



**CONNECTICUT**  
Children & Families

Work Session  
February 25, 2026

# Position Count

- Total Number of General Fund, full-time, permanent positions including:
  - 2974 funded
  - 2974 authorized
- 2855 positions filled as of 02/18/26
- 119 authorized but not filled
- Total positions filled with employees on leave status: **202**
  - Total incumbents out on block FMLA: 113
  - Total incumbents out on Worker's Compensation: 77
  - Total incumbents out on Pending Disability Retirement: 12

# Position Count

## Position Type of Unfilled Authorized Positions

- Direct Care Staff (non-licensed) – 55
  - Social Workers/Trainees, Social Work Supervisors, Social Work Case Aides, Children Service Workers, Lead CSWs, Children Service Unit Supervisor, Children Services Consultant
- Administrative Support – 34
- Licensed Health Care Staff – 19
- Building Maintenance Staff – 7
- Managers – 3
- Educational Professionals – 1

# Position Count

Historical Date, FY 2021 through FY 2025 and FY 2016

- FY 2016: Filled Position Full Time/Regular: 3033
- FY 2021: Filled Position FT/Regular: 2792
  - Vacancies: 229
- FY 2022: Filled Position FT/Regular: 2622
  - Vacancies: 323
- FY 2023: Filled Position FT/Regular: 2737
  - Vacancies: 208
- FY 2024: Filled Position FT/Regular: 2810
  - Vacancies is 164
- FY 2025: Filled Position FT/Regular: 2796
  - Vacancies is 178

# Position Count

## Staffing Information for Solnit South (Hospital and PRTF)

- Filled Positions: 311
- Vacant Positions: 27
  - Direct Care Staff (non-licensed) – 5
    - Children Services Workers, Lead CSWs, Children Services Unit Supervisor
  - Administrative Support – 2
  - Licensed Health Care Staff – 17
  - Building Maintenance Staff – 3
- Total positions filled with employees on leave status: **62**
  - Total # of Solnit South incumbents out on block FMLA: 14
  - Total # of Solnit South incumbents out on Worker's Compensation: 45
  - Total # of Solnit South incumbents out on Pending Disability Retirement: 3

July 2025 emergency staffing plan: established 10 permanent and 20 temporary full-time Children Services Worker positions and obtained refill authorization for 16 full/part time CSW positions, 4 LPNs, 3 Head Nurses, 2 Nurses and 5 per diem Nurses.

# Staff Training for Solnit South (Hospital and PRTF)

- Solnit South staff are provided with pre-service and annual in-service trainings.
  - Priority mandated trainings include:
    - CPR/First Aid
    - Therapeutic Assessment, Communication and Education (TACE) – physical intervention training
    - MANDT Technical Prohibited Practices
    - Attachment, Belonging, Competence, Doing for Others (ABCD) milieu model
    - Mandated Reporter
    - Emergency Safety Intervention
    - Youth Supervision
    - Clinical Rounding
    - Medical Response
    - Nurse Ethics and Standards of Care
    - Trauma informed Care (Nurses)
  - 240 training sessions across all courses
    - Includes 16 new employee cohorts
    - 67 new hires in the 16 cohorts
  - The Staff Development unit at Solnit South collaborates with Solnit leadership and staff to offer trainings in response to emerging needs. Some recent examples of this have included: Performance Management for Supervisors; Enhancing Leadership Skills; Treatment of LGBTQ Youth; Narcan administration for opioid overdose; etc.
  - A standing Staff Development Committee meets monthly with stakeholders at Solnit South to address ongoing staff development progress and needs.
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# Adjustments in Governor's Budget

## Other Expenses & Various Grants

Various Grants [ $\$800,000 * 20\% = \$640,000$ ]

- Various Grants are comprised of the following (less 20%) reduction.
  - i. LOVE146 [ $\$500,000$ ] a specialized statewide service provider supporting youth who have been trafficked. The organization works to prevent child trafficking and provide holistic expert support services.
  - ii. Thames River Community Service [ $\$250,000$ ]
  - iii. Left Hearts [ $\$50,000$ ].

# Adjustments in Governor's Budget

## Summary of Budget Adjustments to Current Agency Requirements

<b>Program/Budget Components</b>	<b>Funding</b>
B&C for Children – Short-term and Residential	\$ 4,000,000
B&C for Children – Foster	500,000
Individualized Family Supports	150,000
<b>Total Adjustment to Reflect Current Requirements</b>	<b>\$ 4,650,000</b>
Substance Abuse Disorder Waiver	1,635,000
Supportive Housing	500,000
<b>Total Funding for Current Services</b>	<b>\$ 6,625,000</b>

# Board & Care Actual & Budget SFY2023 – SFY2027

## Summary of Board & Care Actuals and Budgets

Program/Budget Components	SFY2023	SFY2024	SFY2025	SFY2026	SFY2027
	Actual	Actual	Actual	Budget	Budget (Revised)
B&C for Children – Adoption	\$ 106,286,349	\$ 105,755,102	\$ 105,614,175	\$ 106,884,511	\$ 106,884,511
B&C for Children – Foster	110,815,045	114,948,001	117,310,702	123,521,818	124,021,818
B&C for Children – Short-term and Residential	61,673,425	64,660,509	68,544,503	65,628,396	69,628,396
Individualized Family Supports	3,295,035	3,783,841	3,853,519	3,871,304	4,021,304
<b>Total B&amp;C Expenditures/Funded</b>	<b>\$ 282,069,854</b>	<b>\$ 289,147,453</b>	<b>\$ 295,322,899</b>	<b>\$ 299,906,029</b>	<b>\$ 304,556,029</b>

