



# Senate

General Assembly

**File No. 103**

January Session, 2023

Substitute Senate Bill No. 1012

*Senate, March 16, 2023*

The Committee on Children reported through SEN. MAHER, C. of the 26th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

***AN ACT CONCERNING THE DEPARTMENT OF CHILDREN AND FAMILIES' RECOMMENDATIONS FOR REVISIONS TO STATUTES CONCERNING CHILDREN.***

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

1 Section 1. Section 17a-114 of the general statutes is repealed and the  
2 following is substituted in lieu thereof (*Effective July 1, 2023*):

3 (a) As used in this section, (1) "approval" or "approved" means that a  
4 person has been approved to adopt or provide foster care by a child-  
5 placing agency licensed pursuant to section 17a-149, (2) "licensed"  
6 means a person holds a license to provide foster care issued by the  
7 Department of Children and Families, (3) "fictive kin caregiver" means  
8 a person who is twenty-one years of age or older and who is unrelated  
9 to a child by birth, adoption or marriage but who has an emotionally  
10 significant relationship with such child or such child's family amounting  
11 to a familial relationship, and (4) ["regular unsupervised access" means  
12 periodic interaction with a child in the home for purposes of  
13 unsupervised child care, medical or other services to the child]

14 "emergency placement" means the placement of a child by the  
15 Department of Children and Families in the home of an individual,  
16 including, but not limited to, a neighbor, friend or relative of a child, as  
17 a result of the sudden unavailability of the child's primary caretaker.

18 (b) (1) No child in the custody of the Commissioner of Children and  
19 Families shall be placed in foster care with any person, unless (A) (i)  
20 such person is licensed for that purpose by the department or the  
21 Department of Developmental Services pursuant to the provisions of  
22 section 17a-227, [or] (ii) such person's home is approved by a child  
23 placing agency licensed by the commissioner pursuant to section 17a-  
24 149, or (iii) such person has received approval as provided in this  
25 section, and (B) on and after January 1, 2017, for a child twelve years of  
26 age or older, such child has received a foster family profile in accordance  
27 with the provisions of section 17a-114e. Any person licensed by the  
28 department may be a prospective adoptive parent. The commissioner  
29 shall adopt regulations, in accordance with the provisions of chapter 54,  
30 to establish the licensing procedures and standards.

31 (2) [The] (A) Except as provided in subparagraph (B) of this  
32 subdivision, the commissioner shall require each applicant for licensure  
33 or approval pursuant to this section and any person [sixteen] eighteen  
34 years of age or older living in the household of such applicant to submit  
35 to state and national criminal history records checks prior to issuing a  
36 license or approval to such applicant to accept placement of a child for  
37 purposes of foster care or adoption. Such criminal history records  
38 checks shall be conducted in accordance with section 29-17a. The  
39 commissioner shall check the [(A)] (i) state child abuse and neglect  
40 registry established pursuant to section 17a-101k for the name of such  
41 applicant and for the name of any person [sixteen] eighteen years of age  
42 or older living in the household of such applicant, and [(B)] (ii) child  
43 abuse and neglect registry in any state in which such applicant or person  
44 resided in the preceding five years for the name of such applicant or  
45 person.

46 (B) If an applicant for licensure or any person eighteen years of age

47 or older living in the household of such applicant has submitted to the  
48 state and national criminal history records checks described in  
49 subsection (c) of this section within the previous twelve-month period,  
50 the commissioner shall not require such applicant or person to submit  
51 to the state and national criminal history records checks described in  
52 subparagraph (A) of this subdivision.

53 (3) The commissioner shall require each individual licensed or  
54 approved pursuant to this section and any person [sixteen] eighteen  
55 years of age or older living in the household of such individual to submit  
56 to state and national criminal history records checks prior to renewing  
57 a license or approval for any individual providing foster care or  
58 adopting. Such criminal history records checks shall be conducted in  
59 accordance with section 29-17a. Prior to such renewal, the commissioner  
60 shall check the (A) state child abuse and neglect registry established  
61 pursuant to section 17a-101k for the name of such applicant and for the  
62 name of any person [sixteen] eighteen years of age or older living in the  
63 household of such applicant, and (B) child abuse and neglect registry in  
64 any state in which such applicant or person resided in the preceding five  
65 years for the name of such applicant or person.

