Department of Children and Families
Summary of Legislation

The following is a compilation of legislation of interest to the Department of Children and Families that passed during the 2021 Regular Session of the General Assembly. These summaries are based largely upon the bill analysis prepared by the General Assembly’s Office of Legislative Research. Click on the Public Act Number below to review the statutory language of the Public Act. Please contact Vincent Russo (VINCENT.RUSSO@ct.gov) or Ken Mysogland (KEN.MYSOGLAND@ct.gov) with any questions.

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Public Act 21-2 – H.B. 6515 – AN ACT CREATING A RESPECTFUL AND OPEN WORLD FOR NATURAL HAIR

This act, known as the CROWN Act, states that “race”, for the purposes of the state anti-discrimination laws, includes ethnic traits historically associated with race, such as hair texture and protective hairstyles (e.g. braids, cornrows, etc.). Employers are therefore prohibited from discriminating against employees based on any of these traits. These protections extend to other areas, including housing, public accommodation, credit practices, union membership, and state agency practices.

EFFECTIVE DATE: Effective upon passage

Public Act 21-6 - H.B. 6423 - AN ACT CONCERNING IMMUNIZATIONS

This act eliminates the religious exemption from immunization requirements for individuals attending public and private schools, including higher education institutions, and childcare centers and group and family day care homes. Under prior law, an individual could claim an exemption from immunization by providing a signed statement that the vaccination was against the individual’s religious belief or, if a child, against the belief of the child’s parents or guardian.

Students enrolled in grades kindergarten or higher who submitted a religious exemption prior to the act’s passage are grandfathered under the previous exemption. The act continues to grandfather these students if they transfer to another public or private school in the state.

The act retains existing law’s medical exemption from these immunization requirements for individuals who can document that the immunization is medically contraindicated.

EFFECTIVE DATE: Effective from passage

Public Act 21-9 – H.B. 5596 – AN ACT CONCERNING TELEHEALTH

This act modifies requirements for the delivery of telehealth services and insurance coverage of these services until June 30, 2023. The act authorizes the Department of Public Health (DPH) to temporarily modify, waive or suspend certain regulatory requirements to reduce the spread of COVID-19 and protect the public health. The act expands the types of health providers authorized to provide telehealth services. It also requires both individual and group insurance to pay for telehealth the same way they would pay for in-person services.

The act also permits certain telehealth providers to provide telehealth services using audio-only telephone and other communication technologies, such as Apple Facetime.

Lastly, it authorizes the DPH commissioner to temporarily modify, waive, or suspend certain regulatory requirements to reduce the spread of COVID-19 and protect the public health.
EFFECTIVE DATE: Effective upon passage

Public Act 21-15 - H.B. 6321 - **AN ACT CONCERNING ADOPTION AND IMPLEMENTATION OF THE CONNECTICUT PARENTAGE ACT**

This act adopts the Uniform Parentage Act (UPA), which will be cited as the Connecticut Parentage Act (CPA). The act generally:

- provides for equal treatment under the law for children born to same-sex couples by, among other things, removing certain gender-specific references (e.g., changing “maternity” and “paternity” to “parentage”);
- expands recognition of non-biological parents by (a) making marital or “hold-out” presumptions gender neutral and (b) establishing de facto parentage (i.e., the court adjudicates a person to be a parent under certain circumstances);
- provides guidance on adjudicating parentage and adjudicating competing claims of parentage (e.g., creates best interest of the child factors that the court must consider);
- provides the process for establishing acknowledged parentage through an acknowledgment agreement;
- provides for adjudicating genetic parentage and updates the rules governing children born under a surrogacy agreement; and
- establishes a procedure to enable children conceived through assisted reproduction to access medical and identifying information about any gamete donors.

Key components of the act that directly influence aspects of the Department's work are:

- It identifies DCF as an entity that may petition the court to adjudicate parentage.
- It requires the petitioner (if the matter is in juvenile court) or the court (if the matter is in probate court) to notify DCF when a petition to adjudicate parentage is filed involving a child for whom a neglect petition has been filed and who is under DCF’s care and custody or guardianship.

EFFECTIVE DATE: January 1, 2022

Public Act 21-21 - H.B. 6105 - **AN ACT CONCERNING ACCESS TO ORIGINAL BIRTH CERTIFICATES BY ADULT ADOPTED PERSONS**

This act expands access to birth certificates for adopted persons age 18 and older and their adult children or adult grandchildren by allowing them to obtain an uncertified copy of the adoptee’s original birth certificate upon request. The act also repeals a report submitted by DCF required under C.G.S. section 7-53a detailing the contact preference of birth parents and the number of medical health history forms voluntarily filed by birth parents.

