

HB 6292

PA 801

1971

Senate 3402

House 5066

Public Health and Safety 194-195, 202-204,
216-222, 246

S-82
CONNECTICUT
GENERAL ASSEMBLY

SENATE

PROCEEDINGS
1971

VOL. 14
PART 7
2874-3413

June 9, 1971

Page 73

File 1608; Cal. 1365, House Bill 5578, File 1444; Cal. 1366, House Bill 5697
File 666; Cal. 1367, House Bill 5824, File 775; Cal. 1369, House Bill 6180,
File 1580; Cal. 1371, House Bill 6687, File 1290; Cal. 1372, House Bill 6731
File 1469; Cal. 1373, House Bill 6842, File 1659; Cal. 1375, House Bill 7031
File 588; Cal. 1376, House Bill 7237, File 1629; Cal. 1377, House Bill 7493
File 1623; Cal. 1379, House Bill 7907, File 1446; Cal. 1380, House Bill 7960;
File 1306; Cal. 1381, House Bill 8093, File 1663; Cal. 1383, House Bill 8170
File 1621; Cal. 1386, House Bill 9220, File 1635; Cal. 1387, House Bill 9252,
File 1672; Cal. 1389, House Bill 5154, File 913; Cal. 1390, House Bill 5286,
File 1271; Cal. 1392, House Bill 5661, File 919; Cal. 1394, House Bill 6380
File 1386; Cal. 1395, House Bill 6908, File 1442; Cal. 1396, House Bill 6914
File 1388; Cal. 1397, House Bill 7438, File 890; Cal. 1398, House Bill 7450
File 1198; Cal. 1399, House Bill 7889, File 1441; Cal. 1296, House Bill 5036
File 746; Cal. 1297, House Bill 5147, File 1437; Cal. 1298, House Bill 5157
File 1466; Cal. 1299, House Bill 5216; File 744; Cal. 1300, House Bill 5219
File 949; Cal. 1301, House Bill 5247, File 1429; Cal. 1303, House Bill 5561
File 1431; Cal. 1304, House Bill 5577, File 1289; Cal. 1306, House Bill 5754
File 1554; Cal. 1308, House Bill 5918, File 937; Cal. 1309, House Bill 5953
File 1445; Cal. 1310, House Bill 5957, File 1563; Cal. 1311, House Bill 5958
File 1299; Cal. 1312, House Bill 6123, File 1468; Cal. 1313, House Bill 6292
File 1456; Cal. 1314, House Bill 6376, File 833; Cal. 1315, House Bill 6423
File 1458; Cal. 1316, House Bill 6470, File 923; Cal. 1317, House Bill 6512
File 1428; Cal. 1318, House Bill 6525, File 1475; Cal. 1319, House Bill 6547
File 1266; Cal. 1320, House Bill 6606, File 933; Cal. 1321, House Bill 6837
File 1353; Cal. 1322, House Bill 6682, File 1352; Cal. 1323, House Bill 6885
File 1348; Cal. 1324, House Bill 6939, File 1330; Cal. 1325, House Bill 6963

H-118

**CONNECTICUT
GENERAL ASSEMBLY
HOUSE**

**PROCEEDINGS
1971**

**VOL. 14
PART 11
4831-5162**

Saturday, June 5, 1971

11

Page 16, calendar 1169, house Bill 7903, file 1284.

Calendar 1170, substitute for House Bill 7959, file 1292.

Calendar 1171, substitute for House Bill 8228, file 1294.

Page 17, Calendar 1217, substitute for House Bill 7686,
file 1349.

Page 18, Calendar 1234, House Bill 6837, file 1353.

Calendar 1242, substitute for House Bill 6448, file 1377.

Calendar 1245, Substitute for House Bill 7974, file 1382.

Page 19, Calendar 1263, substitute for House Bill 5561,
file 1431.

Calendar 1273, substitute for House Bill 5247, file 1429.

