



Southwest Regional Mental Health Board • 1 Park Street • Norwalk, CT 06851  
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**COPY TO PUBLIC HEALTH COMMITTEE – Public Hearing, November 13, 2017**

To the Editor:

Over 40 years ago the Connecticut Legislature mandated the creation of a low-cost, grassroots system of Regional Mental Health Boards to provide independent community oversight of the mental health system. This was a direct response to the State's discovery of abuses of patients in the State psychiatric hospitals.

Now—ironically at a time when abuses are once again being uncovered—this community “watchdog” function seems set for elimination by the State Department of Mental Health and Addiction Services (DMHAS).

The watchdog function consists of all-volunteer Catchment Area Councils (CACs) throughout the state, overseen and managed by their local Regional Mental Health Board (RMHB). Each CAC is composed of an appointed consumer representative from each town and city, along with local clinical providers and other interested stakeholders. The CACs provide input that is used to identify needs, set regional priorities, and review programs and services. The RMHBs report findings and recommendations regionally and to DMHAS.

This system has provided much more than community feedback. The RMHBs have also ensured cross-pollination of ideas, stimulated new initiatives, provided public education and awareness, and served the community with information and referrals for over forty years—during which time their budget kept shrinking.

Today, with the State's sole remaining psychiatric hospital, Connecticut Valley Hospital (CVH), under investigation for alleged abuses at its Whiting Forensic Institute, the oversight function of the Regional Mental Health Boards and Catchment Area Councils is more critical than ever.

This is a particularly inopportune time to do away with this protective function. Unfortunately, DMHAS is currently engaged in a process to “consolidate” its contracts with the five Regional Mental Health Boards and 13 Regional Action Councils into five new Regional Behavioral Health Action Organizations. These new entities will lack any role in community oversight.

Dialogue with representatives of the Department of Mental Health and Addiction Services has cemented our concern on this matter: DMHAS has no interest in whether any entity will pick up this function after it ends its contracts with the Regional Mental Health Boards effective January 1<sup>st</sup>, 2018.

It seems to us, therefore, that the omission of the community “watchdog” function from the new entities is not an oversight, but intentional. Such removal would be alarming at any time, but when DMHAS's hospital is itself under investigation for abuses, it is especially concerning.

We call on our legislators to recognize and recommit to the value of the watchdog function they put in place 40 years ago. Do not allow DMHAS to ignore the statutes and de-fund the structures that exist to keep an eye on their services.

Sincerely yours, on behalf of the Southwest Regional Mental Health Board of Directors

Rev. Debra Slade, Board President

Matt Guzzetti, Board Vice President

Louis Schulman, Board Treasurer

Tina Corlett, Board Secretary

Vered Brandman, CAC 1&2 Chair

Denique Weidema-Lewis, CAC 3&4 Chair