EFFECTIVE DATE: July 1, 2021
Public Act 21-32 - S.B. 1019 - AN ACT CONCERNING THE BOARD OF PARDONS AND PAROLES, ERASURE OF CRIMINAL RECORDS FOR CERTAIN MISDEMEANOR AND FELONY OFFENSES, PROHIBITING DISCRIMINATION BASED ON ERASED CRIMINAL HISTORY RECORD INFORMATION AND CONCERNING THE RECOMMENDATIONS OF THE CONNECTICUT SENTENCING COMMISSION WITH RESPECT TO MISDEMEANOR SENTENCES

Public Act 21-33 - S.B. 1093 - AN ACT CONCERNING CIVILIAN POLICE REVIEW BOARDS, SECURITY GUARDS, BODY-WORN RECORDING EQUIPMENT AND SEARCHES BY POLICE

These acts combined, known as the "Clean Slate" bill, establish a process to erase records of certain state criminal convictions after a specified period following the person’s most recent conviction. Class A, B, or C felonies (or certain unclassified felonies), and crimes against children or family violence and sex crimes are ineligible for erasure. These ineligible crimes include:

- Enticing a minor (1st offense, victim age 13 or older; other cases are class B or C felonies)
- Obscenity as to minors
- Possession of child pornography 3rd degree
- Failure to register as a sexual offender when required
- Assault of an elderly, blind, disabled, or pregnant person or person with intellectual disability 3rd degree

Eligible misdemeanors are subject to erasure seven years after the person’s most recent conviction and eligible felonies are subject to erasure 10 years after the most recent conviction. For earlier offenses, erasure is automatic for offenses occurring on or after January 1, 2000; for earlier offenses, erasure occurs when the person files a petition for erasure. The act establishes a separate process for erasing certain misdemeanor convictions committed by minors before July 1, 2012.

The act prohibits discrimination in various contexts based on someone’s erased criminal history record information, including in housing, employment, public accommodations, credit and state agency services. It classifies this type of discrimination as discriminatory practices under the jurisdiction of the Commission on Human Rights and Opportunities (CHRO).

EFFECTIVE DATE: January 1, 2023

Public Act 21-33 also establishes the crime of “enticing a juvenile to commit a criminal act.” A person is guilty of this crime if he or she is at least age 23 and knowingly causes, encourages, solicits, recruits, intimidates or coerces a person under age 18 to commit or participate in the commission of a criminal act. The act defines a “criminal act” as conduct constituting a felony or a misdemeanor.

EFFECTIVE DATE: October 1, 2021
This act declares racism as a public health crisis in Connecticut. It provides that racism will continue to be such a crisis until the state meets the goal of reducing, by at least 70%, racial disparities in specified indicators in four areas - education, health care utilization and outcomes, criminal justice, and economic matters.

It also establishes a Commission on Racial Equity in Public Health which is tasked with developing and periodically updating a comprehensive strategic plan to eliminate health disparities and inequities across sectors. The plan must consider various factors (e.g. access to health care and the impact of climate change) and provide ways to incorporate health and equity into specific policies, programs and government decision-making processes. The act requires the commission, upon completing or updating the plan, to submit it to the Public Health Committee and any other legislative committee the commission determines has oversight over matters relevant to the plan.

The Commission is required to determine best practices for state agencies to evaluate structural racism within their policies, practices, and operations and create and implement a plan to eventually eliminate any such structural racism within the agency. The plan must include benchmarks for improvement.

The DCF Commissioner, or the Commissioner's designee, is a statutory member of the commission.

The act also establishes a working group to develop recommendations for the strategic expansion of school-based health center services (SBHCs) in the state. The working group may consider establishing school-based mental health clinics, which can provide on-site mental, emotional, or behavioral health services to children and adolescents at the school.

The DCF Commissioner, or the Commissioner's designee, is a statutory member of the working group.

Additionally, the act requires the Department of Mental Health and Addiction Services (DMHAS), within available appropriations, to increase access to mobile crisis services throughout the state. DMHAS must do so by expanding these services’ hours of operation to include nights and weekends. The act also requires DMHAS to develop a plan to increase access to mobile crisis services throughout the state by making these services available 24 hours a day, seven days a week.

EFFECTIVE DATE: Effective from passage
Public Act 21-46 - S.B. 2 - AN ACT CONCERNING SOCIAL EQUITY AND THE HEALTH, SAFETY AND EDUCATION OF CHILDREN

This act addresses children's mental and emotional health by implementing several changes at DCF and other agencies.

Section 1 creates a "Train the Trainer" program for youth suicide prevention training. It requires the Youth Suicide Advisory Board (YSAB) and Office of the Child Advocate (OCA) to jointly administer an evidence-based youth suicide prevention training program in each local and district health department and offer it at least once every three years. The program must provide certification in Question, Persuade and Refer (QPR) Institute Gatekeeper Training that will allow participants to then train other individuals, including members of the public. Participants must be members from the following groups in each health district:

- Local and district health department employees,
- Youth service bureau employees,
- School employees,
- Youth-serving organization employees and volunteers,
- Youth athletic activity employees and volunteers,
- Municipal social service agency employees,
- Paid municipal or volunteer fire department members, and
- Local police department members.

Section 10 makes changes to the laws surrounding consent and notification of a parent or guardian for a minor’s outpatient mental health treatment. Previously, a mental health provider was required to notify the minor that consent, notification, or involvement of a parent or guardian is required to continue treatment after the sixth session, unless it would be seriously detrimental to the minor’s wellbeing. This section instead allows minors to request and receive as many outpatient mental health treatment sessions as necessary without the consent or notification of a parent or guardian. Under the act, the provider may, in limited circumstances, notify a parent or guardian, without the minor’s consent, of the treatment being provided if the notice is necessary to protect the minor’s wellbeing.