Calendar 1274, substitute for House Bill 6512, file 1428.

Page 20, Calendar 1299, House Bill 5147, file 1437.

Page 21, Calendar 1308, substitute for House Bill 5895,
file 1463.

Calendar 1311, substitute for House Bill 5953, file 1445.

Calendar 1312, substitute for House Bill 6123, file 1468.

Calendar 1316, substitute for House Bill 6292, file 1456.

Page 22, Calendar 1322, substitute for House Bill 6447,
file 1497.

Calendar 1324, House Bill 6525, file 1475.

Page 24, Calendar 1379, substitute for House Bill 9229,
file 1576.

Page 25, Calendar 1383, substitute for House Bill 7744,
file 1573.

Page 28, Calendar 1422, substitute for Senate Bill 240,

**JOINT
STANDING
COMMITTEE
HEARINGS**

**PUBLIC
HEALTH
AND
SAFETY**

**PART 1
1-491**

**1971
Index**

PUBLIC HEALTH AND SAFETY

THURSDAY

MARCH 4, 1971

serving as a program for institutionalized handicapped adults, it also provides a program for some 35 clients who live at home with parents or relatives.

This twofold program enables the state to rehabilitate present residents of institutions by providing a program in the Hartford area as well as offering parents an alternative to institutionalization. This project has processed over 200 retarded adults since its conception, at a great saving to the State of Connecticut.

I urge your favorable consideration of this bill and passage to the Appropriations Committee.

I have a detailed outline for members of your committee summarizing the background and history of the project since 1967.

Sen. Pac: Any questions from the committee?

Sen. Gunther: I understand it's now reduced to \$20,000?

Rep. Gaffney: This is reduced to \$20,000, right.

Sen. Gunther: On this phasing out by '72, does that mean the federal phasing out?

Rep. Gaffney: Federal funding will be eliminated as of May of 1972.

Sen. Gunther: What does that mean statewide?

Rep. Gaffney: Well, as I said, last year the state contributed two positions. This year the funding is three positions, \$25,000. This funding this year does not meet the needs of the program as it now stands. An additional \$20,000 would be needed. A year from now it would have to be an additional \$37,000 for the state to completely pick up the financing of the project.

Sen. Pac: Any other questions? Thank you, Representative.

Rep. Gaffney: Thank you.

Sen. Pac: Any other legislators wishing to be heard? If not we'll call on the public. Norman Fendell.

Norman Fendell, Director of the Manchester Sheltered Workshop:
I am speaking on bill 6292. AN ACT CONCERNING MENTALLY RETARDED ADULTS WHO ARE UNABLE TO ENTER INTO COMPETITIVE JOB EMPLOYMENT.

THURSDAY

MARCH 4, 1971

There are thirty-five clients in our sheltered workshop. Approximately thirty-one clients would be considered as terminal. They will not be able to find competitive employment. We provide sub-contract work, an educational program, counseling and social programs. The present time we receive approximately \$230 per client from the OMR, Department of Health, and it is absolutely, it's an absolute impossibility to operate our facility on this amount of money. We have a waiting list of eight potential clients and we have a need for more staff. If we had to close our doors today, it is estimated it would cost the state, and remember the clients in our workshop are living with their families, living in the community, it is estimated it would cost the state \$175,000 based on \$99.50 per week at Mansfield.

Sen. Gunther: Is that the total appropriation? \$175,000?

Mr. Fendell: No, there's no dollar figure on this grant.

Sen. Gunther: Have you any idea what it would be?

Mr. Fendell: At this time, no.

Rep. LaRosa: What has it been in the past?

Mr. Fendell: The total grant-in-aid program for all the workshops in the state? Miss Switzer will have that.

Sen. Pac: Any other questions?

Mr. Fendell: I brought a client. He wants to make a statement.

Michael Robinson: My name is Michael Robinson and I live at the Manchester Hospital and I am at the Manchester Sheltered Workshop. I like it very much and I like the program.

