

October 20, 2008
jmk SELECT COMMITTEE ON CHILDREN 10:00 a.m.
AND HUMAN SERVICES

PRESIDING CHAIRMAN: Senator Harris
Senator Meyer

COMMITTEE MEMBERS PRESENT:

SENATORS: Harp, Freedman, Harris,
Kissel, Meyer

REPRESENTATIVES: Ruwet, McMahon, Mushinsky,
Thompson, Truglia, Villano,
Abercrombie, Gibbons,
Caron, Jarmoc, Orange,
Thompson, Truglia, Walker

SENATOR HARRIS: Good morning. I'd like to convene the investigatory hearing concerning the operations of the Department of Children and Families. This is, as I say, an investigatory hearing.

I think all of us at the table here, I'm sure out listening, understand that this is a very difficult issue, and we are dealing with some very challenging situations, to say the least, and that even on a good day, bad things happen.

Difficult choices have to be made, and that some problems are unavoidable. But our responsibility as a Legislature with oversight, all of our responsibilities are to really ask the question and get answers to this question.

That's really the crux of what we're going to be doing in this investigatory hearing. And I want to give you a very quick description of the general process of the investigatory hearing and then the procedures that we're going to employ here today.

That will be for the first day. That panel, all a part of that panel, may be called back on a subsequent day for follow-up and additional conversation with regard to that question.

We will also have a day reserved for a public hearing, at which time the public can come and comment on what's been said and on their individual experiences with the Department of

Children and Families. So that's the macro.
The hearing will be continued today.

The goal in answering that question would be to do so before the commencement of the Legislative Session in January of 2009 and hopefully not only to answer that question, but to have a series of recommendations which then can be handed over to the Committees of cognizance, most likely Human Services and the Children's Committee, to be able to be acted upon during the Legislative Session.

With respect to the procedures today, we're going to have the panel all invited up together. And each individual, by name, will have the opportunity to make a five-minute statement.

And then we will turn it over to the Committees for questioning. With that, I will turn it over to the Co-Chair of this investigatory hearing, Senator Meyer.

SEN. MEYER: Thank you, Senator Harris. The Department of Children and Families was established in 1974 as an agency to protect children and families.

It has about 3,500 employees and has a budget of almost \$1 billion. It's a combination of public funds and private funds.

Our Committees are exercising today legislative oversight in accordance with our responsibilities because of what many of us

view as troubling events, very troubling events indeed, related to this agency.

And just quickly, by way of mentioning those events and hoping that the witnesses will address them, at least in part, this morning, we are very concerned about the apparent killing on May 19th of this year of a baby in the custody of a DCF employee whose prior child abuses, prior child abuses were concealed.

We're concerned about the disclosures made last month by the United States Department of Health and Human Services, that DCF has a failing record in achieving the permanent placement of abused and neglected or abandoned children and that DCF has failed to address the father's role in these types of cases and does not file, or does not timely file, court applications determining parental rights.

We're concerned also by the study earlier this year of the General Assembly's Program Review and Investigations Committee that concluded that little attention has been given to examining DCF as a whole or assessing how well the agency is achieving its broad goals.

And that failure of attention is coming on watch, and we intend to end that. The study also saw the greater emphasis on tracking how services for children and families are delivered rather than just assessing their end results.

The study pointed out the agency's contracting process provides little accountability, little consequences for poor performance. And working relationships with private providers need improvement.

The study found, after many months of work, that the results data are not regularly integrated and analyzed. And it goes on, you know, a very comprehensive review.

We're concerned also with the Juan F. Consent Decree. That's a decree that's 17 years old. Five of the 22 conditions, there still has not been compliance.

We came right up to the brink this summer of putting the agency into a federal receivership, and that was avoided, fortunately, by a settlement. And that needs to be addressed.

We're very concerned about the alarming reports of the Child Advocate, who has revealed substantial program failures at the Riverview Hospital for Children, where our state is remarkably spending about \$860,000 per child per year.

The Children's Committee has held Committee meetings actually at that hospital out of concern with the situation.

We're concerned about a further report this month, stating that there is a, and I'm quoting, a chronic pattern of deficient

We're very concerned about a revelation just last week that DCF has failed to oversee and correct the involuntary injection of an immobilizing drug at the Stonington Institute.

I truly believe that we have the right people in the room to address and correct our current situation, in having the Attorney General, the Child Advocate, Commissioner Hamilton, and the Secretary of OPM.

I would just finally say, in conclusion, that, repeat what Senator Harris said, and that is that this will be a continuing investigation.

We're going to be a little discreet there, discriminative with the respect to too many people.

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But there are so many people in the State of Connecticut who feel affected negatively by DCF, some positively as well.

But they're going to be given an opportunity to be heard. So thank you, and I'll turn it back to you, Mr. Chairman.

SEN. HARRIS: Thank you, Mr. Chairman. Will any of the Chairs of either Human Services or Children like to make a statement, Ranking Members?

UNIDENTIFIED SPEAKER: We'll save our comments.

SEN. HARRIS: Okay. Thank you very much. Then we will call the panel up. Okay. You can all sit up at first. I know Attorney Blumenthal will be making the first statement, but you might all--

SEN. MEYER: We need to put one up at a time--

SEN. HARRIS: Okay. Attorney General, then you can make your statement first.

SEN. MEYER: I think what we're going to do is just put the witness up first, and then at the end, all four of you come up for questions. So we're going to start with the Attorney General.

The rest of you can sit right behind him and then come up when we have a panel discussion at the end.

As I look at this panel, I see people who have been involved in this problem for years and years, virtually as long as I've been Attorney General, which is 18 years, and as long as there has been a Consent Decree, which is about the same length of time.

But in the midst of focusing on the problems, I want to emphasize at the beginning, and I hope at the end, that DCF has many, many profoundly dedicated, qualified, hardworking, skilled people trying to save children from abuse and neglect and other perils that endanger their childhood and their lives.

So I begin with that strong statement, and I'm going to try to follow the Chairman's injunction. I will put it as an injunction, not an invitation, to be brief, five minutes or less, and simply say that our reports, seven of

them since 2001, certainly detail serious and systematic problems in this agency.

They are structural and systemic, not simply dealing with individuals in particular positions, and they relate to accountability and oversight as a broad, general matter.

We've demanded that DCF implement the same reforms again and again and again, only to see our demands either disregarded or rejected, more often ignored than declined.

If we want real reform at DCF, and all of us really want reform, I think, we need a different approach.

We need for the General Assembly to really take charge and exercise its power to demand accountability and restructuring, through your power over money. The power of the purse is your leverage here.

And what I'm suggesting, very specifically, is a partial breakup of the agency, a complete overhaul of existing management, and other fundamental reforms that the Child Advocate and I have advocated in our reports and that may result from an outside objective comprehensive top-to-bottom review, mandated by this Legislature.

And I might suggest, simply as a forecast or as a suggestion, that not only should the regulatory and oversight function be broken away from DCF, but also, a separate juvenile

justice agency should be established, taking those responsibilities from DCF, and a transfer of the mental health responsibilities to either the Department of Mental Health and Addiction Services or another appropriate agency, probably that one.

DCF's management structure, as well as its managers, need that kind of objective, top-to-bottom, outside review.

Although many of the caseworkers and staff may be profoundly dedicated, the current organization consistently fails many of Connecticut's children.

The Legislature should require recommended changes by dictating those changes through the appropriations authority, which guarantees that funds are used effectively. And it ought to link those dollars with administrative reform.

DCF must be compelled to perform better in the best interest of the children, rearranging the deck chairs cannot right a listing, leaking ship.

So I urge, immediately, measures that would remove from DCF and transfer to another agency the authority for licensing and oversight of state and state-funding facilities, assuring their independence from the agency's administration.

This action would amount to an immediate partial breakup of an agency that has grown too

big. It is a sprawling, massive, mammoth behemoth and too internally conflicted to be effectively managed.

I also urge that there be created a clear, straightforward communications structure and system for abuse and mismanagement reporting with checks to guarantee that all complaints are investigated, as well as strict procedures and rules to prevent such reports from being buried, ignored, or neglected.

We have only to look to the tragic Michael B. case to see the need for that recommendation. It was part of the 2003 report recommendations. It was repeated, and in the response from the Commissioner, very surprisingly, it was the revelation that the 2003 report wasn't even made available to her until it was submitted in our letter following the Michael B. case.

The 2003 report with that very recommendation and others was never reviewed by the Legal Director, or other senior staff apparently, until after Michael B. occurred.

Let me just finish by saying at the core of DCF's current problems and dilemma is a fundamental conflict.

As we've repeatedly noted, a state agency that contracts with private entities to provide services for abused and neglected children simply can't effectively also regulate those private contractors.

And the agency can't be both a contractor and a regulator of the entities that perform those contracts. So that point underlies the reason that I've made the recommendations for breaking up that function.

The proof is not in the theory. It's in the practice of failure, chronic failure, to oversee properly and effectively and vigorously the shortcomings of private program providers.

So again, my thanks for giving me this opportunity to talk to you today about what are indeed recent illustrations of this problem, the Stonington Institute letters that we wrote, showing involuntary intramuscular injections, in violation of DCF's own policy, and other kinds of problems that have occurred at Stonington Institute over the years, again, repeatedly, which shows the need for better management, not just rearranging the deck chairs, but fundamental restructuring and

reorganizing that much take place, first with the breakup of the regulatory and quality control functions and then very likely with other functions, split to other agencies, to follow. Thank you very much.

SEN. HARRIS: Thank you, Mr. Attorney General. Next, we'll have the five-minute statement from Secretary of OPM, Bob Genuario.

SEC. ROBERT GENUARIO: Good morning, and thank you for the opportunity to be here this morning to talk about the Department of Children and Families.

Senator Harris, Representative Villano, Senator Meyer, Representative McMahon, Distinguished Members of the Human Services and Select Committee on Children, for the record, I am Robert Genuario.

I am the Secretary of the State of Connecticut Office of Policy and Management. I think it's clear to say that DCF has one of the toughest jobs in state government.

It has the job of protecting children and protecting children who, by the nature of their experience, come to the Department with very, very complicated and less than desirable circumstances.

DCF's mission can be divided into four categories, Child Protective Services, Behavioral Health Services, for all

Connecticut's children, Juvenile Justice, and Prevention.

A child protection worker at the Department alone, on any given day, touches about 35,000 children in over 16,000 households. In addition to their juvenile justice mandate, over 800 youth are served.

The Department operates 4 24-hour-a-day, 7-days-a-week facilities. DCF is a large agency, and its budget has grown since 2004 from \$607 million to approximately \$884 million in Fiscal Year 2009.

I might add that it's not almost \$1 billion. It's about \$100 million less than \$1 billion. And where I come from, \$100 million is still a lot of money. But it has grown. It has grown by about 7.8% per year since 2004.

And a lot of things have driven that growth. I think it's important to understand some noteworthy trends.

But some of the things that have driven the growth are the Juan F. Consent Decrees, the Connecticut Community KidCare Initiative, and a significant initiative to provide more group homes in the community so more children can be served in the community, connected with community services, as opposed to apart from the community and residential treatment facilities.

The Department's Residential Board and Care account is a large account, and it generates significant attention. It's grown by \$52 million since 2004.

But there are a number of programs that are funded by this account, Safe Homes, Crisis Stabilization, Short Term Assessment, and Respite.

The largest components are, of course, group homes and what people often think about as traditional residential treatment facilities.

Spending on residential treatment facilities, both in state and out of state, has decreased by almost \$20 million, \$19.2 million, between 2004 and 2009.

This decline can be attributed to the increased success in keeping children in their homes, the growth in adoption, and increased use of community settings.

And when we keep more children in our, in the homes, and again, these are children with troubled pasts, we keep them in their homes by providing more services in home.

So the decrease in the residential care expenditures has been coupled with an increase in alternative settings, alternative services to these children.

The other major trend that can account for the decrease in the use of traditional residential

treatment I the increase in community, in-home, and individual services.

The combined growth of expenditures over the last five years for accounts that provide direct services to children and families in their homes is \$54 million.

The accounts for such programs as supportive housing for recovering families, intensive in-home services, Intensive In-Home Child and Adolescent Psychiatric Services, sometimes referred to as IICAPS, Multi-Systemic Therapy, Functional Family Therapy, reentry education services, etc.

So the emphasis in recent years is to provide more community and in-home facilities and less residential treatment, where possible and only where possible.

For Fiscal Year 2009, we do anticipate deficiencies in some accounts, including the Adoption Account, which has the largest expected deficiency for this year.

In a sense, that's a good thing. A deficiency in, the deficiency isn't a good thing, but the increase in adoption is.

It means we are supporting more children in permanent homes than we anticipated two years ago when the budget was put together. That's a positive for the Department.

All told though, we believe the agency will be able to address any projected shortfalls in this account, or other associated accounts, by decreases in residential care and other accounts.

Overall, for Fiscal Year 2009, we believe that the Department's budget is sound. Like many other departments will experience this year, we may need to shift money around from one account to another, since it has been so long since those accounts have been set up.

The Juan F. Exit Plan is a major driver of the Department's efforts and, consequently, its expenditures.

Commissioner Hamilton can go into more details on the outcome measures, but 17 of the 22 outcome measures of the exit plan are being achieved, and the achievement is being maintained.

Clearly, we still have work to do on the last five measures, and they're important measures. And that's where a lot of the focus on DCF will be, a lot of the focus of DCF efforts will be in the upcoming years.

People always ask me whether there's been any improvement in the Department. As you know, the federal government evaluates the quality of all states' efforts in every child protective, in Child Protective Services.

In fact, five of six of the comparable measures have been met. And the only one that hasn't missed by one percentage point.

There has been significant progress. And frankly, there has been great improvement in the services rendered by DCF over the course of the last four to five years, coupled with significant increases in expenditures.

I do want to talk a little bit about Riverview Hospital because there has been a lot of talk about the expensive Riverview Hospital, and it is expensive. There's no question about it.

I want to, not that I think my next comment is what drives the issue, but I did attach a summary of the budget of Riverview Hospital to my testimony. It's on the last page of my testimony. And that may help you a little bit.

First of all, the, when we talk about the amount and the \$800,000 figure per child, I want to emphasize that that includes something that we call indirect costs that the comptroller assigns.

Now indirect cost is assigning a part of your salaries to an agency, this building to this agency, my department's cost to this agency.

We talk about the comptroller's costs to this agency, probably the Attorney General's cost to this agency.

The non-direct functions of any, of state government are assigned to those agencies on a percentage basis. And that explains some of the indirect cost and probably accounts for

about \$100,000 per child of the estimated costs.

But that's not really what should drive this discussion. I just say that for clarification purposes.

The fact of the matter is that the cost, the direct cost of running Riverview is about \$48 million a year for Fiscal Year 2008.

And if you were to look at the breakdown of that cost, \$42 million of the \$48 million is personal salaries and fringe benefits. So that cost is driven by staffing.

The bulk of the other cost is worker's comp, and OE. OE pays for utilities, food, etc. So the bulk of that, of the costs for this agency is the staffing that goes no.

Now Commissioner Hamilton, in a few minutes, will detail for you the type of child that we are treating in Riverview Hospital. It is a child that requires intensive services, 24 hours a day, 7 days a week.

The, while some could argue, or some could propose, that the staffing be reduced, we feel that the amount of staffing that we have at Riverview Hospital is necessary to provide the appropriate level of treatment, the appropriate safety, the appropriate level of intervention that children of this nature need.

But it is personnel driven. And as you know, when we have a private, state-run institution, which this is, and there's nothing comparable to it in the New England area, we need to pay for the state fringe benefit costs, which are higher than most private costs.

We need to pay for all of the components of personnel services that tend to drive state institutions to a certain level of cost.

But the fact of the matter is the census in Riverview is now down. And that also was a good thing because, again, we are treating more children in community settings and other facilities, less expensive facilities.

The problem is of course that as the census goes down, the cost per case tends to go up. It's like any other institution. You take a few children out of a school, you can't get rid of the principal.

So we're happy that the census is going down. It tends to drive the per cost up, but the per case, the cost of Riverview is primarily driven by personnel costs and primarily driven by the very, very heavy staffing required by the children that are in this facility.

I'd like to touch a little bit on Connecticut Juvenile Training School. CJTS has struggled since its initial years of operation. It has been high profile. It has been controversial. It has also been retooled.

That proposal was not adopted. No funding for those localized facilities were, was approved by the Legislature, and we get the message.

If CJTS is going to remain open, then improvements need to be made for it. In the last Legislative Session, having received that message and also cognizant of the Raise the Age legislation that will shortly go into effect, the Governor introduced a proposal to modify, both structurally and operationally, some of the functions of CJTS.

We will need legislative approval, and we will need legislative cooperation if we are going to make CJTS into the facility that we want it to be.

I just want to add one point before I close. The Department of Children and Families is

perhaps the agency that is under the most supervision and most review and most accountability measures of any department we have in state government.

First and foremost, the federal courts have appointed a monitor to oversee the Department's effort with respect to the Consent Decree.

The agency is measured quarterly on the exit plan. And one could say similar methods is what the Legislature is striving for in its results-based accountability approach.

The Department has two Committees of Cognizance at the Legislature, and not to mention a very active Subcommittee within the Appropriations Committee.

This Department is reviewed frequently by the Child Advocate. The Office of the Attorney General has an oversight role. A host of other state agencies and related entities dealing with children frequently offer input.

