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## OLR Bill Analysis

sHB 6637 (as amended by House "A")\*

### ***AN ACT CONCERNING A MENTAL HEALTH BILL OF RIGHTS FOR DEAF, DEAFBLIND AND HARD OF HEARING PERSONS.***

#### **SUMMARY**

This bill establishes a bill of rights for individuals in need of mental health services who are deaf, deafblind, or hard of hearing. It specifies that the rights afforded these individuals must be available to them only to the extent that they are implemented in accordance with the general statutes, federal law, and the state and U.S. constitutions.

The bill changes the name of the Advisory Board for Persons Who are Deaf or Hard of Hearing to the Advisory Board for Persons Who are Deaf, Hard of Hearing or Deafblind. It makes several minor and conforming changes in the statutes governing the advisory board to:

1. allow board representation by service providers who work with individuals who are deafblind;
2. expand the board's duties to include considering and advocating for their service needs (e.g., making legislative recommendations; monitoring services; and discussing best practices with agency heads); and
3. eliminate the requirement that the governor appoint the eight ex-officio members, thus enabling their immediate board participation upon assuming their outside positions.

The bill also defines several terms related to the bill of rights and the duties of the Advisory Board for Persons Who are Deaf, Hard of Hearing or Deafblind.

\*House Amendment "A" eliminates (1) the underlying bill's requirement that the bill of rights be implemented in accordance with

state policies, procedures, and regulations and (2) current law's requirement that the governor appoint the advisory board's eight ex-officio members.

EFFECTIVE DATE: July 1, 2021

### **MENTAL HEALTH BILL OF RIGHTS**

The bill establishes a bill of rights for persons in need of mental health services who are deaf, deafblind, or hard of hearing under which a person has a right to:

1. culturally and linguistically affirmative mental health services that accommodate his or her unique needs;
2. accessible mental health services delivered in his or her primary language or communication mode or style;
3. specialized mental health services when necessary that provide appropriate and fully accessible counseling and therapeutic options using an appropriate oral, aural, or speech-based system tailored to his or her unique needs;
4. express his or her opinion in determining the extent, content, and purpose of mental health treatment or services that accommodate his or her unique needs;
5. programs offering access to a full continuum of services, including all modes of therapy and evaluations;
6. programs informed by appropriate research, curricula, staff, and outreach; and
7. express his or her views concerning the development and implementation of state and regional programs for his or her mental health service needs.

The bill defines "culturally and linguistically affirmative mental health services" as the provision of a full continuum of mental health services to a deaf, deafblind, or hard of hearing person through an

appropriately licensed mental health professional fluent in the primary language, communication mode or style, and cultural needs of the person requiring these services.

“Accessible mental health services” is defined under the bill as the provision of a full continuum of mental health services with the use of auxiliary aids and services necessary for a deaf, deafblind, or hard of hearing person to communicate with appropriately qualified mental health professionals who are not fluent in the primary language or communication mode or style of the person requiring such services, including qualified interpreters using the language or communication mode used by such person, written communications, or assistive listening devices.

**COMMITTEE ACTION**

Human Services Committee

Joint Favorable Substitute

Yea 19 Nay 0 (04/01/2021)