



Review of Children that Exited from an Out-of-State Congregate Care Placement Between 1/1/11 and 9/30/11

Data Request

12.9.11

Request Date: October, 2011

Completed Date: December, 2011

Request Details:

The Commissioner's office asked ORE to prepare a dashboard report that included the number of children placed in out-of-state congregate care placements in September 2011. The trend showed a considerable reduction in the point-in-time figures for these children during 2011, and ORE was asked to conduct a review of those children who exited from such placements during 2011 to find out where they had gone following this placement exit, and how they have been doing since that time.

Request Response:

Information for the 250 children who exited an out-of-state congregate care placement between January 1 and September 30, 2011 was extracted from LINK by ORE staff and categorized by whether they had moved into another placement, had been discharged from DCF care, or their outcome was unknown.

There were 110 children who had been discharged from DCF care or whose outcome was unknown and each of their LINK records were reviewed to determine their placement status. If they had gone into another placement, data were collected on the type and geographic location of placement. . If they were discharged, reviewers looked for documentation of services provided to the child/family at or following discharge, and whether or not they experienced any of a selection of adverse events following their discharge.

This population is a mix of children being served for protective, voluntary and juvenile justice (JJ) services. It should be noted that 38 (34.5%) of the 110 records reviewed concerned children who were involved in JJ episodes, and therefore have limited information available in the LINK database. Basic information concerning payments, placements and legal status are present in LINK for these children, but most narrative concerning services and other outcomes is maintained solely in CONDOIT. As ORE staff do not currently have client-level access to that system, we were unable to fully review the records for these 38 children.

1. From where did all children in out-of-state Congregate Care placements exit during CY11 (from 1/1 - 9/30/11)?

- Most exits from out-of-state Congregate Care placements during this timeframe were from Residential placements (243, 97%), with the remainder from Group Homes (7, 3%).
- The largest group of youth exited from placements in Massachusetts (130, 52%), with an additional 9 in Rhode Island and 2 more in New York; for a total of 141 (56.4%) exiting from placements in a state bordering Connecticut (CT). The next largest group of children exited from placements in Pennsylvania (56, 22%), then 21 (8%) in Vermont, 11 (4%) in Maine, and a scattering of 6 or fewer across 9 other states as far away as Florida and Utah.



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2. What happened immediately following their exit from these out-of-state placements, and was there any variance by age group in the immediate outcome for children exiting out-of-state Congregate Care?

- 161 (63%) of these children moved from one placement to another, while 89 (37%) were discharged from DCF care entirely.
- Children who stayed in care have significantly more previous placements (prior to the out-of-state placement from which they exited) than those that were discharged. The median number of previous placements for those who moved from one placement to another is 3, with an average of 4.7, while the median for those who were discharged is only 1, with an average of 2.3. The number of previous placements ranged for both groups from 0 to more than 20.
- The only noteworthy variance by age group is that those who exited at age 18 or older were discharged from DCF care completely at a higher rate than those of younger ages (47% compared to 34%).
- Of those who remained in care, children age 18 or older were more likely to enter some form of Independent Living arrangement rather than continuing in either a Group Home or Residential facility than those that exited at younger ages.

3. What kinds of placements did those who moved from the out-of-state placement to another go to, were the next placements located in CT or elsewhere?

- 161 (63%) of these children moved from one placement to another. Of these 161 children, the majority (109, 68%) were placed with a provider located in CT. Forty children (25%) moved to another placement in the same state in which they were already placed, and 12 (7%) moved to a placement in another state's facility. Broken down by original placement type, the results are as follows:
 - 3 (2%) children moved from out-of-state Group Home care to another placement, of these:
 - 1 went to a CT Group Home
 - 1 went to a different out-of-state Group Home
 - 1 went to an out-of-state Residential Treatment program
 - 158 (98%) children moved from out-of-state Residential Care to another placement, of these:
 - 50 (32%) moved to another out-of-state placement
 - 44 (88%) moved to another out-of-state Residential placement
 - 2 (4%) moved to an out-of-state Group Home
 - 2 (4%) moved to an out-of-state Sub-Acute
 - 2 (4%) moved to an out-of-state Hospital (1 for medical, 1 for psychiatric reasons)
 - 108 (68%) moved to a placement in CT, of these:
 - 29 (27%) to a Group Home
 - 25 (23%) to a DCF Facility
 - 19 (18%) to a Residential facility
 - 12 (11%) to Independent Living
 - 9 (8%) to Foster Care (6 to Core, and 1 each to Relative, Special Study and Therapeutic)
 - 14 (13%) to some form of temporary care (detention, shelter, hospital or Safe Home or on Runaway status but with an open episode of care still as of the review)

