of private providers of human services throughout the
356 [region] area. The commissioner, or the commissioner's designee, shall
357 appoint one-third of the representatives of each group for a term of
358 three years, one-third for a term of two years, and one-third for a term
359 of one year. No person may serve more than two consecutive three-
360 year terms. All subsequent appointments to replace those whose terms
361 have expired shall be for a term of three years. No person may serve
362 on more than one area advisory council at a time. The area director
363 shall make a good faith effort to ensure that, to the extent possible, the
364 membership is qualified and closely reflects the gender and racial
365 diversity of the area. All members shall serve without compensation.
366 Each [regional] area advisory council shall elect [a chairman and a
367 vice-chairman to act in the chairman's absence] two cochairpersons.
368 Each [regional] area advisory council shall meet at least quarterly, or
369 more often at the call of the [chairman] cochairpersons or a majority of
370 the council members. The area director or a designee of the area
371 director shall be an ex-officio member of the council without the right
372 to vote. Any member who fails to attend three consecutive meetings or
373 fifty per cent of all meetings during any calendar year shall be deemed
374 to have resigned. A majority of the members in office, but not less than
375 six members shall constitute a quorum.

376 Sec. 8. Section 17a-47 of the general statutes is repealed and the
377 following is substituted in lieu thereof (*Effective from passage*):

378 There shall be a legal division which shall consist of attorneys-at-
379 law assigned to [each regional office of the department, who shall be
380 assistant attorneys general on the staff and under the direct
381 supervision of the Attorney General. Said division] the Department of
382 Children and Families, who shall be on the staff and under the

383 supervision of the Commissioner of Children and Families. There shall
384 also be assistant attorneys general on the staff and under the direct
385 supervision of the Attorney General. Such assistant attorneys general
386 shall diligently prosecute petitions of neglect giving priority to
387 petitions which allege child abuse as the grounds of neglect. [The
388 Department of Children and Families shall cooperate with such
389 attorneys in preparation of their cases and shall render such assistance
390 to them] Such assistant attorneys general and the department shall
391 cooperate in preparation of such cases as shall be necessary to protect
392 the safety and best interest of the child named in the petition.

393 Sec. 9. Section 17a-55 of the general statutes is repealed and the
394 following is substituted in lieu thereof (*Effective from passage*):

395 The Commissioner of Children and Families shall implement a
396 system of awarding grants to community service programs whereby
397 such programs are funded proportionate to their effectiveness in
398 treating clients of the department. The evaluation of a program shall be
399 based on (1) an analysis of program outcomes; (2) an assessment of
400 [regional] needs for treatment services in each service delivery area;
401 and (3) the availability of the program to clients of the department. The
402 Department of Children and Families shall collect, maintain and
403 analyze the data to be used in the evaluation process on an ongoing
404 basis. The commissioner shall impose a probationary period on a
405 program found to be ineffective and shall propose requirements for the
406 improvement of such a program. The commissioner shall determine
407 the length of the probationary period and shall cease to fund a
408 program which has not met the proposed requirements for
409 improvement within such period.

410 Sec. 10. Section 17a-56 of the general statutes is repealed and the
411 following is substituted in lieu thereof (*Effective from passage*):

412 (a) The [Commissioner of Children and Families] Children's Trust
413 Fund Council shall establish the structure for a state-wide system for
414 Healthy Families Connecticut, which is based on the national Healthy
415 Families model, and which is intended to demonstrate the benefits of

416 preventive services by significantly reducing the abuse and neglect of
417 infants and by enhancing parent-child relationships through hospital-
418 based assessment with home outreach follow-up on infants and their
419 families within families identified as high risk.

420 (b) Within available appropriations, the [Commissioner of Children
421 and Families] Children's Trust Fund Council shall establish healthy
422 families pilot programs in geographic areas which are not currently
423 served by prevention outreach services and which have a high rate of
424 confirmed child abuse and neglect, a high rate of infant mortality and
425 low birthweight infants, or a high rate of teen pregnancy. [On and after
426 July 1, 1997, the commissioner shall establish three additional pilot
427 sites. Services shall be provided on a voluntary basis to families
428 identified through the assessment process as having a high risk of
429 child abuse or neglect.]

430 (c) The healthy families pilot programs shall: (1) Provide a
431 comprehensive risk assessment of all newborn children and their
432 families; (2) identify families that would benefit most from the
433 program; (3) provide and coordinate support services including, but
434 not limited to, community-based home visiting intervention services,
435 counseling, child care and primary health care services; and (4)
436 provide follow-up and support services until the child attains the age
437 of five.