They include the Commission on Children, the Children's Trust Fund, the Early Childhood Council, the Poverty and Prevention Council, the Juvenile Justice Policy and Operation Coordinating Council, the FWSN Advisory Board, the Behavioral Health Oversight Council, The Governor's Taskforce for Justice for Abused Children, the Child Fatality Review Panel, the Juvenile Justice Advisory Committee.

With this level of oversight and advocacy, and indeed it is important that this particular area have this level of oversight and advocacy, there is natural pressure from many sides to expand services, which inevitably has budgetary consequences.

I look forward to participating in the discussion at the conclusion of the individual testimony. Thank you so much for the opportunity.

COMM. SUSAN HAMILTON: Good morning, Senator Harris, Senator Meyer, Representative McMahon, Representative Villano, and Distinguished Members of the Select Committee on Children and the Human Services Committee.

My name is Susan Hamilton. I am Commissioner at the Department of Children and Family, and I greatly appreciate the opportunity to be here

today and to talk about my perspective on the important issues that are before us today.

I am confident that all of us here today are genuinely invested in gaining a balanced and accurate understanding about the strength as well as the challenges facing Connecticut's child welfare system, including the performance and functioning of our department in order to promote improved outcomes for the children and families that we serve.

The focus on improvement is fundamental to me and our entire department. And I trust that today's hearing and the discussions we'll have today will underscore that focus and will also provide assurances that despite areas in need of improvement, the Department is not failing in its mission to protect children, to improve child and family well being, and to support and preserve families, despite some recent reports to the contrary.

I think, as all of you know very well, the work that we do at the Department is complex. And the families that we serve are often struggling with a host of societal issues and challenges related to mental health issues, domestic violence, substance abuse, lack of financial resources, isolation, homelessness, and a host of other stressors and risk factors.

On any given day, the Department is serving approximately 35,000 children across the state from approximately 16,000 families. And we have 52,000 children in placement.

It's my understanding that in part, we are here today driven by some recent reports, as Senator Meyer referenced, particularly related to Riverview Hospital, the tragic fatality of a child in foster care that occurred in May of this year, as well as some progress reports regarding our performance under the Juan F. Exit Plan.

Given that focus, I have provided the Committee Members with a detailed briefing book providing additional information on those topics as well as written testimony.

And in addition, I have chosen to highlight the systems of accountability that the agency has both internal and external, and also provided information regarding the status of our implementation of a statewide, integrated strategic plan.

The materials that I've provided, and I hope the discussion today will highlight the following.

With regard to the exit plan, the Department's performance has been impressive. In 2004, when the exit plan was initially entered, we were meeting 1 of the 22 outcome measures.

As has been noted by Secretary Genuario, we are now currently meeting, or close to meeting, 20 of the 22 measures. And notably, the majority of those have been maintained and sustained for the last two years.

Clearly, we still have work to do on the areas that remain outstanding, and we have entered, recently, an agreement that is specifically targeted towards expediting improvements in both outstanding areas.

There will be other notable trends that I think deserve some discussion. There has been a reduction in the number of kids that have required out-of-home placement into foster care, meaning that we're able to serve more children at home as opposed to in foster care.

We have increased for many kids the timeliness to permanency, whether that be reunification with their families, adoption, and transfers of guardianship.

There has been a significant reduction in the number of repeat maltreatments, the cases in which children are subject to ongoing neglect and abuse.

We have increased the ability for children to be placed, if they do have to be placed in foster care, they are placed more often now with families than they are institutional settings and residential placements, increasing in-home services.

And on the juvenile services side, we've seen an, I think, encouraging trend in a reduction in the number of delinquency commitments that we're seeing, meaning more children on the

juvenile services side are being served successfully in the community.

With regards to Riverview Hospital, I welcome the opportunity today to have a broader discussion about some of the issues that have been raised in the most recent quarterly report issued by the monitor for Riverview.

This report noted in part concerns regarding restraints and seclusions at Riverview. And I need to start by saying that I first share very much the Child Advocate interest in looking at reducing the numbers and the need for restraints at Riverview.

And I'm prepared to discuss today our efforts in that regard. However, I do believe, and I hope we'll have some discussions around the global well being and safety of children at Riverview, which I feel differently about perhaps in some respects that was indicated in some of those reports.

As the Secretary mentioned, the cost for Riverview clearly is high. No matter when you use the comptroller's calculations or the Department's calculations, which are in your materials, it is a costly program.

And the per diem costs have risen in connection with the reduction in census, which was a positive and something that I think the Department, the Child Advocate, and the Court Monitor had collectively recommended in 2006.

The single most difficult event during my last 16 months was the death of a child in foster care in May of this year.

As many of you know, the foster parent, who was also a DCF employee, was arrested in connection with that fatality.

The death of any child for any reason is difficult to comprehend. When it happens at the hands of someone who has been entrusted by the state with the child's care, it is an unspeakable and unacceptable tragedy.

In response to that incident and that issue, I immediately evaluated the case, as you would in the aftermath of any critical incident like that.

We did identify some individual performance deficiencies regarding a few staff that had been involved, as Senator Meyer mentioned, in some prior investigations, two of them involving the employee as a parent with her own child.

Both investigations had been unsubstantiated, but I had concerns around the quality of those, and we did take disciplinary action involving the worker who had done those underlying investigations.

In response, we had, in addition to the discipline that was taken in connection with that, we also began outsourcing, October 1st,

the licensing of any DCF staff who are seeking to be foster parents.

That had historically been done internally through a central unit at the agency. And to avoid even the appearance of any conflict of interest in our licensing, that has been outsourced to independent agencies.

In addition, the unit that investigates all of our employee reports of abuse and neglect has been overhauled, put under new management, and other changes have been made to that unit.

And lastly, there was a systemic concern we identified in response to that review, which was that investigations, if they were unsubstantiated, involving DCF employees had not been entered by that one unit into our DCF database, and that has, all prior investigations and all future investigations of employees have now been entered.

Nothing can or will take away from the effect that that death had on me, on our entire agency, on, obviously, his family.

And I will continue to hold myself, my staff, and the system accountable for any changes that are needed.

With regards to systems of accountability, the Secretary did a nice job of highlighting those. I don't know of any other agency, clearly, at least here in Connecticut, that is subject to the level of oversight and internal or external

monitoring than our department, and we welcome it.

We glean valuable information from our own internal analysis of our work and, I think even more importantly, from those external reviews that are done and the feedback that we get from all of those entities that assist us in evaluating our performance.

We do, and we'll have an opportunity, I think, to discuss many of those opportunities at length. But the federal CSFR that was already mentioned this morning is clearly an important one.

That is a federal agency that oversees all child welfare agencies across the country every five years.

They recently just completed their second round of reviews here in Connecticut and identified some significant strengths, as well as areas in need of improvement, and provide an opportunity for us to focus our energies on those areas that require further work.

I think in addition, I'd like to highlight the importance of the Legislative Program Review and Investigation Committee's work historically over time with our agency and others.

But they conducted a review on, issued a very helpful report last fall, particularly related to our areas of monitoring and evaluation.

And I was pleased to see, as a result of that, that they highlighted many strengths that they felt were lacking in prior reports with regards to monitoring and oversight.

The noted the exit plan oversight activities, our own internal oversight and monitoring, and identified some areas as well in need of improvement, many of which we have already begun to implement.

One of the recommendations specifically related to the development of the strategic plan. I have communicated with some of you already, and we can certainly have some discussions today about our work in that regard.

It was clear to me that there was a increased need to look at a truly outcome-driven, performance-based, integrated agency-wide strategic plan.

And we have been working on that and are soon to implement that structure, as recommended by the Program Review report.

And I guess I would be remiss if I didn't also comment on my view about the suggestions around breaking up or carving out any of the core mandate areas of the Department, placing them under different agencies or creating new agencies to oversee those.

It is my position that carving out any of the main mandate areas around behavioral health, juvenile services, child protection, or

prevention would likely give rise, in my view, to unintended fragmentation without any corresponding increase in efficiencies or improved outcomes.

I'm fully invested and supportive of exploring alternatives and looking at ways that we can evaluate the various options of how to organize in a more effective way.

But I do believe that creating separate agencies, which may be one of the options on the table, would likely create greater obstacles for families who are seeking services.

I want to thank you again for the opportunity to be here today. I am very much looking forward to our discussions.

I know that we have many challenges as a system and as an agency. But I also think it's important to note the progress that has been made, not only with regards to our internal functioning and monitoring, but with regards to the outcomes that we're seeing.

And I don't think that that progress in the outcomes are indicative of a failing system or a system in crisis.

We have work to do, but I think that's an important to keep in mind. And we need to work together, all of us who are invested and share that same [Gap in testimony. Changing from Tape 1A to Tape 1B.]

--thank you.

SEN. HARRIS: Thank you, Commissioner Hamilton. Now I'd like to invite up the Child Advocate, Jeanne Milstein.

CHILD ADV. JEANNE MILSTEIN: Good morning, Senator Meyer, Senator Harris, Representative Villano, and Members of the Committees.

Thank you for the opportunity to be here this morning, and thank you for conducting this important investigatory hearing.

I'll summarize my remarks. You have my written testimony before you. As the current economic climate places greater stress on Connecticut citizens, now more than ever, taxpayers want to be sure that DCF, which I view as our most important state agency, that which is charged with protecting and caring for our children, uses every bit of its, oops, Secretary Genuario, almost \$1 billion budget effectively on behalf of Connecticut's children and families.

I also want to recognize the good work at DCF. There are many dedicated people who work hard and care deeply. We can all agree that there are pockets of progress, which I have outlined in my written testimony.

As an independent investigatory oversight agency, the Office of the Child Advocate has very unique access to a great deal of

information, which gives us the unique ability to understand what is happening.

And we too want to make this the best agency possible. So when we see where progress has been made, it is often reaction to a crisis or external pressure. It takes pressure to get action.

And OCI isn't the only entity that has shared our observation. They include the Program Review and Investigation's review and the court and the Office of the Attorney General.

We have repeatedly seen reactive leadership rather than proactive assessment and long-term planning for individual children and the agency.

Much of the progress over the last decade and during the last two years has been in response to the constant scrutiny of the Juan F. Consent Decree Exit Plan and other external pressure.

Only under the threat of federal receivership did DCF agree to conduct a high level review of all children with no hope of ever living with a family and finally released a detailed plan to recruit and retain the necessary pool of foster homes.

Only under pressure from my office and the Attorney General's office did DCF close Haddam Hills in 2001 and Lake Grove last fall.

Despite known and persistent concerns about the health, safety, and well being of children, DCF continued placing children in these facilities, in the case of Lake Grove, for almost a decade.

And most recently, only in response to the tragic death of seven-month-old Michael Brown did DCF take swift action to stop the practice of keeping paper files on DCF employees accused of abuse and neglect, rather than documenting these cases in the DCF database as required in all other cases.

Today, after nearly two decades, the federal monitoring and innumerable [inaudible] and repetitive findings and recommendations related to systemic deficiencies, DCF has a draft strategic plan that we haven't seen.

DCF has a draft reorganization plan, and DCF has its third foster care plan in two years. DCF has its third iteration of a plan to implement the differential response team. We've talked about Riverview Hospital.

At the Governor's request, we have a monitor at Riverview Hospital. DCF also has costs there at Riverview which are astronomical, and we have seen an increase in restraint and seclusion and injuries to children.

We have numerous [inaudible] care settings that are under corrective action and many significant events that are reported.

We don't yet have a continuum of care for growth. And this summer, record numbers of adolescent girls, 90%, with current or past involvement with DCF are incarcerated in our maximum-security prison for adult women.

Nearly 90% of these girls were incarcerated and subsequently released under pretrial status, meaning that is, that they have never been convicted of a crime, yet they are in the maximum-security prison for women.

And again, perhaps most notable, after nearly 20 years under Juan F., DCF continues to fail to meet the needs and provide adequate treatment planning for nearly half of the children in its care.

And those are the real quality measures for a child [inaudible] that treatment planning. The concerns that I raise today, related to leadership and management, are not new.

They have been raised again and again by my office and by other investigatory entities, including Program Review and Investigations, the court, and the Office of the Attorney General.

Many of the people in leadership positions at DCF during these investigations continue to guide the agency in leadership positions today.

I've used every tool in the arsenal provided in state statute. I've gone as far as I possibly can go with the resources that I have. I still

have not seen meaningful and sustainable, and I emphasize the word sustainable, change at DCF.

So my recommendations today, and I'd really like to focus on the recommendations, urge you to move us forward dramatically.

We need better planning, meaningful oversight, strong management and leadership, accountability, and transparency.

Commissioner Hamilton has drafted a reorganization plan, and there's much debate about the merits of the consolidated agencies.

Yet, and I support Commissioner Hamilton's view that the Department of Children and Families should be, remain a consolidated children's agency.

But given past reorganizations, however, there isn't strong indication that reorganization improves functioning.

So I urge you to move beyond this idea of structural change and to look at whether DCF today, at all levels, has the right people with the right skills to actualize and sustain fundamental change.

Are they in the right positions, and again, at all levels? At the same time, we need to continue to ensure that DCF is held accountable to respond in a timely and specific manner to the findings and recommendations of investigatory and oversight entity.

My written testimony includes a couple of specific legislative recommendations, including great recommendations by Program Review and Investigations.

So today, I would urge that you consider perhaps conducting a management study akin to that done recently for the Department of Transportation, a study that was done which informed, by change management principles, used by successful corporations, that look at the skills and talents of those in leadership positions and ask whether we have the right people, again, with the right skills in the right positions.

I really believe that a look at the organizations talent and management, again, at all levels of DCF is essential to expedite the fundamental change needed to finally bring DCF from the brink of federal receivership.

We need to go beyond draft plan to implementation. We need leadership and management with proven knowledge and skills to get the job done.

Connecticut's children and our families are our future. They and all of Connecticut citizens deserve nothing less than our urgent attention and response to ensure that they arrive with the building blocks for successful adulthood. Thank you.

SEN. HARRIS: Thank you, Ms. Milstein. Now if we could invite all of our presenters to sit up, to sit up at the desk. You can sit up straight too if you like. Thank you. And I will then turn it over to the Committees first for questioning. Senator Meyer?

SEN. MEYER: Thank you, Senator. Let me say at the outset that I find it absolutely astounding and very upsetting, as one State Legislator, that there could be such a fundamental difference between the four of you sitting at the table.

On the one hand, the administration, which has been struggling through this and prior administrations with this agency, and it does of course have the societal problems that the Commissioner well articulated, it's finding, the administration is finding this as an agency that's not failing, I'm quoting, in the performance of their responsibilities.

I, we got a financial analysis from OPM, which was appreciated, but basically said let's continue the course. This course can't be continued.

I speak as Chair of the Children's Committee who's held meetings in many of these facilities. Many of the Children's Committee Members are present here today. We are very, very distressed about the situation.

I was present at the federal report by the U.S. Department of Health and Human Services and Children's Bureau.

While it pointed out some good things at DCF, it also indicted the agency with respect to permanency results, failure to include fathers in the process.

It put us in a very low national ranking there. It put us in a very low national ranking with respect to the agency's effort to reunify families. It was a striking indictment.

And I just don't understand it. And from a taxpayer's standpoint, you know, we're being asked today, back in our districts, repeatedly, what are we going to do about this, our state budget?

And, Mr. Genuario, you testified that the DCF budget is sound. I can't go back home and tell my constituents it's sound at almost \$1 billion dollars, with the [inaudible] that are going on in the programs, the recidivism at the juvenile training school, the matching of juvenile delinquents at Riverview with children who are mentally ill.

You know, we only average about 64 children at Riverview Children's Hospital. We average about 64 at one particular time. It's costing us \$48 million. I don't, I just don't understand that.

And I don't understand, as I said, I'm very upset at the difference between the four of you at the table who have had so much government

I would like to ask specific questions in only two areas this morning, if I might, please. And, Commissioner, the first one is to chat with you a bit about the death of Michael B.

We've had to pick up the, we have to pick up the newspapers to find out what's happening. You and I have never had a discussion.

I think it was Paul Newman who once said in a movie, there's an absence of communication. I feel an absence of communication with you and the Department on this, as well as other horrible, tragic incidents.

In 2003, she was investigated for abuse of her own children and got, the finding was that there was no substantiation of the abuse of her own children.

You thereafter found that that investigation was incomplete, was not satisfactory, according to your standards, which is commendable.

And that investigation was, to use a pejorative word, was concealed because it didn't go into the database of the DCF files. It was just a hard copy, a written report, kept outside the database.

And therefore, when a time came to assign Michael B. to this DCF worker, whose name was Suzanne Listro, and that assignment was made on Monday, May 12, of this year, the agency did not know about the prior investigation of her for abusive children and placed her, on May 12, with Suzanne Listro, an employee of your agency.

And then just a week later, on May 19, allegedly, the child was killed by a blunt instrument. And homicide charges have been leveled against that mother.

The information I have also shows, as I said before, that the prior investigation, 2003, of Suzanne Listro did not get into the database, was not known to your agency at the time, and the horrible, horrible mistake was made. And am I accurately and faithfully reciting the facts as you understand them?

COMM. SUSAN HAMILTON: Well, I have a couple of clarifications, but, yes, in part, what you're saying is accurate. When the licensing staff,

who conduct the licensing of foster parents, well, let me step back.

There were two prior investigations involving this employee in connection with her own child that she had adopted through an international adoption agency some time ago.

Those, there were two investigations that were done. Both of those were done by our Special Investigations Unit, which is a centralized unit in our central office.