Section 21 addresses virtual visitation of children in DCF care and custody. It specifies that in the event of a pandemic or outbreak of a communicable disease resulting in a declaration of a public health emergency by the Governor or a declaration of a national emergency by the President, the child must be given opportunities to communicate with his or her parents and siblings by telephone, video, or other conferencing platform instead of in-person visitation. These visits must occur as often as reasonably possible based on the best interest of the child.

By January 1, 2022, DCF must develop a policy to temporarily stop in-person visitation, on a case-by-case basis, when 1) a child, their parent, or sibling is seriously ill due to a communicable disease and 2) visitation could result in at least one participant contracting the disease during
the visit. The policy must allow for the child to have a virtual visit in lieu of an in-person visit. The terms "seriously ill" and "communicable disease" must be defined in DCF’s virtual visitation policy.

**Section 22** requires DCF to create and maintain a mobile and computer app that will allow for (1) the reporting of non-emergency incidents to DCF by mandated reporters and (2) communication between children in DCF care and custody and the social workers assigned to them. The app must be developed by February 1, 2022.

**Section 23** requires new information be given to parents or guardians at the time of any initial face-to-face contact with the Department. Currently, DCF provides written notice outlining certain rights of the parent or guardian through a document known internally as DCF’s “Right to Know” Brochure. This section specifies that the brochure should inform the parent or guardian that they may have an attorney present at any meeting conducted to determine whether the parent or guardian’s child should be removed from the home, in line with current DCF policy. It also states that starting on October 1, 2021, in addition to this written notice, DCF must also provide a list of providers of free and low-cost legal services through which the parent or guardian may obtain legal advice. As with the notice, DCF must (1) make reasonable efforts to ensure that this list is written in a manner that will be understood by the parent or guardian (e.g. in their primary language) and (2) request that the parent or guardian sign and date the notice to acknowledge receipt.

**Section 30** establishes a 25-member task force to study the comprehensive needs of children in the state and the extent to which their needs are being met by educators, community members, and local and state agencies. The DCF Commissioner, or their designee, is a member of this task force.

Among other things, the task force must (1) identify children's needs using certain tenets of the whole child initiative developed by the Association for Supervision and Curriculum Development and (2) recommend new programs or changes to existing programs operated by educators or local or state agencies to better address children’s needs.

The task force must submit a report on its findings and recommendations to the Children’s Committee by January 1, 2022.

EFFECTIVE DATE: July 1, 2021 (all listed sections except Section 30, which is effective upon passage)

**Public Act 21-54 - S.B. 972 - AN ACT CONCERNING COMMUNICATION SERVICES IN CORRECTIONAL AND JUVENILE DETENTION FACILITIES**

This act requires the Department of Correction (DOC) and the Judicial Branch’s Court Support Services Division (CSSD) to provide free phone calls for inmates in correctional facilities and children detained in a juvenile detention center. The act allows the DOC commissioner and
CSSD executive director to supplement phone calls with other telecommunications services, including video communication and email, provided those communications must be free of charge to the inmates or children and to the people who initiate or receive the communication.

The act prohibits DOC and CSSD from supplanting in-person contact visits with phone or other communication services and the state from receiving revenue for these phone or telecommunications services on and after October 1, 2022.

EFFECTIVE DATE: Upon passage, except the repealer section is effective on October 1, 2022.

Sections 52 and 53 of S.B. 1202 (the Budget Implementer act) moves up the implementation date requiring DOC and CSSD to provide free telephone services to inmates, from October 1, 2022 to July 1, 2022, and generally makes incarcerated adults and detained youths eligible to use telephone services for at least 90 minutes a day providing these services do not interfere with the facility’s standard operations.

Public Act 21-64 - H.B. 6113 - AN ACT REQUIRING THE PROVISION OF INFORMATION CONCERNING CHILD SEXUAL ABUSE

This act requires the Governor's task force on justice for abused children, in collaboration with a national association of adult survivors of child abuse, to create two sets of materials by December 1, 2021:

- Instructional guidelines for youth coaches on best practices for appropriate interaction with youth athletes.
- Informational guidelines that describe abusers' grooming techniques; victim behavior and advice on how tell a parent/adult if sexual abuse has occurred; and methods for contacting the appropriate authorities.

These materials will be available on the Governor's task force website. The instructional guidelines will be distributed annually to youth coaches starting January 1, 2022. Also starting on that date, municipalities, businesses, and nonprofit organizations operating youth athletic activities and youth camp licensees must distribute the informational guidelines to the parent or guardian of each activity or camp participant upon enrollment or registration.

EFFECTIVE DATE: December 1, 2021 (creation of materials); January 1, 2022 (distribution of materials)

Public Act 21-72 - H.B.-6637 - AN ACT CONCERNING A MENTAL HEALTH BILL OF RIGHTS FOR DEAF, DEAFBLIND, AND HARD OF HEARING PERSONS

This act seeks to eliminate the disparities in mental health services for individuals who are deaf, deafblind, or hard of hearing. Section 2 of this act creates a bill of rights for persons in need of mental health services who are deaf, deafblind, or hard of hearing under which a person has a
right to:

- culturally and linguistically affirmative mental health services that accommodate the unique needs of such person;
- accessible mental health services delivered in such person's primary language, communication mode or style;
- specialized mental health services when necessary that provide appropriate and fully accessible counseling and therapeutic options using an appropriate oral, aural or speech-based system tailored to the unique needs of such person;
- express their opinion in determining the extent, content, and purpose of mental health treatment or services that accommodate the unique needs of such person;
- programs offering access to a full continuum of services, including, but not limited, all modes of therapy and evaluations;
- programs informed by appropriate research, curricula, staff and outreach; and
- express their views concerning the development and implementation of state and regional programs for the mental health service needs of such person.