438 (d) The [Commissioner of Children and Families] Children's Trust
439 Fund Council shall: (1) Develop the comprehensive risk assessment to
440 be used by the [pilot] programs; (2) develop the training program,
441 standards, and protocols for the [pilot] programs; and (3) develop,
442 issue and evaluate requests for proposals to procure the services
443 required by this section. In evaluating the proposals, the
444 [commissioner] Children's Trust Fund Council shall take into
445 consideration the most effective and consistent service delivery system
446 allowing for the continuation of current public and private programs.

447 (e) The [Commissioner of Children and Families] Children's Trust
448 Fund Council shall establish a data system to enable the [pilot]

449 programs to document the following information in a standard
450 manner: (1) The level of screening and assessment; (2) profiles of risk
451 and family demographics; (3) the incidence of child abuse and neglect;
452 (4) rates of child development; and (5) any other information the
453 [commissioner] Children's Trust Fund Council deems appropriate.

454 (f) The [Commissioner of Children and Families] Children's Trust
455 Fund Council shall report, in accordance with section 11-4a, to the
456 General Assembly on the establishment, implementation and progress
457 of Healthy Families Connecticut, on January first [and July first,] of
458 each year. [The first report shall be due on January 1, 1996.]

459 Sec. 11. Subsection (b) of section 17a-79 of the general statutes is
460 repealed and the following is substituted in lieu thereof (*Effective*
461 *October 1, 2005*):

462 (b) No child in the custody of the Commissioner of Children and
463 Families shall be admitted for diagnosis or treatment except in
464 accordance with sections 17a-76 to 17a-78, inclusive, unless (1) the
465 commissioner requests such admission, (2) legal counsel appointed by
466 the [court] superior court for juvenile matters or court of probate in
467 accordance with section 17a-76 agrees, in writing, to such admission,
468 and (3) the child, if fourteen years of age or over consents to such
469 admission. The parents or guardian of the person of such child, if any,
470 shall be notified within five days of such admission that such child has
471 been hospitalized under the provisions of this section. If the
472 whereabouts of such parents or guardian of the person is unknown,
473 then the nearest relative of such child shall be notified. In the event
474 either parent or the guardian of the person of the child requests in
475 writing the release of such child, the hospital shall release such child,
476 unless the Commissioner of Children and Families commences
477 commitment proceedings in accordance with sections 17a-76 and 17a-
478 77. The hospital may detain the child for five business days after
479 receipt of the written request in order to allow an application to be
480 filed. If an application is filed, hospitalization shall be continued for an
481 additional period of time to allow the application to be heard, but in no

482 event shall hospitalization continue for more than fifteen days, or
483 twenty-five days, if the matter has been transferred to the Superior
484 Court, beyond the receipt of such application by the court.

485 Sec. 12. Subsection (b) of section 17a-114 of the general statutes is
486 repealed and the following is substituted in lieu thereof (*Effective from*
487 *passage*):

488 (b) (1) No child in the custody of the Commissioner of Children and
489 Families shall be placed with any person, unless such person is
490 licensed for that purpose by the department or the Department of
491 Mental Retardation pursuant to the provisions of section 17a-227, or
492 such person's home is approved by a child placing agency licensed by
493 the commissioner pursuant to section 17a-149. Any person licensed by
494 the department may be a prospective adoptive parent. The
495 commissioner shall adopt regulations, in accordance with the
496 provisions of chapter 54, to establish the licensing procedures and
497 standards.

498 (2) The commissioner shall require each applicant for licensure
499 pursuant to this section and any person sixteen years of age or older
500 living in the household of such applicant to submit to state and
501 national criminal history records checks prior to issuing a license to
502 such applicant to accept placement of a child. Such criminal history
503 records checks shall be conducted in accordance with section 29-17a.
504 The commissioner shall also check the state child abuse registry
505 established pursuant to section 17a-101k for the name of such
506 applicant and for the name of any person sixteen years of age or older
507 living in the household of such applicant for perpetrator information.