Sen. Pac: Thank you. William Rosenblatt?

William Rosenblatt, speaking for the Capitol Region Mental Health Planning Committee: I'd like to talk on a few bills. I am representing this morning Mrs. Eleanor Rubinow who is the Chairman of the Planning Committee, and first I'd like to talk about H.B., Senate Bill 594 AN ACT CONCERNING THE ESTABLISHMENT OF THE CONNECTICUT REGIONAL MENTAL HEALTH AUTHORITIES.

There's been some work done on this bill by the Conn. Association for Mental Health and our Planning Committee feels there's some additional work to be done in examining

PUBLIC HEALTH AND SAFETY

TUESDAY

March 4, 1971

this encourages her to act more grown up. If she couldn't go to the program I'm afraid she might go back to acting more like a child. My husband and I wouldn't want to see this so we ask you to pass this bill so that the program can go on working like it has in the past. Thank you.

Sen. Pac: Thank you, maam. Will someone kindly close the door in the back please, and keep your conversation down to a minimum. It's difficult to record some of the soft spoken people. Anyone else that just came in, would you please if you wish to speak find the registration list in the back. Mrs. Wanda Carroll.

Wanda Carroll, President of Parents and Friends of Mentally Retarded Children in Bridgeport, Conn., sponsors of the Kennedy Center Workshop where at present we have 130 clients attending: I heartily endorse this bill #6292 because of the desperate needs of this group of young people who need this kind of help. 90% of our trainees would fall in the category of those that would be unable to be competitive in employment outside in the community. We strongly urge that this bill be passed. Thank you.

Sen. Pac: Thank you. Robert Jemiolo.

Robert Jemiolo: Speaking on House Bills 6587 and 6292 which I both am in favor of. In terms of bill ~~6587~~ (sic) I speak from two vantage points. One, as the first director of this particular project and secondly in my current role of citizen not employed by the state of Conn. with no vested interest in this particular program.

I think even in a period of austerity this program can be justified on two major counts. One is the humanitarian and the other financial. And I just offer a couple of observations in both these areas. First of all on the humanitarian side. We're talking about people who previously were just sitting at home almost vegetating, doing very little. They had limited interpersonal relationships, no chance of further development and were being considered for institutionalization. The Project provides a multitude of services which help each of these clients develop to his or her maximum potential. Now on the financial side, while the Project continues to function, the families are providing room and board, medical costs, clothing costs, supervision sixteen hours a day and love. The only alternative that these parents will have, if this program stops, is to consider institutionalization on an either short term or long term basis. Now when this happens, and the state of Conn. is going to be faced with additional three shifts of staff to supervise these people plus weekends, holidays, and all the costs that the state incurs in

PUBLIC HEALTH AND SAFETY

THURSDAY

MARCH 4, 1971

institutionalization. This program represents only one of only few outstanding and undisputedly beneficial programs for retarded adults in the nation. And while I was project director, we have visitations from all over the country and in fact several from foreign countries that came to Hartford just to see this particular project.

And not only from the point of view of the humanitarian side but because it makes financial sense. And in the long run the State of Connecticut will benefit. That's all I have to say in reference to 6589. I'm sorry, 6587.

Now in reference to bill 6292, I also speak from two vantage points. Following my term as director of the previous project I was moved over to the central office of the Office of Mental Retardation and was the administrator of the CMR grant-in-aid program to the workshops which would be affected by this particular bill. Again I am not a state employee at this time with no vested interest in this particular program. However I can tell you from a financial point of view that this bill makes a tremendous amount of sense. A year ago when I was with the Office of Mental Retardation we did a survey what it was costing to operate programs in Connecticut and our grant-in-aid program with a total of \$140,000 and that represented approximately 10% of the cost of these programs. Ten percent. Parent groups and a few fees from the Department of Education were making up the rest. The only question I have in regard to this bill is that it would be applied as I interpret it only to workshops that are operated by incorporated parents associations. Now parents associations provide a tremendous program and we need them very much. However I would ask that it be a slightly broader one in terms of making this particular bill applicable to all workshops that serve the retarded. The reason I feel this way is that parent groups have approximately eighteen such programs out of a total of thirty one or thirty two in the state. And I think if a family happens to live geographically near a workshop that is not incorporated as a parent group but yet provides an essential service, that particular workshop will get no reimbursement under this bill while they deserve it equally as well as the workshops that are incorporated. However, overall I urge the passage of this bill because this, as well as the other one, makes a great deal of financial sense. Thank you.