66 (4) The commissioner shall comply with any request to check the  
67 child abuse and neglect registry established pursuant to section 17a-  
68 101k made by the child welfare agency of another state.

69 (c) (1) Notwithstanding the requirements of subsection (b) of this  
70 section, the commissioner may [place a child with a relative or fictive  
71 kin caregiver] make an emergency placement with an individual who  
72 has not been issued a license or approval, when such placement is in the  
73 best interests of the child, provided a satisfactory home visit is  
74 conducted [,] and a basic assessment of the family is completed. [and  
75 such relative or fictive kin caregiver attests that such relative or fictive  
76 kin caregiver and any adult living within the household has not been  
77 convicted of a crime or arrested for a felony against a person, for injury  
78 or risk of injury to or impairing the morals of a child, or for the  
79 possession, use or sale of a controlled substance.] When the

80 commissioner makes such a placement, the commissioner shall (A)  
81 request a criminal justice agency to perform a federal name-based  
82 criminal history search of each person eighteen years of age or older  
83 residing in the home, and (B) check the state child abuse and neglect  
84 registry established pursuant to section 17a-101k for the name of each  
85 person eighteen years of age or older residing in the home. The results  
86 of such name-based search shall be provided to the commissioner.

87 (2) Not later than fifteen calendar days after a name-based search is  
88 performed pursuant to subdivision (1) of this subsection, the  
89 commissioner shall request the State Police Bureau of Identification to  
90 perform state and national criminal history records checks of any person  
91 residing in the home, in accordance with section 29-17a. Such criminal  
92 history records checks shall be deemed as required by this section for  
93 the purposes of section 29-17a and the commissioner may request that  
94 such criminal history records checks be performed in accordance with  
95 subsection (c) of said section. The results of such criminal history  
96 records checks shall be provided to the commissioner. If any person  
97 refuses to provide fingerprints or other positive identifying information  
98 for purposes of such criminal history records checks when requested,  
99 the commissioner shall immediately remove the child from the home.

100 (3) If the commissioner denies an emergency placement or removes a  
101 child from such child's home based on the results of a federal name-  
102 based criminal history search performed pursuant to this section, the  
103 person whose name-based search was the basis for such denial or  
104 removal may contest such denial or removal by requesting that state and  
105 national criminal history records checks be performed in accordance  
106 with subdivision (2) of this subsection.

107 (4) Any [such relative or fictive kin caregiver] individual who accepts  
108 emergency placement of a child shall be subject to licensure by the  
109 commissioner, pursuant to regulations adopted by the commissioner in  
110 accordance with the provisions of chapter 54 to implement the  
111 provisions of this section or approval by a child-placing agency licensed  
112 pursuant to section 17a-149. The commissioner may grant a waiver from

113 such regulations, including any standard regarding separate bedrooms  
114 or room-sharing arrangements, for a child placed with a relative or  
115 fictive kin caregiver, on a case-by-case basis, if such emergency  
116 placement is otherwise in the best interests of such child, provided no  
117 procedure or standard that is safety-related may be so waived. The  
118 commissioner shall document, in writing, the reason for granting any  
119 waiver from such regulations.

120 (d) Any individual who has been licensed or approved to adopt or  
121 provide foster care and any [relative or fictive kin caregiver] individual  
122 caring for a child pursuant to an emergency placement shall apply a  
123 reasonable and prudent parent standard, as defined in subsection (a) of  
124 section 17a-114d, on behalf of the child.

125 Sec. 2. Subsection (b) of section 17a-101g of the general statutes is  
126 repealed and the following is substituted in lieu thereof (*Effective July 1,*  
127 *2023*):