508 Sec. 13. Section 17a-145 of the general statutes is repealed and the
509 following is substituted in lieu thereof (*Effective October 1, 2005*):

510 No person or entity shall care for or board a child without a license
511 obtained from the Commissioner of Children and Families, except: (1)
512 When a child has been placed by a person or entity holding a license
513 from the commissioner; (2) any residential educational institution

514 exempted by the state Board of Education under the provisions of
515 section 17a-152; [or] (3) residential facilities licensed by the Department
516 of Mental Retardation pursuant to section 17a-227; or (4) facilities
517 providing child day care services, as defined in section 19a-77. The
518 person or entity seeking a child-care facility license shall file with the
519 commissioner an application for a license, in such form as the
520 commissioner furnishes, stating the location where it is proposed to
521 care for such child, the number of children to be cared for, in the case
522 of a corporation, the purpose of the corporation and the names of its
523 chief officers and of the actual person responsible for the child. The
524 Commissioner of Children and Families is authorized to fix the
525 maximum number of children to be boarded and cared for in any such
526 home or institution or by any person or entity licensed by the
527 commissioner. Each person or entity holding a license under the
528 provisions of this section shall file annually, with the commissioner, a
529 report stating the number of children received and removed during
530 the year, the number of deaths and the causes of death, the average
531 cost of support per capita and such other data as [he] the commissioner
532 may prescribe.

533 Sec. 14. Section 20-14i of the general statutes is repealed and the
534 following is substituted in lieu thereof (*Effective October 1, 2005*):

535 Any provisions to the contrary notwithstanding, chapter 378 shall
536 not prohibit the administration of medication to persons attending day
537 programs, or residing in residential facilities, under the jurisdiction of
538 the Departments of Children and Families, Correction, Mental
539 Retardation and Mental Health and Addiction Services, or being
540 detained in juvenile detention centers or residing in residential
541 facilities dually licensed by the Department of Children and Families
542 and the Department of Public Health, when such medication is
543 administered by trained persons, pursuant to the written order of a
544 physician licensed under this chapter, a dentist licensed under chapter
545 379, an advanced practice registered nurse licensed to prescribe in
546 accordance with section 20-94a or a physician assistant licensed to
547 prescribe in accordance with section 20-12d, authorized to prescribe

The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either House thereof for any purpose:

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect
Departments of Children and Families, Mental Retardation; Office of the Attorney General	GF - None

Note: GF=General Fund

Municipal Impact: None

Explanation

This bill makes various changes to statute concerning the Department of Children and Families.

Section 1 removes a provision of current law that prohibits the assignment of cases to social worker trainees during their training period. This conforms to current practice, as social worker trainees are assigned a limited number of cases under supervision during training.

It also removes a requirement that a plan regarding committed delinquents placed at the Connecticut Juvenile Training School (CJTS) be developed. This mandate was met by a Critical Response Team Report issued by the executive branch on January 1, 2000.

Sections 2, 4 - 7 and 9 make changes that conform to the agency's present operation of fourteen area offices. Other provisions in these sections are technical in nature or make policy changes that result in no fiscal impact.

Section 3 clarifies that periodic permanency plan reviews be done for children served by the Voluntary Services program in only those cases in which the child resides in a foster home or licensed residential facility. This is not anticipated to result in a fiscal impact.

Section 8 conforms statute to the current responsibilities of the DCF's Legal Division and the Child Protection Unit of the Office of the Attorney General and results in no fiscal impact.

Section 10 transfers responsibility for the Nurturing Families Network program (formerly known as Healthy Families Connecticut) from the DCF to the Council to Administer the Children's Trust Fund. This conforms to current practice. Additionally, certain obsolete statutory references are removed. No fiscal impact is associated with these changes.

Section 11 makes a technical change and has no associated fiscal impact.

Sections 12 and 13 conform statute to the department's current practice of placing children in facilities licensed by the Department of Mental Retardation (DMR) or homes approved by licensed child placing agencies. This results in no associated fiscal impact for either the DCF or the DMR.

Section 14 clarifies law regarding medication administration protocols to be followed by residential facilities by stating that they are applicable to residential facilities dually licensed by the DCF and the Department of Public Health. This results in no fiscal impact.

Section 15 eliminates a Family Violence Coordinating Council and an Out of Home Placement Advisory Council. No fiscal impact is anticipated to result, as both groups have been inactive in the last few years.

OLR Bill Analysis

sSB 1037

AN ACT CONCERNING REVISION OF CERTAIN DEPARTMENT OF CHILDREN AND FAMILIES STATUTES**SUMMARY:**

This bill makes numerous changes in statutes applicable to the Department of Children and Families (DCF). It:

1. replaces DCF's six regions with an unspecified number of area offices and makes personnel, advisory council, and conforming changes;
2. changes the manner in which DCF and the attorney general prosecute abuse and neglect cases, and adds protecting the safety of abused and neglected children, rather than their best interests only, as a goal of abuse and neglect prosecutions;
3. transfers from DCF to the Children's Trust Fund Council responsibility for operating the Health Families Connecticut (re-named the Nurturing Families Network) program statewide;
4. eliminates or simplifies the agency's obligation to prepare plans for children in certain circumstances;
5. allows probate court-appointed attorneys to consent to their minor client's voluntary commitment for mental health treatment;
6. makes minor changes concerning child placement facilities;
7. allows DCF to assign cases to social work trainees; and
8. eliminates the Family Violence Coordinating and Out of Home Placements Advisory councils.

