

Public Health Committee JOINT FAVORABLE REPORT

Bill No.: HB-5419

AN ACT CONCERNING THE DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES' RECOMMENDATIONS REGARDING REGIONAL

Title: BEHAVIORAL HEALTH ACTION ORGANIZATIONS.

Vote Date: 3/18/2022

Vote Action: Joint Favorable

PH Date: 3/14/2022

File No.:

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SPONSORS OF BILL:

The Public Health Committee

REASONS FOR BILL:

In 2018, the Department of Mental Health and Addiction Services (DMHAS) reorganized existing Regional Mental Health Boards and Regional Action Councils, replacing them with five Regional Behavioral Health Action Organizations (RBHAOs). This bill officially codifies the RBHAOs in statutes and repeals the laws that established the prior boards and councils. The bill also makes the corresponding changes in statute to address the transfer of duties from these boards and councils to the RBHAOs. It requires each RBHAO be a community partner to coordinate behavioral health planning and education to enhance prevention of behavioral health issues, promote behavioral health, and advocate for behavioral health needs and services within its mental health region. The bill establishes responsibilities for the RBHAOs and requires them to correspond with the communities in fulfilling these duties.

RESPONSE FROM ADMINISTRATION/AGENCY:

Nancy Navarretta, Commissioner, Department of Mental Health & Addiction Services, (DHMAS):

DMHAS is supportive of this bill. The combination of the Regional Mental Health Boards (RHBAOs) that focused on mental health, with the Regional Action Councils (RACs) that focused on substance use prevention created community agencies across the state that focus on integrated behavioral health, rather than perpetuating a bifurcated system addressing mental health or substance use. Combining the agencies also achieved fiscal

efficiencies. Codifying the current RBHAOs is an important step in breaking down the substance use and mental health silos.

NATURE AND SOURCES OF SUPPORT:

Adam Burrows, Superintendent of Schools, Voluntown:

Passage of this legislation will allow our local Prevention Council to continue our work of offering direct support to the youth of our community with vaping materials, curriculum upgrades to health teachers, and collaboration with other community organizations.

Donna Culbert, Director of Health, Newtown District Department of Health:

Last year, despite COVID related challenges, our region's RBHAO, the Western CT coalition, managed to train 397 individuals in the administration of Narcan to save lives. We also provided the suicide gatekeeper training QPR to 587 people, including 150 police officers. Western CT Coalition used radios and billboards to raise awareness about underage drinking, electronic nicotine delivery systems, cannabis, and problem gambling prevention.

Michele Devine, Executive Director, South Eastern Regional Action Council:

Our current fiscal structure is based on grant funding that comes through DMHAS; we cannot function on this roller coaster anymore. We need to have confidence that we are supported in our suicide prevention work through, not only a state statute, but also funding. In the future, we hope to receive dollars from the very systems with whom we collaborate on issues of prevention. We have so much more we could do and provide to our communities in building healthy, proactive, and supportive communities and families.

Allison A. Fulton, Executive Director, Western CT Coalition, Inc.:

Problem gambling is an issue that the RBHAO's support through their efforts to mitigate areas of behavioral health. Passing this bill would demonstrate support from leaders in our state to help integrate problem gambling awareness and prevention as co-occurring disorders related to mental health and substance misuse. Through this integration we can better support CT residents and their overall wellbeing to reduce the impacts of behavioral health issues across the lifespan.

Thomas Giard, Superintendent, Waterford Public Schools:

Our Regional Action Council has hosted family talks in our district on social emotional and mental health subjects, such as drug abuse and vaping, that directly connect with the social and mental health programs taught in our schools. They have been a consistent partner at our Parent Academy Nights, offering information on suicide prevention, vaping, prescription drug misuse, and mental health services available for families and the community.

Dani Gorman, Director of Youth Services, Town of Waterford:

The local Prevention Council funding we receive through our Regional Action Council allows us to facilitate several services and programs, including our very successful education and prevention program, our Health Fair, and mental health training for our staff. The material they have provided, especially regarding vaping has been instrumental in changing the views of the young people we serve.

