



## Behavioral Health Partnership Oversight Council

### **Child/Adolescent Quality, Access & Policy Committee**

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[www.cga.ct.gov/ph/BHPOC](http://www.cga.ct.gov/ph/BHPOC)

*Co-Chairs: Sherry Perlstein, Hal Gibber, & Robert Franks*

#### **Meeting Summary**

**Friday, May 18, 2012**

**2:00 – 4:00 p.m.**

**Value Options**

**500 Enterprise Drive, 3rd Floor Hartford Conference Room  
Rocky Hill, CT**

**Next Meeting: Friday, June 15, 2012 @ 2 PM at Value Options,  
Rocky Hill**

*Attendees: Co-Chair Sherry Perlstein, Co-Chair Hal Gibber, Teodoro Anderson-Diaz, Karen Andersson, Sarah Becker, Lois Berkowitz, Nancy DiMauro, Bill Halsey, Beth Klink, Mickey Kramer, Ann Phelan, Lynne Ringer, Lori Szczygiel, Hillary Teed, Laurie Van Der Heide, and, Brenda Wilcox*

#### **Opening Remarks and Introductions**

Sherry Perlstein commenced the meeting by welcoming everyone and introductions were made.

#### **Department of Children and Families Presentation**

Nancy DiMauro, DCF Director of Child Welfare Services gave a presentation on the review of a preliminary report on the **Impact on Children of “Congregate Care Rightsizing and Redesign”** initiatives to:

- Reduce Placements of Children Under age 12
- Reduce Out of State Placements



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**DCF's Goals/Mission is to serve children in care in the least restrictive and most appropriate family-based setting while planning permanency from day one.** DCF has engaged in an exhaustive review of children 12 years and younger who were still residing in Congregate Care facilities as of January 2012. Each case review focused on potential discharge to family, therapeutic foster care or other community-based setting with a facilitated case review using the **Ann Arundel County Child and Family Readiness Tool** (see hand-out). Training on this model was provided to 30 DCF professionals.

Readiness results are assessed by determining the child's readiness for community-based placement and the family's readiness to receive the child. This information (see hand-out) was compiled from a study of in depth reviews of a cohort of 220 youths, 12 years of age and under from June 2001 until April 2012. It was noted, by November 2011, the number of youths had already been reduced to 118. The study consisted of reviews of the system as a whole and issues and barriers that have resulted in an over-reliance on congregate care. A **Team Decision-Making Model (TDM)** looks at the readiness of a child's family to determine if that child is ready for a lower level of care (see p. 3 of the hand-out on **Congregate Care Rightsizing Child and Family Readiness Tool** on degrees of readiness). This is used to help children get back to family settings. Family input must be included in the TDM meetings and all decisions are family driven. A team, led by DCF professionals trained in the model, but is not the child's worker, includes a wide array of professions from FASU, ARG, social workers, BHPDs, and, social work supervisors..

## Discussion

Discussion focused on clarification of the process, the role of various participants in the process, including the congregate care provider that has been working with the child. There were also questions on clarification of the data and terms used. Nancy indicated that length of stay was based on behavior and issues. On an average, it was 90 days and if there was no change during that period, it would be evaluated if that was the right place for the child. Referring to the charts on Demographics of Children in Initial Cohort (see attached hand-out), Nancy said that **TOG** meant **Transfer of Guardianship** and **APPLA** meant **Another Permanency Plan Being Arranged**. She emphasized that when a child is originally placed with family or a close relative, there is a better chance of success rather than when placed in stranger-care.

Further discussion focused on difficulty DCF and BHP are experiencing in identifying specific services these youths are accessing once they get back into the community. In addition, Nancy highlighted that the most significant barriers to moving kids out of placement include finding therapeutic foster homes and appropriate school placements particularly for youngsters who were not identified with special education needs prior to, or while in placement. Youngsters with complex needs and high risk behaviors have difficulty finding a family for

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placement when no other relatives are available. Finding the right home is the greatest barrier for the child's ultimate success. There was also discussion of whether or not school districts are brought into the process early enough in the process. Co-Chair Hal Giber said a **PPT (Pupil Parent Teacher)** meeting to develop an **IEP (Individualized Educational Plan)** must be held 45 days before a student goes back to school. He also noted that designating a child as needing a 504 accommodation costs less than a Special Ed designation. It was suggested that an Educational Advocate be assigned to a child when returning to the community. Information is not currently available on the average length of time from the initial TDM to the time a child is placed.

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Karen Andersson noted that Phase II will focus on 13-15 year olds. Approximately, 253 youths will be looked at in a similar fashion. Areas they will study will be how long these youths had DCF involvement, length of time and care, what were their placements, and total number of youth in congregate care. This data and a summary of the comments by the committee will be presented at the June Council Meeting.

### **Update on efforts to Obtain Feedback from Families on their Experience of Changes Implemented Under the "Fostering the Future" Initiatives**

Co-Chair Hal Gibber led the discussion on asking consumers, 'How is it going?' The answer depends on who you talk with. He said that DCF is focused on serving youth in a lower form of care and closer to home. Families are asked what do you need to parent to keep from further involvement in DCF and future problems with the Juvenile Justice System. Karen Andersson said it was a more of a question of consumer satisfaction and quality initiatives at DCF. Mickey Kramer said that if the re-entry into an education environment is not successful, that would sway a family's opinion very much. Questions on education, healthcare, medical and mental health, clinical support needs being met, having a roof over their heads are all important to understand a true picture of the status quo. Hal said that he would like DCF to ask kids three months after they step down from DCF care, "How is it going?" Karen said she would get back to the Committee if they can do that and for how long.

### **New Business and Announcements**

Sherry then thanked everyone for their attendance and participation and said for the next meeting, Ken Mysogland; Director of Foster Care at DCF will give the presentation. Upon hearing no comments or questions, she adjourned the meeting at 3:54PM.

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**Next Meeting: Friday, June 15, 2012 @ 2 PM at Value Options, Rocky Hill**

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