128 (b) The Commissioner of Children and Families shall establish  
129 protocols for the investigation of and response to reports of child abuse  
130 or neglect of children from birth to three years of age. Such protocols  
131 shall include, but need not be limited to, (1) appropriate supervision of  
132 the case, (2) appropriate visitation by department personnel to such  
133 children, (3) documentation of case activities relevant to the safety and  
134 well-being of such children, and (4) a case supervision tool specific to  
135 the unique needs and risk status of children from birth to three years of  
136 age. All investigations of a report of child abuse or neglect pursuant to  
137 this section shall include a home visit at which the child and any siblings  
138 are observed, if appropriate, a determination of the nature, extent and  
139 cause or causes of the reported abuse or neglect, a determination of the  
140 person or persons suspected to be responsible for such abuse or neglect,  
141 the name, age and condition of other children residing in the same  
142 household and an evaluation of the parents and the home. In the event  
143 of a pandemic or outbreak of a communicable disease resulting in a  
144 declaration of a public health emergency by the Governor pursuant to  
145 section 19a-131a, or a declaration of a national emergency by the

146 President of the United States, such home visit may be conducted by  
147 video or other conferencing platform in lieu of an in-person visit, for the  
148 duration of any such declaration. The report of such investigation shall  
149 be in writing. The investigation shall also include, but not be limited to,  
150 a review of criminal conviction information concerning the person or  
151 persons alleged to be responsible for such abuse or neglect and previous  
152 allegations of abuse or neglect relating to the child or other children  
153 residing in the household or relating to family violence. After an  
154 investigation into a report of abuse or neglect has been completed, the  
155 commissioner shall determine, based upon a standard of reasonable  
156 cause, whether a child has been abused or neglected, as defined in  
157 section 46b-120. If the commissioner determines that abuse or neglect  
158 has occurred, the commissioner shall also determine whether: (A) There  
159 is an identifiable person responsible for such abuse or neglect; and (B)  
160 such identifiable person poses a risk to the health, safety or well-being  
161 of children and should be recommended by the commissioner for  
162 placement on the child abuse and neglect registry established pursuant  
163 to section 17a-101k. If the commissioner has made the determinations in  
164 subparagraphs (A) and (B) of this subsection, the commissioner shall  
165 issue notice of a recommended finding to the person suspected to be  
166 responsible for such abuse or neglect in accordance with section 17a-  
167 101k. If the child is represented by an attorney or guardian ad litem, the  
168 commissioner shall notify the child's attorney or guardian ad litem in  
169 writing not less than five days prior to the date of any meeting in which  
170 the department is considering removing the child from the household,  
171 except, if the commissioner, or the commissioner's designee, has  
172 authorized the immediate removal of a child from his or her household  
173 pursuant to the provisions of subsection (e) of this section, the  
174 commissioner, or the commissioner's designee, shall not be required to  
175 provide advance written notice of such removal to the child's attorney  
176 or guardian ad litem.

177 Sec. 3. Subsection (i) of section 17a-126 of the general statutes is  
178 repealed and the following is substituted in lieu thereof (*Effective July 1,*  
179 *2023*):

180 (i) In the case of the death, severe disability or serious illness of a  
181 caregiver who is receiving a guardianship subsidy or an adoptive parent  
182 who is receiving a subsidy pursuant to section 17a-117 or 17a-118, the  
183 commissioner may transfer [the guardianship] such subsidy to a  
184 successor guardian who meets the department's foster care safety  
185 requirements and who is appointed as legal guardian by a court of  
186 competent jurisdiction. For purposes of maximizing federal  
187 reimbursement for the costs of the subsidized guardianship program,  
188 the commissioner shall request that the caregiver or adoptive parent  
189 identify such successor guardian in the subsidy agreement and any  
190 addendum thereto.

191 Sec. 4. Subsection (b) of section 19a-179f of the general statutes is  
192 repealed and the following is substituted in lieu thereof (*Effective July 1,*  
193 *2023*):

194 (b) On or before January 1, 2024, the Office of Emergency Medical  
195 Services shall develop protocols for a licensed or certified emergency  
196 medical services organization or provider to transport a pediatric  
197 patient with mental or behavioral health needs by ambulance to an  
198 urgent crisis center. As used in this subsection, "urgent crisis center"  
199 means a center [licensed by] operated under the oversight of the  
200 Department of Children and Families that is dedicated to treating  
201 children's urgent mental or behavioral health needs.

202 Sec. 5. Subsection (a) of section 38a-477aa of the general statutes is  
203 repealed and the following is substituted in lieu thereof (*Effective July 1,*  
204 *2023*):

205 (a) As used in this section:

206 (1) "Emergency condition" has the same meaning as "emergency  
207 medical condition", as provided in section 38a-591a.