Those investigations were unsubstantiated. And because they were unsubstantiated, consistent with the entry of other employees at the agency, there were not entered in our LINK Database.

So I would not use the word concealed. Unfortunately, that practice in that individual unit for employee investigation was consistent with how they were entering other records.

So I don't know if concealed would be the way I would describe it. But the fact of the matter is that they were not entered into our LINK Database, for employees only, by that one unit. So when the--

SEN. MEYER: Excuse me, you had a practice, the agency had a practice, did it not, that in the case of abuses by DCF employees, you didn't enter it in the database, but you did enter abuses by nonemployees.

COMM. SUSAN HAMILTON: Yeah. If it was unsubstantiated, they were not, for on employees, they were not entered. And that has now been rectified.

But substantiated investigations of anybody obviously are entered into the system and part of our centralized child abuse and neglect registry.

So therefore, when the licensing staff who were conducting the home assessment and the licensing process with this individual employee did not have access through the LINK Database of these two prior unsubstantiated investigations.

The issue is that when we looked at the underlying investigation, the employee who had done those investigations, in my view, was not of the quality that we would expect.

And the nature of the investigation and some of the work that was done that came through was not thorough. So it's hard to determine.

We don't know whether or not that investigation would have been substantiated if some of the additional work that we were doing, investigation was actually done.

So that was the employee's performance deficiency that I recognized. But the systemic concern related to, again, the entry of the employee unsubstantiated report that

[inaudible] received, that they didn't have access to in our LINK system--

SEN. MEYER: Did you have a policy at the time that investigations of DCF employees for abuse of children, as in the case of Suzanne Listro, would not be entered into the database?

COMM. SUSAN HAMILTON: No, it was not a policy or a directive, but that unit was--

SEN. MEYER: Was that the practice if it was--

COMM. SUSAN HAMILTON: That was the practice. That was the practice of that--

SEN. MEYER: It wasn't a written policy, but it was the practice.

COMM. SUSAN HAMILTON: Right, and that came to my attention on the heels of that.

SEN. MEYER: And is that changing?

COMM. SUSAN HAMILTON: That has been changed.

SEN. MEYER: That has been changed.

COMM. SUSAN HAMILTON: Hundreds of, all of the prior reports of any employee unsubstantiated now have all been entered into our LINK Database so that will no longer be an issue in the future.

And any future reports of employees will also be entered, substantiated or not. We've rectified--

SEN. MEYER: Okay. But you understand that there's a considerable public concern here, that DCF has been entering into the database abuse investigations with respect to nonemployees of DCF, but with respect to employees of DCF, it has not entered them into the database.

COMM. SUSAN HAMILTON: Right.

SEN. MEYER: And it looks to the public and the people who call my office, and have written me and e-mailed me, it looks to them as though DCF is very improperly protecting its own employees.

COMM. SUSAN HAMILTON: Yeah. And I think, and I obviously shared the concern around those unsubstantiated reports.

Regardless, every record should have, you know, be entered so that people can access them through our automated database.

But I do want to clarify that, obviously, any report that is founded or substantiated, regardless of whether you're internal to the agency or not, are entered.

I think in part, that unit was doing that, and I'm not condoning it, obviously. We've halted that practice.

I believe that was done in part for confidentiality reasons in the event that employees who work here would be more apt to

Regardless, that has been rectified. And I should also note that even unsubstantiated reports of any of us, if any of us had an unsubstantiated report that was entered in the system, those are expunged after a certain period of time if there are not future reports because clearly, that's not information that should be utilized against anybody, whether you work internally or not, after a period of time.

SEN. MEYER: Yes, absolutely.

SEN. MEYER: And what about the investigation of employees? That's another conflict of interest.

If a DCF staff person is investigating an alleged abuse by another DCF person, that looks to me as though it's full of conflict of interest.

COMM. SUSAN HAMILTON: Yeah. That used to be done actually in our local area offices. We have centralized that, again, to a unit out of central office to, you know, minimize the concern that somebody who works with a coworker in their own office might be investigating them.

So generally, the staff who are doing that are not located, well, they are not located in the same location and do not work on a daily basis with the employees that they're investigating.

SEN. MEYER: Okay. My understanding is that after the killing of Michael B., you ordered a finding as to how many other child abuse investigations there were against DCF employees.

And I think the figure that I read was that you came up and found 549 investigations of child abuse, alleged child abuse, by DCF employees. Is that correct, 549?

COMM. SUSAN HAMILTON: I forget the total. Yeah, dating back, yeah, so 12 years, dating back 12 years, any report that was ever made against any employee, whether in connection with, yes, so, and reports against individual employees with regards to their own children, and other

reports that might have been raised with regards to their--

SEN. MEYER: Yeah. That's an enormous number of children, and to me, it's an enormous number, even though I have six. It's a lot of children.

And were all, were any of those 549 cases of DCF employees abusing children entered into a database, or were they all kept out of the database?

COMM. SUSAN HAMILTON: No, they've all been entered. A percentage of those had been entered because they were substantiated. But a very small percentage of the overall report involving employees are in fact substantiated.

So the issue was, my concern was that I wanted to make sure any prior unsubstantiated report was in the database, even if it wasn't substantiated, reason being, just like it is with anybody else, that information is relevant in the event that there's a future report involving that particular individual.

So that was the impetus behind making sure, regardless of what the status was of the investigation, that the information was--

SEN. MEYER: Okay. Commissioner, I think we just need an assurance from you, both of our Committees, that currently, there are no children placed with DCF employees who have been the subject of investigations,

particularly investigations that have proved to be faulty, as you've gone through your review. Is that a fair assumption?

COMM. SUSAN HAMILTON: I think it's a fair assumption. I mean, we went back and looked at, in addition to all the other safeguards and issues that we've looked at with regards to that incident, we also went back and had a heightened level review for any prior unsubstantiated closings of cases involving employees, again, to sort of look at whether or not, even though this was one employee that was involved in this investigation, we wanted to make sure that the quality of the other reports was not of equal concern. And so I think that I have a level of comfort with regards to that [inaudible]

SEN. MEYER: Okay. The last question I have on this death was the question of whether or not you've discovered in your own review, and it sounds to me as though your own review was conscientious, did you find in your own review that you actually were not aware of the practice of the agency in failing to put these investigations of your own employees into the database? Did you, you did not know--

COMM. SUSAN HAMILTON: I did not know that unsubstantiated reports were not being entered promptly. I knew, I assumed, and of course it was true, that all substantiated reports, regardless, are entered.

SEN. MEYER: Is that true?

COMM. SUSAN HAMILTON: Yes.

SEN. MEYER: They are entered?

COMM. SUSAN HAMILTON: Substantiated, and now
[inaudible] even unsubstantiated reports.

SEN. MEYER: But now we've got a question about
what's substantiated and not substantiated
because, as you candidly pointed out, this was
an investigation of Suzanne Listro, which was
conducted negligently and indeed may have well
been substantiated. And that's, okay.

I want to chat with, briefly about Riverview
Children's Hospital, if we could. The
Children's Committee has been out there. We've
looked at the situation. We've met with the
director. We've met with the staff.

And I read, Ms. Milstein, your report of July
of this year, July 17, in which you indicated
that there was, at the time you prepared the
report, an expenditure, \$724,795 per child per
year.

And then you later amended that, as I
understand it, to the fact that the state is
now paying about \$860,000 per child per year.
Is that right?

CHILD ADV. JEANNE MILSTEIN: I think, yeah.

SEN. MEYER: And you compared that in your report to
what you viewed as the ordinary cost for this

kind of a complex child in care. And you put it considerably lower than that.

What are we doing wrong in Connecticut, in your view, to have such a disparity between the \$860,000 per child on the one hand and the cost that you find in other similar private hospital facilities for troubled children?

And I think, looking at your report, you said that the cost naturally was between \$292,000 and \$365,000 per child per year, you know, maybe one third or two thirds less than what we're paying here in Connecticut. What did you do to substantiate that?

CHILD ADV. JEANNE MILSTEIN: Well, the numbers that were in the letter, and that \$860,000, the reason that wasn't in the letter was the comptroller's new numbers came out about a week or so after we sent that letter over.

So those are the comptroller numbers for Riverview Hospital. As Secretary Genuario pointed out earlier, there certainly is a factor in terms of being a state-run facility.

However, having said that, is it still a substantially higher number than private facilities of, I use Connecticut as an example, substantially higher.

For example, the Institute of Living was about, their cost about \$800 or so per day per child up to, I think it was, the numbers that he quoted, \$365,000.

Currently, the [inaudible] has dropped.
There's also been a number of consultants at
Riverview Hospital.

I think we'd have to get the comptroller in
here to discuss more in detail what the numbers
are. All I did was report on, you know, what
like facility we're paying for the cost of
care.

SEN. MEYER: Okay. One of the costs that you cited
was in the last fiscal year, that it was almost
\$3 million of workman's compensation payments
to staff, maybe patients, I imagine to staff
who suffered injuries there. Is that correct?

CHILD ADV. JEANNE MILSTEIN: That is correct, and
that--

SEN. MEYER: What is causing that huge amount of
injuries?

CHILD ADV. JEANNE MILSTEIN: The greatest likelihood
of injury in a facility is the use of restraint
and seclusion.

Because the numbers of incidents of restraint
and seclusion were so high at Riverview
Hospital, it is more likely that staff will get
injured. So the worker's comp numbers are a
very significant part of this budget.

When you see other facilities reduce restraint
and seclusion, their worker's comp numbers go

down as well, and the number of injuries go down.

SEN. MEYER: Okay. Your report is critical of the restraint and seclusion practices at Riverview Children's Hospital.

And, Commissioner, I just want to ask you what the philosophy of your agency is with respect to restraints and seclusions.

COMM. SUSAN HAMILTON: I actually think, Senator Meyer, that that's an area where we agree. And I didn't comment earlier, in response to your earlier question, about where I believe there is significant agreement amongst the four of us.

While clearly, we have different perspectives on the issues before us today, I think we do share some of the same concerns.

So the philosophy on the importance of reducing restraint and seclusion we share with the Child Advocate's office, and we have been working very closely with them and with the monitor that has, I frankly would also want to commend her work specifically with regards to our staff there.

There has been, in my view, a real culture shift over the course of the last year with regard to our emphasis on looking at ways to reduce the likelihood of many for restraint and seclusion.

I agree we are not seeing the numbers trend in a way that we would like. We would like to see a consistently downward trend in the use of restraints at Riverview, and it tends to fluctuate in a way that we want to continue to address.

So my, the question on the philosophy is that we share it. Obviously, there are instances where, despite our best efforts, it may be needed to protect the child or others.

Our state statutory scheme, as you know, doesn't make it a prohibition for good reason. Given the level of a few of these, of the needs of the kids at Riverview and in some of our other programs, the legislative framework for that does allow for the use it, but only, and it should be limited, and it appropriately is in the statute, only in instances where it's necessary to protect the child or protect others.

And so our emphasis right now is really working together with the monitor to look at incidents of inappropriate use of restraints and seclusion.

And how we define restraint too, I think we should know. And I think that the Child Advocate's office has done a good job of highlighting some of the areas where we have seen progress.

We're no longer utilizing two-point restraints at all throughout the entire facility for the last--

SEN. MEYER: Okay. Commissioner, let me just give you the impressions of an observer that goes out. I did go out there.

I remember going out first in 2005, and there were lots of injuries on the staff because of restraints and seclusions in part.

Indeed, I think 30% of the staff at the hospital had filed workman's comp claims because of injuries.

I went out in 2006. The philosophy of the hospital had totally changed. It had become a tough-love policy. There was no restraints and seclusions.

There was a room called the time-out room, which was closed. No one, you know, kids going in it. I asked them if I could borrow it because I needed it for one of my grandchildren.

And so it was closed, no restraints and seclusions. Now we come back into a situation, as the Child Advocate has revealed, where there's intense restraints and seclusions again.

And I have to tell you, as a nonprofessional in this area, it gives the Children's Committee a feeling that the agency, DCF, is undecided

about whether or not this is a good policy or a bad policy. And the Child Advocate says we're going in the wrong direction.

COMM. SUSAN HAMILTON: Yeah. I mean, I think, I don't want to speak for you. I would hope that, well, two things.

One is we're not seeing the trends going in the right direction, and we really are, but that being said, there is a genuine, invested commitment by myself personally, but the staff at Riverview.

And I know we don't have the opportunity here today to open this up to other folks. But when we have that chance, I think that you would hear that loud and clear, not only from the staff who work there, the leadership of that facility, but also the families that are, we have some who I know wanted to speak today to their experience with the hospital.

So my answer to that is there absolutely is an investment in that. We haven't seen, as I said, I'm recognizing, I guess, the failure to see some successes in those reductions.

But as of, I think in part, in response to the most recent quarterly report and I think just the ongoing work with the monitor, we have recently revised a strategic plan there with some input from them as well, to focus clearly on the first round of the strategic plan, following the 2006 report, was around staff competencies, changing the atmosphere at the

facility, and looking at being able to collect data in a reliable way.

But we've now recodified and refocused the strategic needs and looked specifically at the reduction in restraint issues, since we're not seeing a trend in the right direction, and looking at comfort and prevention strategies, debriefing following incidents, which has been implemented there, as well as workforce development.

So my answer is absolutely committal, 100% yes, we share that goal. And to the extent that we can reformulate our energies in a way that will accomplish what we want to see collectively, we're invested in doing that.

SEN. MEYER: Okay. The Children's Committee, I'm sure, will be out there at the beginning of next year. Child Advocate Milstein, do you have a question?

CHILD ADV. JEANNE MILSTEIN: --and I agree, there have been improvements at the hospital. There's better communication. But I'd like to use Riverview as just an example of the systemic issues that we've been talking about.

It took, it was a reactive way to deal with the problem. It took a monitor to point out some of these issues.

And I would argue that DCF has a lot of data that's available to you, excellent data. But I think it has to be used in a more meaningful

way so some of this could be predicted before it happened.

And just in terms of the environment at Riverview, I think, you know, at this point, and you're definitely moving in that direction, to really make it a clear statement about this is the vision we have for this hospital.

This is the expectations we have for staff. We are moving from an environment of control and consequence to a therapeutic environment. And you need to be very proactive.

I would also argue, going forward, you know, looking at the cost issues, looking at the reduced numbers, that some kind of taskforce actually be set up to look at the operations of Riverview Hospital in terms of not just the dollars but the direction that it's going in as well.

COMM. SUSAN HAMILTON: I mean, you know, I would not be opposed to that. I do think though that we have a host of existing groups that are looking at that strategic plan for that very reason, to make sure that the initiatives are targeted, that there's ways of measuring them.

And to the extent that we need to add other folks to that, I would hesitate to create another, you know, separate taskforce to look at this issue when we have existing opportunities for that.

But I think, you know, we can certainly have those discussions around whether there are other folks that we would want to bring to the table.

But I do, you know, again, and we, I don't want to split hairs because I think we agree on where we want to go and where we want to be ultimately.

SEN. MEYER: Okay. I just say in conclusion, this is a comment, that the Secretary and the Commissioner have said that we've got numerous wonderful advisory groups and oversight groups of DCF.

And I think that may well be right, that we have numerous, but I, for the life of me, I can't see how they're effective. And that's one reason we want to take a deeper look at this troubled agency. Thanks, Mr. Chairman.

SEN. HARRIS: Thank you, Senator Meyer. I just want to quickly follow up, since we're on the subject, what the Child Advocate said with respect to productivity.

Could you give us some idea about what you have been done, you have done since you took over as Commissioner to be more proactive?

And what are the actual procedures in place? What do people do to deal with this data that you get to be proactive?

COMM. SUSAN HAMILTON: Well, as I mentioned, I think following, in part, our, the changes that were made in 2006, the entire management and staffing infrastructure at Riverview was changed.

There's new leadership at Riverview now that really has developed not only the capacity to measure the numbers of restraints and the circumstances that are giving rise to those restraints, but in particular have set up concrete points at which the managers, the supervisors, and the individual staff involved in those restraints are actually brought together to look at what was done, what could have been differently to prevent the restraint.

And that's on top of a host of various training that has been done with staff on different techniques and ways to intervene to deescalate the need for the restraint, and different ways of documenting, utilizing.

Again, a lot of this is stuff that we've collectively worked on together to look at ways we can document the restraints so it's not just numbers we're looking at because I also think that, to the extent you look at trends and data across frequency, that's important.

But you also have to look at the underlying nature of [inaudible] to be restrained, and was it an inappropriate restraint, or could it have been avoided.

And so I'm, I have our superintendent that could go into lots of detail about what she's been doing there, but there's been a whole-scale change in the focus of how they conduct their work.

And to the extent that we talk about workman's comp and patient injuries, they, I have different, somewhat different figures perhaps, but I'm not seeing huge increases.

In fact, we're seeing slight decreases in the number of injuries that are being, that are happening as a result of restraints, that clearly it gives rise to.

And so to the extent that we can reduce that, that's where we want to be. But the infrastructure has changed completely around training, oversight, debriefing, and learning from those instances so that we can implement strategies that can avoid it whenever possible.

SEN. HARRIS: Thank you. I appreciate that. But you're describing internal to Riverview what's been done. When you said, first of all, new leadership, you mean actually new people?

COMM. SUSAN HAMILTON: Riverview--

SEN. HARRIS: Was it just a reorganization of spots with the same people, or were there actually new people that were put in place?

COMM. SUSAN HAMILTON: New staff were put in place at Riverview, so there's new leadership there

that has been, you know, working for the last couple of years and really changing the atmosphere and the functioning of that facility.