Sen. Pao: Any questions?

Rep. Rose: On bill 6292 I don't want to put you in a difficult position but it happens that in my own community the employment of retarded children has been carried on by certain industries in order to participate. The problem develops

PUBLIC HEALTH AND SAFETY

THURSDAY

MARCH 4, 1971

that for example, filling station attendants, where they have employed them, the private owner of that station perhaps is taking advantage of a situation here in the minimum wage he has paid, whereas commercial establishments find themselves in a position competitively where they can't meet this wage thing and provide the service they are accustomed to providing. Therefore there is a serious question here whether the state is involving itself in competition with private industry in a way which is supported by the taxpayer and which would not be good practice. I wonder if you'd comment at all to that?

Mr. Jemio: Yes, first of all workshops are required to have a certificate from the United States Department of Labor which oversees payment of wages to clients as well as fair competition among industry. They have an inspector assigned to this particular area who will go into a workshop, look over the records to insure both the payment of wages to a client being equitable as well as protection of labor overall. You see the US Department of Labor is not just concerned with the workshops.

Also the Office of Mental Retardation has a full time person which is a position I was in previously as administrator of the grant-in-aid program, to also see to it that any recipient of state funds complies with these laws. So you really have two people overseeing this.

Now certainly there may be an occasion where someone does take advantage of this but I think if it's brought to the attention of either the Department of Labor or the State Office of Mental Retardation, they would be just as concerned as you about protecting all facets of this area.

Sen. Pac: Any other questions? Thank you, sir. Commissioner Shepherd.

E.A. Shepherd, Acting Commissioner of Mental Health: I just about got under the line here. If I understand the procedures, the committee permits comments on any of the bills that are posted for hearing? This morning? Very good.

The first one that we want to speak on behalf the Department of Mental Health for is Senate Bill 594 (AN ACT CONCERNING THE ESTABLISHMENT OF THE CONNECTICUT REGIONAL MENTAL HEALTH AUTHORITIES), having to do with regionalization of mental health services and the establishment of, I believe the title is, of the Conn. Regional Mental Health Authorities.

We would like to indicate the department's very real agreement with the intent of this legislation and with the concept that it advances as a way to provide mental health services through the State. We would also like to ask though

PUBLIC HEALTH AND SAFETY

THURSDAY

MARCH 4, 1971

professionals who have the responsibility for administering and implementing programs. We feel that in the areas of planning for present and future needs in the areas of communication between parent bodies and government agencies and between parent bodies and community groups at large can be very valuable and we would recommend that this bill be passed by the General Assembly. I think it would add immensely to the input of citizens into the development of programs that are responsive to needs in the community as they see them. This of course would be supplemental to what the professionals determine are needs in the community. The combination we feel would be very beneficial to all who are involved in providing programs for mentally retarded.

We also are supporting, sponsoring supporting, S.B. 516 and I'd like to read our purpose of this bill is to repeal a two year residency requirement for admission to state facilities for the mentally retarded. Existing regulations for admission to the Office of Mental Retardation residential facilities will insure that those most in need of care will be admitted to a residential program for the mentally retarded whether newcomers or long time residents of the state. It is our feeling that there may be some constitutional prohibition for this sort of residency requirement but putting aside the legalities of it we felt that it was just unfair for people who come into the community not to be taken in as full citizens of the community, not to have all of the facilities available to all residents of the state, available even to newcomers. And we would hope that the General Assembly would pass this act.