208 (2) "Emergency services" means, with respect to an emergency  
209 condition, (A) a medical screening examination as required under  
210 Section 1867 of the Social Security Act, as amended from time to time,

211 that is within the capability of a hospital emergency department,  
212 including ancillary services routinely available to such department to  
213 evaluate such condition, and (B) such further medical examinations and  
214 treatment required under said Section 1867 to stabilize such individual  
215 that are within the capability of the hospital staff and facilities.

216 (3) "Health care plan" means an individual or a group health  
217 insurance policy or health benefit plan that provides coverage of the  
218 type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-  
219 469.

220 (4) "Health care provider" means an individual licensed to provide  
221 health care services under chapters 370 to 373, inclusive, chapters 375 to  
222 383b, inclusive, and chapters 384a to 384c, inclusive.

223 (5) "Health carrier" means an insurance company, health care center,  
224 hospital service corporation, medical service corporation, fraternal  
225 benefit society or other entity that delivers, issues for delivery, renews,  
226 amends or continues a health care plan in this state.

227 (6) (A) "Surprise bill" means a bill for health care services, other than  
228 emergency services or urgent crisis center services, received by an  
229 insured for services rendered by an out-of-network health care  
230 provider, where such services were rendered by (i) such out-of-network  
231 provider at an in-network facility, during a service or procedure  
232 performed by an in-network provider or during a service or procedure  
233 previously approved or authorized by the health carrier and the insured  
234 did not knowingly elect to obtain such services from such out-of-  
235 network provider, or (ii) a clinical laboratory, as defined in section 19a-  
236 490, that is an out-of-network provider, upon the referral of an in-  
237 network provider.

238 (B) "Surprise bill" does not include a bill for health care services  
239 received by an insured when an in-network health care provider was  
240 available to render such services and the insured knowingly elected to  
241 obtain such services from another health care provider who was out-of-  
242 network.



243 (7) "Urgent crisis center" means a center [licensed by] operated under  
244 the oversight of the Department of Children and Families that is  
245 dedicated to treating children's urgent mental or behavioral health  
246 needs.

247 (8) "Urgent crisis center services" means pediatric mental and  
248 behavioral health services provided at an urgent crisis center.

249 Sec. 6. Section 17a-102a of the general statutes is repealed and the  
250 following is substituted in lieu thereof (*Effective July 1, 2023*):

251 (a) Each birthing hospital shall provide education and training for  
252 nurses and other staff who care for high-risk newborns on the roles and  
253 responsibilities of such nurses and other staff as mandated reporters of  
254 potential child abuse and neglect under section 17a-101.

255 (b) The Department of Children and Families shall coordinate with  
256 each birthing hospital in the state to disseminate information regarding  
257 (1) procedures for the principal providers of daily direct care of high-  
258 risk newborns in birthing hospitals to participate in the discharge  
259 planning process, and (2) ongoing department functions concerning  
260 high-risk newborns.

261 (c) Not later than January 1, [2019] 2024, the Commissioner of  
262 Children and Families shall, in consultation with other departments,  
263 agencies or entities concerned with the health and well-being of  
264 children, develop guidelines for the safe care of newborns who exhibit  
265 physical, neurological or behavioral symptoms consistent with prenatal  
266 substance exposure, withdrawal symptoms from prenatal substance  
267 exposure or fetal alcohol spectrum disorder. Such guidelines shall  
268 include, but are not limited to, instructions to providers regarding such  
269 providers' participation in the discharge planning process, including the  
270 creation of written [plans of safe care] family care plans, which shall be  
271 developed between such providers and [mothers] birth parents of such  
272 newborns as part of such process.

273 (d) A provider involved in the delivery or care of a newborn who, in

274 the estimation of such provider, exhibits physical, neurological or  
275 behavioral symptoms consistent with prenatal substance exposure,  
276 withdrawal symptoms from prenatal substance exposure or fetal  
277 alcohol spectrum disorder shall notify the Department of Children and  
278 Families of such condition in such newborn. Such notice shall be made  
279 in a form and manner prescribed by the Commissioner of Children and  
280 Families and in addition to any applicable reporting requirements  
281 pursuant to chapter 319a. On and after January 15, 2019, such notice  
282 shall include a copy of the plan of safe care created pursuant to the  
283 guidelines developed pursuant to subsection (c) of this section.

