

Approved Ivan Sand Date 2/28/85

MINUTES OF THE HOUSE COMMITTEE ON LOCAL GOVERNMENT

The meeting was called to order by REPRESENTATIVE IVAN SAND at
Chairperson

1:30 ~~am~~ p.m. on FEBRUARY 25, 1985 in room 521-S of the Capitol.

All members were present except:
~~Committee staff present~~
Rep. George Dean, excused
Rep. Don Rezac, excused
Rep. Rick Bowden, excused
Rep. LeRoy F. Fry, excused
Rep. L. V. Roper, excused
Rep. Robert D. Miller, excused
Rep. Mary Jane Johnson, excused
Rep. Pat Weaver, excused
Rep. Samuel Sifers, excused

~~Conferees appearing before the committee~~

Committee staff present: Mike Heim, Legislative Research Dept.
Mary Hack, Revisor of Statutes Office
Gloria Leonhard, Secretary to the Committee

Conferees appearing before the committee:

- Mr. Fred D. Allen -- New Legislation
- Mary Hack, Staff, for Rep. Larry Erne -- New Legislation
- Mary Hack, Staff, for Rep. Jerry Friedeman -- New Legislation
- Rep. Mike Hayden -- HB 2275
- Ms. Kathleen J. Payne, Parents of Multiply Handicapped -- HB 2275
- Mr. Paul Klotz, Assn. of Community Mental Health Centers -- HB 2275
- Ms. Beverly Rose, Mental Health Assn. of Johnson County -- HB 2275
- Mr. Howard Snyder, Kansas Families for Mental Health -- HB 2275
- Ms. Joan Strickler, Kansas Advocacy and Protective Services for the Developmentally Disabled, Inc. -- HB 2275
- Ms. Joan Wessellowski, Kansas Assn. of Rehabilitation Facilities--HB 2275
- Ms. Merilee Larson, Kansas Assn. of Rehabilitation Facilities and Sheltered Living, Inc. -- HB 2275
- Ms. Jean Summers, Kansas University Affiliated Facility and Kansas Planning Council on Developmental Disabilities for Mr. Rud Turnbull -- HB 2275
- Mr. Gary Condra, Residential Alternatives, Inc. -- HB 2275
- Mr. Mitch Cooper, Topeka Resource Center for the Handicapped -- HB 2275
- Mr. Ed Eilert, Mayor, Overland Park, Kansas -- HB 2275
- Mr. Bill Ramsey, City of Olathe -- HB 2275
- Ms. Janet Stubbs, Homebuilders Assn. -- HB 2275
- Mr. Bruce Linhos, The Villages, Topeka, KS. -- HB 2275
- Mr. Ernest Mosher, League of Kansas Municipalities -- HB 2275
- Mr. Walter Gautschi, Families for Mental Health, Inc. -- HB 2275
- Mr. Scott Lambers, City of Overland Park -- HB 2206
- Mr. Andrew Happer, Counsel for Overland Park -- HB 2206
- Mr. William Jenke, Overland Park Volunteer Fire Dept. -- HB 2206
- Mr. Jerry Marlatt, Kansas State Council of Firefighters -- HB 2206

Chairman Ivan Sand called for introduction of new legislation.

Mr. Fred D. Allen, representing the Kansas Assn. of Counties, requested legislation which would amend K.S.A. 79-301 and would support the exemption of producers from a grain tax amounting to 50¢ per thousand bushels. Mr. Allen explained that the tax would be shifted from the producer to the handler and would still direct revenue to the state of Kansas.

Rep. Burt DeBaun made a motion to introduce the proposed legislation as a Committee bill. Rep. Kenneth Francisco seconded the motion. The motion carried.

Staff presented for Rep. Larry Erne a request which would allow reserve police officers to carry concealed weapons when not on duty when so authorized.

Unless specifically noted, the individual remarks recorded herein have not been transcribed verbatim. Individual remarks as reported herein have not been submitted to the individuals appearing before the committee for editing or corrections.

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON LOCAL GOVERNMENT,
 room 521-S, Statehouse, at 1:30 ~~xxx~~/p.m. on FEBRUARY 25, 1985

Rep. Clinton Acheson made a motion to introduce the proposed legislation as a Committee bill. Rep. Clyde Graeber seconded the motion. The motion carried.

