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Governor Scott Walker
Secretary Eloise Anderson

Secretary's Office

Date: January 29, 2014

To: Members of the Assembly Children and Families Committee

From: Sara Buschman, Assistant Deputy Secretary

Re: Department Position on AB 675 – In Support

Representative Krug and Assembly Children and Families Committee members,

Thank you for the opportunity to testify on AB 675. My name is Sara Buschman and I am the Assistant Deputy Secretary at the Wisconsin Department of Children and Families (DCF). With me is Robert Williams, the Director of the Bureau of Safety and Well-Being at DCF.

Wisconsin law requires health care providers to report to Child Protective Services (CPS) when an infant is affected by controlled substances. The child welfare agency then assesses the case and provides services to the baby and family through the child welfare system, if warranted, or refers the parent(s) to services in the community.

The reauthorization of the federal Child Abuse Prevention and Treatment Act (CAPTA) created a new requirement that health care providers notify CPS when children are born with and diagnosed with Fetal Alcohol Spectrum Disorder (FASD).

To address the federal requirement, Wisconsin statutes must be amended. Under AB 675, a health care provider, a social worker, or a juvenile court intake worker who suspects that a baby has FASD must refer the child to a physician. The doctor would be required to evaluate the child and diagnose whether the child has FASD. If the physician finds that the child has FASD, he or she would have to report that diagnosis to the local child welfare agency. The county child welfare agency or the Bureau of Milwaukee Child Welfare would then assess the case and provide services to the child and family through the child welfare system, if warranted, or refer the parent(s) to services in the community.

These changes bring state laws into compliance with CAPTA, which is a source of federal funding for the child welfare system in Wisconsin. Additionally, DCF must be in compliance with CAPTA requirements for the Department of Justice (DOJ) Children's Justice Assistance Program to continue to receive CAPTA funding. If this change isn't made, it puts DCF and DOJ at risk of losing federal funding.

Thank you for the opportunity to testify on this legislation. I am happy to take any questions.



Luther S. Olsen

State Senator

14th District

Testimony in favor of AB 675

Wednesday, Jan. 29, 2014

Assembly Committee on Children and Families

Thank you Chairman Krug and committee members for holding a hearing on AB 675. I greatly appreciate the opportunity to discuss this legislation, and the time the committee members are investing in the hearing.

Under current law, health care providers in Wisconsin are required to report to Child Protective Services when an infant is affected by controlled substances or controlled substances analogs. In 2010, the reauthorization of the federal Child Abuse Prevention and Treatment Act (CAPTA) established a new requirement that health care providers inform the child protective services system of infants born with and identified as being diagnosed with Fetal Alcohol Spectrum Disorder (FASD).

CAPTA is the paramount federal legislation addressing child abuse and neglect, and it sets forth a minimum definition of child abuse and neglect. It also authorizes federal funding to states in support of prevention, identification, assessment, investigation and treatment activities. To bring Wisconsin into compliance with this federal law, state statutes must be amended to include infants born with and identified as diagnosed with FASD. This bill will:

1. require a hospital employee, a social worker, or a juvenile court intake worker who suspects that an infant has fetal alcohol spectrum disorder to refer the infant to a physician for an evaluation;
2. require a physician who determines that there is a serious risk that an infant has fetal alcohol spectrum disorder to evaluate the infant to diagnose whether the infant has that disorder;
3. require a physician who diagnoses that an infant has fetal alcohol spectrum disorder to report that diagnosis to the agency responsible for conducting child abuse and neglect investigations; and
4. require the agency to offer services and treatment for the infant and the infant's mother. The county agency and the Bureau of Milwaukee Child Welfare will assess family conditions to ensure a safe plan of care for the child.

The changes under the bill will bring Wisconsin's laws into compliance with CAPTA. It is particularly important that we make these changes as CAPTA is a source of federal funding for the child welfare system in Wisconsin. Along with this, the Department of Children and Families (DCF) must be in compliance with CAPTA requirements for the Department of Justice (DOJ) Children's Justice Assistance Program to continue to receive CAPTA funding. Thus, if these changes are not made, DCF and DOJ could lose federal funding needed to support programs that provide for the health, safety, and welfare of Wisconsin's children.

Once again, thank you for the opportunity to speak in favor of AB 675.