
NORTHWEST REGIONAL MENTAL HEALTH BOARD, INC.

Central Naugatuck Valley Catchment Area Council #20
Housatonic Mental Health Catchment Area Council #21
Northwest Mental Health Catchment Area Council #22

969 WEST MAIN ST., Suite 1B
WATERBURY, CONNECTICUT 06708
TEL./FAX (203) 757-9603
jsw@nwrmbh-ct.org website: www.nwrmbh.org

Testimony for the Appropriations Committee
On the Governor's proposed budget
DMHAS expenditures and recommendations
February 18, 2016

Good evening Senator Beth Bye, and Representative Toni Walker, Co-Chairs; and members of the Appropriations Committee.

My name is Janine Sullivan-Wiley and I am the Executive Director of the Northwest Regional Mental Health Board, Inc. As background, the Regional Boards were **established by state statute 40 years ago to provide a community-based assessment, planning and oversight entity for mental health services**. I stand before you, yet again, to speak of the value of the Regional Boards, as we are faced with a reduction of virtually ALL of our funding (\$585,000) as proposed by the Governor with a proposed "consolidation." That reduction represents virtually ALL the funding the Boards receive from the state. **That is not "consolidation," that is extinction** for the boards.

It also does not allow for any process. There are 5 Regional Boards, and 13 Regional Action Councils. Each is a separate, PNP entity. With the kind of gutting of the funding, (virtually all of the Boards' money and roughly half of the RAC funding), and only about four months left in the fiscal year, it is quite impossible for those 18 separate entities to achieve "consolidation." Any of you who have ever run a business will understand the logistical and strategic planning that would be needed to achieve this. Four months and such a monetary reduction will NOT accomplish that stated goal.



Which then prompts the question of what then is the value of the Regional Boards?

The Boards provide the state with a **complex web of grassroots community connections, built over 40 years**, including **minimal staffing and hard working volunteers**, which then provides community education to Connecticut's residents, comprehensive evaluations, effective needs assessment and all-stakeholder participation.

- The Boards' process – with the RACs – **enables the state to get \$23 million in Federal funding.**
- **Community connections:** with our all-stakeholder membership and extensive relationships within our communities, we can identify what is "out there" and what is needed. We then bring those community issues, and the voice of consumers, families, and providers to the state's needs assessment process, multiple state agencies and with essentially ALL of the structures within the state. When outside entities need to do research or get information from the community, they turn to the boards for help in reaching the right people.

- **We evaluate services – including state-operated services – with an independent process that answers to the community.** I have been asked how our evaluation and planning process brings about needed change. We are like braces that orthodontists use. With consistent pressure, and a vision of what should be and what is needed, we help agencies and programs make the changes that are needed, much the way those thin wires move teeth in jaw bone.

And by the way, there are many community needs that the currently proposed budget will jeopardize. We see that, and hope you do, too. The people of Connecticut do not want the safety net of behavioral health services gutted. It grieves me to have to speak to our own funding when I would much rather spend my time talking about the needs which we see so clearly in our – and your – communities.

- **We provide information and training in the community.** We provide **Mental Health First Aid training.** Last year, our one board alone got over **9000 educational pamphlets and resource sheets into 42 towns** in the northwest region of the state.
- **Developing solutions:** Did you know that the need for specialized Young Adult Services was first raised by a Regional Board? They brought in federal funds and early expertise. Now these services are helping young adults throughout the state to get what they need to recover, often no longer needing the adult system. As the healthcare system evolves, we have the right structure to develop new solutions to new challenges.
- It can be hard for consumers, family members, providers and the community to understand their sometimes divergent viewpoints. **We bring all stakeholders to the same table.** We make sure all voices are heard. We then take what we learn to the state level and the various groups that need to hear about those experiences and needs.
- **We are cost-effective: For every staff person we employ, there are 50 volunteers,** greatly expanding our impact for very little money. **We are already regionalized.** There are five boards that cover the five regions in the state.
- An employee of DMHAS described us as “**the glue that holds the system together.**” An employee of another state agency noted that **if you want it done well, and in the most cost-effective way, ask the Regional Boards.**

All of that stands to be lost if the Governor’s budget recommendation for the Boards’ funding is not changed. **Cutting the \$585,000 in funding to the five boards would result in great monetary and service loss to the state. There is no way to replace what we do for anywhere near the cost of what we do this work for. If a truly effective consolidation is the goal, this is not the way to do it.**

Thank you for your consideration.

Thank you!