SEN. HARRIS: Were they staff from DCF, other places, or were they staff from outside the agency?

COMM. SUSAN HAMILTON: The current superintendent had been a prior superintendent at one of our other facilities.

And I will say that, you know, that these folks, generally internally and externally, have been fused with her management of the facility and the progress on a host of fronts that we've seen there, so, but that would be the answer to that question. It was, in part, internal staff that would be from other facilities.

SEN. HARRIS: And again, Commissioner, now you're talking about what's happening within the agency. Between, or excuse me, within Riverview.

Between Riverview and your office, ultimately, you being ultimately accountable to the Governor, what's the interaction there?

I mean, what do you do to make sure that not only new people are there, but that results are being achieved?

COMM. SUSAN HAMILTON: Right. Well, we review, I go out to Riverview somewhat regularly, but we also have a strategic plan, as we said, where there are quarterly reports that are done, monthly reports that are done, that are sent up to my office that I can actually track as well the trends that we're seeing with regards to the functioning of the facility, plus a host of outcome areas, restraints and seclusions being one of them.

So I think that the facility management is very clear about my direction and our focus on this issue in part, and also the more global outcomes that we expect from the hospital.

So there's ongoing meetings that we, that central [inaudible] and myself and my chief of staff have with the management at Riverview that I think accomplishes that goal to make sure they're clear about my vision and my message.

I also would say that, and I'm not sure this was your question, Senator, but we're also doing work with our other providers, not just our own facility, in trying to make restraint and seclusion, a reduction of that, a priority across the board, looking at refining what the expectations are for when that is appropriate and when it's not appropriate, and then collecting data and being able to monitor programs in accordance with that data.

SEN. HARRIS: I, my question actually was even more global, just in general, with respect to

productivity because I think one of the things that I've been struck by as I've delved into this is the fact that we seem to have a system of reaction, that something happens, and then there is a reaction to what happens, but that there doesn't seem to be a implementation of plans and proactive steps taken to prevent.

And I think that's really more of what I'm looking for is for you to be able to outline to the Committees in general how you can be better at proactively preventing some of these tragedies from occurring.

COMM. SUSAN HAMILTON: I appreciate the question. I think that, and certainly, some of the materials I've provided goes into a lot of detail on, the briefing book, beginning on page 43, about the host of work that's being done at Riverview.

I'd be happy, I did not attach the strategic plan for the facility and the quarterly updates. I would respectfully disagree in part with your comment that things are always reactionary.

I mean, our intent with the development of the strategic plan was to not be reactionary, to say, here are the things, from a strategic perspective, that we want to see happening over the course of the next year, three years, five years.

And it specifically tracks those things. And we try to do those and set them, those

expectations, those goals, in a measurable way so that we can track them and that we aren't just reacting to incidents as they occur.

So if that would be helpful, I would be happy to share that as well with the Committee because I think it would, in part, respond to your question.

SEN. HARRIS: Well, I'm going to move on now. But what I would like is not just strategic plans but examples showing how conduct within the agency actually takes that information and does something with it proactively.

I don't need a piece of paper saying here's what the plan is, and here's what the data is, because we have reams of plans and reams of data, as you say, reams of organization, looking at things.

But I need to know the human behavior, what's happening, who's responsible to make things better. That's what I'm looking for in documentation. Secretary?

SEC. ROBERT GENUARIO: If I can comment, and I'll give you one example that I'm familiar with. Probably around 2004, 2005, determination was made by leadership of DCF, working with the federal court, the federal court monitor, that there were too many people, too many children in these residential facilities, be it Riverview, be it High Meadow, the state-run facilities, isolated from the community.

The Department developed a newer, robust, community-centered system. They developed therapeutic group homes, where instead of children being isolated from the community in one of three facilities, they would receive their therapy within the community, be connected with the community.

We now have multiple, I think it's over 50, therapeutic group homes around the state over the course of the last 3 or 4 years.

And if you look at the data, you will see that the census, not only in Riverview, but in all of our state-run residential facilities has dropped.

Now that means it's not that cheap. It's actually cheaper to take care of them in the residential facilities than it is in some of the therapeutic group homes.

But it is a better methodology of service that not only the leadership of DCF felt was important, the federal court felt was important, and was implemented in a perspective proactive way.

And that has rolled out very efficiently and very effectively. That's just one example that I can give you.

You know, I will comment on Senator Meyer's original comment because I have the same reaction. I'm sitting in the back here, and

I'm listening to my two friends, and I'm listening to Commissioner Hamilton.

I know what I said, and [inaudible] and that's not a good thing because we're all working with the same agency. And certainly, we all look at it from different perspectives.

I don't want my testimony, and I'm sure Commissioner Hamilton feels the same way, in any way, shape, or form to suggest that there isn't substantial room to be done.

I believe that the objective facts would indicate that there has been not just sporadic but a consistent improvement in the care provided to children over the course of the last four to five years.

More needs to be done. We need to look at the most efficient way to do it. I'll tell you, in Riverview, from where I sit, it's a lot of money. It's a lot of money per child.

And if anybody wants to sit with me or with the Commissioner and look at the, it's primarily personal based, look at the staffing and make some suggestions or discuss a better way, a more efficient way to deliver these services to these children, I'm all ears.

I don't come here with a closed mind. I want the best service for these kids at the most efficient price.

SEN. HARRIS: Thank you. One final follow up just to ask for future information, not necessarily a response now, I think my lack of understanding of this is that you, it's great to be able to say, if you look at the numbers quantitatively [Gap in testimony. Changing from Tape 1B to Tape 2A.]

--going to prison, how they become productive members of society. Then you could show me the things that have gone down forever, and that doesn't give me the complete answer and explain how not only are people's lives being affected, but how nearly a billion dollars of taxpayers' money are being spent to what outcomes. So that's the information that I'm seeking, not just the numbers, quantitative but qualitative.

SEC. ROBERT GENUARIO: I think that's a fair question, and it gets to the heart of the matter.

And I think that the Commissioner could demonstrate that a lot of the reduction in these residential care is the result of the increase in adoption, therapeutic foster care, and therapeutic community group homes. I think we could demonstrate a direct linkage between those new settings and therapies and the reduction in the residential care facilities.

COMM. SUSAN HAMILTON: And I would echo that, and I would also say that clearly, in addition to the infusion of more in-home, community-based services to serving these kids, without requiring a more restrictive placement setting,

which is one of the goals, we're also seeing, and I couldn't agree more about the need to tie our initiatives.

All of us collectively want to make sure that we're utilizing our resources in the most effective way possible.

So in addition to looking at that, you have to look at what are the outcomes that we're actually seeing, with regards to safety, permanency, well being, across the board.

Clearly, there's always going to be a need for an agency like ours to improve in areas, and there's absolutely no question about that.

And to the extent that we're ever at a place where we say it's good enough, we all ought to stop doing the job. So I agree with that, and I support it.

I think that the outcomes that we can show, particularly when you look at the exit plan outcomes and others, really is, in part, directly related to what we collectively have done, I think, as a system in looking at where we spend our money, and where can we spend it in a way that's going to be more effective.

SEN. HARRIS: Okay. And, Child Advocate, Attorney General, response to that? And also, if you have any responses also to the Michael Brown line of questioning.

CHILD ADV. JEANNE MILSTEIN: Just a couple of comments, on a quality issue, I can't emphasize enough how important that is, going beyond the numbers.

And that's why the two measures that haven't been adequately addressed yet and adequately met in the Juan F. Consent Decree are the needs met of children and the treatment planning. That gets at the core of quality.

And as you pointed out, Senator Harris, we talk about the children might not be in these facilities, but where are they, and what is the quality of their lives?

We look at a lot of DCF data every month. And obviously, we get, you know, hundreds and hundreds of calls in my office.

And the first thing we do is we look at the quality of investigation, which gets to the Michael Brown issue, which we'll deal with in a moment.

But we also look at the data, and we received the number and the reports of significant events that occur at DCF, DCF facilities, every month.

And for example, one month, during, I think it was July, mid-July to mid-August, there were 214 reported significant events. Sixteen percent of those involved medication that wasn't being adequately administered.

So I think it's really important to look beyond the numbers and to look at the quality. What does it mean to be in a shelter or therapeutic group home?

What does it mean to be in foster, what does it mean to be back in the community? I think we really have to understand what that means to understand the outcomes for children.

And just going back to Riverview for one second, and again, there are improvements that are being made.

But your point about, you know, the reactive, I mean the strategic plan, which is really good, was developed sort of after we insisted, after there was investigation. So hopefully, we'll see some more proactive kinds of initiatives.

SEC. ROBERT GENUARIO: Yeah, Senator, I think, you know, you've raised a really key point, reams of plans, reams of data, reams of paper, but someone has to enforce accountability.

And either the Legislature can sit in constant watch, or there has to be some office or function that exercises outside accountability.

Now the Commissioner, for the first time, I think, today, has announced there will be, she called it outsourcing, of the investigative function when DCF employees are alleged to have committed violations of law. I welcome that development.

I don't know who is going to do it. I don't know what outsourcing means. But I think it is a step in exactly the direction that I said the agency has to go, which is essentially to split the investigative and regulatory function from the core abuse and neglect protective responsibilities.

And that is the kind of split that I recommend. I want to say the suggestion of a breakup is a suggestion. It's not a recommendation. I think it just ought to be on the table.

When there is the kind of review that the Child Advocate has suggested, and I hardly endorse a management study, whatever you want to call it, but I think that idea ought to be on the table.

But right now, I think we can say that the Commissioner is moving in the right direction by, in effect, placing outside the agency this function of reviewing the performance of either contractors or parts of the agency that need to be evaluated.

All these reams and reams of paper and plans and data can be digested and analyzed and evaluated by an independent, call it an inspector general.

Put it in the OPM. It doesn't have to be a new agency. It can be part of another agency like the Office of Policy of Management.

SEN. HARRIS: We'll do that within available appropriations, Secretary. Any comments by any

other Members of the panel on the Michael Brown piece? I know that that--

ATTY. GENERAL RICHARD BLUMENTHAL: Well, you know, I stated earlier, as you know, that we believe the 2003 report in fact contained some of the recommendations for action that has been taken by the Commissioner.

And we're very glad that the Commissioner is moving in those directions, but it is five years later.

And you know, I think the other part of this picture that needs to be emphasized is for every Michael Brown that hits the headlines, there are literally thousands of other cases where DCF is doing its job well, saving children.

And hardworking, dedicated caseworkers and staff are saving Michael Browns from similar situations in non-DCF employee foster or adoptive care situations.

So I think we can learn from Michael Brown. But again, we should keep, and I've said it before. I apologize for repeating it, but I really think it's important to emphasize that we've got a lot of the right people.

We just need to enable and empower them with leaders who are in the right places. And that really is a management challenge that we still haven't fully addressed.

CHILD ADV. JEANNE MILSTEIN: Well, you know, just in terms of Michael Brown, and it's still an ongoing investigation in my office because the Child Fatality Review Panel is looking at it.

But just going back to the 2003 report, I think the fundamental issues we found back then, that are related to Michael Brown, are in quality and investigation and then the more thorough analysis and recording of the data. Those are the two areas that I would identify.

CHILD ADV. SUSAN HAMILTON: And I guess I would comment, clearly, with regards to the 2003 report, many of the, well, I think it's important to keep it in context.

That clearly looked at, and I think rightfully so, looked at the quality of investigations practice statewide. We do 27,000, say, approximate investigations per year.

And overall, the quality of those investigations is good. We've had external as well as internal reviews of the quality, statewide, of our investigations practice, and it's relatively sound.

This one employee of the 1,400 staff that we have that do investigations did not do a decent job, and he was terminated for that, and you know, as he should have been.

But I think it's important to keep it in context when we make conclusions about what has

or has not been done in response to some of these reports.

I do know that many of the recommendations that were raised in that 2003 report actually have been implemented, perhaps not exactly in the way that may have been recommended, but I think in part, that's why I would support, I think, one of the Child Advocate's recommendations, that we, I have been doing that since I have come onboard, is to follow up with a response to each recommendation so there is clarification for everybody about what's been done, what we may choose not to do, or what the status will be of those recommendations, because I was somewhat concerned when I received a letter that indicated that we hadn't, it made the conclusion, I guess which troubled me a little bit, that the recommendations from that report had not been implemented, and therefore, this incident occurred.

And my review of it, many of the recommendations, perhaps in various forms, have been followed, and we had an investigator who didn't do a good job. I mean, that is unacceptable.

But I think to draw connections between that and our global investigations practice over the thousands that we do every year is something we ought to be cautious about.

And so, you know, I appreciate that very much. And I do agree with the recommendation here

SEN. HARRIS: Thank you. Representative Villano, my Co-Chair of Human Services, I think you wanted to ask some questions.

But in so doing, you've given the Members of both Committees a very difficult job. Where do we go from here? And it's not an easy task.

But the thing that strikes me first of all, and why we're here, is the statement presented to us by the Office of Child Advocate, are children and families better off for their involvement in DCF?

And as we delved, as I delved into it, I too became disturbed and said that maybe, perhaps

And so I was not surprised to hear the major recommendation of the Attorney General and the Child Advocate for a partial breakup of the office, Department of Children and Families, overall of the existing management and outside objective review.

So these are very difficult things to do, and we're going to have to, again, as I said, take a very good look at what the evidence tells us, what the information tells us, and where the best public policy lies, and how best can we serve our children and families, and go from there.

I wanted to ask Commissioner Hamilton a couple of questions from one of the communications that she sent us.

You said in the letter of September 29th that the development of our strategic plan, which will evaluate the effectiveness of our [inaudible] organizational structure.

But we, and this is the thing that I was surprised to read, and this is a direct quote. Reorganization is being considered solely as a means to support the accomplishment of our strategic planning goals.

That would indicate it has a very narrow defined purpose. And to me, it seems to overlook other problems within the Department. And I would like to ask you if you think that statement still applies.

COMM. SUSAN HAMILTON: I do, but I think I intended it in a different way. I think, consistent with actually the report that came out from the Legislative Program Review and Investigations Committee, rearranging the deck chairs without looking at what it is we're trying to accomplish is what we want to avoid.

So for us, and I think there's consensus around this, I hope, that any changes we make structurally, organizationally, or otherwise, ought to be driven by where is it that we want to go.

What are the outcomes, the core outcomes, and the core performance indicators that we want to see? And how do we collectively think that we can organize, with the best organizational structure, to help us, position us to actually accomplish those?

So the intent behind that is that they were not doing it because they just wanted to move things around and say that we've made changes.

We want to do them in a way that is clearly targeted to what we can agree, I hope, are the core goals and outcomes that we want to see this agency and the system achieve.

So that was, so I do believe that it is driven. Changes, whether we make them in a more wholesale way, as a result of some of these discussions, or whether we make them, in part, based on how we're looking at it, they ought to be driven by what's the best structure to get us where we want to be, and that ought to be driven by some agreed upon outcomes and performance indicators.

So that was really what I meant by that, that it shouldn't be done in lieu of that goal. And I think, you know, there's consensus on that, generally, that principle, that you can rearrange the deck chairs all you want, but if it's not geared towards a particular outcome, it's probably not worth the effort. So that's what's driving it.

REP. VILLANO: Thank you. In addition to the structural weaknesses that have been reported [inaudible] Program Review and its work has uncovered a number of weaknesses in accounting and oversight.

And what has been done, if anything, to correct those, that would lessen the need for you to [inaudible]

COMM. SUSAN HAMILTON: Well, I think actually, the scope of the recommendations that were raised by that Committee, I think they were twofold.

One, they did outline, I think, some successful oversight activities and structures that are in place now that weren't in place when they did their prior review.

And my read of the report was that they thought those were strengths that shouldn't, that we shouldn't tinker with.

However, the recommendations, one of them relating to the development of a strategic plan, we've already embraced and are working on, and I hope that we'll be able to have continued discussions around that plan.

But also, I think the recommendations around looking at formal response to recommendations that come both internally and externally through the Department, so that everybody is onboard with what is being done in response to those, was one of the recommendations that we supported.

I don't recall, frankly, there being too many recommendations from that report that we took issue with. We actually found it very helpful and are moving forward with the recommendations that they outlined in their report.

There were a couple of things in that report that called for some statutory changes that I know were not ultimately passed in the last

session. And you know, we can certainly look at collectively revisiting those.

But to look at the recommendations in there we are implementing, and I can certainly, I have materials in here that outline what we're doing on those if you'd like to go into more detail about it.

REP. VILLANO: Ms. Milstein also recommended, asked that we transfer licensure for DCF facilities to DPH. You okay with that?

COMM. SUSAN HAMILTON: I think that's something that's worth exploring. When you look at agencies, we have several programs that are jointly licensed by both us and DPH because there are substance abuse treatment components to the overall program.

I think in those areas in particular, it would be worth looking at so that you don't have two independent licensing agencies overseeing the same program.

But I certainly think that's something to look at. What are the pros and cons of outsourcing licensing to another agency?

So I think we need to look at the implications to that, but I think it should be considered as part of the recommendations from this discussion.

REP. VILLANO: Thank you. Back to the Attorney General, I wanted you to elaborate a little bit

on your comment that one of DCF's major problems that you talked about, the dilemma, is the agency contracting with private entities to provide appropriate services for abused and neglected children but cannot effectively also regulate those private contractors. Why is that a huge dilemma?