Staff presented for Rep. Jerry Friedeman a request for legislation which would increase by 1/4 mill the tax levy for the Great Bend Recreation Commission.

Rep. Phil Kline made a motion to introduce the proposed legislation as a Committee bill. Rep. Kenneth Francisco seconded the motion. The motion carried.

Chairman Sand called for hearings on the following bills:

HB 2275, concerning zoning; relating to group homes.

An overview was provided by Staff. (See Attachment I.)

Rep. Mike Hayden, a sponsor of the bill, appeared to give background and intent of the bill. Rep. Hayden stressed that deinstitutionalization for group home residents is desirable and urged the Committee to support the bill. When questioned, Rep. Hayden affirmed that group houses would have to meet standard building codes; that clients who are primarily mentally ill are not sent to group homes.

It was noted that the 1,000 feet requirement is intended to disburse the homes for interaction.

Ms. Kathleen J. Payne testified in support of the bill. (See Attachment II.) Ms. Payne is a member of Parents of Multiply Handicapped.

Mr. Paul Klotz, Executive Director, Assn. of Community Mental Health Centers of Kansas, testified in support of the bill. Mr. Klotz stressed that most mentally ill persons are no more dangerous than other citizens.

Ms. Beverly Rose, representing Mental Health Assn. of Johnson County, testified about her experience with Breakthrough House in Johnson County. (See Attachment III.) Ms. Rose said in Johnson County it takes four years to get zoning for the mentally ill; that in seven years of working with the mentally ill, they have had no problems.

Mr. Howard Snyder, President of Kansas Families for Mental Health, testified in support of the bill. (See Attachment IV.)

Ms. Joan Strickler, Executive Director, Kansas Advocacy and Protective Services for the Developmentally Disabled, Inc., testified in support of the bill. (See Attachment V.)

Ms. Joan Wessellowski, Executive Director, Kansas Assn. of Rehabilitation Facilities, gave introductory remarks regarding that Association. Ms. Merilee Larson, Kansas Assn. of Rehabilitation Facilities and Sheltered Living, Inc., was introduced by Ms. Wessellowski and presented suggested amendments to HB 2275 set out in Attachment VI. Ms. Larson noted inconsistency among cities of numbers of non-blood related persons who may share a group home.

A question was raised about whether "single family" rather than "multi-family" should be included in the bill for tax purposes.

Ms. Jean Summers testified in support of the bill. Ms. Summers distributed testimony from Mr. Rud Turnbull. (See Attachment VII.) Ms. Summers appeared as Vice Chairman of the Kansas Planning Council on Developmental Disabilities and the Acting Director of Kansas University Affiliated Facility. Ms. Summers testified that a concern regarding group homes is declining property values; however, studies in various states of realtor appraisals, comparable neighborhood sales, crime rates, traffic problems, etc. showed no detrimental effects to neighborhoods from group homes; that the environment around group homes was usually of higher quality than around other homes in the same neighborhood.

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON LOCAL GOVERNMENT,
room 521-S, Statehouse, at 1:30 ~~XXX~~/p.m. on FEBRUARY 25, 1985

Mr. Gary Condra, Residential Alternatives, Inc., Lawrence, Kansas, testified in support of the bill. (See Attachment VIII.)

Mr. Condra noted that the 1,000 feet requirement presents a problem in that several homes in Lawrence would be too close together, although they have been in existence over ten years.

Mr. Mitch Cooper, Executive Director, Topeka Resource Center for the Handicapped, testified in support of the bill. (See Attachment IX.)

Mr. Ed Eilert, Mayor of Overland Park, commented that he agrees with the intent of group homes but noted some problems from the City's point of view.

Mr. Bill Ramsey, City of Olathe, testified that in Olathe from time to time group homes have been allowed to come in based on special use permits and that activity in that location must be maintained after the home is placed; that HB 2275 will eliminate the process of approving or rejecting placement; that he objects to taking away the procedure of reviewing the placement of a home in the community.

Ms. Janet Stubbs, representing the Homebuilders Association, commented that she sees a loss of home rule power and noted to have no zoning laws is not a desirable situation.

Mr. Bruce Linhos, Associate Director of The Villages, Topeka, Kansas, testified that he has never seen a problem with an agency once it is established in a community -- only in the initial stages.