The rights afforded these individuals must be available to them only to the extent that they are implemented in accordance with the general statutes, federal law, and the state and U.S. constitutions. The bill of rights affects all children and adults who are deaf, hard of hearing, or deafblind and receive mental health services through DCF.

EFFECTIVE DATE: July 1, 2021


This act affects DCF’s Fiscal and Grants and Contracting divisions by, among other things:

- streamlining contracting requirements for certain state, municipal, and quasi-public agency contracts by eliminating the requirement that contractors submit documentation (e.g. affidavits and certifications) about their compliance with certain contracting laws (e.g. State ethics laws and affirmative action requirements) and instead requiring that these applicable requirements be incorporated into the contract itself;
- modifying the state set-aside program's eligibility requirements by requiring that for-profit entities be registered as a small business in the federal government’s contracting database to participate in the program;
- allowing state and quasi-public agencies to conduct various business activities electronically such as accept fee payments by any electronic funds transfer means they adopt; and
- requiring state and quasi-public agencies to post on their website or another electronic portal available to the general public any legal notice that must be advertised in a newspaper under current law.
This act defines domestic violence, outlines certain acts which demonstrate coercive control, and creates additional protections for victims of domestic violence.

Section 1 defines “domestic violence”, in family relations matters statutes, as:

- a continuous threat of present physical pain or injury against a family or household member,
- stalking a family or household member,
- a pattern of threatening of a family or household member or a third party that intimidates that person, or
- “Coercive control” of a family or household member, which is a pattern of behavior that in purpose or effect unreasonably interferes with a person's free will and personal liberty. An example of coercive control is an individual unreasonably controlling, regulating or monitoring the family or household member's movements, communications, daily behavior, finances, economic resources, or access to services.

Sections 2, 3, and 15 change certain protocols surrounding civil restraining orders. The act expands eligibility criteria to petition the court for a restraining order, allowing domestic violence victims who are subject to coercive control by a family or household member to be eligible petitioners, rather than limiting it to only those who have been subject to continuous threats of present physical pain or physical injury, stalking, or a pattern of threatening. The act states that in any court proceeding in a family relations matter, a party or child who has a protective order, restraining order, or standing criminal protective order against another party may submit a request to be able to testify away from said party. This request must be submitted at least two days before a proceeding, and the court must order that this be followed.

Section 15 also establishes a grant program to provide legal assistance at no cost to indigent individuals when applying for temporary restraining orders.

Sections 4-6, 11, 12, and 16 make changes to existing family violence statutes, including family violence crime and family violence statutes. Under existing law, a "family violence crime" means a crime other than a delinquent act which contains an element of an act of family violence to a family or household member. It does not include disciplining minor children unless these acts constitute abuse. "Family violence" is an incident resulting in physical harm or an act of threatened violence that constitutes fear of imminent physical harm, including stalking or a pattern of threatening; however, it excludes verbal abuse or argument unless
there is present danger and a likelihood of physical violence. The act expands the definition of family violence crime to include 1st and 2nd degree violation of conditions of release and criminal violation of a protective order, standing criminal protective order, or restraining order when the condition of release or court order is issued for an act of family violence or family violence crime.

Section 16 expands the factors the court may consider when determining what release conditions for an arrested person will reasonably ensure that the person's appearance in court and that the safety of any other people will not be endangered.

Section 12 expands the judicial districts in which family violence victims must be allowed to provide services to domestic violence victims to include the Family Division in each judicial district and in each geographical area Superior Court.

Sections 8 and 9 expand the list of factors a guardian ad litem (GAL) or attorney for a minor child must consider in determining a child's best interest to include the physical and emotional safety of the child. The act makes the same change to the list of factors a court must consider in custody decisions, including those in which DCF is assigned custody of a child.

Sections 20-22 enhances safety for tenants under protection orders. It requires landlords to change a dwelling unit's locks or allow a tenant to do so upon a tenant's request when:

- at the time the tenant makes the request, they are named as a protected person in a court-issued civil restraining or protection order; family violence protective order; criminal protective order; foreign order of protection registered in Connecticut; or a protective order issued in cases of stalking, harassment, sexual assault, risk of injury to or impairing morals of a child,
- the order requires the respondent or defendant to stay away from the tenant's home or stay a minimum distance away from the tenant, and
- the tenant provides a copy of the order to the landlord.

The tenant may change the locks themselves if the landlord:

- has informed the tenant that the tenant is responsible for changing the locks,
- fails to change the locks, or
- fails to allow the tenant to do so within six hours after the tenant's request.

In this case, the tenant must ensure the locks are changed in a workmanlike manner and give the landlord a key to the new locks within two business days of the change.

