Testimony for the Appropriations Committee
March 1, 2019

Regarding HB: 7148: AN ACT CONCERNING THE STATE BUDGET FOR THE BIENNIUM ENDING JUNE THIRTIETH, 2021, AND MAKING APPROPRIATIONS THEREFORE


My name is Janine Sullivan-Wiley, and I am the Executive Director of the Northwest Regional Mental Health Board; I have been doing this work for 26 years. Our Board is currently in the process of merging into the Housatonic Valley Coalition Against Substance Abuse, joining the CNVRAC and forming the Regional Behavioral Action Organization – the RBHAO – for Region 5.

I am deeply concerned about several parts of the proposed funding:

Consolidations are generally a good thing. Efficiencies are a good thing. Funding is tight. When I hear the legislature talk about these, it is always with some kind of caveat: we will provide incentives. We will have efficiencies but maintain critical services. Well, last year there was consolidation but without those kinds of caveats.

DMHAS put through – without legislative oversight or consultation – a broad consolidation: 13 Regional Action Councils (whose role was and still is in statutes that LEGISLATORS created) plus five Regional Mental Health Boards (whose roles also were and still are in statutes that LEGISLATORS created) into five Regional Behavioral Action Councils. Eighteen into five; a drastic reduction. But worse, the “surviving” entities are funded only with Federal Block grant dollars – ALL of the state funding was eliminated. Net result: a major deficit in the resources needed for those surviving entities to do what they should for both prevention and in the traditional roles of the Boards and Catchment Area Councils. It falls to you to assure that essential funding is there. It falls to you to assure that the final structure preserves the grassroots voice and representation, the oversight and evaluation of DMHAS funded services. (Reference HB #5145)

Unless the funding changes, monitoring and evaluation of services – especially DMHAS-operated services – will now have little or no oversight. The RBHAOs could continue that Regional Board/Catchment Area function at a fraction of the cost of outsourcing to consultants (or not doing it at all) and be a open, transparent and publically connected process. Recent history
suggests that this is not what should be lost now. It would appear that DMHAS is willing and able to eliminate those functions by strategic funding decisions. We count on you to **restore this critical oversight and evaluation function**. You are the only ones with that power. Quite possibly that role should rest with another state department, providing even greater independence – especially in the monitoring of DMHAS-operated services.

Second: In general, funding **for mental health and substance abuse treatment services** – except for special initiatives – has been **eroded over the years**, and seems to continue that trend in this budget with another two million dollar reduction. **Services are lean, services have been reduced. Our communities need more, not less.** Touted is the annualization of a ONE PERCENT increase for the private non-profits. That doesn’t even keep up with inflation; it is effectively a reduction in services in the PNPs. I leave it to the Alliance to give you detail on that. DMHAS again proposes to privatize services in its Torrington and Danbury locations – two of the highest quality state-operated programs in Connecticut. **Such decisions should always be based on quality and efficiency.** Clearly that was not the process used here, and **you should require such metrics** when these proposals are made. Again, this demonstrates the need for oversight.

Lastly, I encourage you to **maintain funding in the DMHAS legal services line for CT Legal Right Project.** They have a long and valued history of protecting people with mental health issues who are also low income. CLRP plays a critical role for people living at CVH and for people facing discrimination in housing and employment.

You have so many hard decisions to make in this area. I know you will make them using all the best information at your disposal, and I encourage you to maintain critical, transparent and community-based oversight of DMHAS services and expenditures going forward.

Thank you.