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# PATRICK SNYDER

STATE REPRESENTATIVE • 85<sup>th</sup> ASSEMBLY DISTRICT

## Testimony in Support of SB 674: Release of Mental Health Information

Thank you Chairwoman Vukmir and members of the Health and Human Services committee for holding a public hearing on Senate Bill 674. This proposal is a direct product of the bipartisan Speaker's Task Force on Foster Care, which I had the honor of serving on over the past several months.

According to the Department of Children and Families Annual Out-of-Home Care Report, there was a total of 7,482 children living outside of their homes in 2016. These children have been removed from their homes and exposed to neglect, abuse, and maltreatment. As a result to their exposure to this trauma, it is not surprising that children in out-of-home care often have significant, complex medical needs that differ from children who remain in the comfort of their own homes. This is especially prevalent in the area of mental health.

Throughout the various public hearings held by the Speaker's Task Force on Foster Care, foster parents, social workers, and health care providers spoke to the lack of information that is provided to a foster parent. Thousands of foster parents open their hearts and their homes to these vulnerable children every day, and as a state who administers this system, it is important we are providing them with the necessary, critical information to do so. However under current law, health care providers are often reluctant to engage in these important conversations with foster parents because they are wary of state confidentiality laws regarding these children. Unfortunately, when this information isn't shared in a timely manner, those who suffer are our children.

This bill gives health care providers the flexibility to discuss with foster parents and out-of-home care providers any relevant mental health information that they believe is necessary in order to properly care for the child. This brings mental health to parity with other areas of health care such as physical health. A perfect example of when this would be useful is demonstrated in a story we heard from a foster parent in La Crosse.

A woman who attended the public hearing spoke about a foster child who continuously hoarded food underneath their pillow. As she struggled to find ways to get this child to stop, she became increasingly frustrated as they insisted on doing so. As time passed, she eventually learned from the child's psychiatrist that they had been starved by their biological parents and this was a method they used to cope. If the foster parent would have been aware of this useful information earlier, she would have been provided with the tools to adequately address this child's needs in a timely manner, and perhaps respond to the situation in the best way possible.

Today you will hear from foster parents, health care providers, and advocates who will speak to the negative effect this lack of information has on those who are at the center of our system: our children. Although there may be instances in which this information can be shared within a few days, those are still days past by that a foster parent isn't receiving the necessary information to properly care for a child.

I ask that you join me and the rest your colleagues in supporting Senate Bill 674. This bill has received broad bipartisan support in both houses, unanimously passed the Assembly Mental Health Committee, and is supported by a number of organizations that are heavily involved in our child welfare system.

Thank you, and I would be happy to answer any questions.

# **Alberta Darling**

## **Wisconsin State Senator**

**Co-Chair, Joint Committee on Finance**

Testimony before the Senate Committee on Health  
Senate Bill 674  
Tuesday, February 6, 2018

Thank you Chair Vukmir and committee members for holding a public hearing on Senate Bill 674. This bill is indescribably important to providing trauma informed care for our state's youth in out-of-home care.

In Wisconsin, approximately 7,000 children are part of the child welfare system at any given time. The Centers for Medicare and Medicaid Services estimate that 90% of children in foster care have been exposed to trauma. According to national data from the National Conference of State Legislatures, nearly 80% of youth involved with the child welfare system require mental health intervention and services due to developmental, behavioral, or emotional issues. Per the same source, children in foster care utilize mental health services at five to eight times the rate of other Medicaid eligible children. Additionally, foster youth are more likely than children not in child welfare to use multiple psychotropic medications, like antipsychotics, antidepressants, ADHD, or anxiety medications.

Yet, despite the clearly significant need for youth in out-of-home care to have access to mental health treatment, they have significant barriers to the treatment they need. Under current law, in order for a foster parent or out-of-home provider to access information they need for the daily treatment of the child, they need to first have obtained the written consent of the parent.

Senate Bill 674 reforms this system to put the needs of the child living in out-of-home care first. The bill in front of you allows a health care provider to disclose a portion of the mental health treatment record for a child in out-of-home care, if the health care provider reasonably believes it is necessary for the proper care of the child. This bill is instrumental in ensuring that the individuals caring for our foster youth on a daily basis have access to information like diagnosis, treatment plan, and medication management plan.