Finally, the act prohibits landlords, when the locks to a unit have been changed for the above reasons, from providing a new key or any access to the dwelling unit to the tenant who is required to stay away from the unit as the named respondent or defendant in the court order.
EFFECTIVE DATE: October 1, 2021

Public Act 21-82 - H.B. 6417 - AN ACT REQUIRING BACKGROUND CHECKS FOR CERTAIN EMPLOYEES OF YOUTH CAMPS AND YOUTH SPORTS COACHES, TRAINERS AND INSTRUCTORS

This act requires youth camps licensed by the Office of Early Childhood (OEC) to require prospective employees age 18 or older to submit to comprehensive background checks. The act also requires certain municipalities, businesses, and nonprofit organizations operating youth athletic activities to have prospective employees or volunteers who are age 18 or older and applying for a position as coach, instructor or athletic trainer to submit to comprehensive background checks. Background checks include a check of the DCF child abuse and neglect registry.

As under existing law, individuals required to be checked must provide a release of personal information form. For youth camp personnel, OEC will be responsible for collecting the forms and submitting names to DCF's background check unit.

The act allows prospective employees to begin working on a provisional basis while the background check is pending. During an employee's provisional work period, the employee must be supervised by an employee who has successfully completed the background check process.

The background checks must be completed upon hiring or volunteering and then once every five years afterward. The act does not prohibit an organization from requesting background checks more frequently.

EFFECTIVE DATE: October 1, 2022


This act addresses the claims backlog by instituting several changes concerning claims presented to the Claims Commissioner exclusively seeking permission to sue the state (rather than seeking payment through the claims process).

It adds six temporary deputies to the Office of the Claims Commissioner who may serve until September 30, 2023. These temporary deputies have the authority to issue a final decision to grant or deny permission to sue for each claim referred to them.

Sections 3-6 eliminate the requirement for a hearing for a claim exclusively seeking permission to sue and allows the Claims Commissioner to grant permission to sue based on the claim notice and any supporting evidence (e.g. transcripts, records, etc.), provided that the attorney or pro se claimant files 1) a motion for approval to assert a claim without a hearing and 2) a notarized affidavit attesting to the claim's validity.
Pending claims that were filed more than three years before the act's passage will be automatically referred to a temporary deputy, unless the claimant expressly states the desire for the claim to remain with the commissioner. Starting July 1, 2022, for any claim that has been pending for at least 18 months, a notice can be filed with the Attorney General, Governor, and Judiciary Committee, and the Claims Commissioner must issue a decision within 90 days after this notice is filed. If they do not meet this deadline, the claim must be referred to a temporary deputy through June 30, 2023 unless the parties stipulated to an extension of time for the commissioner to dispose of the claim.

Claims referred to a temporary deputy must be reviewed, along with the claim notice, state's notice of opposition, and any discovery or supporting evidence. Within 90 days after the referral, the deputy must either deny or dismiss the claim or authorize the claimant to sue the state. Claimants whose claims were denied or dismissed by a temporary deputy may request that the legislature review that decision, and the legislature has the same authority regarding these claims.

EFFECTIVE DATE: Effective upon passage

Public Act 21-103 - H.B. 6657 - AN ACT CONCERNING HUMAN TRAFFICKING

The act establishes an affirmative defense for a trafficking victim who is a minor (under age 18) charged with human trafficking if the minor knowingly committed human trafficking under coercion or fear by the minor's perpetrator. The act also allows individuals who committed certain crimes due to being human trafficking victims to apply to have those convictions vacated (i.e., seek vacatur relief). Applicants are required to notify any victim of the crimes about the application for vacatur. The vacatur section was further clarified under Public Act 21-104 (see below).

The act also specifies that an individual must have “knowingly” participated in human trafficking to be found guilty of that crime. It additionally broadens the definitions of "sex trafficking,” “patronizing a prostitute”, and “commercial sex abuse of a minor” by making it a crime to engage in the prohibited acts in exchange for anything of value instead of in exchange for a fee as under current law.

The act reduces, from annually to every three years, the required frequency of the DCF refresher training in human trafficking awareness for certain professions and extends the training requirement to emergency medical services (EMS) personnel.

Lastly, it requires the Trafficking in Person Council to examine how traffickers use the internet to groom minors to be trafficked and exploited and report its findings to the Judiciary Committee, including recommendations to combat online grooming by January 1, 2022.

EFFECTIVE DATE: October 1, 2021, except the examination and reporting requirement for the Trafficking in Persons Council is effective July 1, 2021
Public Act 21-104 - H.B. 6505 - AN ACT CONCERNING COURT OPERATIONS

The act replaces several references to “juvenile detention center” throughout the statutes on juvenile matters with “juvenile residential center”.

EFFECTIVE DATE: January 1, 2022

Under the act, the Judicial Branch may allow certain individuals, including DCF employees, to enter, physically or virtually, a juvenile residential center and interact with the staff and juveniles without a court order, if the entry and interaction are required by the individual to perform his or her duties.

EFFECTIVE DATE: Effective from Passage

The act also requires the court to vacate a conviction for prostitution and dismiss the charge if the defendant proves that participation in the offense was a result of having been a victim of human trafficking. It additionally also allows the court, at its discretion, to vacate any conviction for any other misdemeanor offense; class C, D, or E felony; or unclassified felony offense carrying up to a 10-year prison term applied for by a human trafficking victim.

