



STATE OF CONNECTICUT

PSYCHIATRIC SECURITY REVIEW BOARD

TESTIMONY PRESENTED TO THE PUBLIC HEALTH COMMITTEE

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Good morning Senator Gerratana, Senator Somers, Representative Steinberg, Vice Chairs, ranking member and distinguished members of the Public Health Committee. I am Ellen Lachance, Executive Director of the Psychiatric Security Review Board and I have served in that capacity since 2004. Thank you for the opportunity to appear before you today to speak about the Board and how it carries out its statutory mission of public safety to the citizens of Connecticut.

The Board is an independent state agency formed in 1985 after an examination of Connecticut's management of insanity acquittees. Connecticut's Law Review Commission discovered that many individuals who were found not guilty of a crime by reason of mental disease or defect were discharged from state hospitals to community treatment without follow-up or monitoring to ensure medication or treatment compliance. As a result, the Board was established under Connecticut General Statutes Section 17a-580 – 17a-603, and a new system was adopted to ensure greater control and accountability.

The Board is composed of six individuals, appointed by the Governor. By statute, the members must include an attorney, a psychiatrist, a psychologist, a probation or parole expert, an individual with experience in victim services and an individual from the general public. This constellation of disciplines represents the complexity of managing and treating individuals with a mental illness who have committed a serious criminal act.

Individuals are committed to the jurisdiction of the Board by Superior Court for specific periods of time, which can be extended or shortened. Only the court can commit or discharge individuals from the Board. The Board, in turn, confines the individual to the Department of Mental Health and Addiction Services (DMHAS) or to the Department of Developmental Services (DDS).

Through an administrative hearing process, open to the public, the Board determines the placement, level of supervision and treatment for each individual. Acquittees under the Board's jurisdiction cannot transfer out of maximum-security to a less secure hospital setting at Connecticut Valley Hospital or begin a transition to the community without Board authorization. Acquittees residing in the community must follow the conditions of their release. Failure to abide by those conditions can result in a readmission to CVH.

For perspective, the Board's population is small. Each year, Superior Court commits approximately 5-7 individuals to the Board and the total population has remained relatively stable at approximately 150 acquittees. The majority of those individuals, approximately 120 acquittees, reside at CVH, with 37 individuals ordered to maximum-security.

Thank you for the opportunity to address the committee. I am happy to answer any questions you have about the Board's procedures or functions.