

CONNECTICUT LEGAL RIGHTS PROJECT, INC.

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PLANNING AND DEVELOPMENT COMMITTEE PUBLIC HEARING 2/19/16  
TESTIMONY OF KATHLEEN FLAHERTY, EXECUTIVE DIRECTOR  
In Opposition to Raised H.B. 5176

Senator Osten, Representative Miller, and members of the Committee:

The Connecticut Legal Rights Project (CLRP) is a legal services organization that advocates for low-income individuals in institutions and in the community throughout the state who have, or are perceived to have, psychiatric disabilities. We support initiatives that integrate individuals into the community.

**CLRP joins with others who are OPPOSED to Raised H.B. 5176, “AN ACT CONCERNING COMMUNITY RESIDENCES.”**

Raised H.B. 5176 includes several provisions which potentially run afoul of rights protected under the Connecticut Constitution, the Connecticut and federal fair housing laws, and the Americans with Disabilities Act.

The first section of the bill would amend existing 8-3e to add the following language:

c) Any municipality may designate an employee to serve as a liaison between the municipality and the Department of Public Health, the Department of Developmental Services and the Department of Mental Health and Addiction Services, as applicable, with respect to all matters associated with existing or proposed community residences within the municipality that are operated or funded by any such department. Not later than January 15, 2017, and annually thereafter, the Commissioners of Public Health, Developmental Services and Mental Health and Addiction Services, as applicable, shall provide each municipal liaison with a list of any existing or proposed community residences that are operated or funded by the commissioner's department and located within the liaison's municipality.

The second section of the bill would establish a task force to study the distribution of community residences throughout the state. The existing bill language lists who is responsible for making the various appointments to the task force, which would include 8 members. There are no descriptions regarding the appointments other than to say any of the members “may be a member of the General Assembly.” The Task Force is supposed to submit a report on its findings and recommendations to the joint standing committee of the General Assembly having cognizance of matters relating to planning and development, by January 1, 2017. The task force shall terminate

on the date that it submits such report or January 1, 2017, whichever is later.

There may very well be a benefit to encouraging municipalities to designate a specific individual to serve as a liaison in the event that problems do occur at the sites of group residences. Knowing who to contact in the event of a problem is usually the first step to resolving that problem. However, requiring the various departments to report annually to that person about existing sites or proposed sites is problematic.

Notification of the placement of community-based residential facilities essentially would require the release of health care information about the individuals served by those facilities. The privacy of this information is protected under both state and federal law, and the siting of a group residence is not one of the exceptions to rules preventing disclosure of this information. In addition, people with disabilities who are served by certain residential facilities have protections under state and federal law against discrimination. Denying permission to site certain group homes could result in the State having to defend legal challenges under both Connecticut and Federal Fair Housing laws.

People have the legal right to live in the least restricted environment and the right to community integration. Decisions on a placement must be person-centered and made between the individual and his/her health care providers and not subject to reporting to municipalities. Community-based care is a less expensive option than treatment in hospitals or other institutions. The daily cost of care in a hospital is \$1,089; an inpatient psychiatric unit \$1,187; an emergency room \$2,152 (2013 statistics from the Partnership for Strong Communities).

The bill proposes the establishment of a task force to study the distribution of group homes throughout the state. **Any additional barriers to people's ability to live in the most integrated setting will have a disproportionate impact on people living with disabilities, and essentially target them for discrimination on the basis of those disabilities.** If the committee decides to proceed further and approves the establishment of a task force, it is imperative that people with disabilities, and their advocates, be included as members. The current language of the bill does not specify any requirements as to the background of the eight members to be appointed to this proposed task force, other than to say that a member of the General Assembly may be appointed.

Any actions proposed by this task force in their report must comply with anti-discrimination laws and further the state's obligation to comply with the community integration mandate of the Americans with Disabilities Act.

We understand the concerns of municipalities that may experience additional cost burdens when a facility is sited in a particular location. To the extent that some of those costs are incurred because of inappropriate use by facility staff of municipal services (for example, calling 911 when there is not a true emergency) – an investment by programs into additional training for program staff as to the appropriate use of municipal resources should result in a reduction of costs.