We are also supporting H.B. 6292. This is an act concerning mentally retarded adults who are unable to enter into competitive job employment. Someone spoke to this bill a little bit earlier and we certainly are in support of this bill.

Also H.B. 6905 (AN ACT CONCERNING ADMISSION TO STATE FACILITIES AND COMMUNITY RESIDENCES FOR THE MENTALLY RETARDED AND THE POWERS AND AUTHORITY OF THE SUPERINTENDENTS OF SUCH INSTITUTIONS.), defining the powers of superintendents of facilities for mentally retarded or epileptic persons, amending requirements for voluntary or informal admission to such facilities, and providing for diagnostic or emergency admission to such facilities for limited periods.

It is our feeling that in emergency cases, superintendents of regional centers or state facilities should have the power of discretion in order to admit someone on an emergency basis without having any repercussion coming back to him as a result of admitting someone without specific authorization of an act, and support this bill.

PUBLIC HEALTH AND SAFETY

THURSDAY

MARCH 4, 1971

We also would like to refer to other bills that are before this committee. H.B. 6587 about which some people have spoken earlier today and which we support. H.B. 7018 and H.B. 6510. I thank you for the time.

Rep. Cohen: Under 516 what would you expect from out of state if we removed the residency? How many people will it involve? And what might be the cost or have you no way of estimating?

Mr. Teitelman: I have no way of knowing how many people are involved.

Rep. Cohen: Or might be involved if the residency were removed? Do we get a lot of people from out of state? Even after the two year residency? People who have recently moved here? I'm trying to ascertain just what this might mean to us in dollars and cents.

Mr. Teitelman: I'm not in a position to indicate what it would mean in dollars and cents, nor are we concerned with the element here of dollars and cents, for this reason. If a facility exists that is capable of handling, without adding any particular budget for the purpose of handling these people, it exists for the purpose of handling cases that people who may have been waiting in other states, on waiting list, and who as a result of job transfers or other reasons, come into Connecticut and with that transfer essentially bring their own expertise, their own capabilities of producing income and adding to the value of the community, that these people should not be singled out for the purpose of being excluded from services that exist in the state.

Rep. Cohen: We have to know if there's no money involved, or how much then it goes to appropriations etc. You can't just - if there's at least \$50,000 involved we have to send it to appropriations. It isn't whether we may be as concerned as you are in regard to these people, but we still have to have a price tag.

Mr. Teitelman: I shall be glad of course to check into this aspect of a price tag and perhaps write a memo to you as to what we might feel is a price tag on this. I'm sorry that I cannot at this moment answer that.

Sen. Crafts: To continue the same trend of thought there and the same question, you of your own personal experiences, how many newcomers to the state do you personally know of that have been denied the services because they didn't have the residency requirement?

Mr. Teitelman: Personally I know of none.

Sen. Crafts: Thank you.

PUBLIC HEALTH AND SAFETY

THURSDAY

MARCH 4, 1971

Rep. LaRosa: Mr. Chairman, then I think I myself do not believe that - I'm for extending as many facilities as possible for the residents of the State of Connecticut but I can't conceive why we should open up an area that would allow people from the adjoining states primarily to just avail themselves of our facilities. And I think that as a result the people of the State of Connecticut would be asked to bear a cost that would not be relevant to their particular needs, and I think this is the concern of the committee because then you would have the probability that you'd have a long time resident of the State of Connecticut who would want to get admitted to one of these facilities, but yet he'd have to play second fiddle to someone who was admitted from another state. I think that I'd like to get clarification in that area.

