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United States Senate

WASHINGTON, DC 20510

Senator Lindsey O. Graham

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Fax Transmittal Sheet

To: Gov. Haley

Fax #: 1-803-734-5167 Date: 11-3-15

From: Alice Cooper - CONSTITUENT SVS.

RE: Kelly Ann Curran Pages to follow: 6

Comments/Notes: Please note the Senator's interest and provide assistance. Thank
you.

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LINDSEY O. GRAHAM
SOUTH CAROLINA



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UNITED STATES SENATE

November 3, 2015

The Honorable Nikki Haley
Governor
Office of the Governor
1205 Pendleton Street
Columbia, SC 29201-3756

Dear Governor Haley:

The attached letter concerns an issue outside my official jurisdiction. Therefore, as a courtesy to my constituent, I am sending this correspondence to your attention.

Thank you for your attention to this matter, and I ask that you please respond directly to the individual.

Sincerely,

A handwritten signature in black ink, appearing to read "L. Graham".

Lindsey O. Graham
United States Senator

LOG/ac

Enclosure

RECEIVED
11-3-15

Kelly Ann Curran
219 S Court Ave
Florence, SC 29506
908-403-6274

October 28, 2015

Lindsey Graham, U.S. Senator
401 W. Evans St. Suite 111
Florence, SC 29501

Dear U.S. Senator Graham:

On September 11, 2015, I became a foster parent to a fifteen year old child from Lexington County through SCYAP and the Department of Social Services. The child came into care after being released from the Department of Juvenile Justice when her mother refused to take custody of her on September 2, 2015. She was placed in another foster home from September 2, 2015-September 10, 2015 before coming to me. I received this child with only the following information: she had recently been released from DJJ because she ran away from home, she has ADHD, and she has a child of her own whom she doesn't have custody of. In addition, the child, along with her siblings who have now aged out, have a long history with DSS.

While in my care, a plethora of additional details arose that was not disclosed prior to the child being placed with me. The child had attempted suicide the year before while in foster care and had been hospitalized for approximately one month. She also had another suicide attempt a few years prior. The child stole her mother's car which is why she went to DJJ, not just for running away. The child and her family were heavily involved in the Bloods gang. The child disclosed being involved in drug and sex trafficking. The child had a Personality Disorder which was also never disclosed by DSS along with PTSD and Oppositional Defiant Disorder. It had been documented in a Psychological Evaluation that this child had a history of hallucinating, being cruel to animals, and fire starting. The child had a history of prostituting and selling herself on websites for sex. None of this information was provided to me by DSS.

While in my care, the child disclosed sexual abuse that stemmed from approximately age 3 until 14 by her biological father. She advised that it had been reported but despite multiple attempts to confirm that, DSS would not advise if that was true. The child disclosed that her mother suffers from mental illness (bipolar, schizophrenia, dissociative disorder) and abuses drug. She also disclosed that her grandmother told her when her mother was a child she put a kitten in a microwave and killed it. The child disclosed that the reason she ran away which led her in DJJ was because her mother's boyfriend had thrown a shoe at her head which struck her and that he had grabbed her wrists and bruised her. The child disclosed that she has witnessed her mother be in abusive relationships before and has had to call for help in the past because her mom was being abused and that afterwards she would get in trouble for saving her mother's life. She referenced a specific time when she watched her mother get strangled by an abusive paramour. The child disclosed that she was sexually and physically abused in foster care. The child also disclosed that she was given a date rape drug and sexually assaulted last year by, "friends".

The child came to me with no medication or medical records. She had severe allergies which lead to anaphylactic shock and she had no epi-pen or anything. She had Anxiety, Depression, Adjustment

Disorder, PTSD, Oppositional Defiant Disorder, Personality Disorder (undefined), Conduct Disorder and ADHD and was not on any medication. She had asthma and a history of anemia. The child also had a herniated disc in her back, a fractured foot from a few months prior that she did not go to physical therapy as she was supposed to and was still experiencing pain. She also had a swollen, painful knee from a prior injury. I asked multiple times for medical records because I was unable to get any new doctor's to write any medications for her without a medical history without starting from square one. Many requests and weeks went by and my pleas were ignored and/or unfulfilled. The caseworker was new to the case and appeared to be trying to do her best. I emailed the supervisor, the County Director, the Regional Team Leader, State Director and a few others with DSS multiple times without as much as an acknowledgement. Fortunately, after approximately 4 weeks, I was able to get this child on some medication and attempt to start stabilizing her.

She advised me when she came to me that she was having trouble seeing and I took her to an eye doctor immediately. They advised me that her eyes were, "fluctuating like crazy". She was experiencing such severe muscle spasms in her eyes from stress and anxiety that it was constricting her eye muscles and limiting her ability to see. She was unable to see the large, "E" on the exam board. The doctor said she had been suffering. She was prescribed glasses and said anxiety medication would also help. It wasn't until weeks later that I was able to get her those anxiety meds because I had to start from square one because no one would provide me the necessary records.

When asked, the child said she had not been to the Dentist in a while and said she was experiencing pain in her mouth. I took her to a Dentist where they discovered she had nine cavities. She was also referred to an Oral Surgeon because of her wisdom teeth. The child was seen by the Oral Surgeon where it was determined her wisdom teeth were impacted and she would need surgery to remove them as they were growing into her teeth and most likely the culprit of her ongoing pain.

The child asked me on September 21, 2015 if it was normal to experience pain while having a bowel movement and she said she had blood in her stool. I took her to a doctor immediately where blood tests were ordered, a CT Scan, and a MRI due to her headaches and severe allergies. The child was unable to have a CT Scan and MRI due to insurance issues. She was seen in the Emergency Department and by another primary doctor where they believe she has internal hemorrhoids and/or constipation. Due to her history of anemia, I wanted to make sure she was not anemic which thankfully she wasn't.

