



**TESTIMONY OF
CONNECTICUT HOSPITAL ASSOCIATION
SUBMITTED TO THE SELECT COMMITTEE ON CHILDREN
Tuesday, February 24, 2004**

SB 301, An Act Concerning Formal Evaluation Of The Needs Of Children Placed In Residential Facilities

SB 303, An Act Concerning Reporting On Children Placed In Out-Of-State Residential Facilities

On behalf of Connecticut's not-for-profit hospitals, the Connecticut Hospital Association (CHA) appreciates the opportunity to submit testimony in support of **SB 301, An Act Concerning Formal Evaluation Of The Needs Of Children Placed In Residential Facilities** and **SB 303, An Act Concerning Reporting On Children Placed In Out-Of-State Residential Facilities**.

CHA supports SB 301, which would require formal clinical evaluations of children placed by the state in residential facilities after six months, one year and quarterly thereafter to determine whether the placement is meeting the child's needs. CHA respectfully recommends SB 301 be expanded to require clinical evaluations of all children with long-term stays in residential facilities, not just children placed in residential facilities by the state.

CHA also supports SB 303, which requires the Department of Children and Families to track and report to the General Assembly on children placed in out-of-state residential facilities. CHA respectfully recommends that DCF track and report on residential placements for all children, not just those placed by the state, and track in-state placements as well as out-of-state placements in order to provide an accurate assessment of the utilization of this level of care.

Connecticut's mental health system continues to be in a state of crisis, with children waiting days or even weeks in hospital emergency departments when an inpatient bed cannot be found. At the same time, children who are ready for hospital discharge wait in inpatient beds because there are no placements in the community. By tracking residential placements and requiring periodic reviews of the continued propriety of residential placements, SB 301 and SB 303 may contribute to reducing gridlock in Connecticut's mental health system.

Thank you for your consideration of our position.