

## U n r e s o l v e d I s s u e s a d v o c a t e d b y t h e S t a t e w i d e a n d L o c a l A d v o c a c y C o u n c i l s

### **1. Mental Health Institutional Rules**

The DCF Mental Health Program Office has completed its draft rule and initial workshops. Official notice of rulemaking Has not yet occurred but is expected soon.

### **2. Changes to the Adoption Rules**

Changes requested in 1998 to the Adoption rules have still not been made as of this report, even though the draft of the revised rules are over two-years old. Ed Feaver, DCF Secretary Jerry Regier's predecessor, approved all of the changes. This issue is still outstanding with DCF and has been ongoing for 5 years.

### **3. Medical Passport**

Based on a review of 1,181 foster care records during 2001-2002 by SAC and LAC members, the Medical Passports were Still not uniform, completely filled out, or in the proper location. DCF needs to continue to improve in this area.

### **4. Children in CSUs: Statewide Policy**

In 1999, SAC presented an emergency appeal to Judge Kathleen Kearney, Secretary of DCF. Judge Kearney reacted very positively to the crisis of having 14 children housed in a CSU when they did not meet criteria. One of the children was a 3 year-old boy. Secretary Kearney sent a letter to all district administrators regarding this issue. Since that time, there have been no formal policy changes only a lot of meeting and draft policies. The Inspector General's (IG) investigation was finally completed after 2 1/2 years. SAC agreed with the findings and recommendations in the IG report. A statewide policy has still not been issued by DCF's Children's Mental Health Program Office. This issue is still outstanding with DCF.

### **5. The Home and Community-Based Waiver for the Developmentally Disabled Application Process**

New Providers wishing to enroll in the Home and Community-Based Waiver Developmentally Disabled Medicaid Program are still experiencing difficulty due to numerous reviews and delays which appear to be more cumbersome than the traditional Medicaid provider process. This process needs to be streamlined.

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