Mr. Teitelman: Well I'd like to respond to this aspect of second fiddle. I think what we probably would like to see is an agreement perhaps between states where you might have retroactive considerations of these similar kinds of situations. I believe there is some such agreement with some states but the issue really is not one of putting anybody in a secondary position. It's trying to reach a point where everybody is in an equal position. And the numbers I'm unprepared to discuss numbers with you although I would be glad to have our technical staff check this out and submit a memo to the committee so that it's more clear. The issue I think is one of recognizing that all citizens and residents of Connecticut who are bona fide residents, who come here as bona fide citizens, as residents of Connecticut, who come here as bona fide citizens pursuing bona fide activities should not be singled out for special adverse consideration and we would hope, and furthermore I say there are some constitutional implications here, but without even addressing myself to the constitutionality implications I think it's simply a matter of fairness to have all bona fide residents of the state treated by the same rules, although I would like to submit if I may a memo to the committee along this line. I'm sorry I'm not prepared with any more information.

Rep. Cohen: Further questions of the speaker? If not, thank you very much. We'll now hear from Ann Switzer.

Ann Switzer, Executive Director of the Connecticut Association for Retarded Children: I'd like to just briefly speak, not go into any great detail on this repealing the two year residency requirement, to say to you that Connecticut has reciprocal agreements now with forty states. You know, if our people move to New Jersey, there's no waiting. I talked this over with Bert Schmickel before he left the Office of Mental Retardation. He feels that, very strongly about this, and even with a waiting list especially in the Southbury area, he said that no matter who came in here to live they would stand in line with the rest of the people in Connecticut and be treated the same way in terms of getting into one of our residential programs. I think per-

MARCH 4, 1971

THURSDAY

haps the dire emergency case would be the one the people in the Office of Mental Retardation would be most concerned with. So I feel that perhaps we could get numbers of people. I probably get a letter or a telephone call as week at my office asking for some relief from this situation, especially from young executives who have moved in to the lower Fairfield County area, in need of emergency residential care. Also I'd like to say that all of these patients are thoroughly investigated by the social workers from the Office of Mental Retardation so it isn't just a superficial kind of thing. I understand the difference in philosophy here. It's been stated for instance that the people in the General Assembly would have no particular concern about the philosophy behind this bill but they don't want it to cost Connecticut any more money. And that perhaps the federal government should be responsible for helping out in this kind of a case. And so I realize this is controversial.

I especially want to talk to you on H.B. 6292, and I'd like to leave the human interest part of this for the moment which I know is very appealing to many people, many people on this committee. You will notice if you study the bill that on page two we have really emphasized an amendment to the present legislation that sets up the grant-in-aid program for the Office of Mental Retardation. In deliberating on how we could get some financial relief to our workshops we discussed this with a number of people, and since we already have a grant-in-aid program and I believe the Manchester Workshop Director pointed out that this vocational training grant gives about \$250, give or take \$10 one way depending on the quality of the workshop program. And I'd like to add to that and say to you that the cost of keeping a sheltered client in a workshop, a client who would not be competing for a job on the outside due to the extent of his handicap, that the parent organizations have figured that it costs between \$1200 and \$1500 a year to carry such a client currently even with good subcontracts where in good times, good economic times, you might have fairly good overhead from these subcontracts which is the money that goes to pay the wages of a workshop client. And when we talk about a sheltered client we're talking about somebody who may have been evaluated by the Division of Vocational Rehabilitation and placed permanently in the workshop. He is working in an atmosphere that has been approved by the Wages and Hours Division of the Labor Department. He is paid as much as he is worth in terms of the job he can do. And he probably will be there as long as the workshop is there.

Now there is a point that I'd like to leave with you in terms of a dollar figure because I'm not any more optimistic than you that we'll get any new money for vocational training for retarded. In fact I get very discouraged at the lack of interest of this administration in our program because I