Mr. Ernest Mosher, League of Kansas Municipalities, appeared in opposition to HB 2275, on behalf of the State Legislative Committee. Mr. Mosher noted that 26 states have made a special effort to single out various types of group homes in connection with bond approval.

Mr. Walter Gautschi, Past President of Families for Mental Health, Inc., testified in support of the bill. (See Attachment X.)

Written testimony of Dean and Karen Testa was presented to the Committee. (See Attachment XI.)

The hearing on HB 2275 was closed.

HB 2206, concerning fire protection in certain cities of the first class.

Mr. Mike Heim, Staff, gave an overview of the bill. (See Attachment XII.)

Mr. Scott Lambers, representing City of Overland Park, introduced Mr. Ed Eilert, Mayor of Overland Park, who testified in support of the bill. (See Attachment XIII.)

Mr. Andrew Happer, Counsel for Overland Park, urged the Committee to support the bill.

Mr. William Jenke, President of the Overland Park Volunteer Fire Department, urged the Committee to support the bill.

Mr. Jerry Marlatt, representing Kansas State Council of Firefighters, indicated his support of the bill.

Mr. Mike Heim, Staff, suggested referring to Overland Park in the statute to clarify.

The hearing on HB 2206 was closed.

SB 12, concerning the limitation of bonded indebtedness.

An overview of the bill was provided by Staff. (See Attachment XIV.)

Written testimony of Mr. Tom Bell, Kansas Hospital Assn. Legislative Liason, was presented to the Committee. (See Attachment XV.)

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON LOCAL GOVERNMENT,
room 521-S, Statehouse, at 1:30 ~~am~~ p.m. on FEBRUARY 25, 1985

Chairman Sand explained that SB 12 affects Trego and Geary County and urged favorable passage due to its uncontroversial nature.

Rep. Gayle Mollenkamp made a motion that S.B. 12 be passed and placed on the consent calendar. Rep. Holmes seconded the motion. The motion carried.

The minutes of the meeting of February 20, 1985, were approved as presented.

The meeting adjourned.

MEMORANDUM

February 15, 1985

TO: House Local Government Chairman
FROM: Kansas Legislative Research Department
RE: H.B. 2275

ATTACHMENT I
2/25/85

H.B. 2275 authorizes group homes for the physically or mentally ill or handicapped to be located in any area zoned for single family dwellings. Such group homes shall be exempt from any zoning ordinance or regulation or restrictive covenant to the contrary.

MH/pk

Attachment 1

2/25/85

Local Government Committee:

I speak to you today as a parent of a severely handicapped child, as secretary of the Kansas Parent Association for Deaf-Blind/Multiply Handicapped, and as a member of GAP, a group of parents formed to promote group homes and alternative programming. And so I speak to you in support of House bill 2275.

In the last eleven years with a deaf-blind child I have discovered the mountains of paperwork is oftentimes nearly defeating and at times seems to outweigh the results. So it is with group homes for the handicapped, particularly the difficult to serve like my daughter. The difficult to serve include those whose combined mental and physical impairments make them severely handicapped, usually profoundly or severely retarded. They are difficult to serve even while in the educational setting with all the resources of the Department of Education, yet these problems are small when compared to the problems parents and advocates face when they look to the community for services after schooling.

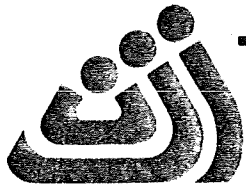
Cast aside for a moment the problem of funding for such services, and consider only the paperwork and stringent requirements involved in applying to the government agencies and/or private organizations for assistance. The stringent requirements to protect these individuals alone cause costly adaptations and delays. And, to face facts, group homes for

the difficult to serve are not cheap. To make them as financially viable as possible requires more than 5 individuals in each home. So, to the paperwork we add more, applications to local zoning boards, hoping to get permission for our homes in residential areas.

Having fought to keep my child in a home environment and the public school setting for eleven years, I abhor the thought that my daughter is destined to live in an environment without the stimulation a family-type home provides. To make group homes for her and other difficult to serve, we must make their development possible, not improbable due to zoning restrictions.

We in Kansas can look with pride to the educational services our communities offer the difficult to serve, let's not undo that by failing to make zoning changes that will enhance their ability to be a presence in our communities after twenty-one.