As a state, we place the well-being of children living in out-of-home care with our foster parents, kinship care, and group homes. How can we expect these individuals to provide needed mental health care for our kids if they are not aware of the child's daily treatment plan or need for medication? Senate Bill 674 prioritizes the welfare of the child living in out-of-home care.

I'd like to thank Senator Johnson and Representatives Snyder and Meyers for their work on this bill. I urge your support on Senate Bill 674.



STATE SENATOR  
**LaTonya Johnson**

WISCONSIN STATE SENATE

6TH DISTRICT

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**Senate Bill 674**

Children in out-of-home care often have additional medical, developmental, and behavioral needs that foster parents must assist them in managing. For instance, children who have been removed from an abusive environment can benefit from a trauma-informed approach, which will improve their long-term mental health outcomes. Ensuring that caregivers and foster parents receive essential health information regarding the children in their care will improve their ability to meet the child's needs and understand how best to seek additional support when necessary.

This bill would give mental health care providers the flexibility to discuss with foster parents and out-of-home care providers any relevant mental health information that they believe is necessary in order to properly care for the child. The disclosure provisions in SB 674 mirror existing statutory language which allows family members to receive necessary information for the treatment of a loved one.

By clarifying the kind of mental health disclosures that may be made to foster parents and other out-of-home care providers, this proposal will allow them to participate more-fully as a member of the child's caregiving team.

We all want prosperous communities where families are able to thrive. These proposals will get us one step closer towards that goal by helping to prevent the need for family intervention by the child welfare system.

It is important to note that this package is just one step in a larger, ongoing conversation that must continue regarding ensure success for our children. I hope to see the work of the Task Force continue, and I look forward to working with my legislative colleagues on both sides of the aisle to keep the momentum going.



TO: The Honorable Members of the Senate Committee on Health and Human Services

FROM: Linda A. Hall, Executive Director

DATE: February 6, 2018

RE: **Support for Senate Bill 674 – Limited release of Mental Health Information**

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Thank you for the opportunity to provide testimony in support of Senate Bill 674 to permit limited release of mental health information to out-of-home care providers and child welfare agencies.

WAFCA is a statewide association that represents over fifty child and family serving agencies and leaders in the field and advocates for the more than 250,000 individuals and families that they serve each year. Our members' services include family, group and individual counseling; substance use treatment; crisis intervention; outpatient mental health therapy; and foster care programs, among others.

Senate Bill 674 would allow foster care agencies, group homes and residential treatment centers to receive targeted mental health information regarding children in their care. Under current law a mental health treatment record is confidential and caregivers can only receive information if the child's parents or guardians have consented to the release of information.

Although standard practice is for providers to work with parents, engage them in the treatment process and gain their consent to the release of information, this type of collaborative process with parents is not always possible particularly at the beginning of a foster care stay when the sharing of information with caregivers is especially crucial.

Foster care agencies are required to provide foster parents essential information about the health and mental health of children they are being asked to welcome into their home. The first few hours or days that a child is in care are critical. They have typically just been taken away from their parents and are experiencing a considerable degree of trauma. Caregivers are expected to help calm them, observe them and be prepared to share information on the child with the foster care agency, physicians and therapists who are also working with the children to address their physical and mental health needs.

When releases of information get in the way of foster parents accessing children's medications or key information about their past traumas, children are not well-served and foster parents are needlessly stressed.

Although most parents are engaged, some parents are not due to impairments by substance use, mental health conditions or incarceration. The statutory language changes in SB 674 would allow providers to access limited information until parents are ready to be engaged in their children's mental health care.

The bill language offers the mental health provider flexibility in distinguishing what portion of a child's treatment record should be shared. Some concerns have been raised that providers may share too much information. However, it should be noted that when deciding which information is necessary for the proper care of a child's mental health, professionals will be guided by the practice and ethical standards of their discipline.

Furthermore, residential treatment centers and foster care agencies which, for the most part, would be receiving this information will continue to be responsible to statutory requirements requiring that they make reasonable efforts to work with parents on the care for their children.

This legislation provides important flexibility to access information necessary to help children experiencing trauma and begin the medical and mental health treatment that can start them on a path to healing.