284 (e) For purposes of this section:

285 (1) "Birthing hospital" means a health care facility, as defined in  
286 section 19a-630, operated and maintained in whole or in part for the  
287 purpose of caring for [women] pregnant parents during delivery of a  
288 child and for [women] postpartum parents and their newborns  
289 following birth;

290 (2) "High-risk newborn" means any newborn identified as such under  
291 any regulation or policy of the Department of Children and Families;  
292 and

293 (3) "Provider" means any person licensed pursuant to chapter 370, 377  
294 or 378.

295 Sec. 7. Subdivision (30) of subsection (g) of section 17a-28 of the  
296 general statutes is repealed and the following is substituted in lieu  
297 thereof (*Effective from passage*):

298 (30) The Department of Public Health for (A) the purpose of  
299 notification when the Commissioner of Children and Families places an  
300 individual licensed or certified by the Department of Public Health on  
301 the child abuse and neglect registry established pursuant to section 17a-  
302 101k, and (B) purposes relating to the licensure of the Albert J. Solnit  
303 Children's Center and the administration of licensing requirements  
304 established pursuant to or set forth in sections 19a-134 and 19a-498;

305 Sec. 8. Section 17a-115a of the general statutes is repealed. (*Effective*  
 306 *July 1, 2023*)

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>July 1, 2023</i>	17a-114
Sec. 2	<i>July 1, 2023</i>	17a-101g(b)
Sec. 3	<i>July 1, 2023</i>	17a-126(i)
Sec. 4	<i>July 1, 2023</i>	19a-179f(b)
Sec. 5	<i>July 1, 2023</i>	38a-477aa(a)
Sec. 6	<i>July 1, 2023</i>	17a-102a
Sec. 7	<i>from passage</i>	17a-28(g)(30)
Sec. 8	<i>July 1, 2023</i>	Repealer section

**Statement of Legislative Commissioners:**

In Section 1(c)(1)(A), "each person residing in the home" was changed to "each person eighteen years of age or older residing in the home" for consistency, in Section 1(c)(2), "perform state and national" was changed to "perform a state and national" for clarity, in Section 1(c)(3), "denies emergency placement" was changed to "denies an emergency placement" for clarity, and in Section 6(e)(1), "pregnant parents" was changed to "postpartum parents" for accuracy.

**KID**      *Joint Favorable Subst.*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

**OFA Fiscal Note**

**State Impact:**

Agency Affected	Fund-Effect	FY 24 \$	FY 25 \$
Children & Families, Dept.	GF - Savings	20,704	20,704

Note: GF=General Fund

**Municipal Impact:** None

**Explanation**

The bill, which exempts individuals under eighteen years of age that live in a Department of Children and Families (DCF) foster care applicant's home from submitting to state and national background checks and child abuse registry checks, is anticipated to result in a savings to the agency of approximately \$20,704 annually.

The Department's current foster home licensure regulations require state and national background checks and child abuse registry checks for all adults and all adolescents 16 years of age and older, prior to issuance of a placement license. While child abuse registry checks are performed in-house by the agency, state and national background checks are performed by the Connecticut State Police at a cost to DCF of \$32.00 per check. DCF does not track the ages of the individuals for whom background check inquiries have been submitted. It is estimated that approximately 50% of the homes for which licensure inquiries are submitted include at least one adolescent between the ages of 16 and 17. Based on this assumption, with 1,294 licensing requests submitted in FY 22, approximately 647 included at least one 16- or 17-year-old. Not performing state and national background checks for these individuals results in a savings to DCF of approximately \$20,704 in each fiscal year.

Other provisions of the bill are not anticipated to result in a fiscal impact to the State or municipalities.

***The Out Years***

The annualized ongoing fiscal impact identified above would continue into the future subject to the number of 16- and 17-years-olds that live in a DCF foster care applicant's home.

**OLR Bill Analysis****sSB 1012*****AN ACT CONCERNING THE DEPARTMENT OF CHILDREN AND FAMILIES' RECOMMENDATIONS FOR REVISIONS TO STATUTES CONCERNING CHILDREN.*****SUMMARY**

This bill makes several changes in laws related to the Department of Children and Families (DCF).