Kathleen J. Payne
1915 SE Herschell Rd.
Tecumseh, Mo 66542



**THE
MENTAL HEALTH
ASSOCIATION OF JOHNSON COUNTY**

7208 West 80th Street • Room 208 • Overland Park, Kansas 66204

913 • 381-2707

February 25, 1985

(ATTACHMENT III)

2/25/85

EXECUTIVE DIRECTOR
Sue Beckman

PRESIDENT
Nita Washburn

VICE PRESIDENT
Marcia Berkley
Frank Neff
Deb Grimes

SECRETARY
Joanne Francisco

TREASURER
Ken Setzer

BOARD OF DIRECTORS

Marcia Berkley
Evelyn Bowman
Wanda Chinnery
Angie DeBerry
Claire Ewert
Robert Flood
Joanne Francisco
Dixie Glenn
Jan Goble
Mary Goetze
Deb Grimes
Sydney Kramptz
Barbara McConahay
Lorraine Murray
Frank Neff
Blake Ohsol
Beverly Rose
Eve Schick
Ken Setzer
Bob Shapiro
Howard Snyder
Nancy Tait
JoEl Vagt
Lance Waldo
Virgil Walstrom
Nita Washburn
David Woodbury
Helen Yeomans

PROFESSIONAL CONSULTANTS

Elizabeth Barker-Smith, M.D.
Harold Boyts, M.S.W.
Jude Bridgeman, L.S.C.S.W.
Jean Erwin
Art Foster, Ph.D.
SuEllen Fried
Roberto Gilbert, M.D.
Sharon Helm, Ph.D.
Fowler Jones, M.D.
H. Ivor Jones, M.D.
Lucia Landon, L.M.S.W.
Ray Morgan
Jean Peterson, Ph.D.
Hon. Joseph Pierron
Janelle Ramsburg, R.N., M.S.W.
O. Dale Smith, M.D.
Penny Wade

TO: Committee on Local Government

Ivan Sand, Chairperson
Robert D. Miller, Art Douville, Phil Kline, Burr Sifers,
Clint Acheson, Elizabeth Baker, Burt Debaun, Clyde
Graeber, Carl Holmes, Martha Jenkins, Gayle Mollenkamp,
Dorothy Nichols, Rick Bowden, George Dean, Ken
Francisco, LeRoy Fry, Don Rezac, Sam Roper, Patricia
Weaver.

FROM: Beverly Rose and Mary Goetze for the Mental Health
Association of Johnson County

RE: H.B. 2275

On behalf of the more than 1,000 members of the
Mental Health Association of Johnson County, we are testi-
fying in support of H.B. 2275, the Act concerning zoning
relating to group homes. The establishment of zoning at
the state level would greatly increase the possibility of
developing the group homes necessary to move the chronically
mentally ill from institutions to the local community.

We founded a group home, Breakthrough House, in
Johnson County. Even though we were zealous in getting
neighborhood support, community support, funding and
licensing, it took almost four (4) years to start this
group home. In other words, it took four (4) years to
establish ten (10) beds. It is also very difficult to
find a house that is suitable. This is indicative of the
almost insurmountable problems to overcome in attempting
to develop a service needed by many people who could be
in the community if group homes were available.

We urge you to support H.B. 2275.

Attached - a copy of a Jean Haley article in the
Kansas City Star about the unfair stigma of mental illness.



K.F.F.M.H.

Kansas Families For Mental Health

1268 Western
Topeka, Kansas 66612
913-232-6807

HB 2275

(ATTACHMENT IV)

2/25/85

February 25, 1985

My name is Howard Snyder, and I'm from Prairie Village. I'm testifying today as President of KFFMH in support of HB 2275. KFFMH is a state-wide organization of family support groups made up of families who have long term mentally ill family members. We represent approximately 300 families in Kansas. There are local chapters in Lawrence, Topeka, Johnson County, Kansas City, Wichita, Hiawatha, Concordia, Manhattan, Hutchinson, Newton, McPherson, Winfield and Emporia.

In the 1960's the state of Kansas made the unilateral decision to reduce the population in the State Psychiatric Hospitals by approximately 80%. This was in line with a trend across the US to implement a policy called "deinstitutionalization." There were 2 parts to this policy. One was the reduction of the hospital population for humanitarian reasons, and the second was the establishment of community acceptance and services to support the people being released from the hospitals. The first part was accomplished quickly, and people were dumped into nursing homes, family homes if available and the streets and jails where no homes were available. One result of this has been savings to the state of millions of dollars each year since.