ATTY. GEN. RICHARD BLUMENTHAL: Well, it's a dilemma, Representative Villano, for exactly the same reason that the Child Advocate and I have recommended that the licensure function be transferred to another agency.

Licensing, regulations, oversight, scrutiny, evaluation, that kind of cluster of responsibility all requires some objective, outside review.

If the agency that contracts with a particular company, and has a vested interest in that company performing well, and evaluating those reams of data or papers in a way that casts it in a positive light, has that kind of strong incentive to validate it, it can't, at the same time, be a critical and even demanding scrutinizer.

And so I think there's a conflict of interest here, as there is often when there is outside contracting within any agency.

And it's kind of an expansion of the same point that has been made with regard to licensing and why there should be DPH involvement in that function.

REP. VILLANO: Thank you. Final question of Ms. Milstein, do you recommend dismantling the agency or wide overhaul, huge steps or little steps?

ATTY. GEN. RICHARD BLUMENTHAL: Well, I don't think I, I'm not speaking for the Child Advocate. Nobody is advocating dismantling the agency. There is a core function here of protecting and safeguarding children from abuse and neglect.

Those are literally 30,000 cases that are now on the docket and every year are on the docket and [inaudible] my office go to Juvenile Court and carry out that core mission.

And what I suggested, and the Child Advocate as well, is a top-to-bottom, outside, objective review, a study, whatever you want to call it. Corporations do it all the time.

And the Governor has done it with respect to the Department of Transportation perhaps with good results.

And there may be, at the end of that study, a recommendation for a separate agency dealing with juvenile justice.

You know, what's more important today, as a social or public policy objective, than juvenile offenders, what to do with them and how to manage them within the justice process. Maybe that is separated out.

Maybe mental health or behavioral issues, we have an agency that deals with those issues, maybe. I'm not saying that they should. But dismantling the agency is not something at least that I'm recommending.

CHILD ADV. JEANNE MILSTEIN: Could I, thank you. My, I, for the record, believe that the agency should stay intact in terms of the fact that it's a consolidated children's agency, prevention, juvenile justice, mental health, and child protection.

I agree with the Commissioner that breaking it up would fragment the services. Having said that, my suggestion to you today is to really look at the DOT study that was done that really looks at are the right people in the right positions.

What is the strategic plan for this agency? What are the expectations? What are the timeframes for meeting these outcomes? What are the outcomes? Going beyond quantity into quality.

So that would be my main recommendation, as well as implementing the very fine recommendations of Program Review and Investigation.

One of the pieces I would take out of DCF is the licensing function because I believe that it's, there's a conflict of interest, that DCF is the consumer and the licensor of facilities

and that it's a question of the fox watching the henhouse.

REP. VILLANO: But the Legislature does not hire people. So how do we find the right people to run the agency?

CHILD ADV. JEANNE MILSTEIN: Well, I think one of the things you might want to do is really look at the DOT study because that articulates, in great detail, the process that they used and what they did to develop their recommendations.

You know, I'm happy to put something together for you. I do have some information that I've collected and have put into a sort of two-page summary, which I'm happy to provide to you.

REP. VILLANO: Thank you. And, Susan and Bob, finally, major overhaul or just fine tuning?

COMM. SUSAN HAMILTON: Well, I would certainly support any look, however we want to structure that, at our overall mandate areas. I do feel strongly that a consolidated children's services agency is the right approach.

So many of the kids that we serve through our various mandate areas are the same kids. A lot of our kids who have been subjected to trauma and abuse and neglect do end up part of our, or end up receiving services through our Juvenile Services Bureau or through the court system.

And so I do think that by breaking that up and putting it under the oversight of separate

agencies would be fragmenting it in a way that I don't think would give rise to the improvements and the outcomes we want to see.

However, I'm very open, and I would welcome the look at are there different ways to organize? I mean, that's in part what's driving our strategic plan and our reorganization review is to look at ways to do it better.

And I would welcome looking at that and having other people help us with that. I think there are lots of strengths that we would want to keep intact and things that we would want to change.

To the extent we can do that collectively, together, I would be interested in doing that. I do think that on the licensing front, not unlike other agencies, we do have a separate licensing, although it's part of our overall organization, there is a firewall, so to speak, between the licensing function and the program function so that the people who are doing the licensing aren't the ones who ultimately end up placing children or needing to make decisions to utilize particular programs.

But that being said, again, in that area, if there are ways to look at enhancing that and having that done in a way that is, enhances the neutrality of that review, we would welcome that.

But there are ways of looking at outsourcing that I would be happy to talk with folks about to see how that can be done better.

SEC. ROBERT GENUARIO: I agree with everything everybody said. The, you know, this is probably an inept phrase, but DCF has always been, and always will be, a work in progress. It needs to continue to improve.

I think many of the ideas that have been mentioned today are worth exploring. I think that if we were to look at a management study, like we did with DOT, you would want to focus that and make it clear of what areas you wanted the agency to review, consistent with the reviews that the Commissioner has already engaged in.

The last thing you want to have is another ream of paper. You want to make sure that that management study is directive. The Legislature is certainly within its powers next session to appropriate funds for something like that.

I would make the observation, without suggesting that it would be inappropriate to separate the licensing and regulatory from the contracting function, that the situation in DCF is not unique.

REP. VILLANO: Thanks again. I believe both Committees will be seeking your comments as we go forward.

SEN. HARRIS: Thank you, Chairman Villano. Next, the Distinguished Ranking Member of the Children's Committee, Anne Ruwet.

And I did see some consistencies through this, the fact that you're here and that you care

about the 35,000 children that are under the responsibility of the Department of Children and Families.

I think where the Attorney General had mentioned, and I appreciate, Commissioner, the invitation to communicate, you know, where you're going with your organizational changes.

I didn't see anyone else there, but I learned a great deal in terms of the process of your strategic planning, in terms of including all of the stakeholders as you look at reorganizing the Department. So that looked helpful.

But where the Attorney General and I at first agreed, until I heard your answer to it, was is the Department too big? Is it too cumbersome for one commissioner to actually oversee?

Your answer actually, I thought, was important, and that was the continuity of care for a child and family within the system of care, and needing the mental health services that might be available for that child, identifying it, and certainly focusing on the individual child in that family unit.

Secretary Genuario has mentioned that it wasn't quite \$1 billion, \$884 million. If there was \$1 billion, I wanted to suggest something. \$120 million of that, you know, in some of the more positive proactive approaches to caring for children and families, as you well know, I serve on the Youth Policy Council, which was the [inaudible] Council.

I can give you a list, youth service bureaus, YMCA's after school programs, early intervention programs, fatherhood initiatives, all of those, \$120 million could do a great deal of work.

So don't go to that billion before we actually look at some of those community services that absolutely need your help.

On the delicate subject of abuse and neglect, you, when your investigators, and those employees who are trained, what type of training do they have to do those investigations?

COMM. SUSAN HAMILTON: Well, all staff, whether they're going to be investigators or carry ongoing case work of families that we serve, go through a pre-service training [inaudible] and that's pretty extensive.

It goes for, I think it's a period of four months, four months of training, and I actually have materials in, that I've provided you that outline the training that our staff receive.

In addition to that though, investigators have to have experience in handling a regular, ongoing services caseload for a period of a year to two years before they actually can be assigned to an investigations unit, for the reason that they really have to have a solid understanding of how to identify abuse and neglect and what are the factors that you would

look at and you need to consider when making those determinations.

So it is really extensive. It looks not only at obviously the legal definitions around abuse and neglect, but what are the indicators? What are the visual things that you would need to observe?

What are the collateral contacts that you need to make in order to round out the thoroughness of your assessment of that family situation?

There's obviously a host of training for all staff, including investigators, around identifying substance abuse issues, domestic violence issues, mental health issues.

All of that goes into the underlying assessment of the case and the determination as to whether or not that child has been subjected to abuse and neglect.

And I think importantly, what are the types of services that that family needs in order to keep that child safe in the event you do identify risk factors and concerns?

REP. RUWET: But when they actually do the investigation, they're using the statutory definition of abuse and neglect.

COMM. SUSAN HAMILTON: Right.

REP. RUWET: Can you tell us what that definition is?

COMM. SUSAN HAMILTON: Abuse and neglect, neglect is defined broadly, and actually one of the categories of neglect is abuse. So it seems a little bit integrated in that sense.

But being denied proper care and attention is one of the grounds of neglect, physically, educationally, and emotionally, or morally, which is an odd ground, in some respects, in our statutory scheme for neglect.

If a child has been abused, it is one of the grounds. We also have uncared for in Connecticut, which is basically the child has specialized needs that cannot be met at home, or they are homeless.

That's one of the grounds we have under our uncared for definition, which is a broad neglect ground.

So our statutory definitions are relatively broad for what determines neglect in particular, but it is denies proper care and attention in those main core areas.

And abuse is, you know, you need to actually have physical injury evident or be in a condition that warrants, that subjects you [inaudible] of abuse.

REP. RUWET: I guess what I'm leading to at this point is when an investigator actually determines that is unsubstantiated, they've

gone through a thorough investigation, an average of how many days or--

COMM. SUSAN HAMILTON: Well, there's a whole, it depends on the nature of the underlying case. But we actually make the determinations on substantiating during the course of a 30-day investigation.

We have time limits in statute, rightfully so, upon which we must make the finding as to whether or not a child has been neglected or abused.

And, but in addition to, during that timeframe, the interviews with the child, all the people who live in that home, collateral contacts, the schools, the medical providers that might be serving the child, any other services that might have information that would be relevant to the determination as to whether or not that child was being properly cared for.

So it's not only individual interviews with the children and the family members, but collaterals as well.

REP. RUWET: And I guess when an investigation is determined unsubstantiated, you know, at that point, the thorough investigation that's been done, I guess my question I'm trying to get to is why an employee or anyone would actually be on a list if, in fact, that investigation was unsubstantiated.

COMM. SUSAN HAMILTON: Well, they wouldn't be, unsubstantiated, when a report comes in, it gets entered into our database.

And then during the course of the investigation, it shows as a report. It wouldn't show the actual finding.

At the conclusion of the investigation, unsubstantiated records of anybody are maintained, can be maintained in our database for internal purposes, in the event we get another future report, but that's only for a limited period of time, and then they get expunged so that they're [inaudible] you know.

And that, from a federal perspective as well, there are requirements around expungement of unsubstantiated case records.

UNIDENTIFIED SPEAKER: Five years?

COMM. SUSAN HAMILTON: Five years, yeah. And if a case is substantiated, another level of determination that's made, pursuant to some recent statutory changes, was a determination as to whether or not that individual perpetrator, who is identified in the investigation, ought to be listed on our Child Abuse and Neglect Registry because it's only folks who are listed on that registry that would be subject to the release of their information publicly for background checks, employment purposes, and all of those.

So it's a very layered process to protect balance. I think the protection around information that should not be made public on unsubstantiated information regarding any individual, but also information that should be made available to folks, particularly if they're looking to hire somebody to work in their facility, if they're looking to employ somebody in the school system.

So it's the substantiated records that go on our, when we say the list, it's substantiated records only that would be subject to that type of disclosure.

REP. RUWET: Did you have anything to say?

CHILD ADV. JEANNE MILSTEIN: Just following up on the training issue, which you raised initially, and I think the Commissioner would agree with me, that training is only as good as the practice that results from the training, and that certainly requires, you know, good supervision, good quality assurance. So I think that's an important piece of this as well.

REP. RUWET: I would agree. I wanted to also mention that I think you're on the right path of permanency. And I was happy to see in your testimony that there was an increase in adoptions from our foster care system.

Obviously, you know I'm a large proponent of putting more into expediting adoption out of our foster care system, and the quicker we can

do that, you know, for a child's sake, we've heard testimony in our children's hearings from foster parents who have had four or five years, waiting to have the opportunity to adopt a child or a sibling from the same family.

So hopefully, you'll continue in that effort in your new reorganization of the Department for that effort.

And also the community supports that you're providing, I think when you are doing group homes and emphasizing on children returning to their communities, probably one of the largest concerns is is the community ready.

What supports, behavioral supports, clinical supports, might be ready in those communities? And we're probably still weak in those areas, but appreciate your attention to that. And that's it, thank you very much.

SEN. HARRIS: Thank you, Representative Ruwet. I want to exercise the prerogative of the Chair and follow up on one piece.

You're talking about general statutory language to determine abuse and neglect. When it comes to physical or psychological neglect, even though they're subjectivity there, I get that.

But educational neglect, moral neglect, I mean, I think everyone should know the Gettysburg Address by heart by the time they're in eighth grade because I did that. Where do you draw

the line? Shouldn't parents have some control over what their kids learn?

COMM. SUSAN HAMILTON: Yes. And I think in fact that's why the statutory definitions are global.

We see very few cases, well, I shouldn't, well, in comparison to the other types of neglect, educational neglect really is evident when a parent who should be able to get the child to school, the child is missing an excessive amount of school, for example, older kids, sometimes that goes in more of a truancy type of report for the Juvenile Court.

But educational neglect, from our perspective, looking at it from a parental responsibility perspective, are those instances where a young child, just by way of example, is not getting to school because the parent has a substance abuse issue, or there might be some reason why that child is not being educated.

The statutes allow for people to provide education to their kids at home. That is not educational neglect. Educational neglect in the child protection statutes are not failure to perform educationally.

So in other words, if a child is not performing well in school, that's not something that would come through our department as a child protection matter, in other words, an issue regarding the parents' ability or capacity to provide education to that child.

It really falls under the scope of those cases where kids are not getting to school, and they're not receiving education at home.

Those are generally the types of educational neglect reports we get, not school performance related. Those are addressed, obviously, through their local school districts and otherwise.

SEN. HARRIS: And are there guidelines or regulations that spell these things out so people understand what they are?

COMM. SUSAN HAMILTON: Right, yes. Our policies speak to what we, from a child protection standpoint, look at and define as educational neglect.

But I think also the school systems have their own definitions of what they would define as being truancy, I mean, our statutes regarding truancy are defined, in terms of the number of absences and the like.

So they're two distinct areas, and school performances are completely unrelated. That doesn't become a child protection issue. You know, that wouldn't come through our department for oversight.

But it really, the scope of the educational neglect on our end are cases where kids are not going to school because the parents are not able to and are not, you know, for a host of

reasons may not be able to get the child to school.

SEN. HARRIS: And what about in the instances of home schooling, what do you do in that case?

COMM. SUSAN HAMILTON: Home schooling is not, is legally permissible, and it doesn't give, is not, should not be accepted as a report of educational neglect if in fact the child is receiving a proper education at home. So that in and of itself is not a neglect issue from our perspective.

SEN. HARRIS: And how do you tell that? I mean, what do you do to be able to make that assessment?

COMM. SUSAN HAMILTON: Well, generally, we get reports from the schools on, if that were the case, then the school district is calling me to report, saying they have a child who is registered, or is school age, is not attending.

We would have to follow up with a reporter to find out has, is the parent actually providing education at home, and have they followed whatever rules the school may have for doing that?

So we don't intend to get involved in those instances of home schooling because it's a legal right of a parent to do that.

And we have lots of parents who successfully do that every day. And that is not a child protection issue and shouldn't be.

SEN. HARRIS: So that there are few instances or no instances of home schoolers being charged essentially with educational neglect?

COMM. SUSAN HAMILTON: We get a, we may get a report that will warrant follow up for some other reason unrelated to the home schooling, so I can't say there isn't anybody who happens to be home schooling their children who doesn't have, isn't involved with our agency.

But if the sole reason, let me be very clear. If the sole reason that the report comes in, and there are no other issues, if the family is appropriately home schooling their child in accordance with state law, it is not a DCF issue. And if there are cases open like that, I'd like to know about them.

SEN. HARRIS: Thank you. And finally, very quickly, what about this moral neglect, how does that work?

COMM. SUSAN HAMILTON: Moral neglect is in the statute very, not defined. We don't, I mean, our policy really doesn't, there are criteria for each of the categories, physical, educational, emotional, and moral.

We do not substantiate on the ground of moral neglect, I think, at all. It's a definition, it's a word in the statute that's not defined,

Our cases really, that get substantiated, investigated come in, you know, in the broader definition of neglect.

And I just had a couple of questions because of the comments that were made by the four of you.

I'm not sure who made the comment about all the people are in there constantly evaluating this group, that group, this group.

Commissioner, how often do you get to see these evaluations, and what happens to them after they, or is there a separate entity within your agency that does just looking at evaluations? It sounded like there were millions of them.

COMM. SUSAN HAMILTON: There are many. We have a Bureau of Continuous Quality Improvement that really is our main bureau that oversees internal and external quality evaluations.

So they oversee not only our internal work, our administrative case reviews of all of our 18,000 we do a year of individual case reviews, our own internal comprehensive case reviews that we do globally across the agency, they oversee and maintain that.

They also [inaudible] for all the external reports that we get because oftentimes, you know, there may be an issue where there are various groups that would be providing input and recommendations on, and they are the centralized point to really track what are those recommendations, what are the trends, and what are we doing with those.

So the [inaudible] recommendations, for example, are tracked through that bureau, and that's the group that oversees that.

There's a bureau chief level, manager, who is in charge of that bureau, who is part of my executive team.

And as a regular item on our executive team agenda are updates from the bureau's, and his included, around where are we with regards to those recommendations, and are we on track with implementing the ones we felt were warranted.

SEN. FREEDMAN: And I guess as a follow up to that though, so much of that may be coming into the agency based on a contact chair, a contact there, and a contact somewhere else.