Thank you for your time and consideration. We look forward to working with the Committee to advance this legislation.

**TO: Senate Committee on Health & Human Services**  
**FROM: Brooke Luebke, Direct Services Manager, Children's Hospital of Wisconsin**  
**DATE: Tuesday, February 6, 2018**  
**RE: Support for SB 674—Limited release of mental health information to out-of-home care providers and child welfare agencies**

Good morning, Chairwoman Vukmir and members of the committee. My name is Brooke Luebke and I am licensed by the State of Wisconsin as a marriage and family therapist. I have provided outpatient therapy to children and families for over 14 years and am currently the direct services manager at Children's Hospital of Wisconsin. Thank you for allowing me the opportunity to testify in support of SB 674 which provides for the limited release of mental health information to out-of-home care providers and child welfare agencies. I also want to thank the Speaker's Task Force on Foster Care for holding public hearings last year and to the authors, Representative Snyder and Senator Darling, for sponsoring this legislation.

As you know, Children's Hospital of Wisconsin (Children's Hospital) serves children and families in every county across the state. We have inpatient hospitals in Milwaukee and the Fox Valley. We care for every part of a child's health, from critical care at one of our hospitals, to routine checkups in our primary care clinics. Children's Hospital is the largest not-for-profit, community-based agency serving children and families in the state, providing community services to more than 15,000 children and families annually. Children's Hospital operates seven of the 15 child advocacy centers (CACs) across the state and in partnership with the Division of Milwaukee Child Protective Services, Children's Hospital is responsible for the ongoing case management of approximately half of the youth and families involved in out-of-home care in Milwaukee County. The majority of children and youth have some degree of physical, behavioral and emotional needs stemming from the trauma they have experienced in their lives.

Additionally, Children's Hospital provides behavioral and mental health services in clinics and schools at more than 30 locations across the state. Our therapists provide trauma-informed, holistic care to address life challenges and improve social and emotional health in the home, school and community. They have extensive experience working with children, parents and families, including those involved in the child welfare system.

Through public health research, we know that children who experience a number of adverse childhood experiences (ACEs) such as unstable housing, scarcity of food, parental absence, drug or alcohol abuse in the home, or physical or emotional abuse have increased risks for illnesses like depression, addiction and chronic illnesses. In order to achieve our vision of Wisconsin's kids being the healthiest in the nation, we are focused on addressing the impact of ACEs and build resilient kids who grow into healthy, thriving adults.

While many factors play a role in building this resilience, researchers point to the presence of an early, consistent and caring relationship with an adult as a factor. While Children's Hospital has programs focused on the parent and child to help foster those relationships through home visiting and parent child interaction therapy (PCIT), we also focus on strengthening relationships with foster parents and other family members.

Children in out-of-home care typically have greater medical, developmental, behavioral and dental needs than children not involved with the child welfare system. Currently, when a child receives mental or behavioral health care, their treatment record is confidential and can only be released with informed written consent. Obtaining timely consent from a biological parent or legal guardian can be a difficult task. SB 674 would allow a health care provider to disclose a portion of the child's mental health treatment record – that they believe is reasonably necessary to in order to properly care for the child – to an out-of-home care provider or child welfare agency.

Allowing foster parents and other out-of-home caregivers to have access to parts of a child's mental health record, such as the diagnosis, treatment and medication management plans, enables better and more immediate trauma-informed care and helps the caregiver understand the child and develop a better relationship with them. Current law allows providers to share medical information with out-of-home caregivers and we question why chronic conditions like diabetes and asthma are treated differently than a behavioral health diagnosis. While there can be sensitive information in a child's mental health record, just as there can be in the medical record, the provider should be able to provide timely information to caregivers in order to facilitate best care for the child.

SB 674 would increase transparency for the provider to share important treatment and medication information to help them work with biological and foster parents to best meet the child's treatment needs and goals. This will prevent the child from suffering any adverse health outcomes and ensure foster parents are able to wholly support the child's behavioral and mental health.

Chairwoman Vukmir and committee members, thank you again for the opportunity to testify in support of SB 674. If you have any questions, comments or concerns, please feel free to contact me via email at [bluebke@chw.org](mailto:bluebke@chw.org) or via phone at 608-221-3511.