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**TESTIMONY OF
CHRISTINE RAPILLO, DIRECTOR OF JUVENILE DELINQUENCY DEFENSE,
OFFICE OF THE CHIEF PUBLIC DEFENDER
Human Services and Select Committee on Children
Joint Forums on the Department of Children and Families
December 18, 2008**

This testimony is submitted on behalf of the Office of the Chief Public Defender. The Public Defender's Office deals with DCF on a daily basis in the various juvenile matters and adult criminal courts across the state. The lawyers, social workers and investigators find that our young clients are often involved with DCF or in need of their services. Currently, there are problems obtaining DCF services for court involved youth, even for those who are committed to DCF. The various DCF Bureaus argue internally over whether the child is a "delinquent" or a "child protection" client. Breaking up the Agency will make this desire to classify children more difficult to overcome.

Each Bureau serves a different need but the same population. Court involved children have needs that cross agencies and DCF Bureaus. For example, of the children and youth who are committed to DCF as delinquent, nearly 80% have previously been involved with DCF at some point in their lives. All children and families need access to appropriate services at times of crisis, whether the crisis involves an emerging mental health need, an abusive or neglectful family situation, or a delinquency referral caused by unmet mental health or family needs. Dismantling DCF to create additional specialized agencies will not bring better service for these children. Creating separate agencies to handle these important areas will increase fragmentation of services in a system that is already too difficult for most families to navigate. Troubled children and troubled families need easy access to quality services, not more bureaucracy.

While the Office of the Public Defender does not support the break up of DCF, we strongly believe that the responsibility for licensing residential child care facilities must be removed from DCF. It makes no sense that the consumer of the residential services is also responsible for licensing and overall quality control. Even more problematic is the fact that DCF effectively licenses and oversees itself. Riverview Hospital, CJTS, High Meadows and the Connecticut Children's Place are all DCF facilities, licensed by DCF. When there is a complaint about abuse or neglect at one of these facilities, it is a fellow DCF employee that investigates and makes findings on the validity of the complaint. This system of in-house oversight has resulted in years of inattention to complaints.

Our Post Conviction and Reentry Unit represents children who have been committed to DCF licensed facilities as part of their delinquency sentence. Therefore, we have first-hand knowledge of how the children, our clients, fare in these programs. The lack of independent review has perpetuated instances of poor and sometimes abusive treatment of children committed to these programs. DCF has a long history of inaction in attending to Unit complaints about treatment at both private residential programs and the four state run facilities. The Post-Conviction Unit has notified DCF of client abuse allegations at Lake Grove and the Stonington Institute, systemic problems at Riverview Hospital, and inappropriate educational plans for children placed out of state. DCF has repeatedly ignored or downplayed our clients' claims of problematic treatment.

Children committed as delinquent and the advocates who try to help them find it increasingly difficult to make their voices heard. When there is a problem with a child's placement, DCF can easily discount the child's complaints because of the lack of independent oversight. To insure the highest quality treatment for our most troubled children, licensing must be removed from DCF and placed under the authority of an independent and responsible agency that does not answer to the Department.