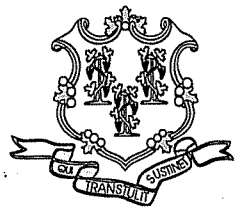
STATE OF CONNECTICUT
DEPARTMENT OF CHILDREN AND FAMILIES



Public Hearing Testimony

Select Committee on Children

February 8, 2011

Proposed S.B. No. 198 AN ACT CONCERNING RIVERVIEW HOSPITAL

The Department of Children and Families suggests that the Select Committee on Children take **no action** on Proposed S.B. No. 198 An Act Concerning Riverview Hospital.

Report Due April 15th

Section 32 of Public Act 10-3 requires the Department in consultation with the Child Advocate, to submit a plan by April 15, 2011 regarding the future of Riverview Hospital to this committee and also the Human Services and Appropriations Committees. We believe that this plan will provide data and other information that will guide the General Assembly and the administration in making a sound policy decision on the future of Riverview.

Background

Riverview Hospital is the only publically operated psychiatric teaching hospital for children and adolescents in the State of Connecticut. The 88 bed facility provides inpatient psychiatric assessment and treatment for those ages 5 to 18 years of age. Riverview has the clinical expertise to provide mental health treatment services for children and adolescents who are experiencing extreme emotional and behavioral difficulties. Riverview Hospital functions as a Safety Net for the State by providing inpatient care to a mostly disfranchised and indigent population. Riverview Hospital serves an important role as the most intensive psychiatric treatment setting within the behavioral health continuum of care developed by the Department of Children and Families (DCF) and Behavioral Health Partnership (BHP). Riverview Hospital Admission Criteria as set by BHP is much higher than other private hospitals in Connecticut and require failed past treatments including unsuccessful inpatient hospitalizations. Riverview takes patients from private facilities with more complex histories and who can't be managed successfully in those settings leading to inpatient stabilization at Riverview. The expertise in the treatment of seriously emotionally disturbed children and adolescents has been developed slowly over the course of many years of staff experience at Riverview, and represents a specific set of clinical skills and knowledge which cannot be automatically transferable to other community hospitals.

Riverview Hospital offers inpatient services on eight units. Treatment provided at Riverview Hospital is trauma informed, culturally sensitive, person and family centered and embraces a holistic team approach providing comprehensive, state of the art care to children and youth of Connecticut. Interdisciplinary teams at Riverview Hospital consist of Child and Adolescent Psychiatrists, Psychologists, Clinical Social Workers, Nurses, Milieu Staff, Rehabilitation Therapists, Educational & Teaching Staff, Speech and Language Specialists, Occupational Therapist, Pediatrician, Dentist, and trainees from various disciplines providing round the clock treatment. Riverview Hospital is accredited by the Joint Commission (formerly JCAHO) which is a national organization providing accreditation to hospitals nationwide based on best practice standards of clinical care.

Proposed S.B. No. 746 AN ACT REQUIRING AN INVESTIGATION BY THE DEPARTMENT OF CHILDREN AND FAMILIES WHEN A PERSON IS ARRESTED FOR DRUNKEN DRIVING WITH A CHILD IN THE VEHICLE

The Department of Children and Families **supports the intent behind** Proposed S.B. No. 746, An Act Requiring an Investigation by the Department of Children and Families When a Person is Arrested for Drunken Driving with a Child in the Vehicle, **but believes that it may already be addressed in current law.**

This bill would amend section 14-227a of the General Statutes to provide that any person arrested for operating a motor vehicle while under the influence of intoxicating liquor or any drug, or both, while a child under sixteen years of age is a passenger in such motor vehicle shall, if such person has custody of one or more children, be immediately reported to the Department of Children and Families and said department shall investigate to determine whether any children in such person's custody are safe and cared for.

The Department believes that the requirements of sections 17a-101 and 17a-101a of the General Statutes, which require police officers, as well as other professionals designated as "mandated reporters," to report suspected child abuse or neglect, would apply in these cases.

S.B. No. 890 (RAISED) AN ACT PROVIDING CERTAIN ADULT ADOPTED PERSONS WITH ACCESS TO PARENTAL HEALTH INFORMATION AND INFORMATION IN THEIR ORIGINAL BIRTH CERTIFICATES

The Department of Children and Families **supports the intent behind** S.B. No. 890, An Act Providing Certain Adult Adopted Persons with Access to Parental Health Information and Information in Their Original Birth Certificates, but would to work with the Committee to address concerns raised by the Department of Public Health in their written testimony.

The Department would like to share with the Committee some background on the issue of access to adoption information generally as well as the issue specifically addressed in this bill related to adult adoptees' access to their original birth certificates.