The second part was not implemented. Communities were not prepared to absorb this population and services were not set up for their needs. Communities were not educated nor were they even advised of what was happening, therefore, today they are unable and many cases unwilling to accept mentally ill persons into their neighborhoods.

In the city of Overland Park a few years ago an Optimist Club wanted to establish a group home for 6 teenage girls, who were victims of molestation or inappropriate family life. These were not felons, they were victims. Over a period of 2½ years the Optimists went through the protest procedure in 3 different neighborhoods and were shouted down each time. After all, loud citizens represent more votes than quiet victims. The man who worked on this told me that he was even subjected to physical threats and abuse, including malicious and obscene phone calls from the citizens who were exercising their right to protest, but in a very irrational way. This person reported to me that the Optimist Club will never again try to establish any kind of group home if they have to face the citizenry of Overland Park.

There is a great need for group homes all over the state. There are people buried in the state hospitals who could come back to the community if they had supportive living services. 16 areas of the state have no residential services for mentally ill people, and the other areas are woefully short of meeting the need. In the 16 areas without residential facilities it has been estimated by Mental Health and Retardation Services that there is an immediate need for 280 spaces. In a survey of 78 families across the state, 59% reported that their ill member needed to be in a group home. They will probably not be established as long as ill informed prejudiced neighbors are allowed to shout down places for group living.

In addition to the need for residential spaces, there needs to be a massive educational effort to teach people the truth about mental illness so that there is less fear. But

Attachment 4

attitudes are not changed overnight. In fact, it usually takes a full generation. In the 1960's legislation was passed to make housing available in any neighborhood to minorities and yet today 15 or 20 years later in a landlords organization that I belong to, I still hear people talking about ways to avoid renting or leasing to minorities. The same thing applies to the minority of handicapped people. As long as we allow citizens to tell other citizens where they can't live, by expressing their loud protest, we are supporting a tyranny by the majority.

People are fearful that group homes will reduce their property values. This is absolutely untrue and there are studies to prove it. I am a professional real estate appraiser and have been for 17 years and I have never heard of a single case where a group home of any type reduced surrounding property values. The general public, because of ignorance and a bad image projected by the media, are fearful of people with mental illness. The truth is that they are no more prone to violence than is the so called normal population, in fact, they are more prone to be withdrawn rather than over active.

I have a 25 year old son who is mentally ill and will need a group home environment so that he can live in the community. When my wife and I moved into our house nobody had the right to protest. Nobody told me I couldn't live there. I want the same rights and privileges for my son. He is not a second class citizen and I don't want any loud neighbors to make him one. This bill is needed and needed badly to get residential opportunities for people that will otherwise not have them.



Howard Snyder

Kansas Advocacy & Protective Services for the Developmentally Disabled, Inc.

(ATTACHMENT V)

2/25/85



Suite 2, the Denholm Bldg.
513 Leavenworth
Manhattan, KS 66502
(913) 776-1541

Chairperson

*R. C. (Pete) Loux
Wichita*

Vice Chairperson

*Robert Anderson
Ottawa*

Secretary

*Robert Epps
Topeka*

Treasurer

*Neil Benson
El Dorado*

*Rep. Rochelle Chronister
Neodesha*

*Sen. Norma Daniels
Valley Center*

*Sen. Ross O. Doyen
Concordia*

*Mary Hohman
Topeka*

*Harold James
Hugoton*

*Rep. Ruth Luzzati
Wichita*

*James Magg
Topeka*

*W. Patrick Russell
Topeka*

*W. H. Weber
Topeka*

Liaison to the Governor

Robert Epps

Executive Director

Joan Strickler

TO: The House Committee on Local Government
Representative Ivan Sand, Chairperson

FROM: Kansas Advocacy and Protective Services
for the Developmentally Disabled, Inc.
R.C. Loux, Chairperson

DATE: February 25, 1985

RE: H.B. 2275

KAPS assists developmentally disabled children and adults in gaining access to the rights and services to which they are entitled. As provided for by the Developmental Disabilities Act (P.L. 94-103 as amended by P.L. 95-602 and P.L. 98-527), each state designates an independent agency with authority to pursue legal, administrative and other appropriate remedies to insure the rights of persons with developmental disabilities. There are 54 such agencies in our states and territories. KAPS is a private, non-profit corporation created specifically to serve this role in Kansas.