And how does that, does that get assimilated within that bureau, or is it somebody looking at what's going on in juvenile justice as opposed to somebody looking at what's going on with children who are abused or foster care, or does it become one put together?

COMM. SUSAN HAMILTON: Yeah. The goal is to try to do it collectively, together, as a group. I mean, it absolutely is true that you, there are lots of committees, legislative and joint committees, that were referenced in some of the testimony this morning, that come out of various groups.

And we have leads. So for example, I have a deputy commissioner and a bureau chief for juvenile services.

That really is our lead point person on the, I call it the Raise the Age Committee because the

acronym is very long, but folks now, that we're all collectively working on trying to implement that statutory change in raising the age.

Recommendations come from that group, as well as the Family with Service Needs Advisory Group. They kind of all are on related topics.

So our bureau chief for juvenile services is the lead person on bringing that issue to our executive team for review and discussion.

But generally, we have that group that meets [Gap in testimony. Changing from Tape 2A to Tape 2B.]

SEN. FREEDMAN: --all the data and do the checkmarks as to what you've accomplished in terms of what's been requested of your agency from the various, I believe, studies and that you would let us know what the outcomes of those studies have been.

Is that the comment you made earlier? You referenced something, and you said we probably haven't gotten you the information you need. I thought it was from one of the studies where they referenced certain things that you ought to be doing.

COMM. SUSAN HAMILTON: I'm not sure. Maybe we can, yeah, I'm not--

SEN. FREEDMAN: Or we'll have to go back and take a look at the Transcripts.

COMM. SUSAN HAMILTON: Yeah. If there's information, I think what my comment was that it would be, we agreed with the, yeah, we agreed with the recommendation in the L-PRIK study, which was that, to the extent that a, whether it's an L-PRIK report or another legislative report, that has a set of recommendations, that this would be a response to that so that the group who has drafted the report knows what the Department's decision would be on the set of recommendations.

And we would support that. I think we do try to do that as best we can so that there's everybody sort of onboard with what we're doing or not doing on those recommendations.

SEN. FREEDMAN: So that, yes, that would be helpful.

COMM. SUSAN HAMILTON: We would support that recommendation.

SEN. FREEDMAN: And then, Jeanne, I'm not sure whether you can answer this or whether Bob should, I mean, I'm not sure.

Have you looked at how other states, and Bob referenced our neighboring states in terms of they're not doing a heck of a lot better than we are right now.

But have you looked at other states in terms of how they deal with these four areas that come within the framework of our DCF? Do they all have them under one umbrella, or have they separated out the juvenile, either one or both?

SEC. ROBERT GENUARIO: I have not done a comprehensive review, whether other states have separate agencies, consolidated agencies.

What I referenced in my testimony was that we're the only state in the region that has a state-run, full-service psychiatric hospital for children. But other than that, perhaps Jeanne can--

CHILD ADV. JEANNE MILSTEIN: Could I just go back to your first point about quality improvement, what you do with all the information?

The Bureau of Quality Improvement has over 100 people in it. And there's a lot of information that comes to that bureau. And I think one area of DCF that could be strengthened is to use that data in a more meaningful way.

It gets to Senator Meyer's point earlier about, you know, some of the problems that we've seen at Stonington Institute. DCF knew about the problems a long time ago.

And the real question is how quickly do you respond? I'm using Stonington as just an example. You know, how quickly, when did you find out the information? What was your response? How quick was your response?

What did you do based on what you found out? And then what we've found too often is unfortunately, sometimes the team will go in. There might be some improvements made.

But then the team goes to another crisis, and the improvements aren't sustained. So I think there needs to be much more meaningful implementation of the recommendations.

Going to the point about what have other states done in terms of, was your point specific to just reorganizations or consolidations?

SEN. FREEDMAN: Organizations in terms of how they are currently organized. Is there any state that you can think of right now that might have already thought about or already has two agencies, one dealing with either the regulatory side, as Attorney General Blumenthal has pointed out, or where they deal with the juvenile justice side differently from the foster care side and the adoption?

CHILD ADV. JEANNE MILSTEIN: It's a good question. We have looked at it. And the issue really, Senator, is that every state is so unique. Some states have strengths in one area. Some states have strengths in other areas.

All I know is that now we live in Connecticut, which is a very small state. It's a very wealthy state. We have an agency that has almost a billion-dollar budget.

So I think what we really need to do is focus on what we can do to improve protection care of children in our own state. And I just go back to looking at that whole management DOT kind of study that might help guide us.

SEN. FREEDMAN: And I guess, Bob, to you, the question might be how much would a study like that cost, to get it done properly and move us in the right direction?

Because you know, sometimes the money we spend up front is well worth it if we come up with something that we will be able to use. And that's my only concern, it won't be useful when we're through with it.

SEC. ROBERT GENUARIO: That's, truly, we normally would put something out this to bid. I could give you a round number, but to tell you the truth, numbers like that that I'd give you off the top of my head are usually wrong.

So I'd rather do a little work on it. I'd be happy to report back to you and make a recommendation if that would--

SEN. FREEDMAN: That's fine, that's fine. I mean, I know we've done a lot of studies internally through Program Review and Investigations that go way back. A lot of recommendations have been made.

A lot of recommendations have never been adopted, some have been adopted. And I guess maybe internally, we should be taking a look at all of what we have also done and putting that all together in some sort of an effort.

But I was, I just hope that as we go forward, and as you go forward, that we will be able to

And maybe that's something again that we as a Legislature should be looking at is how we go about approaching this with all agencies. Again, I thank you, and I hope that only good will come from this. Thanks.

SEN. HARP: Thank you. I guess it's good afternoon now. And it is good to see you here. I think this agency is one that, it's a wonderful idea that we would love to see work

Perhaps we haven't given it the kind of resources that it needs. But at any rate, you know, like there have been difficulties.

And I think that's why Secretary Genuario said that, you know, what he did when he opened his remarks.

One of the questions that I wonder about is is the possibility that a child might be harmed some time in the future grounds to remove the child from the home ever?

So is it sort of DCF thinking that they are going to somehow prevent possible harm to a child, or future possible harm?

And the reason I raise this issue, it's come to my attention, actually from judges who have been in the Juvenile Court, that if you have a teenager who has been in the care and custody of your department and that teenager becomes pregnant, it's more than likely that your department is going to recommend removal from that child of her child.

And so is that preemptive, or is that often, and I guess the other thing I, well, go ahead and answer that question.

COMM. SUSAN HAMILTON: Well, I mean, in order to do an immediate removal of a child, I think appropriately, the statutes are very narrow in that regard.

So you have to have a child who's in immediate physical, suffering immediate physical injury or being basically in immediate physical danger from his or her surroundings.

So it's a pretty high standard to do an immediate removal of a child. Sometimes in cases, and I use the example of a young woman who may have had a baby of her own.

But really the ground there for a removal would not be immediate removal. There would have to be, unless there was some reason why the nature of her circumstances gave rise to immediate physical danger, that that alone wouldn't be enough.

But it would potentially give rise to a need, after some work with the mom, to bring the case to the attention of the court under that general definition of neglect.

That doesn't necessarily require us to seek a removal of the child. Sometimes that, there's confusion around that.

Our core processes I think appropriately allow the Department to bring the case before the court without seeking removal.

But perhaps in cases where you may need to seek some court intervention to ensure that the services that need to be provided are actually provided to the family to prevent the removal.

So it really does vary depending on the facts of the case. But [inaudible] removal is pretty, they're pretty high for immediate removal.

And for a commitment later down the road, there's got to be some evidence that there's been a failure, in some respects, on the part of the parent to actually keep the child safe for the court to commit the child at a later date.

SEN. HARP: So have you looked at the amount of teenage pregnancy among those who are in your care and custody and what has happened to those children as a result of that? Have you taken a precise look at that issue?

COMM. SUSAN HAMILTON: We, I mean, we know that we have young parents that are receiving services from our department. And some of those children of those young parents have been taken to foster care.

But as, I mean, and we have the, I don't have them handy with me today, but we know, we have an understanding of that as an issue.

We think being a young parent and having been involved or exposed to some trauma as a child through the foster care system, or otherwise subjected to abuse and neglect, some of these young parents have difficulties caring for their children.

But our effort is really to try to keep them intact as best we can without removing the child from that parent, whenever we can safely do that.

But I'd be happy to go back and look at the numbers in comparison to the, the overall numbers of parents that we're serving to see what the pocket is for that.

SEN. HARP: Well, I guess the question that I asked was whether or not you have the numbers of teenagers who become pregnant under your care and custody, and then if you've looked at what happens to their children.

COMM. SUSAN HAMILTON: We, I don't have, I couldn't tell you the numbers today, but, yes, we do have that information. And as I said, I think we do have young parents that we serve who are getting pregnant at a very young age.

And some of those children end up in foster care but not all. But I can get you that breakdown.

SEN. HARP: Okay. And then I guess the other thing that I'm curious about, because it's sort of common to me anecdotally, is the whole question of what happens to white babies that are in your care and custody.

The anecdotal information that I get back is it's very hard for those parents to get their children back.

They go into foster care, and an almost promise of adoption is made to those foster care parents is the sense that some folks get.

And I just wonder how you look at that. I know you say you have quality assurance. Are you looking at race and what happens to white babies as opposed to black babies as opposed to Hispanic babies, and the ability for parents to get them back?

The worker misrepresented the religion of the child so that when it went to court, had the judge not asked what the religion of the child was, the child happened to be Jewish in this Muslim home.

It would never have been brought to the attention of the court. And so the reason the grandparent was able to get the child after three and a half years of fighting, and \$50,000 worth of court costs, was because the grandparent was a lawyer.

And it would seem to me that if you had a teenage person who has to rely upon legal aid or some other form, that they're likely to lose their children and not have the ability to deal with this.

I think that I brought to your attention previously that whole question of race in my district and my district's department around, with staff telling me that African-American children are treated very differently than white children are when the same case facts are apparent.

And I'm very concerned that you could have a white family with substance abuse an issue, the black family substance abuse, the black family's children are taken away, and the white family's children remains in the household.

And there seems to be no real way to deal with this. You know, I was told not just by African-American case workers, but also, I've been e-mailed back and forth from some of the white case workers in my district, basically saying to me it's absolutely true that, fearing for their jobs if they bring these things to light.

So I think that it's a very serious problem in the agency, that race is a very serious problem, and that one of the things that we're doing, frankly, is [inaudible] in many respects, the fear.

I guess the question that I have too, because you have this huge police asperity in people's lives, but there are certain people in communities that make false complaints.

COMM. SUSAN HAMILTON: I mean, I think we all share the interest, and I think, in focusing, overrepresentation, I put it under that umbrella, across our systems, you know, the things that come up in regards to arrests and disproportionality there.

We, as a system, try to put enough, as many safeguards as we can to guard against that so that for, you know, all families, all parents, all kids have representation in the Juvenile Court, that I think, fortunately, is an area that we've seen some improvements in over the last several years, so that the advocacy is effective for everybody across the board, whoever is receiving services.

So we do look at, when we get reports obviously, we need to look at the criteria we talked about earlier for acceptance of the report first and foremost.

So if we get a report that doesn't meet the statutory criteria for neglect or abuse, it shouldn't be accepted for investigation.

To the extent it is accepted for investigation, meaning the determination as to whether or not the allegations are founded or unfounded, and whether or not we need to remain involved, shouldn't be dictated by race or ethnicity or any other factor that is unrelated to the care of the child.

So I share that, and I think it, I think that it would be important for us to have the description around it. Let's look at the numbers.

And we have a focus on our end as well for the same reasons that you do. We don't want to see disparate treatment. It's unacceptable, and we need to get underneath is that actually happening.

Even though you may hear anecdotally, we need to look at that to determine are we making decisions across the board, the Department, the court system?

I mean, we can't remove a child, and we can't return a child, and we can't do anything else that relates to permanency for a child without bringing the matter before the court.

So where are the, you know, where are the issues arising, and how can we address them?

And to the extent that it's a problem in our agency, it's something we need to ensure is corrected. And we agree with that.

Because evidently, when someone calls in and says there's a false complaint, you know, like you, it's illegal, how do you even know if it's a false complaint?

SEN. HARP: But how will you know whether or not the person knew? So how do you, is the whole concept of a false complaint a fiction?

COMM. SUSAN HAMILTON: Yeah. Well, I think what happens, when we get a report, whether it's an anonymous report being called in or a report from a mandated report, or whatever the source of the report is, we have to look at the underlying fact that the reporter gives us.

Sometimes those facts at the time of the call are relatively sketchy. You may not have a whole lot. If it doesn't reach the threshold, it's not accepted for investigation.

But if it is and we therefore issue an investigation and we find that the person who reported the information did it intentionally knowing that the allegations were false, it sometimes comes up in cases where there's a divorce or a custody issue where the parent is calling in on the other parent, knowing that the information is false but calling in to report otherwise, and we have to notify local law enforcement about that because it then becomes a criminal matter.

But most of the unsubstantiated cases are not cases where somebody called it in, knowing that it was false and trying to intentionally, knowingly subject them to an unwarranted DCF investigation.

The more common of unsubstantiated cases are cases where we come in and there was a good faith report that the child may have been neglected, but it turns, there isn't enough evidence to support that.

So lots of those cases that are unsubstantiated are what used to be called at-risk. They're cases where the child is not currently being neglected or abused, but there may be some risk factors that the family needs support with to help prevent that in the future.

Those tend to fall into the unsubstantiated category [inaudible] calls are vindictive false reports.

SEN. HARP: So then unless it's a custody fight, you don't really have a way of really ascertaining whether or not it's a false complaint or it could be meaning, could have been he just happened to give you the wrong information.

COMM. SUSAN HAMILTON: Sometimes it, there's cases that come up, most, like I said, are cases where a jury [inaudible] the outset, when you contact the reporter about what the underlying motivation was.

But I think again, our statutes put a somewhat low bar on what needs to be called unreasonable cause to suspect, I believe in part because that's a good faith report.

If somebody has reasonable cause, again reasonable is, that's a narrow defined term in some respects, but that's the threshold for calling in the report for our mandated reporter statute.

So you know that would be the criteria that would warrant our acceptance if it reaches the level that the statute calls for.

SEN. HARP: Okay. So we're going to, I'm going to move on from there because I think you really have, I really think you really need to straighten up this policy.

You probably really need to define what a false complaint is, as opposed to unsubstantiated complaint.

You really have some policy work and definitions to do that, or we need to really, is what I, so I want to move on because I'm not really too, I don't think we can ever get to anything that I'm happy with.

And I'm going to go to the Attorney General around some issues too. I guess the question that I have is would you support in neglect or abuse cases a open court room?

ATTY. GEN. RICHARD BLUMENTHAL: I have supported it very strongly, absolutely. I've supported it in the past. I will again. And I'll introduce legislation to achieve it.

SEN. HARP: And do you have a similar type of training that goes, that you give to your assistant attorneys general in their work with the Department of Children and Families around their responsibility in prosecuting these cases?

ATTY. GEN. RICHARD BLUMENTHAL: Well, we don't have a formal training program. But generally, we have a practice of having attorneys work with more experienced attorneys as they learn how to prosecute these cases.

I might just add, you know, the largest department in my office is the child abuse and neglect, or, as we call it, child protection area, 40-plus attorneys, and they work day in and day out.

But these areas are very difficult. The one you just raised, for example, a false report, you know, if a teacher who's a mandated reporter sees bruises or some more serious injury, there is an obligation to report it.

On the other hand, you and I as a parent wouldn't want our children removed because that child happened to be in a football game or even in a fight with a sibling. And is that a false report on the part of the mandated reporter?

We try to provide advice based on our interpretation of the law, but these issues are not always easy.

SEN. HARP: And I guess from both of you, are parents not supposed to be given the information concerning the allegations that are made against them prior to going into court? Are they given the information that they would be given in any other court case where everything, this is what I see from, as Representative Walker, as my reference point on

the justice system, as from watching television.

So unfortunately, but, you know, it's my understanding that in typical criminal cases anyway, that the defense attorneys are supposed to be given the same information that the, you know, like the prosecuting attorneys had.

Now is that the same standards that we use for child protection cases, or is there a different standard?

COMM. SUSAN HAMILTON: Well, the standard is not exactly the same as it is in the criminal context.

I think in Connecticut, we have a pretty high quality representation system in the Juvenile Court, whereby every party, including the child, gets a lawyer to represent them.

We have, I think all of us here have been invested in trying to look at the quality of the representation that parents receive across the board, as well as children, and that would be part why the Legislature changed the structure for providing representation to parents over the last couple of years and created an independent organization of the child protection attorney to oversee that process to improve the quality.

So they are entitled to and have access to information about, and should have, about the nature of the allegations and what the

departments and the other part of the divisions are on those in advance.

I do know that issues have been raised as to when we initiate, so when we go out, we get a report, we accept it for investigation, and we do that first contact with the family, that's where I think it's critical that we, you know, they don't have to cooperate with our agency.

We are supposed to, and I'm sure there are cases where it doesn't happen across the agency, statewide, but we have materials that we produce jointly to help provide parents, and it's called *The Parent's Right to Know* brochure.

Now I know it doesn't, I'll come out in front saying I know it doesn't perhaps provide in every single case, but it should.

And it provides them with information about their rights, that they don't need to comply, that they have the right to have, you know, seek legal advice.

But once a case is brought before the court, in the event that has to happen, they are also then appointed a lawyer who advocates for them there as well.

SEN. HARP: But you really didn't answer my question. I mean, it seems like every time I ask one, you sort of tell me everything around it.