4. How many of the children who exited out-of-state placements for other placements remained in that placement as of the date of the review?



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- About 86% of the 161 children placed have not experienced any additional placement changes after exiting the out-of-state placement (i.e., the subsequent placement has been stable).
- Those that were moved to placements in CT maintained such stability at a lower rate (84%) than those placed in the same (90%) or other state (92%) from which their exit occurred.
- Predictably, those whose next placements were other Congregate or DCF Facilities had better stability (about 92% with no further moves) than those in either a setting designed to be temporary (10 of 16, or 63%) or foster care (3 of 9, or 33%).

5. For what reasons were children immediately discharged from DCF care following their exit from out-of-state-placement?

- 89 (37%) of these children were discharged from DCF care entirely, of these:
 - 85 (95.5%) children were discharged from out-of-state Residential care, of these:
 - 66 (78%) were Reunified
 - 10 (12%) were Transferred to Another Agency
 - 6 (60%) to DMHAS
 - 4 (40%) to DDS
 - For the most part, reviewers believe these youth to be doing well. One young adult remained in DCF care until age 21, following a lengthy history of 24 placements since age 10 due to extensive mental health issues. She actually continues to reside in the out-of-state DMHAS group home in which she has lived over the past year, and her exit actually represented only the end of DCF's legal responsibility for her. Though her parents' rights were terminated many years ago, she continues to have a good relationship with them and enjoys spending time with her grandmother and three sisters. In another example, the youth is residing in a DMHAS home while his worker helps find an apartment for him to live independently. At the same time he is getting help fighting a denial of SSI benefits, and is attending community college. In another example, however, a girl was placed in a newly established DDS group home with a couple of other girls and they were all arrested for fighting with each other within two months of placement.
 - 9 (10%) either ran away, were emancipated or living with another relative
- 4 (4.5%) children were discharged from out-of-state Group Homes, of these:
 - 3 (75%) were Transferred to Another Agency (all to DMHAS)
 - 1 (10%) ran away in June and is currently whereabouts unknown

6. What services were provided to children at or following their discharge from DCF?

- Reviewers could not find documentation of services provided at or following discharge for over half (48, 54%) of the 89 children. Most of these children (33, 69%) without documentation were JJ cases whose primary database of record is CONDOIT and not LINK. At this time ORE staff do not have client-level access to the CONDOIT system and so we could not explore further their records within the time available. We were, however, able to find documentation that about 32% of all those discharged received some form of behavioral health service, about 24% received some form of independent living service, and about 14% received a service related to ensuring their physical health. (Additional detail on specific services is available on request.)
 - In some cases, having the right combination of services in place over long periods of time seemed to help maintain a stable reunification. In one Voluntary Services case, a 15 year old girl with a history of trauma, mental health and developmental issues exited from a Massachusetts residential program after



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a year-long stay. Prior to her placement there she had been receiving in-home services from All Pointe and CRI, and they both resumed provision of services as she was preparing for and after her placement ended, though the exact mix of services provided was altered to better fit her current situation. WR funding was secured to ensure the availability of services, and her mother was able to secure DDS services upon her second application with the help of an advocate from the Office of Protection and Advocacy.

7. How many of the discharged children have not been the subject of any abuse/neglect reports since discharge?

- 66 (74%) of the 89 children discharged were under age 18 at the time of discharge. All but 11 of the 66 children discharged under age 18 have not yet had another abuse/neglect report since discharge. All but four of these 66 children were reunified or went to live with a relative, so there is insufficient information to detect a no meaningful difference in the incidence of repeat allegations by discharge type.