As knowledge of the nature of disabilities has grown, parents and communities are no longer being encouraged to place retarded or other developmentally disabled children and adults in institutional settings. Instead, more normalized settings within the community are being sought and developed. The Kansas Long-Range Mental Retardation Plan reports that, as of 1980, there were more than 750 community-based residential placements for mentally retarded and other developmentally disabled citizens in Kansas. More have been developed since that time. As part of its basic philosophy and purpose, the Kansas Plan states "...that all persons, including those who happen to be mentally retarded, have the same basic need - the need to be appreciated and respected as human beings of personal worth and dignity. Further

Attachment 5

that mentally retarded persons have both the right and capacity to be assisted in their development - physically, emotionally, intellectually, spiritually and socially, preferably in or near their home community."

State institutions are no longer perceived of as permanent placements. In the last decade we have observed the growth of community-based centers providing services for mentally ill as well as developmentally disabled adults.

The reason for these changes - for this shift from institutions to the community are basically two.

- Philosophical. It is desirable to make it possible for persons with handicapping conditions to live in less restrictive and more normalized settings in the community.
- Financial. In general, it costs less to serve people in community settings rather than hospitals and institutions.

Most communities have absorbed group homes with little public attention. In some situations, however, members of the community have expressed reservations. Their fears generally fall into two categories - concerns of property values and concerns of safety. These fears can result in public hearings that subject disabled persons and their families to humiliation and pain without justification.

Group homes for developmentally disabled persons have been built throughout Kansas and the nation, and experiences in running such homes tend to diminish these fears.

First a look at property values.

In 1978, at the request of the State of New York, Princeton University conducted a study of what happens when a group home is placed in a neighborhood.¹ The study focused on 42 communities in which sales of 754 homes took place which were located next door, or across the street, from group homes for persons with developmental disabilities. At the same time, the study looked

at the sales of 826 homes in 42 similar communities that had no group residences. The following are some of the very clear findings that came from that study.

- The presence of group homes had no impact upon property values at all. The values of homes increased (or decreased) similarly to houses in communities where no group homes existed.
- The proximity of a house to a group home had no effect upon the market value. Even homes immediately next door to group homes did not decline in value.
- The establishment of a group home did not generate a higher degree of property turnover than that found in communities without such homes.
- The group homes, were, in fact, found to have a better appearance than the average home. The repair and maintenance was better, and even the lawns, bushes, and trees were better cared for.

All reported studies concerning the effect of group homes on property values have shown that these residences do not adversely affect the worth of real estate.²

Second - a look at safety.

There is no evidence to support fears that mentally retarded people are dangerous to society. Gene Stephens, an authority on criminal justice and developmental disabilities has written "...there has never been support for the hypothesis that there is a significant positive relationship between mental retardation and criminality - that is, mentally retarded people are no more apt because of their "below normal" intelligence, to become involved in criminality than non-mentally retarded persons."³

In fact, evidence suggests it might be safer to be a neighbor of a group home. A recent study found that the arrest rate of 60 per thousand per year for adults in the general population is significantly higher than the 3 per thousand rate registered by mentally retarded and other developmentally disabled residents of group homes.⁴


According to a report prepared by the Government Accounting Office, once residents have moved into group homes, and the neighborhood has become more familiar with the purpose and operation of the homes, community opposition becomes minimized.⁵

There are some considerations that I wish to bring to your attention.

- Group homes are always staffed when any of the residents are present in the home.
- Developmentally disabled adults lead lives similar to other working people. They spend their days in a sheltered workshop or work activities center and come home to have dinner and relax.
- Licensing standards guarantee a level of quality for residences.
- Neighbors can monitor residential programs. For example, if a neighbor observes anything improper about the abilities of the staff members, the adequacy of upkeep of property or the treatment of the residents, they have the right to communicate their concerns to any of a number of persons or agencies. These might include the staff members themselves, the agency responsible for the home, responsible elected officials, or state licensing agencies.