EFFECTIVE DATE: October 1, 2005 unless otherwise specified.

ELIMINATION OF REGIONAL OFFICES (§ 2, 4, 5, 6, AND 7)

The bill eliminates DCF's six regional offices and the unclassified regional administrator positions associated with them. It replaces them with service area offices, headed by area directors who are in the classified service.

Regional Advisory Councils

In addition to replacing the Regional Advisory councils with Area Advisory councils, the bill exempts council appointments from the statute requiring appointing authorities to consider the state's gender and racial diversity in selecting appointees. Instead, it requires the DCF commissioner or her designee, who appoints members, to make a good faith effort to ensure that members are qualified and closely reflect the council area's gender and racial diversity.

It permits the DCF commissioner's designee to appoint council members, limits their membership to two consecutive three-year terms, and prohibits members serving simultaneously on more than one council. It also replaces the current council chairman and vice chairman positions with co-chairmen and makes the area director an ex-officio member without voting privileges.

EFFECTIVE DATE: Upon passage

COORDINATING LEGAL EFFORTS BETWEEN DCF ATTORNEYS AND ASSISTANT ATTORNEYS GENERAL (§ 8)

The bill makes DCF, rather than the attorney general, the direct supervisor of agency staff attorneys. The attorney general retains supervision over his assistant attorneys general who prosecute abuse and neglect petitions.

It requires DCF and assigned assistant attorneys general to cooperate in prosecuting abuse and neglect cases. Current law requires the agency to cooperate with the assistant attorneys general.

EFFECTIVE DATE: Upon passage

HEALTHY FAMILIES CONNECTICUT OPERATIONS (§ 10)

The bill transfers from DCF to the Children's Trust Fund Council the

responsibility for operating the Healthy Families Program (now known as the Nurturing Families Network) on a statewide basis and filing annual legislative reports. This program assesses and provides voluntary services to parents and their children from birth to age for who are at risk for abuse and neglect.

EFFECTIVE DATE: Upon passage

ELIMINATION OR SIMPLIFICATION OF STATUTORILY MANDATED PLANS (§§ 1 AND 3)

The bill eliminates the requirement DCF prepare a plan for keeping children placed at the Connecticut Juvenile Training School for at least one year. The plan must include provisions to develop a comprehensive approach to juvenile rehabilitation.

The bill also simplifies individualized plans DCF is required to develop for children admitted to its voluntary service program but who remain in their homes. Rather than developing the detailed permanency plans required by law for children in DCF's custody who are in out-of-home placements (such as foster children and delinquents), the bill authorizes the agency to develop a case service plan for these children. The bill retains the requirement for the probate court to review youngsters' case service plans after 120 days, but limits continuing juvenile court review to youngsters in the voluntary services program living in out-of-home placements.

FACILITY PLACEMENTS

The bill permits:

1. DCF to place children in facilities licensed by the Department of Mental Retardation, conforming statute to practice;
2. DCF to place children in unlicensed homes if a licensed child placing agency has approved them; and
3. trained staff in residential facilities dually licensed by DCF and the Department of Public Health to administer medication to children (they can already do this in facilities under DCF jurisdiction).

ELIMINATION OF THE OUT-OF-HOME PLACEMENTS AND FAMILY VIOLENCE COORDINATING COUNCILS

The bill eliminates statutory authorization for the Family Violence Coordinating Council, which was established in 1996 to increase awareness and understanding of family violence and its consequences and to reduce its frequency. Its membership includes state and local officials, legislators, and members of the public.

It also eliminates authorization for the Out of Home Placements Advisory Council, which was established in 1997 to advise the governor, legislature, and DCF on various issues regarding the adequacy and quality of placement resources and services for delinquents, children needing substance abuse or mental health treatment, foster children, families with service needs, and voluntary services families. Its membership includes state officials, legislators, service providers, foster parents, and members of the public.

COMMITTEE ACTION

Select Committee on Children

Joint Favorable Change of Reference
Yea 12 Nay 0

Human Services Committee

Joint Favorable Change of Reference
Yea 16 Nay 0

Judiciary Committee

Joint Favorable Report
Yea 40 Nay 0