# Other Expenses

See Attachment A

- Projected EOY for SFY 2026
  - \$31,137,956
  
- Projected OE for SFY 2027
  - \$31,137,956

# Program Descriptions by Line Item

- See Attachment B

# Facilities Funded Under Grants for Psychiatric Clinics for Children

Agency	Location
BHCare	North Haven
Bridges Healthcare	Milford
Catholic Charities	Hartford
Charlotte Hungerford	Torrington
Child and Family Agency of Southeastern CT	Westbrook, New London & Pawcatuck
Child and Family Guidance Center	Bridgeport
Community Child Guidance Clinic (formerly Child Guidance Clinic of Central CT)	Meriden & Manchester
Clifford Beers	New Haven
Community Health Center	Greenwich, Stamford & Middletown
Community Health Resources	Manchester
Community Mental Health Affiliates	Waterbury & New Britain
Cornell Scott-Hill Health	New Haven
Family and Children's Aid	Danbury
Hartford Hospital (IOL)	Hartford
Mid-Fairfield Child Guidance Clinic	Norwalk
The Village for Families & Children	Hartford
United Community & Family Services	Norwich
United Services	Dayville
Wellmore	Waterbury
Wheeler Clinic	Plainville
Yale University	West Haven

# Requested DCF Stats

- Number of CPS Reports (CY25):
  - Received: **63,980**
    - Accepted: **30,256**
      - Family Assessment Response (FAR): **11,137**
      - Investigation Response: **19,440**
        - Substantiated: **4,359**
- Number of Families being served In-Home (as of 2/18/26): **8,279**
  - Intake (Family Assessment and Investigation): **4,618 (55.7%)**
  - Family Services (with no children in placement): **2,337 (28.3%)**
  - Probate: **1,324 (16%)**
- Number of Families with Children-In-Placement (as of 2/18/26): **2,354**
  - Number of Children (under 18 years old) in Placement: **2,912**
  - Number of Youth (>=18 years old) in Services Post-Majority: **556**
- Re-Entry to Foster Care Within 12 Months of Discharge (for all discharges):
  - SFY24: **8.7%**
  - SFY25: **6.6%**

# Mobile Crisis Funding

- DCF Fiscal is presently finalizing the analysis to determine level of funding required through the remainder of SFY 2026.
- We anticipate having funds being released and remitted to providers beginning in March 2026.

# Child and Family Services Review (CFSR)

## Status of Program Improvement Plan (PIP) Process

- Draft Program Improvement Plan Goals
  - Improve safety and risk assessment and services to prevent entry/re-entry
  - Improve access to services to meet children/family's needs
  - Increase the quality of engagement with children, mothers and fathers to improve assessments, quality visitation and case planning
  - Improve collaborative efforts to achieve timely permanency with special focus on the first 12 months
  - Improve Foster parent training, child-placing agency oversight and timely completion of ICPC requests
- Draft PIP document submitted on-time for Children's Bureau (CB) review on 11/3/25
- Draft PIP revised and submitted on-time for further review on 1/20/26
- Children's Bureau released Technical Bulletin 14 proposing a new pilot method for PIP 12/19/25
  - "In 25 years, no states have been found to be operating in substantial conformity with all outcome measures and systemic factors...consequently, every state has been placed on a required PIP."
  - "...CFSRs may not be effectively assessing state child welfare agency performance in ways that are truly indicative of promoting child safety, permanency, and child well-being."
  - Pilot process focuses states on improving the ratio of Foster Homes to Children in Placement, with more flexibility on strategy selection, more emphasis on quantitative measurement, and lower chance of fiscal penalties
  - DCF and Regional CB team are considering transition to TB14 pilot methodology, but are waiting for further details before committing to the change

# Missing from Care Enhancements

- Prior to the Audit report, DCF had been working with the Administration for Children and Families to update our policies and practices for youth missing from care. The efforts ensure compliance with federal and state law and adopting best national practices.
- DCF also invited a representative from the national Center for Missing and Exploited Children (NCMEC) to all of our meetings to inform our practice improvements.
- The policy and practice guide define AWOL, Missing from Care and Abduction and provide different protocols to follow for each
- Adheres to federal law by requiring DCF to be the responsible party to contact law enforcement and the National Center for Missing and Exploited Children (NCMEC) according to the timelines in law and per policy
- Identifies steps that specific employees must take when a child is reported missing from care to the Department

# Missing from Care Enhancements

- Ties in our behavioral health network and Human Anti-Trafficking Response Team to assist with children that run and ensure proper assessment when they return to care.
- The new forms are tools for department and provider staff to use with children that have a propensity to run and ensure proper assessment when they return to care.
- The policy, practice guide and new forms can be found here:
- [21-15](#) Missing from Care Policy
- [21-15PG](#) Missing from Care Practice Guide
- [21-15D](#) Returning Child De-Briefing Form
- [21-15P](#) Youth Run Prevention Plan Form

**Thank You**