Melinda Smith, Superintendent, Thompson Public Schools:

Our district has come to rely on the skilled team of individuals at our Regional Action Council to provide training and support for our faculty and staff in the areas of substance abuse and suicide prevention. This bill will ensure that RBHAOs continue to be a vital resource to support communities, including school districts.

Angela Duhaime, CT Prevention Network:

Passing this bill would demonstrate support for a statewide vision to build a suicide prevention infrastructure that is supported by legislation and funding, integrating prevention across co-occurring issues. This bill will increase local prevention councils, coalitions, and collaboratives, and reduce the impact of substance abuse, mental health, problem gambling, and suicide on other statewide systems.

Diana Goode, Executive Director, Connecticut Council on Problem Gambling:

While they are supportive of the bill, they propose a substitute to Sec. 10. Currently, their organization receives 5% of the monies directed to the Chronic Gamblers Rehabilitation Fund and applies those funds towards operations of our 24/7 problem gambling helpline. They propose changing the language to not less than 10%. With this additional revenue, they could offer the increased trainings necessary to begin to bridge the knowledge gap of providers around the topic of gambling related harm and gambling disorder.

Adele Cyr, Unit Director, Reliance Health, Inc.:

Our Regional Action Council is an important part of the community providing services such as LPC funding, TIPS trainings, educational billboards, trainings to the community (CAP, QPR/Narcan, Drug Trends), vaping materials, curriculum to health teachers and collaborations for prevention and postvention.

Additional Testimony in Support

- Scott Barton, Director, Mashantucket Pequot Tribal Nations Good Medicine Project
- Pamela Mautte, Director, Alliance for Prevention & Wellness
- Giovanna Mozzo, Director, The Hub
- Marie Miszewski, Board Member, Western Ct Coalition
- Todd Bieri, Amplify, Inc
- Karen Ravenelle-Bloom, Prevention Director, Windham PRIDE Coalition
- Patricia Calvo, Director, Windham Youth Services
- Thomas Burr, Community and Affiliates Relations Manager, NAMI Connecticut
- Marcia DuFore, Co-Chair, Keep The Promise Coalition
- John Schwartz, Recovery Center Manager, CT Community for Addiction Recovery
- Ellen Kleckner, Coordinator of Youth Services, New London Youth Affairs
- 10 others testified in support

NATURE AND SOURCES OF OPPOSITION:

Kathleen Flaherty, Executive Director, Ct Legal Rights Project, Inc.:

While the sections of this bill that correctly fund and codify the RBHAOs are laudable, Sec. 4 of the bill is very concerning. The language as it exists would remove all representation of people living with mental health conditions and or substance use disorders from the State Board of Mental Health and Addiction Services. You cannot remove our representation and replace us with providers, when providers are already at the table. This section of the bill must be removed.

Margaret Watt, Policy Chair, National Alliance on Mental Illness Connecticut Chapter:

Sec. 4 of the bill removes any requirement for individuals with lived-experience to be a part of the State Behavioral Health Board, which further represents the dismantling of the original vision of these boards. This is a major shift in values that should be addressed by the legislature. If this bill is enacted, its purpose should be to clearly delineate the guiding values, realistic priorities, and membership of the RBHAOs, rather than to compile the old statutes into one document without addressing their complexities.

Mitzy Sky, Advocacy and Education Coordinator, Advocacy Unlimited, Inc:

The RBHAOs are gatekeepers to continue the language and treatment of emotional distress and behaviors as the disease illness/disease model. Their research and formulas show that what they are doing is not working as they ask for more money and more services in the name of prevention and illnesses. We need more peer recovery organizations and people who lived through devastation and found their way through. These organizations are run by people with degrees pushing a disease model of care that profits them and keeping the people seeking help stuck in a cycle of dependency.

David Gedraitis, Waterbury:

This bill should allow review boards to oversee what is going on in DMHAS services. It is important to monitor DMHAS services to be sure they are providing safe, high quality treatment for all involved, as well as critical funding. It is vital to fund our nonprofit agencies.

Reported by: Dallas Emerle

Date: 4/4/2022