EFFECTIVE DATE: October 1, 2021

Public Act 21-116 - H.B. 6510 - AN ACT REQUIRING THE PROVISION OF INFORMATION CONCERNING CHILDREN’S BEHAVIORAL AND MENTAL HEALTH RESOURCES IN HOSPITAL EMERGENCY DEPARTMENTS AND SCHOOLS

This act requires DCF to develop and annually review and update a document for each mental health region designated by DMHAS describing the behavioral and mental health evaluation and treatment resources available to children. DCF must do so in consultation with the Behavioral Health Partnership Oversight Council (BHPOC), the DMHAS and DPH, and DCF’s Youth Suicide Advisory Board. BHPOC must then (1) distribute the documents electronically to each licensed hospital that has an emergency department and to each local and regional board of education and (2) make them available on the council’s website.

The act further requires hospital emergency departments, starting on January 1, 2022, to provide a copy of the applicable documents to the parents or guardians of each child upon the child’s discharge from the emergency department. It also requires each local and regional board of education to (1) distribute the applicable documents to parents and guardians and students starting January 1, 2022, and (2) make the documents available on its website.

EFFECTIVE DATE: December 1, 2021
Public Act 21-140 - S.B. 872 - AN ACT CONCERNING THE DEPARTMENT OF CHILDREN AND FAMILIES’ RECOMMENDATIONS FOR REVISIONS TO THE STATUTES CONCERNING CHILDREN

This act is the Department’s legislative proposal for this session. Many of the sections are technical but key components of the act are described below.

Several sections of the act repeal mandated statutory reports that DCF must submit to the legislature. Rather than recreating the information, this act allows the Department to provide this information by submitting the Department’s federal reports prepared for and approved by the Administration for Children and Families (ACF) of the U.S. Department of Health and Human Services. Those include:

- The Department’s Child and Family Services Plan (CFSP), which lays out DCF’s 5-year strategic plan to achieve goals that are aligned with the mission and mandates of the agency.
- The Annual Progress and Services Report (APSR), which details the steps the Department has taken to achieve its goals, as outlined in the CFSP, and highlights priorities that may have changed over the previous year.
- The Child and Family Service Review (CFSR), which enables the ACF to ensure that the state conforms with federal child welfare requirements, determine outcomes of child welfare cases, and assist the state in achieving positive outcomes for children and families.
- The Program Improvement Plan (PIP), which details action steps to improve child welfare practices in response to the CFSR.

The federal reports will provide the General Assembly a comprehensive assessment of the work being conducted by the Department.

The act also establishes “qualified residential treatment programs” (QRTP) in state statute. Connecticut must adopt a QRTP protocol in order to continue to claim federal Title IV-E reimbursement for the cost of a child’s stay in a congregate care facility, pursuant to the federal Family First Prevention Services Act (FFPSA).

Key components of the proposed legislation include:

- defining QRTPs;
- defining "qualified individuals" as trained professionals or licensed clinicians who will assess a child’s needs and recommend whether the child requires treatment in a QRTP or can receive care with in-home services with family or in foster care;
- authorizing the Department to promulgate regulations setting forth QRTP requirements and the qualifications of qualified individuals; and
- instituting a required court review and determination process for placements in such facilities
The act also adds a health care professional to the membership of the Statewide Advisory Council on Children and Families.

EFFECTIVE DATE: Most sections are effective July 1, 2021. The court process for QRTP is effective October 1, 2021 or when the federal government approves the CT Family First Prevention Plan.

**Public Act 21-142 - S.B. 919 - AN ACT CONCERNING IMMUNITY FROM CRIMINAL PROSECUTION FOR A MINOR WHO POSSESSES ALCOHOL WHEN THE MINOR SEEKS EMERGENCY ASSISTANCE TO PREVENT THE DEATH OR SERIOUS INJURY OF ANOTHER PERSON**

This act gives minors (i.e. under age 21) immunity from criminal prosecution for possessing alcohol when they call 9-1-1 to prevent another person's death or serious injury. The minor receives immunity only if:

- a law enforcement officer first becomes aware of a minor's illegal alcohol possession after the minor made a 9-1-1 call requesting emergency medical assistance based on their reasonable belief that another individual was in immediate medical assistance to prevent death or serious bodily injury;
- the minor placing the 9-1-1 call was the first person to make the 9-1-1 call requesting immediate medical assistance to prevent the death or serious bodily injury of another individual;
- the minor provided their own full name, or any other relevant information requested by the law enforcement agency during the 9-1-1 call; and
- the minor remained at the scene with the individual needing immediate medical assistance until a law enforcement officer and emergency medical personnel arrived, and they continued to fully cooperate with the law enforcement officer and emergency medical personnel at the scene.

EFFECTIVE DATE: October 1, 2021

**Public Act 21-145 - S.B. 1071 - AN ACT IMPLEMENTING THE RECOMMENDATIONS OF THE AUDITORS OF PUBLIC ACCOUNTS**

This act updates two Connecticut State statutes concerning DCF by replacing "Office of the Ombudsman" with "Office of Community Relations." This brings the statutory language in line with DCF's internal language.

EFFECTIVE DATE: October 1, 2021


This act makes several changes affecting the education and treatment of children in the juvenile
justice system.

The act increases the lower age of a child who may be charged with an act of delinquency in juvenile court from seven to ten years of age.

The act requires DCF, with help from an implementation team, to develop an operational plan for a unit within DCF to educate children who are incarcerated or residing in a juvenile justice facility. The implementation team must provide a report to the JJPOC by September 1, 2021 that details the timeline, necessary funding and other measures needed to implement the plan.