The child was unable to originally begin school immediately because of her history with DJJ so we had to go through an Administrative Hearing. Fortunately, she was granted the opportunity to enter the school district and was assigned to an alternative school. It was discovered when requesting her records, that this child is almost 16, had ZERO credits towards graduating high school. There was a possibility that we just didn't have the right records. However, because DSS would never provide us with records, the child had to start school as if she were a freshman.

The child was placed into Psychotherapy and was seeing a Psychologist, Psychiatrist, LPC in school, and LPC out of school. She was on psychiatric medications including sleeping medications to help with her nightmares and flashbacks. She had her epi-pen and oral allergy meds. She had her glasses. She had majority of her cavities filled. She had an appointment to get her foot re-examined. She was under the care of a Chiropractor for her back and knee. She had an appointment scheduled for her wisdom teeth to be removed. She was in credit recovery classes and obtaining passing grades in school. She was not missing any classes other than for DSS visits or doctor's visits. The child was on a dance team. She was enrolled in Urban League where she was attending bi-monthly meetings preparing for full-time summer employment. The child was actively looking for a part-time job. The child was set to begin

parenting classes so she could work on her treatment plan to possibly get her child back. She was thriving in my home.

A court date was set originally for October 7, 2015. However, was rescheduled for October 19, 2015 due to the historic flooding. After a visit with her family and a few days prior to the court date, she expressed concern to myself and the SCYAP staff regarding fear that the courts might send her back home. Her family had advised her that if she just told her mom she was sorry then she could come home. Her sister who is violent and also in a gang also detailed a plan to have the child come back home briefly and then take her from the home to live with her. She is believed to have a criminal history and use drugs. She expressed that she felt obligated to her family but she felt loved, supported, and safe in her foster home with me. I had been in close contact with the Guardian ad Litem who was not advocating for the child to be returned home. I kept the case worker abreast of everything that was going on with very detailed emails even if I didn't hear back.

On October 15, 2015, I received a call from the caseworker advising me that DSS' Assessment Team met yesterday and unfounded the child's case. The mom had decided she wanted her back now. They then presented it to a Judge and got an order for her to return home the following day. When asked about the medical neglect and the concerns involving the household she would be returning to, the reply from the caseworker I received was, "that's not what this case is about."

Prior to DSS' advocating for her return home, I had filed a complaint with the DSS Ombudsman because no one would respond to my contacts and without her medical records the child was in jeopardy of not being able to attend school because she didn't have up to date immunization records. The Quality Improvement worker for DSS was also contacted and never called me back. DSS' solution to my concern with her going home was for me to transport the child 1.5 hours to the DSS office and meet with the mom and tell her my concerns. My concerns involve her and her boyfriend and the other gang members in the home. I am not sure how that was a solution. It presented safety concerns actually and potentially would have jeopardized the child's safety when she returned home if I expressed certain things which made the mom mad.

When I brought the child to the SCYAP office to notify her that she would be returning home, she immediately began shaking and crying and continuously pleaded with me and begged me not to let DSS take her. She just kept saying, "Please don't let them take me. I don't want to go. I want to stay with you." You could see the fear in her eyes. She refused to pack her belongings and was in denial that she was leaving. She kept asking throughout the night as she cried if this was all a dream and if she was going to wake up.

I contacted everyone I could. The Guardian ad Litem who was not even aware the child was being returned home, the Guardian ad Litem General Counsel, the SC Foster Parent Association, the SC DSS Ombudsman, the SC DSS State Director, and the child's counselors but I couldn't stop it. The transporters came and took her the next day. The Ombudsman told me that we needed to hope and pray that the environment was better and she would be ok. The child's counselor made a report and DSS advised her they had an open case, yet they let her return to that toxic home.

The child was returned to her family at 11 am. By 3p, her 19 year old sister illegally allowed her to operate a motor vehicle and she had hit a tree. I notified DSS and their response was, "I am really sorry to hear this." A week had past and the child contacted me just then trying to ascertain her school records. A few days later, the child contacted me again asking about clothing vouchers because she needed clothes and her family didn't have money to buy her any. To the best of my knowledge, the child is also not

This is not ok. None of this is ok. It is not ok to treat foster parents which you need this way nor is it ok to treat kids this way. I used to see stories on television about children dying in foster care or shortly after being in foster care and I was puzzled as to how that could happen. However, after seeing firsthand what happened with this child, I fully understand how it happens. Please help me help this child. I am willing to take her back in my home. She deserves a chance at a life free from abuse, violence, and pain. Please don't let this child slip through the cracks and die on your watch.

Respectfully,



Kelly Ann Curran

Cc:

The Honorable Nikki Haley, SC Governor

Harry W. Davis Jr., Children's Law Center Interim Director

Tammy Beshers, SC Appleseed Legal Justice Center Family Law Attorney

Carl Brown, SC Foster Parent Association Executive Director

Pat Llewellyn, National Foster Parent Association President

Blondean Funderberk, Guardian ad Litem Director

Margaret Barber, Department of Juvenile Justice Director

Lex Cole, SC Youth Advocacy Program Chief Executive Officer

Marvena Twigg, National Youth Advocacy President/CEO

Veronica Swain Kunz, SC Crime Victim's Ombudsman Director

Tim Scott, U.S. Senator

Alan Wilson, SC Attorney General

Jay Koon, Lexington County Sheriff

The Honorable Deborah Neese, 11th Circuit Chief Family Court Judge

Larry Barker, SC Office of Victim Assistance Director