Office of the Deputy Commissioner for Operations Overview

Policy

The Department of Children and Families’ Deputy Commissioner of Operations shall be responsible for:

- Education Management and Unified School District #2;
- Office of Organizational Climate and Staff Support;
- Clinical and Community Consultation and Support;
- Careline;
- Family, Adolescent and Children Services; and
- Health and Wellness

Clinical Community Consultation and Support Division

The DCF Clinical and Community Consultation and Support Division shall be responsible for:

- Interagency Client Planning;
- Community Mental Health;
- Early, Middle, Childhood and Child Welfare, including Prevention;
- IPV and Substance Use and Recovery; and the Behavioral Health Partnership.

Early Childhood

Early childhood means the period of time between birth and age five.

DCF shall develop age-specific and developmentally-appropriate best practices designed to support healthy relationships, promote safe and healthy environments and ensure that the developmental, social, emotional and educational needs of children ages 0 to 5 years who are under DCF jurisdiction are met.

Assessment of the safety of children shall be done through the lenses of trauma, child development and attachment.

DCF staff shall view children and their families from a racially-just lens to ensure equal treatment.

DCF shall promote the concept that the safety, permanency and well-being of children are shared community responsibilities.

DCF shall partner with each family’s natural support system and the agencies and services in the community that directly serve and impact young children and their families to improve outcomes for children and families.

DCF shall minimize the effects of trauma and other adverse childhood experiences by intervening early and connecting young children and families to services in the community.

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Cross references:

- DCF Policy 21-4, “Early Childhood Education."
- DCF Policy 21-9, Safe Sleep Environments."
- DCF Policy 21-10, “Breastfeeding during Placement.”
- DCF Policy 21-11, "High Risk Newborns."
- DCF Policy 21-12, “Safe Havens for Newborns.”

See also these Practice Guides:

- Early Childhood Practice Guide for Children Aged Zero to Five
- Standards and Practice for Safe Sleep Environments
- Access to Early Childhood Education

Prevention

Prevention means a proactive process which empowers individuals within groups and systems to meet the challenges of life events and transitions by creating and reinforcing conditions that promote healthy behaviors and lifestyles.

DCF shall support both primary and secondary prevention programs and services.

DCF shall fund an array of programs along a continuum of care which shall begin with primary prevention. DCF shall employ multiple strategies designed to meet the complex needs faced by children and families.

Secondary prevention or early intervention programs shall seek to reduce the incidence and severity of problem behaviors through early identification and intervention strategies. These programs shall target individuals who are referred with a presenting problem or who are determined to be "at-risk."

DCF shall promote a broad-based, comprehensive approach to prevention which targets multiple systems including, but not limited to:

- the family;
- school;
- peers;
- the community; and
- the neighborhood.

Notification of Adverse Action against Provider

To facilitate up-to-date communication between DCF divisions, whenever a division determines that an adverse action that significantly impacts a DCF-licensed or -contracted provider is necessary, the decision to take such action shall be communicated within two hours in writing to the Commissioner, Deputy Commissioners, all Regional Administrators, all relevant Central Office Division Directors and the Connecticut Behavioral Health Partnership by the Division Director who authorized the action. Such actions may include, but are not limited to, licensing, contract or utilization actions.

The approval of the Commissioner or designee shall be required before any legal activity is initiated, such as the revocation of a facility license or the cancellation of a contract.

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In instances in which DCF becomes concerned about the quality of care being provided by a DCF-licensed or -contracted provider, the relevant DCF division shall initiate communication with other impacted divisions to ensure efficiency and reduce duplication of effort.

Division Directors may opt to send DCF staff to the provider’s place of business to conduct formal investigations or informal reviews. These actions may be precipitated by, for example, Careline reports, reports of significant incidents, observations by Social Workers and Licensing Unit visits.

In the case of out-of-state providers or providers not licensed or contracted by DCF, the Office of Research and Evaluation shall work in conjunction with the appropriate licensing or authorizing authority.

See also “Notification of Adverse Action Against a Provider Practice Guide”

DCF shall support continued emphasis on health and wellness with both statewide and local activities to address issues related to the psychological effects of employee exposure to trauma and violence and to promote activities to support the health and wellness of all employees.

The local Worker Support and Wellness Teams shall coordinate their work with Area Office, facility management and the Threat Assessment Teams. Worker safety and support shall be of the highest priority.

Worker Support Teams shall focus on a range of proactive health and wellness activities designed to enhanced workplace morale and healthy coping with job-related stress.

Health and wellness activities that require a leader or a teacher shall be procured through a vendor authorized by the DCF Academy for Workforce Development.

Note: Employees may participate in health and wellness activities only during breaks, meal periods or outside of regular working hours.

See also “Best Practice Guide for Worker Support and Secondary Trauma.”

The Family, Adolescent and Children Services Division shall be responsible for:

- the Office of Children and Youth in Placement, which includes:
  - Statewide Foster Care Recruitment and Licensing;
  - Therapeutic Foster Care;
  - Congregate Care;
  - Interstate Compact; and
  - Permanency and Subsidy;
- Gender Responsive Adolescent Services;
- Program and Facility Licensing and Oversight; and
- Statewide Integrated Service.