EFFECTIVE DATE: July 1, 2021

Once the operational plan is complete, DCF must create an administrative unit within the Department to implement and supervise the educational services provided to the youth in state custody. The unit must collect education data on the students in the juvenile justice facilities and provide regular reports to the JJPOC. Most importantly, the unit is charged with ensuring the students receive a quality education while detained, including:

- enabling students to earn credits toward high school graduation;
- ensuring credits are transferred with the student when they return to their home school district;
- ensuring that students that complete the minimum credits for high school graduation receive a diploma from the local school district; and
- providing for immediate record transfer to and from the educational oversight unit and the local education authority.

DCF may employ transition specialists to facilitate the child's successful transition from their communities to the juvenile justice facilities and then assist the students with their return home. Transition specialists will work with reentry coordinators designated by the State Department of Education (SDE), on these efforts.

EFFECTIVE DATE: October 1, 2022

The act establishes an implementation team to develop two plans concerning mandatory prearrest diversion of low-risk children. It requires the team to include state and local agency representatives, including from DCF, SDE, CSSD, DOC, and local and regional boards of education. The implementation team ends on the date it submits its second report or January 1, 2023, whichever is later.

Under the bill, the first plan must cover automatic prearrest diversion of children to youth service bureaus or other services instead of arrest for Tier 1 offenses, including infractions for such things as simple trespass, creating a public disturbance, possessing less than one-half of an ounce of a cannabis-type substance, and using, possessing, or delivering drug paraphernalia related to less than one-half of an ounce of a cannabis-type substance. The team must develop
the plan by January 1, 2022 and provide a report on its findings and recommendations to JJPOC.

The second plan, which the team must develop by January 1, 2023, must address the diversion for Tier 2 offenses that include infractions such as 2nd degree breach of peace; disorderly conduct; 5th or 6th degree larceny; possessing at least one-half an ounce of a cannabis-type substance; and using, possessing, or delivering drug paraphernalia related to at least one-half an ounce of a cannabis-type substance. As with the first plan, the team must provide JJPOC with a report on its findings and recommendations.

EFFECTIVE DATE: Effective from passage

**Public Act 21-176 - H.B. 6687 - AN ACT CONCERNING MEDICAL ASSISTANCE FOR CHILDREN AND ADULTS WITHOUT HEALTH CARE COVERAGE**

This act requires the Department of Social Services (DSS) to extend eligibility for medical assistance (i.e., Medicaid), subject to income limits and within available appropriations, to certain groups of people regardless of immigration status, who do not otherwise qualify for health care coverage.

**Sections 1 and 3** extend coverage to children under age 9, regardless of immigration status, with household incomes 1) up to 201% of the federal poverty level (FPL) with no asset limit and 2) over 201% and up to 323% FPL. This applies to children who do not otherwise qualify for Medicaid, the Children’s Health Insurance Program (CHIP) (i.e., HUSKY B), or an offer of affordable, employer-sponsored insurance.

EFFECTIVE DATE: January 1, 2023

**Section 2** extends postpartum care to women who do not qualify for Medicaid due to immigration status and whose household income does not exceed 263% FPL.

EFFECTIVE DATE: April 1, 2023

**Section 4** stipulates that not later than April 1, 2022, DSS shall provide medical assistance for prenatal care through the unborn child option under HUSKY B and will amend the state plan to provide such assistance. The "unborn child option" means a state option under CHIP that allows states to consider an unborn child a low-income child eligible for coverage of prenatal care if other eligibility conditions are met.

EFFECTIVE DATE: October 1, 2021

Public Act 21-2 - S.B. 1202 - AN ACT CONCERNING PROVISIONS RELATED TO REVENUE AND OTHER ITEMS TO IMPLEMENT THE STATE BUDGET FOR THE BIENNium ENDING JUNE 30, 2023

These acts make up the budget for the biennium that includes fiscal year 2022 and 2023. It establishes the following budget line items for DCF:

