

**Testimony before the Appropriations Committee**

**February 21,2020**

**DMHAS BUDGET HEARING**

**H.B. NO. 5005 An Act Adjusting The STATE BUDGET for The BIENNIUM Ending June 30, 2020**

**Brian Reignier**

Good evening Senators Osten, Representative Walker, and members of the Appropriations Committee. My name is Brian Reignier and I serve on the Executive Committee of the State Board of the Department of Mental Health and Addiction Services. I am the Chair of Catchment Area Council 20 in the Northwest Region of Connecticut. I am a retired employee of the Department of Mental Health and Addiction Services (DMHAS). I have been living with mental illness since young adulthood and have been a mental health volunteer in numerous capacities for many years. DMHAS, without regard for Connecticut laws, dismantled the independent grassroots structures known as the Regional Mental Health Boards and the Catchment Area Councils(CACs) that complemented them. The CACs were charged by legislative wisdom in 1975 to review, evaluate, and support DMHAS funded mental health services. Supported by statute, the CACs were composed of persons in recovery, families, and representatives of the several towns in the 5 regions. Those committed grassroots volunteers would assess the health, safety and recovery potential of DMHAS funded services. The volunteers would support those agencies by assisting them in enhancing the delivery of their programs for the benefit of the persons they serve and, by extension, their families. As mentioned, DMHAS removed the CACs citizen oversight role. However, vigorous advocacy by persons and organizations from all reaches of the state resulted in DMHAS restoring the oversight responsibility to the CACs. What remains then, is restore to health those CACs that were damaged and disheartened on DMHAS' watch. With the statewide system of Catchment Area Councils restored, two things can occur as corollaries: first would be the statewide application of Site Visits (where grassroots review is actually conducted within agencies) as an integral component of CAC oversight across the state; Second would be the provision of grassroots based independent review of addiction services, as well as mental health services. The time has come for DMHAS to expand its recent conversion to reinstating responsible oversight of its public services- both mental health and addiction services.