COMM. SUSAN HAMILTON: Right. Okay.

COMM. SUSAN HAMILTON: When the Department brings a case to court, the petition and all the underlying documents that get filed with the court, that includes all the allegations, the underlying facts that are supporting our position on the case, are provided and served on the panel like any other party in any other case.

And the attorneys general do a decent job with providing that, and if not, we provide it. And so the answer to your question would be yes.

COMM. SUSAN HAMILTON: It is, the statute calls for the service to be done within a specific--

ATTY. GEN. BLUMENTHAL: The answer to all these questions, yes, it should be, just as in the

criminal process, there's an obligation on the part of the prosecutor to provide exculpatory material.

Are there instances where it doesn't happen? Yes, in the criminal process, yes, in this process, probably yes.

But there is an obligation, and I will tell you that my attorneys pretty scrupulously, very scrupulously, and without exception, follow it.

But you know, your, what is missing from this discussion, in the real world, a lot of these faces are intertwined with Family Court, where there is no obligation to provide representation, where it's a completely different process, and where custody battles are going on between two spouses who are either going through a divorce or have divorced.

And you know, when you talk about consolidated child agency, I think one of the reasons why children are at risk in the State of Connecticut is lack of payment of child support and lack of often sufficient resources in families to care for their children, in other words poverty.

So you know, why not put that function into DCF as well? The mere fact that it's involved in protecting children doesn't necessarily mean that it's properly discharged by the courts.

SEN. HARP: Okay. I want to move on to something else, thank you. I think that we probably need

And there seems to be, I mean, just so that you all know, you don't have to respond to it, but there seems to be a feeling, one, that the assistant attorneys general are very empowered in the system and that often are not, how can I put it, as balanced as they ought to be.

And my favorite topic is the whole topic of rental subsidies for families and basically insufficient shelter neglect cases.

And isn't it more reasonable, to the degree that we can, it appears to me that you say in here that, the documents that you've provided us, that there are 662 families on a wait list, waiting for subsidized housing.

And how much are those families costing us if, and wouldn't it be simpler, and I know that there is no real mechanism for you to do it, for you to pay for the housing if these families are ready to be unified?

It seems like an awful lot of money to keep those families away from one another and disjointed.

And you know, one of the things that I learned from one of your subcontractors is the longer we keep children out of their families, the harder it is for them to become reunified and to actually function as a family again.

So how much are these 662 families costing us, and are we not sort of like paying good money after bad, in a way, keeping them either in foster care and residential care when we can actually reunify the families and keep them together, since they've already accomplished all the goals that have been set by your department for them to reach?

And these people are waiting. And what's the average waiting time? Obviously, you complain that we just gave you 60 RAP certificates. You needed about 250.

But the reality is you have plenty of money in your budget that is being used, I think, for the most inappropriate level of care. You have families that can be reunified.

So why are you spending that money in that bad way when it comes to kids and families when we could be putting families that are ready to come back together together? And we have FAC that could actually, right?

SEC. ROBERT GENUARIO: You know, I think that's obviously a fair question. I don't know that I would accept the premise though.

The kids who are in residential care or therapeutic group homes, the more intense type service, are by and large kids who, and that's where the big money is being spent, are by and large kids who are not capable, or their families are not capable, of reunification.

They're by and large older kids who have a history of a myriad of issues. Certainly, to the extent that we can move money around, spend more money on either foster care or family reunification that we talked about, into the flex fund account, which has grown significantly, and both you and I have some concerns about it.

But that type of dollars does allow for supports within the family or within the foster family and therefore avoids the more intensive type of setting.

As I sit here, I can't tell you that we have a lot of kids in the more intensive settings that belong somewhere else. You know, the Department, I'm sure, does the best it can to try and sort these things out.

Certainly, from my point of view, family reunification is much cheaper than any of these residential settings.

SEN. HARP: Yeah. And I just got to point out one thing, and I know we used it for other things. But you know, like there have been lapses in the residential account, and we've actually taken money that you've projected in the residential accounts and redistributed it in other areas.

And it would seem to me, I think we just found recently \$10 million. And if we just took \$1 million of your flex fund and another, and that \$2 million, we could have had, at least for one year, residences for these folks.

Plus, there are dollars, and they're not here today, but for these kids in this supportive housing line item for RAP certificates that are in the Department of Social Services, that could, at least on a short-term basis, be provided to this department if the will were there.

And it would seem to me that if we got creative about how we did some of these things, that we could actually have much more stabilized family units.

Some of these folks, I'm afraid, will never be reunified because they'll never have a place to live. And this could be easily solved by some of the current tools that we have available to us. That's my sort of last point.

Every time we meet, I think I bring it up. So if I am privileged to come back here again, you'll probably be hearing it again. So at any

rate, thank you very much. Those are all the questions I have.

COMM. SUSAN HAMILTON: Thank you.

SEN. HARRIS: Thank you, Senator. We are getting to that 1:00 hour we talked about as a potential end of the day.

But what we're going to do is I know Representative Walker has some questions, and then there are a couple questions to throw out for a future part of the process, and a couple of statements that will be made.

And then we'll talk about how we're going to proceed after. So next, I'll call on Representative Walker.

REP. WALKER: Thank you, Senator Harris. I didn't know we have a 1:00 bewitching hour. And just for the record, since we are going to look at further future issues, I would like, since we have a limited time of questioning, I would like behavioral health to be on that list of things that we look at.

And I would also like LINK to be part of that issue that we look at too. First though I want to thank all of you for being here. I know your stomachs are growling just like most of ours.

I thought we would have at least just taken a break from this and gone back to the

questioning so that we didn't have any of us feeling pushed or whatever.

But anyhow, Commissioner, you made a very good statement that I agree with, and this is why I think we're here.

Several of our children that come through the CPS process end up in our JJ system. That, I think, is one of the most critical things that we need to look at.

The main reason why the state intervenes in most of these family situation is because we think we can do a better job.

If we could, then maybe we wouldn't have, I think it's close to 60% or 70% of the JJ kids that we have, have had some sort of connection or open case or investigation through the Department of Children and Families.

And that really raises my eyebrow a great deal. I think we, when we say that we intervene for their benefit, I think we need to look at in the long term, are we doing that?

With that said, that's enough. But retribution I want to also address with, as Senator Harp said, quickly before I start into my questioning.

Many people have come to several of us at the table here, but they do it behind closed doors, and they do it out of quietness because they're

afraid of retribution. And I mean that very sincerely.

And I would hope that if anybody has any of those situations, that they contact us, and we will address it wholeheartedly, especially with the Attorney General's office, because the only way we're going to find out half of the information is from the people that actually are out there on the front line.

And that really is a, I have to say that I had a great day on Friday. I went out to one office formally. I've been to several offices, but one formally.

And I spent the whole day with many of your supervisors and program developers, investigators, and it was extremely eye opening for me.

But before I get to that, I want to talk about the organization. I provided the Committee with ten years of reorganization in DCF, which even though we say we don't want to just move the chairs on the deck, we are.

And if you look at it, we are. And so I ask you, in looking at your suggestions for the reorganization, you are pressing this regional level.

To me, the regional level sounds a great deal like another level of management. The, what you've done is you've moved a lot of the, you've still maintained the seven bureau

chiefs, or eight bureau chiefs, or something close to that.

But you still have the same number of people. I think I looked at your last count for senior management of 171. And your senior management is about \$30 million.

When we move them to different levels, the regional manager, I assume, is going to be a new level.

More than likely, the regional level will be higher than the level that they are right now, which means they're going to get a pay increase.

We can't afford to do those types of situations now. We are hurting in this state, and we need to look at where do we reduce?

The second problem that I see in this is that we create more people in the central office area. They may be regional, and they have a different title.

But the separation from the central office and the area offices is very dramatic to me. I don't see that connect.

And I want to illustrate that with some of the process that you have some of your staff doing. So first, I'll let you answer that one.

COMM. SUSAN HAMILTON: Well, a couple of things. I think that with regards to the reorg, it's very

hard to look at a chart and have an understand of how it's going to, you could look at any change on an organizational chart, and it's going to look like, as you said, it just looks like we're just rearranging the deck chairs.

It really is how does that, how is that operation line? Because it's very hard to look at that in isolation without having some discussion about how that would actually work.

In fact, in part the opposite of what might appear if you just look at the structure itself, but actually, my goal with this is to downsize. I hate to use that word because it means different things to different people.

But we have too, I agree with you, we have, I believe we have too many central office bureaus.

REP. WALKER: My goal is to close down the central office and make everybody work in the regional office.

COMM. SUSAN HAMILTON: This is helping with that. This is, it's not going to--

REP. WALKER: I'll probably get a whole lot of bad mail on that one.

COMM. SUSAN HAMILTON: No, but it really is in keeping with that goal, which is to say we right now, in our current structure, have, it's too much of an us and them, you know.

You have your local area offices, and then there's the central office structure, which, to me, needs to be more localized.

So the intent behind it is in fact to downsize the central office management structure and, embed some of the bureau activities that are right now central office bureau activities, embed them at the local level.

REP. WALKER: Give me an example, please.

COMM. SUSAN HAMILTON: Bureau Adoption Services and the Bureau of Adolescent and Traditional Services right now are two central office bureaus if you look at our current org chart, that while they perform very important functions, for sure, they are independent bureaus within central office that don't actually hold cases, per se, that are handled at the front-line level.

So one of the items with the reorg is to eliminate the separate independent central office Bureau of Adolescent Services and look at taking those core functions that specifically relate to our adolescent cases and providing that oversight and responsibility at the local level.

Same thing with the Bureau of Adoption, we have a separate, right now in our current structure, adoption foster care overseen by two separate bureaus.

Our foster parents are our adoptive parents. Fifty percent of our foster parents end up becoming our adoptive parents.

It doesn't make a whole lot of sense to me to really have two separate bureaus to oversee those functions. So that's another example of an area in central office, to me, that needs to be integrated at the local level.

REP. WALKER: Then why do you keep the others in a central office? I don't understand because I, I mean, you have Child Welfare. You have, I can't read all the--

COMM. SUSAN HAMILTON: You have to have some central office oversight for certain functions. We talked a little bit today already about the need to have licensing and some of the quality improvement work that we do done by a bureau that's separate from the actual caseload [inaudible] bureau.

So you wouldn't want to integrate all of the, and that's just an example, all of the Quality Improvement Bureau functions with the Child Welfare Bureau because you need to have some separation there.

REP. WALKER: Can I ask you a question? Back in 2001, when we had layoffs because of whatever reason, most of the people that were laid off were contract overview reviewers and everything like that.

You would still retain, and one of the big things that I've seen out there, and I've heard from providers and staff, is that that was the worst area to hit DCF because the oversight of the contracts has then gone awry.

So you're saying you would keep those in the central office as opposed to putting them into the area office?

COMM. SUSAN HAMILTON: No. That's an actual example of where we're saying you would have that, as part of that process that occurred several years ago, when your local contract staff were centralized. We want to undo that.

And we want to have that local support done at the area office levels, connected with the regions, as opposed to part of the central office function.

There still needs to be a central office oversight function for contract oversight to make sure that statewide, our contracts are not lapsing in terms of, you know, execution, that we are adhering to the state regs and procurement schedules statewide across programs.

But the fundamental support, that was really what I think people raised issues with, the fundamental support and program oversight at the local level was centralized, and we want to go back.

REP. WALKER: The main reason why most of the offices had better control over it because they were sure that the providers were providing the services that they needed so they could refer the children to those programs.

And that has been lost dramatically out there. The other part of the contract overview was to make sure that the goals and objectives that we set in their contract were directly related to the area office so that they got the service, again, that were identified by the staff at the area offices, so that they knew where they could actually tap into those services.

So that, but again, we go back to you're taking, okay, what you're doing in paper, I see, and you know, you can explain it to us in detail later, but you're taking them from one location and bringing them to another location, which is just geography.

The function of how they relate and how they get those services completed is really the issue that I think we need to hear a lot better shortly.

COMM. SUSAN HAMILTON: I agree. And it really is how you operationalize it. You can look at it in the chart, you know, in a certain way, but it's how it gets operationalized. And then I'm looking forward to that--

REP. WALKER: Okay. I'm going to go to the treatment plan. I looked at some treatment

plans. Maybe ten years ago, when we had treatment plans, there were four pages.

Now the treatment plans, oh, wow, I didn't, the ones I could see were 30 and 40 pages. I understand that we have certain guidelines that we have to [inaudible] both federally and also for some of the local statutes that we have in place.

But one of the, a couple of things that were very glaring to me was the fact that a child that is 4 years old, that gets a treatment plan, has the basic same template as an adolescent 14 years of age.

There is nothing that reflects the developmental stages or needs of that child in the treatment plan. It is very generic.

And I think when we look at where we actually direct our services and our focus, sometimes we're, you know, when you look at the people that are making a lot of these treatment plans, these are social workers, and I use that term lightly because they seem like case workers to me because they don't have a lot of time to do social work.

But these are social workers who are making decisions that sometimes need guidelines to help them do that.

And when we do the treatment plan and we seem to always have incomplete treatment plans, I think they need to be much more age specific,

especially for the developmental issues of a child, because, as we know, a 2-year-old has a different need than a 12-year-old than a 14-year-old , 16, and soon to be 18. Are we looking at, and who is in the discussion on how we change the treatment plan?

COMM. SUSAN HAMILTON: Actually, one of the things that we, and I echo sort of in part what you were saying. I was a front-line social worker--

REP. WALKER: Which part?

COMM. SUSAN HAMILTON: I was a worker myself when we had the four-page [Gap in testimony. Changing from Tape 2B to Tape 3A.]

--treatment plan because it does become an overly cumbersome document, not only for the staff but more importantly for the families to really understand what it is that, you know, they need to be doing, what is it that the Department needs to be doing, and somewhere to come up with a hybrid that is a little more conducive to doing truly family-focused treatment plans. So that is underway.

REP WALKER: When we do these great ideas, I think FDM, there were a couple of different processes that I saw that were extremely time consuming for the social worker.

I think we need to look at a work load of a caseworker. I think we need to look at what are the responsibilities of them because one of

the other issues that I look at was the time allotment that a caseworker has.

We're sending very young people, and they are very young, out to make social determinations of how a family functions.

I think we need to look at are they allowed to actually exercise some of the training in that four-month period that we give them of training before they get a caseload?

Or are we actually just having them do a checklist? And I saw a checklist. I saw no social work involved in a lot of the things that they were doing.

And that, I believe, is probably where we are making that disconnect. Jeanne, you have something to say desperately.

CHILD ADV. JEANNE MILSTEIN: I feel very strongly about this whole issue of treatment plans, as does the court, because it's one of the two areas where, you know, DCF has fallen short in terms of meeting their outcome measures.

Treatment planning is at the heart of what happens to a child. There has to be a good needs assessment. If there's not, everything that happens from there could actually further harm a child.

But we review hundreds of treatment plans a month. Every single day, we review treatment

plans. And some are exactly as you've described. They're more prescriptive.

What we often see, worse than that, is that a lot of treatment plans tend to look at the behaviors of children and not the underlying treatment need that needs to be addressed.

When a worker is, say, leaves the agency, or the case is transferred somewhere else, a new worker will start. And it's often as if that child's life begins with that new caseworker.

So I think treatment plans is a whole area that, I know we're very time limited today, but that's worthy of further discussion.

REP. WALKER: I agree with you. And part of the other problem is the fact that DCF unfortunately, for whatever reason, contracts all of their services out into the field.

So our control of, and our control of the depth of the services that the kids are getting, once we've identified what they need, is somewhat disconnected.

I've talked to several providers out there. The providers say that they're not sure what exactly they're supposed to be doing. The contracts are vague.

Then the caseworkers are saying that there's a limit of what services they can get to actually address the needs of the kids, which is even more of a disconnect.

We may be contracting too much in one area where we need more in another area. So I really, I don't know how we address that, but we have to look at that a little bit better.

Now one of the other things I looked at was LINK. And as you spoke about Michael B.'s case, we have kids, we have reports that are done, handwritten, but then we have reports that are also put into LINK.

But then at the same time, much of the security of LINK is not foolproof because a lot of times LINK breaks down, and a lot of times LINK does not capture all the information.

What are we doing about our software needs in documenting this? And the other thing is when we look at the number of things that we have on LINK, I think it's duplication of process if we make them write those things down and also put into LINK.

So again, we're duplicating the amount of time that they have to do with one case, where that second portion of the time could be utilized in working with the families and doing more direct services. So what are we doing about addressing our software needs with the reporting recording?

COMM. SUSAN HAMILTON: Actually, I think all agencies are required to have a centralized [inaudible] system it's referred to at the federal level, as in the acronym. We have

enough of those, so we don't have to spell it out.

But basically, there's a requirement and, you know, justifiably so that there be a centralized automated record of cases that include all of the elements and the activities that go on in the case.

There are certain components of case records that have to be maintained in hard copy because they're external documents. So you know, you might have--

REP. WALKER: How long do we have, federally, how long are we required to keep them?

COMM. SUSAN HAMILTON: Well, in terms of the [inaudible] has to always be functioning. So you have to, but in terms of individual case records, if there's an unsubstantiated report that gets expunged, but generally speaking, the records are maintained internally as part of the [inaudible] system.

But in any event, so I think that we have to have that information documented in that record for the same reasons that have come up in regards to the discussions we had earlier.

Some documents do, as I said, are maintained in hard copy and become part of the record but are not integrated into the automated system because they're external reports or records or the like.