Non-Identifying and Medical Information

Under the current law, adult adoptees have limited access to the information in their adoption file, which includes their non-identifying and medical information from their records. This is a summary of birth family and medical history, which is documented in the closed adoption records, often prepared on "Genetic Parent Information" forms. Those adults whose adoptions were processed through a private adoption agency may have to pay a fee in order to obtain these histories, including their medical information. Additionally, some agencies only provide a verbal report of the non-identifying information. It is also important to note that medical histories of birth parents may not always be complete.

Search Process

Sections 45a-743 through 45a- 757 of the Connecticut General Statutes provide a search process for individuals to obtain material related to an adoption. Under existing state law, the parties who may request such information include: adult adoptees; biological parents; adoptive parents;

and, in the case where the adult adoptee is deceased, the same information can be shared with their adult descendants.

Current Search Requests

Adoption Search and Reunion remains a very active part of the Department of Children and Families with over 300 cases processed each year. The requests for search vary, in that some parties are looking specifically for non-identifying information. With such a request, the Department would obtain the closed case record, review the record and complete forms related to genetic and demographic information, as well as provide any additional relevant information to the requesting party.

Parties may also request identifying information, where the Department or a private agency, which facilitated the adoption, would attempt to locate the requested party. All parties that may be potentially involved are asked to provide consent and Public Act 09-185 sets forth a procedure to be followed when consent isn't forthcoming or possible.

Access to Original Birth Certificate

Although the original birth certificate for an adoptee is "sealed" under current law, there are ways to access this document. An adoptee can petition the probate court that finalized the adoption for release of the original birth certificate. A fee is involved with petitioning the court. The probate court judge would review the application and, if deemed necessary, appoint a guardian ad litem to represent the interests of the birth parent. The determination to release the birth certificate is currently at the judge's discretion.

The adoptee only has access to the original birth certificate through order of the probate court even in situations where consent has been provided. This includes cases of a consensual reunion between the birth family and the adoptee, or in cases where our responsibility to maintain confidentiality is limited, such as when the birth parents are deceased.

Historical Access

Adoption law originated in 1944 in the State of Connecticut. From 1944 until 1975, adult adoptees (age 18 and older) and/or their adoptive parents in the State of Connecticut had access to their original birth certificates through the State Department of Health or the registrar of vital statistics at the town level. In 1975, the original birth records were sealed both from that point forward and retroactively.

Proposed S.B. No. 135 AN ACT CONCERNING POSTSECONDARY EDUCATIONAL FINANCIAL ASSISTANCE FOR CHILDREN IN KINSHIP CARE

Proposed H.B. No. 5120 AN ACT CONCERNING EDUCATIONAL FINANCIAL ASSISTANCE FOR CHILDREN ADOPTED THROUGH THE DEPARTMENT OF CHILDREN AND FAMILIES

The Department of Children and Families offers the following comments regarding Proposed S.B. No. 135, An Act Concerning Postsecondary Educational Financial Assistance for Children in Kinship Care and Proposed H.B. No. 5120, An Act Concerning Educational Financial Assistance for Children Adopted through the Department of Children and Families.

The Department does provide postsecondary educational support for foster youth in the DCF care and for children who were adopted from our foster care system after January 1, 2005. In addition, we continue our subsidized guardianship beyond age 18 (up to age 21) for youth in postsecondary programs.

While these proposals are well-intentioned, there will be a considerable fiscal impact associated with both of these bills which we cannot support in the current fiscal climate.

H.B. No. 5503 (COMM) AN ACT CONCERNING THE PRIORITY OF GRANDPARENTS IN CHILD CUSTODY CASES

The Department of Children and Families **opposes** H.B. No. 5503, An Act Concerning the Priority of Grandparents in Child Custody Cases.

The Department is concerned about prioritizing grandparents over other potential relative caregivers of a child which may, in some cases not be in the best interest of the child. Commissioner Katz has made the placement of children with relatives a top priority for the Department and would appreciate the opportunity to make the structural changes necessary to significantly increase the number and percentage of children placed with relatives.

Public Act 09-185 already requires the Department to look for suitable caretaker relatives in the early stages of cases where children have been, or are, at risk of being removed from their homes due to allegations of abuse or neglect. It also establishes court procedures for making placement decisions when a relative seeks custody and creates a rebuttable presumption that placing a child with a relative is in the child's best interests.

H.B. No. 5814 (COMM) AN ACT CONCERNING CHILDREN AND CRUELTY TO ANIMALS

The Department of Children and Families **supports** H.B. No. 5814, An Act Concerning Children and Cruelty to Animals.

As with our testimony last week in support of H. B. No. 6226, An Act Concerning Cross-Reporting of Child Abuse and Animal Cruelty, we recognize the correlation between animal abuse, family violence and other forms of community violence. The Department believes that that it makes sense to require a youth charged with animal cruelty to undergo psychiatric or psychological counseling or participate in an animal cruelty prevention and education program.