The bill limits when DCF may do certain background checks on foster care provider applicants by (1) increasing, from 16 to 18, the minimum age at which household members must submit to these checks and (2) generally prohibiting them if they have been done in the last 12 months (§ 1).

It also reorganizes and combines current laws on emergency placements and placements with a relative or fictive kin (i.e., a person who has a family-like relationship with the child); and in doing so, eliminates the duplicative background checks required for licensure for these placements under current law (§§ 1 & 8).

Among other things, the bill also:

1. specifically allows the mandatory home visits to investigate a report of child abuse or neglect to be done by video or other conferencing platform during certain state or national emergencies (e.g., a pandemic) (§ 2);
2. allows subsidies (e.g., special-need subsidy) received by an adoptive parent who dies or becomes disabled or ill to transfer to a successor guardian in certain circumstances (§ 3);

3. requires urgent crisis centers that are dedicated to treating children’s urgent mental or behavioral health needs to operate under DCF oversight rather than under a DCF issued license as required under current law (§§ 4 & 5);
4. requires DCF, by January 1, 2024, to update its existing guidelines for the safe care of substance-exposed newborns (§ 6); and
5. requires DCF to disclose records, without the subject’s consent, to the Department of Public Health (DPH) for purposes relating to licensure of the Albert J. Solnit Children’s Center (“Solnit Children’s Center”) (§ 7).

It also makes changes to conform to the Connecticut Parentage Act (PA 21-15) which, among other things, removed certain gender specific references (e.g., “mother” to “birth parent”).

Lastly, the bill makes technical changes, including eliminating obsolete language on regular unsupervised access (§ 1).

EFFECTIVE DATE: July 1, 2023, except the provision giving DPH access to DCF records regarding licensure of Solnit Children’s Center is effective upon passage.

## **§§ 1 & 8 — BACKGROUND CHECKS**

### ***Foster Care License, Adoption Approval, or Renewal (§ 1)***

Under current law, before issuing a license to someone who applied to become a foster care provider or an approval to adopt a child (“applicant”), DCF must first require state and national criminal history and state child abuse registry records checks on the applicant and anyone living in the applicant’s household who is age 16 or older. The care provider and anyone age 16 or older living in the household must again submit to these same background checks at the time of license or approval renewal. The bill increases, from 16 to 18, the minimum age at which an applicant’s household member must submit to background checks.

The bill also prohibits the commissioner from requiring an applicant or anyone age 18 or older living in the applicant's household to submit to the state and national criminal history records checks if the person has submitted to these background checks within the previous 12-month period in connection with an emergency placement (see below).

### ***Emergency Placement (§§ 1 & 8)***

Under certain circumstances, current law allows the commissioner to place a child with a relative or fictive kin caregiver who has not been issued a license or approval, if, among other things, it is in the child's best interests. Instead of "relative or fictive kin," the bill refers to this type of placement as an "emergency placement," and makes conforming changes to the laws that address required licensure and approval of a person who accepts placement on an emergency basis. It repeals the current statute that governs emergency placements and simultaneously combines it with that on placement with a relative or fictive kin. In doing so, the bill eliminates the duplicative background checks required for licensure under current law for these placements.

Current law authorizes the commissioner to make a placement with such a relative or fictive kin caregiver if:

1. a satisfactory home visit is conducted and a basic assessment of the family is completed; and
2. the relative or fictive kin caregiver attests that they, and any adult living in the household, have not been convicted of a crime or arrested for a felony against a person; injury or risk of injury to or impairing the morals of a child; or possession, use, or sale of a controlled substance.

The bill no longer requires the caregiver to make an attestation about any convictions or arrests for these crimes. Instead, the bill requires the commissioner to do what current law allows for emergency placements, which is to request a criminal justice agency to do a federal name-based criminal history search. Under current law, the commissioner may do so for each person residing in the home. The bill requires her to do so



only for each person aged 18 or older residing in the home and to also do a state child abuse and neglect registry check for these individuals.

The other emergency placement provisions under existing law generally remain unchanged under the bill, such as those related to the:

1. required state and national criminal history records checks that must occur after the name-based search has been completed (the bill increases, from five to 15 days, the deadline for DCF to request the state police to perform the check after the search);
2. commissioner's mandate to remove the child from the home of anyone who refuses to provide fingerprints or other positive identification; and
3. person's right to request a state or national criminal history check if denied emergency placement based on a name-based search.