<table>
<thead>
<tr>
<th>DEPARTMENT OF CHILDREN AND FAMILIES</th>
<th>FY 22</th>
<th>FY 23</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Services</td>
<td>274,659,269</td>
<td>284,948,344</td>
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<tr>
<td>Other Expenses</td>
<td>29,505,436</td>
<td>29,144,436</td>
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<tr>
<td>Family Support Services</td>
<td>946,451</td>
<td>946,637</td>
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<tr>
<td>Differential Response System</td>
<td>15,812,975</td>
<td>15,821,651</td>
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<tr>
<td>Regional Behavioral Health Consultation</td>
<td>1,646,024</td>
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<tr>
<td>Health Assessment and Consultation</td>
<td>1,422,776</td>
<td>1,425,668</td>
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<tr>
<td>Grants for Psychiatric Clinics for Children</td>
<td>16,205,306</td>
<td>16,225,467</td>
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<tr>
<td>Day Treatment Centers for Children</td>
<td>7,294,573</td>
<td>7,311,795</td>
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<tr>
<td>Child Abuse and Neglect Intervention</td>
<td>9,882,941</td>
<td>9,889,765</td>
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<tr>
<td>Community Based Prevention Programs</td>
<td>7,527,785</td>
<td>7,527,800</td>
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<tr>
<td>Family Violence Outreach and Counseling</td>
<td>3,745,395</td>
<td>3,745,405</td>
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<td>Supportive Housing</td>
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<tr>
<td>No Nexus Special Education</td>
<td>3,034,946</td>
<td>3,110,820</td>
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<tr>
<td>Family Preservation Services</td>
<td>6,593,987</td>
<td>6,594,028</td>
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<tr>
<td>Substance Abuse Treatment</td>
<td>8,654,849</td>
<td>8,686,495</td>
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<tr>
<td>Child Welfare Support Services</td>
<td>2,560,026</td>
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<tr>
<td>Board and Care for Children - Adoption</td>
<td>107,421,375</td>
<td>111,010,454</td>
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<tr>
<td>Board and Care for Children - Foster</td>
<td>139,906,480</td>
<td>144,471,637</td>
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<tr>
<td>Board and Care for Children - Short-term and Residential</td>
<td>79,443,183</td>
<td>78,391,093</td>
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<td>Individualized Family Supports</td>
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<td>5,595,501</td>
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<td>Community Kidcare</td>
<td>44,107,305</td>
<td>44,113,620</td>
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<td>Covenant to Care</td>
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<td>Juvenile Review Boards</td>
<td>1,318,623</td>
<td>1,319,411</td>
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<td>Youth Transition and Success Programs</td>
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<td>Youth Service Bureaus</td>
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<tr>
<td>Youth Service Bureau Enhancement</td>
<td>1,093,973</td>
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<tr>
<td>AGENCY TOTAL</td>
<td>791,141,349</td>
<td>808,722,488</td>
</tr>
</tbody>
</table>
Funding in the budget provides for the following Department initiatives:

- DCF will hire additional nurses for Solnit North to meet the 24/7 nursing levels envisioned for the DPH licensure of the Solnit Center hospital and two psychiatric residential treatment facilities (PRTF).
- In preparation for establishing the administrative unit to oversee the education of juveniles detained by CSSD and DOC described in PA 21-174 (see above), funding is included to hire a chief of the unit and an IT specialist to work with existing Department leadership to develop the unit by the effective date of October 1, 2022. It then provides funding to fully staff the unit in FY 2023. Money is also available for the Department to develop the necessary programs for credit and record transfer and other expenses.
- $100,000 to the Department to create the application described in Public Act 21-46 enabling mandated reporters to submit non-emergency reports to the Careline.
- $500,000 each fiscal year for the improvement and expansion of Youth Service Bureaus and Juvenile Review Boards and includes a provision establishing a Youth Service Bureau in the town of Somers, which will receive an annual grant of $14,000.
- Approximately $91,000 for FY 22 for the CT Youth Suicide Advisory Board to provide the QPR suicide prevention "train-the-trainer" program established in Public Act 21-46.

Several sections of the act forgo lapsing the Department's budget surplus to the general fund and use the unexpended funds to increase funding for the non-profit providers that contract for human service programs.

The act earmarks federal American Rescue Plan Act (ARPA) dollars for the following programs through DCF:

<table>
<thead>
<tr>
<th>DEPARTMENT OF CHILDREN AND FAMILIES</th>
<th>FY 22</th>
<th>FY 23</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fostering Community</td>
<td>10,000</td>
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<tr>
<td>Casa Boricua-Meriden</td>
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<tr>
<td>Children’s Mental Health Initiatives</td>
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</tr>
<tr>
<td>Child First</td>
<td>5,100,000</td>
<td>5,100,000</td>
</tr>
</tbody>
</table>

EFFECTIVE DATE: July 1, 2021

Public Act 21-1 - S.B. 1201 - AN ACT CONCERNING RESPONSIBLE AND EQUITABLE REGULATION OF ADULT-USE CANNABIS

This act allows people age 21 and older to possess, purchase and use cannabis recreationally. It permits for the sale of cannabis to adults through dispensaries regulated by the Department of Consumer Protection. It eliminates criminal offenses related to cannabis and prevents juveniles from being adjudicated delinquent for certain cannabis possession offenses. Juveniles will instead be referred to their local youth service bureaus or other appropriate service.
EFFECTIVE DATE: July 1, 2021

Under Section 65 of the act, the Alcohol and Drug Policy Council (ADPC), in conjunction with DPH, DMHAS and DCF, must make recommendations to the Governor and legislature on efforts to mitigate misuse of cannabis and promote the risk and treatment of cannabis addiction with a focus on persons under 21 years old. The ADPC must also report the impacts of legalization on persons under 21 years old and suggest additional measures the state can take to prevent cannabis use by persons under 21.

EFFECTIVE DATE: July 1, 2021, the report is due January 1, 2023

Section 94 prohibits DCF from commencing any action or proceeding against a parent or guardian of a child or newborn or a pregnant woman solely based on a drug screen that detects the presence of cannabinoid metabolites. This provision does not preclude any DCF action or proceeding based on harm or risk of harm to a child, nor does it preclude the department from using information on the presence of cannabinoid metabolites in the bodily fluids of any person in any action or proceeding.

EFFECTIVE DATE: July 1, 2021

Sections 125 and 128 establish the Prevention and Recovery Services Fund which shall serve as a non-lapsing account into which twenty five percent of tax revenue from the sale of cannabis will be transferred for the purposes of substance abuse prevention, treatment and recovery services and the collection and analysis of data regarding substance use.

EFFECTIVE DATE: The Treasurer establishes the fund by July 1, 2022 with the revenues to be deposited into the fund beginning July 1, 2023.