PUBLIC HEALTH AND SAFETY

MARCH 4, 1971

THURSDAY

think we've done a great job and I'm talking now about the parents and friends of the retarded. We feel that if we could get this committee to approve the concept that we might have to fight for the money another two years from now. Our people never give up. They keep coming before you and asking for what they think is a worthwhile program even though you may think it can't be afforded this year. Maybe two years from now we'll fight for the money. New York State told me that they took three years to get this kind of a subsidy into the ARC workshop. The second year Governor Rockefeller liked the idea so well, he said, "I'm going to sign the bill and then we'll fight for the money next year." The parents of the retarded feel very deeply about keeping young adults busy, and I'm talking now about those that cannot get jobs on the outside. There's something kind of wonderful to see the enthusiasm of a very wealthy, severely retarded young man take his check at the end of the week in the workshop. His father may be a millionaire but that check that he gets for doing the work means so much to him. And sometimes even the parents can't understand it. So I think that we're providing something here rather than encouraging dependency. This program is dividing dignity and something to these young people who are in our workshops.

I did a study of eighteen workshops we have here in Connecticut handling the retarded. Some of the clients are evaluated and trained and placed in jobs outside, and then the rest remain inside. I did a study and I have found out that out of the eighteen workshops we have about ten who operate at a deficit. We had to operating with - just breaking even, making no profit. And then one or two reported a slight profit from their overhead in the subcontracts. Right now of course our subcontract business is very poor and the parent associations are having to pick up the slack in terms of salary. I just would like to say to you that I think, and we discussed this very thoroughly, in all of our twenty-four local units, the parents are so enthusiastic about this that those who can afford to pay a participation fee are willing to do so. You know, another indication that people don't want handouts. They want to participate. They want to raise the money. They want to pay out of their own pocket. One woman in Bridgeport said to me, "This is the money I would pay to put my boy through college, and I want to pay some of it to the workshop." So it might mean more help than we're getting now from the General Assembly in our present vocational training grant, would mean a lot more eventually, but I think what we could do with this investment would be great. So I'm not asking you to make the decision on the money. I know that isn't

PUBLIC HEALTH AND SAFETY

THURSDAY

MARCH 4, 1971

your responsibility. But I would be thrilled, and I know a lot of legislators in the Manchester area who have been thoroughly briefed on all the details of this, would be thrilled if this committee would give approval to the bill and we may have to fight for the money later. Thank you very much.

Rep. Cohen: Miss Switzer, you spoke of reciprocity with forty other states. How would you compare our establishments with some of those in our neighboring states, that we do have reciprocity -

Miss Switzer: We thought until yesterday we had the best in the world. I really, you know, feel very enthusiastic as I visit other facilities in other states, about Connecticut. You never really recognize your own problems until you hear the seriousness of problems elsewhere. I think there are some states that have very good facilities - New Jersey. California has some new, good programs but we don't happen to have reciprocity with California. One woman in Essex told me when she came back home to live in Connecticut that she left her boy in Wyoming in the one state school there because he was happy there and she liked the treatment. So you know, I think our Middle Atlantic states probably have facilities that are overcrowded like some of the facilities in New York.

Rep. Cohen: How does New York State rate?

Miss Switzer: Well, I think in quality of service, the parents have been extremely critical because in places like Letchworth Village and the Staten Island facility, they have between six and eight thousand in one facility. The most we have in Connecticut at Southbury is 2200. So you can do a better job with fewer people.

Rep. Cohen: Could you for the benefit of our committee, give us the figure on what it costs per pupil at Southbury per year?

Miss Switzer: Well, it changes. The last figure that was quoted was in the vicinity of \$28, \$28 to \$30 a day. That's a per diem cost.

Rep. Cohen: Thank you. Senator Odegard.