Under existing law, unchanged by the bill, an "emergency placement" is the placement of a child by DCF in someone's home, including a child's neighbor, friend, or relative, because of the sudden unavailability of the child's primary caretaker.

## **§ 2 — HOME VISITS IN A PANDEMIC**

By law, all investigations of any report of abuse or neglect of a child must include a home visit by DCF. The bill specifically allows these home visits to be done by video or other conferencing platform (i.e., online), instead of in-person, in the event of a pandemic or communicable disease outbreak resulting in a declaration of a public health emergency by the Governor or a national emergency by the President. Under the bill, these home visits can be done online for as long as the declaration lasts.

## **§ 3 — SUBSIDIZED GUARDIANSHIP PROGRAM**

Under existing law, if a caregiver who is receiving guardianship subsidies dies or becomes severely disabled or seriously ill, the DCF commissioner may transfer the subsidies to a successor guardian who

meets the department's foster care safety requirements and who is appointed as legal guardian by a court. The bill allows the commissioner to also do this in a case involving an adoptive parent under similar circumstances who was receiving a subsidy.

As is the case for a caregiver under existing law, the bill requires the adoptive parent to identify the successor guardian in the subsidy agreement and any addendum to it.

By law, if DCF certifies a child as special needs before adoption, it must provide certain subsidies for the adopting parents. This may include a special-need subsidy (i.e., a lump sum payment to the service provider), a periodic subsidy to the adopting family for the cost of care, or both. In addition, Medicaid benefits that were provided before the adoption must continue if the child qualifies as the adoptive parent's dependent for federal tax purposes (CGS § 17a-117).

#### **§§ 4 & 5 — URGENT CRISIS CENTERS**

Under current law, an "urgent crisis center" is a DCF-licensed center dedicated to treating children's urgent mental or behavioral health needs and "urgent crisis center services" are pediatric mental and behavioral health services provided at one of these centers. Under the bill, these centers must operate under DCF's oversight rather than under the department's direct licensure, as required by current law. In doing so, the bill allows these centers to be licensed by an agency other than DCF (presumably, DPH), but they must operate under DCF's oversight.

This applies to existing laws that govern (1) protocols DPH's Office of Emergency Medical Services must develop by January 1, 2024, for certain emergency medical services providers to transport children with mental or behavioral health needs by ambulance to urgent crisis centers and (2) health insurance coverage for, and emergency access to, urgent crisis center services (e.g., prohibition on balance billing, higher out-of-network billing, and pre-authorization).

#### **§ 6 — SAFE CARE OR SUBSTANCE-EXPOSED NEWBORNS**

The law required, by January 1, 2019, the DCF commissioner, in

consultation with other departments, agencies, or entities concerned with the health and wellbeing of children, to develop guidelines for the safe care of newborns who exhibit (1) physical, neurological, or behavioral symptoms consistent with prenatal substance exposure; (2) associated withdrawal symptoms; or (3) fetal alcohol syndrome. As under existing law, the guidelines must include instructions to providers on the discharge planning process, including written plans of safe care. The bill (1) replaces the term “plans of safe care” with “family care plan” and (2) requires the commissioner to update these guidelines by January 1, 2024.

It also conforms to the Connecticut Parentage Act (PA 21-15) by removing certain gender-specific references (e.g., “mother” to “birth parent” and “women” to “pregnant parents”).

#### **§ 7 — DPH ACCESS TO DCF INFORMATION FOR SOLNIT CHILDREN’S CENTER LICENSURE**

By law, records maintained by DCF are generally confidential and must not be disclosed without the subject’s consent, subject to various exceptions. Existing law requires DCF to disclose records, without consent, to inform DPH that the DCF commissioner placed a DPH-licensed or -certified person on the child abuse and neglect registry. This bill requires DCF to also disclose information to DPH without consent for purposes relating to the licensure of Solnit Children’s Center. (Solnit is operated by DCF and licensed by DPH.)

#### **COMMITTEE ACTION**

Committee on Children

Joint Favorable Substitute

Yea 17    Nay 2    (02/28/2023)