8. How many of the discharged children have remained in their own homes since discharge?

- 66 (74%) of the 89 children discharged were under age 18 at the time of discharge. All but 4 of the 66 children discharged under age 18 have remained in their own homes since discharge. All but four of these 66 children were reunified or went to live with a relative, so there is insufficient information to detect a meaningful difference in the incidence of foster care re-entry by discharge type.
- One example of a stable reunification illustrates how persistent attempts to find the right match between service, family situation and need can bring positive outcomes. A 15 year old girl was reunified with her mother following an 18 month stay in a Residential Treatment Center (RTC) in Vermont, which was her only placement throughout the episode. She and her family participated in outpatient mental health treatment, including Multi-Systemic Therapy, and in the Y-US program regularly in an effort to prevent placement, though ultimately her behaviors became so out-of-control that it was necessary. The family's participation in her treatment was significantly limited by the distance to the RTC, and even though family sessions were offered on the weekends and DCF reimbursed their travel expenses, the family participated in only 6 family sessions during her stay there. Intensive Family Reunification, marriage counseling and then grief counseling (when father suddenly died) were then attempted to help facilitate and ensure a stable reunification, but the child and family reported little benefit. In spite of these barriers, a different family therapist was then employed with whom they all connected very well, resulting in the child's reunification in June. The case was closed in October as no further risk factors arose since the child's exit from care.
- One example of a re-entry that demonstrates the fragility of some reunifications is that of a 15 year old girl who was reunified with her mother from an RTC in Massachusetts. She had been in that placement for 9 months and had been in 7 previous placements during the preceding four years. Her mother called the Hotline less than a month after the girl returned home, requesting the child's removal, but then refused to meet with DCF and the case was closed. Three months after returning home, the teen overdosed on pills because she didn't want to move to Florida with her mother and wanted "people to feel bad for her." The teen's mother cooperated with the hospital, though not with DCF, and the family moved to Florida a few days later. Five months later, the teen again overdosed on pills in CT after returning for a visit with a friend. Her mother was uncooperative, and the girl ran away from the hospital upon her release the following month. She was quickly arrested for assaulting a police officer and placed in a shelter, and several days later was remanded by the judge to detention. DCF is investigating to determine if she had been the victim of human trafficking. In this case, it appears as though short-term (about 2 months) of compliance with residential and reunification services was insufficient to overcome the significant amount of presenting



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issues, and the reunification was prematurely accomplished in order to allow the child to move with her mother to Florida.

9. How many of the discharged children have not experienced any other adverse event documented since discharge?

- Among the 89 discharged children, reviewers found no documentation describing any of the targeted adverse events following discharge for 53 (60%) of the children. Almost all discharged children had no problems with unplanned pregnancy, substance abuse treatment compliance, suspensions/expulsions from school, or psychiatric hospitalizations. More children experienced problems with arrests/incarcerations, compliance with psychiatric medications and mental health treatment, but the most frequently observed issues (each documented for about 21% of discharged children) had to do with stability of housing and sufficient income for themselves or the families with whom they reside. (Additional detail on specific events is available on request.)
 - Some unstable living situations arise from adolescent assertions of independence, and the system's inability to successfully re-engage them during such times. In one example, a sixteen year-old with a history of 8 previous placements over 5 years and numerous mental health issues refused to return to his out-of-state placement while in CT at a court hearing. He moved in with his maternal grandmother against DCF advice, and his commitment was revoked not long after that time. Within a couple months, he refused to continue working with IICAPS, left his grandmother's home in June and reportedly has been couch-surfing and/or homeless ever since. Finally, he requested and was formally emancipated by the court in November.
 - Several of these youth were arrested for various offenses and are currently at Manson Correctional Center. One of these youth, age 17.5, had run away from the placement during a home visit in order to attend a funeral, then refused to return to placement or cooperate with any DCF services so his commitment was revoked and custody returned to his mother. He actually was rarely at his home since that time, and ended up arrested for multiple charges including possession of marijuana and assault 3. He was placed at Manson Youth Institution on a \$100,000 bond, where he remained as of when the case closed in August because he was sentenced as an adult so was not eligible for DCF Parole Services.