But that is a very small number of external records that fall into that category. So I think that the LINK system, although, you know, it, well, I'm not sure there are changes that are necessarily needed to the system itself.

Documentation is critical. We need to have all the information documented in the record. We don't want duplication, but at the same time, workers, and this is part of, I think, some of the recommendations that have come up from the reports that, internally and externally, that you want to make sure what's accessible in that system actually includes all of the information from the workers' investigations.

REP. WALKER: Wouldn't it be easier if we then just had the social workers do the hard copy, and we had clerical people do the input so that the social work people could do social work as opposed to the data?

COMM. SUSAN HAMILTON: Yeah, some do that, and we also have a greater capacity now to utilize laptops and other, you know, equipment to accommodate that.

We have staff who obviously spend a lot of time in court and elsewhere, and they have access to laptops so that they can enter information directly as opposed to having to handwrite it and then enter it at a later date.

REP. WALKER: And let's say I'm a social worker with DCF. I do a treatment plan. I submit this treatment plan. So I submit the treatment plan

COMM. SUSAN HAMILTON: Yes.

COMM. SUSAN HAMILTON: A manager signs off on the final treatment plan, okay, yeah, an ACR manager.

COMM. SUSAN HAMILTON: Yeah, every six months--

COMM. SUSAN HAMILTON: Right.

COMM. SUSAN HAMILTON: Yes, not as, every six months, those cases get, they wouldn't pull together the family before the treatment plan gets approved. That treatment plan gets reviewed, as they do for every case, every six months formally by the ACR coordinator.

COMM. SUSAN HAMILTON: The supervisor and the workers are the ones who really are responsible for overseeing the case management of that case. So it's the supervisor and the worker who have that front-line responsibility.

REP. WALKER: Okay. Can the ACR change my treatment plan?

REP. WALKER: Can they change my treatment plan?

REP. WALKER: So the ACR, who has not met the child but just reads the report that I write, makes the final determination of what the treatment plan is.

COMM. SUSAN HAMILTON: If the treatment plan is not compliant with the things that have to be documented in there, the ACR, they can make those changes.

If the ACR coordinator is going to question the permanency plan or the direct, the case goal direction of the case, they have to be included in the discussion with the worker and supervisor.

You know, the ACR coordinator doesn't know the family, other than through that meeting. The worker and the supervisor on the case, they make the determination on the case planning and the action steps.

REP. WALKER: Okay. I'm getting sighs. People are glaring at me in the back of my head. This is why I don't like to do the end results. I don't think that, I think we need to look at this because I'm really concerned.

I understand that the ACR is dealing with the compliance. But that, to me, is resounding sounds of No Child Left Behind. We're dealing with the statistical responsibilities.

But again, we go back to the best thing for the child. And if the ACR has not met the child, does not know the circumstance, or whatever, I have a problem with the fact that they can change the, and granted, you're saying that it's because of compliance.

But you know, we can't defer to compliance always when we make the determination what's required for a child. We have to be able to make that discussion and actually look at it. So I'm going to leave that--

COMM. SUSAN HAMILTON: It's complicated--

REP. WALKER: Yeah, we're not going to resolve it right now. But I think, as far as the treatment plans are concerned, one, we need to rethink how we do them.

We need to look at the way they're done, as far as how they are sort of a generic format. And we also need to look at the process and how long it takes, because if I'm not mistaken, one of the things that I read in the court monitor's report was the timeliness of it.

And timeliness is something that's really critical for a lot of families who are waiting for services or families that are in crisis. Yes?

COMM. SUSAN HAMILTON: We do actually meet the timeliness standard. The concerns with the exit plans that really have been raised are around the documentation of all the elements.

But you know, we can have a further discussion at a later date, but the timeliness is something that we do very well.

REP. WALKER: All right. I look forward to more discussion in the continuing weeks because I

think we've just started this process, and I look forward to having those conversations.

SEN. HARRIS: Thank you, Representative Walker.
Representative Orange.

REP. ORANGE: Thank you, Mr. Chairman. You'll be happy to know, Mr. Chairman, that I'm going to kind of like waive a lot of my questions and whatever partly because Senator Harp did an excellent job in asking some of the questions that I also was going to ask. Thank you, Senator Harp.

But as Senator Harp knows, I asked for some of the information at an Appropriations/Human Services/Public Health [inaudible] hearing, and I asked for it to be brought to this forum. And it hasn't been brought to this forum, which is disappointing.

And Senator Harp asked for some of what I asked for, plus more for the next forum. And I am just very pleased to know from Senator Harris that we're going to have another forum because it is now 1:35.

So hopefully, some of this information can be brought to the next forum. And I just want to comment to the Child Advocate that you've stated in your testimony that the Department has suffered a chronic lack of effective leadership and management at all levels and across all bureaus.

If children's deficiency is corrected, DCF will continue to struggle to meet the needs of children and families, and those children and families will suffer the consequences.

Do you think, Jeanne, that in an agency this large, which I do feel should be broken down some, I can't imagine, after looking at this chart here, with all these people and this amount of staff and this amount of children and families that are being served in the State of Connecticut, that there's one chief of staff.

And what interaction does that one chief of staff have with all of these people? Or is it just, is he chief of staff of certain managers?

But anyway, getting back to Jeanne, do you think that the state should [inaudible] a commissioner of the Department of Children and Families, and do you feel that the state should hire a qualified manager to manage this huge agency, to have continuity, as Governors come and go, and as sometimes issues arise, we lose commissioners, such as we lost Darlene Dunbar, who I thought was a good commissioner, in giving the Department more continuity? Do you feel that a manager hired by the State of Connecticut would be a better option?

CHILD ADV. JEANNE MILSTEIN: I think DCF is a very large agency, as you indicated, and that's why I go back to this idea of the Department of Transportation study, because there are multi layers of management.

You know, a commissioner is just one person, and a department is run by a team of people at all levels.

And so that's why I think it's important to look at what is the vision of this agency, what is the plan of this agency, and do we have the right people in the right positions to meet the vision, to meet the outcomes. That's what I would focus attention on now.

REP. ORANGE: Thank you. And does the chief of staff that is here, that seems to come under the commissioner and goes to various places, it doesn't seem to hit the front-line workers at all.

So I take it there's a lot of middle management in the Department. That's what the chart looks like to me. It looks like a lot of middle management.

COMM. SUSAN HAMILTON: There's actually more staff, obviously, at the front-line level in the area offices than there are mid-line managers.

However, I would agree that, as part of the overall structure, we, and frankly, I believe that the plans that we are looking at would maximize the use of our mid-level managers that we have right now and actually require few of them to do the work that they're doing now, and they could be redirected.

With regards to central office, the chief of staff oversees a couple of key areas. One of

them is the Bureau Chief for Child Welfare, and she is the person who oversees the local area directors, so that's the chain of command for the, the connection between the local area offices and our central office and our central office child welfare activities.

REP. ORANGE: And I look forward to, Mr. Chairman, our next forum with DCF. I do have more questions, and I do have more observations, and I'll wait until that time to address those. Thank you.

SEN. HARRIS: Thank you, Representative Orange. Representative Mushinsky.

REP. MUSHINSKY: Thank you, Mr. Chairman. I'm going to ask the questions today, but you can answer them next hearing if you wish, especially DCF.

I'm looking for ways to evaluate what we're doing and when we're doing it and for cost effectiveness.

And I've been working with results-based accountability for a number of years with the RBA work group.

And I need to know, what is the penetration of results-based accountability in the contracted services of your agency?

What you're supposed to be doing is starting to put them in the contracts so that the, the service providers are supposed to be reporting to you their self-evaluation.

So I need to know penetration rate of RBA methods in your service contracts. Second, using, if you are using RBA, and I hope you are, do you have an evaluation of the most cost-effective point of intervention in these families?

Because it looks to me like we're always talking about the same 30,000 families. Those from the poverty communities, and they're not always minority.

Eastern Connecticut has a large group of these families that are in the same situation. But it's the same 30,000 high-risk, poverty-census-tracked families that we keep running into with adolescent parents, untreated mental illness, substance abuse, and so forth.

So are we using RBA data yet to evaluate the most cost-effective point of intervention in this same small, basically core group of high-risk families?

Third question, can you give me the penetration rate of community support for the high-risk families in the poverty census tracks to prevent abuse and neglect? And don't forget to include eastern Connecticut.

For example, the percent of this 30,000 core group of high-risk families that is served by Helping Families Early Intervention Program.

We spend, I forget the numbers, but something like \$2,500 each per, for years now, we've been doing about 2,000 kids, or 2,300 kids, per year, which is about 5.7 million.

Maybe we just should be doing early intervention for these families in the 30,000 high-risk pool, which would be \$75 million, but it still might be cheaper than what we're doing now, so looking at that comparison.

And also, are you doing, are you using RBA to evaluate the relative success of the adolescent pregnancy prevention programs?

I know departments, both DSS and DCF, are peripherally involved in this. And are you using RBA to evaluate the relative success?

And if you're looking for ways to do the evaluation, in addition, I would recommend that you check with the Bloomberg staff in New York because they actually are doing a lot of this analysis right now.

We went down, some of us went down and met with them, and they're actually pretty far ahead of us on their evaluation.

And finally, I just want to make a plea that you keep the Department together, any section that is dealing directly with the children.

One thing I've learned over the years, being on the Select Committee on Children, is to be

aware of dropping the children into a couple different agencies.

Legislators warned me from other states that they had tried that, tried breaking up the agency. It was a nightmare for the children because they were passed from one to another for different types of services and were lost.

So they specifically said to me, if you're thinking about this in Connecticut, Mary, do not let the children be put under the supervision of two separate agencies. You're going to lose kids.

So I pass that warning on to you because I was warned about it from other states. And I basically feel that if we can keep the kids under the same umbrella, we'll at least know where they are and what their service needs are. So I ask that for a plea. But you can answer all these questions next hearing if you wish.

SEN. HARRIS: Thank you, Representative Mushinsky.
Representative Hamm?

REP. HAMM: Thank you, Mr. Chairman, and thank you for including me in the hearing today, although I am not a Member of [inaudible -microphone not on]

COMM. SUSAN HAMILTON: There we go, Select Children to strengthen and preserve families and to provide the support to really help prevent

families from having to escalate into the system.

One of the things that we've talked about a lot I think here, collectively, as a group, is looking at what we can do at the front end.

Again, when you think about prevention, obviously, prevention is one of our mandate areas, what are the things we're doing to help promote the capacity of the system to take care of children, to help support families at the front end?

REP. HAMM: Is it written somewhere? I mean--

COMM. SUSAN HAMILTON: Oh, sure. I mean, division, our guiding principles, they're all, they all are, I mean, obviously, they're available on our website, but they're really what underlie--

REP. HAMM: And is it different from the statutory charge?

COMM. SUSAN HAMILTON: The statutory charge provides the framework, the mandate areas, but the fundamental division and guiding principles are not statutory.

REP. HAMM: I have just a comment and then a question for you, Secretary Genuario. I've been here ten years. You are my third commissioner.

And prior to that, I think it's 20-or-so years when the Department of Children and Youth

Services became DCF, because we all viewed it as important to have a unified children's agency.

So we are now almost 30 years of experience with this vision of a united children's agency. And there are many in this room that still cling to that mission.

I guess I'm wondering how long we're going to believe before we acknowledge that it is in fact, in Connecticut, an illusion and that in fact, we have not been able, after all of this time and all of this money and all of the federal court intervention and all of the monitors for every Riverview, CJTS, all of the child fatality issues, after all of this, we still want to believe that it's the right model.

That's interesting to me because every time an incident happens, a crisis, in whatever part of DCF, we have another taskforce. We do another study.

I guess I'm kind of wondering when we're going to pull the trigger and just admit that the vision is an illusion, and we've got to try another way.

I'll put it on the table now for next session. I believe that restructuring is important, and I believe it's the only way to improve the lives of children right now.

I think DCF is dominated by the child protection function. You consume that by everything else. Juan is eating up all of the dollars that would be available for prevention and other services.

And I don't know how long we can keep going on this path with another taskforce and another study and tinkering around the edges.

We've done Band-Aid after Band-Aid. We have tried all kinds of medical attention, but we've never tried surgery. We are there.

Now having said all of that, I want to base it on what I observe is the fundamental problem with why we can't do it another way.

And that's the inherent conflicts of interest that exist within the agency that send mixed messages to children and to parents who are the providers and the receivers of your services.

First of all, orders of temporary custody, DCF has the function of removing children immediately, and then the worker knocks on their door, a different worker, and says, well, we want to reunify you, and here's the services we are offering you after we just took your kids, a conflict.

Now that may be easy for us to understand from an administrative, bureaucratic place, but it's real tough on families.

So then we divide this concurrent planning mesh. So I have client after client who is looking at a treatment plan that says they're going to have a reunification at the same time the Department is pursuing termination of parental rights.

Now that may make sense in the administrative world, but it doesn't make any sense in the real world, a conflict.

So then we go down to private providers. DCF puts out the RFP. You are the contractor. You then license them, and you then have full quality control responsibility and regulatory responsibility.

How in the world is that reasonable? Third conflict. I don't know how to fix that within a unified children's agency.

We talk all the time about abuse and neglect and reunifying children with families. It's not happening on the ground. We have done better. We've checked off more boxes. That statistics are better.

And I commend two commissioners for the hard work that you've done in that. Juvenile Justice is lost, completely overshadowed by the child protection function, which brings me to my Mr. Secretary question, my only question, and thank you, Mr. Chairman.

I represent Middletown, and I am especially interested in page three of your testimony.

While we haven't finalized our planning, it is plausible that CJTS could need to almost double its current census, due to this initiative, in an effort to serve the inevitable increase in court-committed youth to DCF.

So here's what I would like to request, Mr. Secretary. I want you to look into that camera, public forum that we have, and tell my constituents that right now, Governor Rell is prepared to double the census of the facility that she indicated she wanted to close two years ago.

SEC. ROBERT GENUARIO: [inaudible - microphone not on] so thank you for the opportunity to repeat my answer. Governor Rell proposed to close CJTS.

She made two separate initiatives, made two separate requests of the Legislature for funding to provide [inaudible]

REP. HAMM: And there [inaudible - microphone not on]

SEC. ROBERT GENUARIO: And what that--

REP. HAMM: There was never a vote.

SEC. ROBERT GENUARIO: You are absolutely correct.

REP. HAMM: This General Assembly did not vote to do either of the things you're describing.

REP. HAMM: I did my best.

REP. HAMM: Without a vote.

REP. HAMM: The Governor is the Governor.

REP. HAMM: Oh, I have.

SEC. ROBERT GENUARIO: In any event, we are well past that point because in the interim, the Legislature has chosen to adopt the Raise the Age legislation, which will require additional facilities for the confinement of 16-year-olds

and 17-year-olds outside of the system run by the Department of Corrections.

CJTS is the facility, if it is going to remain open, that will need to serve that function. Those additional children, and I will look straight into the camera, it is our present plan, those additional children will be served at CJTS.

They will also be served, if the Legislature works with us, in a refashioned, both physically and operationally, modeled CJTS.

Both you and the leadership of the General Assembly have been given a plan developed by the Commissioner, approved by the Governor. No action was taken on that last year, and the clock continues to run.

So as frustrated as you are, in terms of not being able to force your will on the Legislature, we are equally frustrated.

But the Legislature is an equal branch of the government. We accept that determination. What we now need to do is to move forward cooperatively to make CJTS the best facility it can to serve not only the children that it serves now, but the new children that will come under the jurisdiction of DCF, and to serve them in a manner that is meaningful and productive. And that is what Governor Rell, I, and the Commissioner are willing to do.

REP. HAMM: So you're prepared to double the census.

And that is a very, very significant macro question more than a micro question. And if we're going to try to do our jobs as Legislators, we need, I think we need to think, in the next part of this investigation, in a more macro way.

I want to just also state, if I could, Mr. Chairman, that this is very much a continuing investigation. And we're going to be bringing in lots of other people.

Hopefully, you will come back. We apologize for asking you to come back. But there are additional questions that people would like to ask you.

Maybe we'll bring you back after we've heard from other people to let you wrap it up.
Thanks.

SEN. HARRIS: Thank you, Mr. Chairman. You can tell I'm getting hungry when macro makes me think of mac and cheese. This is serious though, and I appreciate what Senator Meyer is saying.

And I want to thank the panel very much for their patience and their diligence and willingness to offer information to us.

One quick housekeeping measure, I think there was a reference, Commissioner, to a strategic plan reorganization.

If there is some document out there, if that could be provided to the Committees, and also any other information requested or anything that you feel would supplement what you said here today would be very helpful.

And you know, this is incredibly important. We stated out, you know, describing about how this

is an investigatory hearing with the notion that we want to get to this macro question about whether the children and families are better off because of their involvement in DCF, and I think we've begun to get some information on that today.

It's about the safety of children and families. Of course, it's about the nearly \$1 billion of taxpayer money that's being spent on this and whether there's accountability, efficiency, and whether this is working.

And I thank you for your information on that. We are going to invite you back some time in November to continue this because I have additional questions. I know other panel members have questions.

And we want to make sure we're thorough on this. There may be, as I stated, that day or on a subsequent day, an additional panel of other people.

And we're still open to hear your suggestions on people that might be productive with a direct connection to these macro issues that Senator Meyer refers to.

And then, of course, we will have a very important day, again, for the public to come and testify.

And I just want to say the reason that we're breaking this apart is because we want as many Members here as possible to be able to focus.

