

Testimony before the Human Services Committee
February 23, 2010
Support for SB 140 and HB 5067

Dear Senator Doyle, Representative Walker and members of the Human Services Committee,

My name is Jan Lyon and I am submitting testimony in support of SB 140, An Act Concerning Youth Transitioning Between the Department of Children and Families and the Department of Mental Health and Addiction Services and HB 5067, An Act Concerning the Transition of Care and Treatment of Children and Youth from the Department of Children and Families to the Department of Mental Health and Addiction Services. I am the parent of an 18 year old child, adopted at 4 months through the Department of Children and Families (DCF). I live in New Hartford, have a Masters degree in Early Childhood Education and have worked in the human service/disabilities field for over 30 years, in 2 States, both institutionally and in community services. Having this background and having adopted another child with special needs 5 years prior, I had no fears adopting a child diagnosed with fetal alcohol effect.

In June of 2009, after completing her High School education in residential care, my daughter was able to graduate with her class locally. We were involved with DCF Voluntary Services for her placement, and met with Department of Mental Health and Addiction Services (DMHAS), DCF and residential staff to create a plan for her to go to a DCF group home after graduation, until her 18th birthday in November. Then DMHAS would pick her up and hopefully prepare her for a supervised apartment. However, after she graduated, we were told that she was not eligible for a DCF group home as she had received her diploma and the worker had been unaware this would disqualify her! As she had been a special education student she could have held her diploma and qualified but we were not told this prior to graduation. We appealed this decision more than once but were turned down; there were no exceptions to the rule. The residential facility had no further program for a graduate. [REDACTED]

[REDACTED] There was no where else for her to go but to stay in residential care, [REDACTED]

DMHAS workers said she would have to go to Cedar Crest Hospital as they were afraid to put her in a supervised apartment and we were told they had no group homes. On November 20th, 2009, in an attempt to spare my daughter from Cedar Crest locked facility, I took a risk and brought her home.

Remarkably she did well at home, perhaps fearing the other option and in January 2010, DMHAS provided a supervised apartment for her.

She could use more services than are available and still makes poor choices, but I think she has a better sense of success than when in residential care.

Systems have repeatedly failed my daughter: Public School, State-paid transportation, Voluntary DCF, and DMHAS's inability to transfer her safely in a timely manner. I met with DCF and DMHAS staff repeatedly for the summer and fall of 2009 to get help in either her transferring home at that time or going to a group home or DMHAS services starting early. There were no exceptions, no home services which we had been promised before the State freeze and recession hit, and we knew she would regress in care. We were trapped and just had to ride it out. I have advocated for children in my profession for over 30 years and I was helpless to get the services my daughter needed. In addition, I am an educated person. I can't imagine that a parent without that or without the professional experience could have dealt with all the meetings and all the challenges. There is no advocate for parents and no one who really understands the guidelines for services for these kids. Most importantly there is no CONTINUUM of Care for teens. DMHAS refused to pick her up early and DCF could do nothing to help once she graduated. It's time to look at the continuity of care for these kids. They fall through the cracks, even as we watch.

SB 140 would require DCF to provide services for my daughter during the transition period to DMHAS, regardless of her age, until all of the elements of her transition plan, which were designed to assure a therapeutic and successful transition, have been completed. HB 5067 would require DCF and DMHAS to collect important data on transitioning youth that help the state identify why they are falling through the cracks, and where the system fails them. I urge you to support these two bills, and support the successful transition of vulnerable youth and young adults with mental illnesses.

Jan Lyon, parent