Sen. David Odegard: I speak with regard to H.B. 6292 as introduced by the legislators from Manchester, myself, Rep. Genovesi, Mahoney and Poggini, from the 18th, 19th and 20th Districts. Previous remarks with respect to the meaning of the program

PUBLIC HEALTH AND SAFETY

THURSDAY

MARCH 4, 1971

in question were most eloquent and I think surpassing what I could add. I would simply say this, that from our standpoint, I don't think that we should report out a bill without an intention of funding it. I would with respect to this bill say though that were we to look at the overall picture, and I think a more careful analysis in executive committee would be necessary, but if we were to look at the overall picture, that this would very likely and honestly be categorized as a money saving bill rather than an expensive bill. I think it's a bill that is applicable to the state of Connecticut of course as a whole and I think there are many localities that, had we had the foresight or the time that we could have received co-sponsorship from. The reason sponsorship is limited to Manchester is I think because of the dedication of many of the parents involved in what we call the Manchester Sheltered Workshop, and also those of us who now serve here have served the town of Manchester for some time in one capacity or another and have become very familiar with this program. And it's one of those things that we're extremely proud of. One has to visit a facility I think of this type and see what's happening, and not only the children that benefit so much as indicated by the previous speaker so well, but also their loved ones and their parents. And the dedication that the parents have to this program is just overwhelming and I think it's in direct proportion to the benefit that the program is to their retarded children. And I would certainly appreciate full consideration by the committee. If there are any questions, I'd be happy to answer. Thank you.

Sen. Crafts: I'd like to ask Senator Odegard to remark about the approximate sum of money that we're talking about.

Sen. Odegard: I can I think, within reasonably a period of time, respond to that but right now it's entirely too loose and I've had some figures that have been developed in one way or another, are just tremendous variety and I don't feel I can give that to you now.

Rep. Cohen: Thank you very much. Dr. Robert Cramer.

Dr. Robert Kramer, Associate Professor Pediatrics, University of Conn. School of Medicine and Chairman of the Advisory Council to the Associate Commissioner of Childrens and Adolescents Services of the Department of Mental Health: I'm coming to speak specifically of bill 7269 and will address myself primarily to the issue of the Children's Diagnostic and Treatment Center which is described in this.

The purpose of this bill, although not stated in this document is to establish this diagnostic and treatment center

PUBLIC HEALTH AND SAFETY

THURSDAY

MARCH 4, 1971

Department of Mental Health. The Department feels it's very important that the state not jeopardize its continuing eligibility to participate in the Federal Community Mental Health Centers Act, and as Mr. Bacon and Mr. Melander both pointed out, the existence of a Citizens Advisory Council is necessary in order to continue this eligibility.

Sen. Pac; Any questions? Rather than go down this list, there are fewer people than I have on this list, so anyone wishing to speak come forward.

Francis Dellafera, President of the Association of Extended-Care Facilities, this is the nursing home group in Connecticut:

Sen. Crafts: Excuse me, Mr. Chairman. Would the speaker give his name again?

Francis Dellafera: Yes, Francis Dellafera of Manchester. I'm also President of the Board of Licensure for Nursing Home administrators which was enacted under Public Act 754, and also a member of the Council of Hospitals which is enacted under Public Act 693: I came to speak about 6777, but before I do, I'd just like to mention my support for H.P. 6202. As a former member of the town council in Manchester and as a private citizen I was instrumental with other people in 1960 of getting this off the ground. And I watched it grow. They've done a real good job. Lately my activities with the sheltered workshop have been restricted to hiring one of their graduates who worked out very well until the family removed themselves to Pennsylvania. And then lately with a Unico service club in raising money to buy a delivery truck for these people in Manchester. They really do an excellent job. I'm not so sure all of them will be able to go out into the industrial or commercial world to work, but nevertheless, I support this and hope that you can do something within your fiscal capability.

As far as 677 (6777) is concerned, I didn't know what this was all about until Rep. Prete made his opening statement this morning. And I would like you to know that we would support any mechanism if it needs supporting or if any mechanism is needed, for the revocation of license for nursing homes. I can tell you that in my experience the last twelve or fourteen years I know of only three incidences where attempts were made to revoke licenses. And they did take some time. One was in a children's hospital. This finally had its license revoked. Children's hospitals are now licensed by the Mental Retardation Organization under the Health Department. The other two, one of them was closed in about six or seven months, and the other that came up for hearing on revocation did make corrections in its operations as I understand it and were able to continue