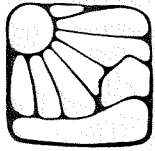
One fact to remember is that the people who live in group homes are like you and me in every way except one - they have a developmental disability. They need the help and support of others to meet some of their basic needs so that they can live much as the rest of us.

Respectfully submitted.


Joan Strickler
Executive Director

JS/jw

- 1) Julian Wolpert, Group Homes for the Mentally Retarded: An Investigation of Neighborhood Property Impacts (Albany: New York State Office of Mental Retardation and Developmental Disabilities, August 31, 1978.)
- 2) Wolfensberger, W., The Origin and Nature of Our Institutional Models, (Human Policy Press, 1975) p. 16
- 3) Stephens, G., Identifying, Handling and Treating the Developmentally Disabled Offender (Columbia: University Affiliated Facility, University of South Carolina, 1981).
- 4) Lubin et al., The Likelihood of Police Contacts with Developmentally Disabled Persons in Community Residences 5 (unpubl. report: New York State Office of Mental Retardation and Developmental Disabilities Feb. 1982).
- 5) An Analysis of Zoning and Other Problems Affecting the Establishment of Group Homes for the Mentally Disabled (GAO/HRD-83-14, August 17, 1983).



Kansas Association of Rehabilitation Facilities

TownCenter Building 120 West Sixth, Suite 110
Newton, KS 67114 316-284-2330



Kansas Association of
Rehabilitation Facilities

TownCenter Building 120 West Sixth, Suite 110
Newton, KS 67114 316-284-2330

Joan Wesselowski
Executive Director

(ATTACHMENT VI)

2/25/85

TO : The Kansas House of Representatives
Local Government Committee

FROM: Kansas Association of Rehabilitation Facilities (KARF)

Re : H.B. 2275, AN ACT concerning zoning; relating to group homes

Date: February 25, 1985

1.0 Position Statement on H.B. 2275, an Act concerning zoning, relating to group homes.

1.1 KARF supports H.B. 2275 that establishes a statewide policy to allow group homes in single family residential surroundings if amended to include:

1.1.1 multi-family residential areas

1.1.2 2/3 majority vote of the local governing body to allow group homes closer than 1,000 feet from one another

1.1.3 existing group homes and those under construction would be exempted from the provisions of this bill

1.1.4 group homes which conform to existing, less stringent, local density regulations and zoning regulations shall continue to be permitted

2.0 Justification

2.1 Current zoning ordinances and regulations vary significantly from municipality to municipality in Kansas and create obstacles to the development of group homes for the handicapped

2.2 Currently there are over 1,500 individuals who are disabled living in group homes or apartment settings. It is projected that approximately 3,000 other individuals will need to be provided living situations in the next 5 to 10 years. It would help to have a statewide policy to assist with this process.

- 2.3 Approximately 18,000 Kansas family members will be affected by this policy
- 2.4 Federal funding, philosophy, and regulations support community integration of our handicapped citizens, e.g. HUD Section 202 Loan Program for the Elderly and Handicapped
- 2.5 Other States have legislation which prohibits exclusionary zoning practices with regard to group homes for handicapped individuals
- 2.6 The Kansas Legislature has previously recognized the need for adequate planning, coordination, and funding in order to meet the demand for community-based residential services for the handicapped
- 2.7 This policy statement supports KARF's belief in integrating individuals with disabilities into the community
- 2.8 This policy statement supports KARF's belief that services for the disabled should be available in the community to prevent institutionalization

FACT SHEET

Identity of Kansas Association of Rehabilitation Facilities (KARF)

KARF is an Association of 34 Rehabilitation Facilities throughout Kansas providing Vocational/Day Activity Programs, Community Living Programs, Children's Services Programs, Individual Support Programs, and Medical Rehabilitation Programs (enclosed membership profile).

The facilities provide programs/services to over 8,000 individuals with disabilities throughout the year with an average daily census being approximately 3,200 individuals.

Definition of Habilitation/Rehabilitation Programs for Individuals with Disabilities

Habilitation/Rehabilitation is the process by which an integrated program of services is provided to help a person disabled at birth or by illness or injury, gain a higher level of function. Such services address vocational, community living, medical, education and support needs. The goal of the rehabilitation process is to help the person become capable of self support by enabling him or her to engage in employment, live as independently as possible, exist outside institutional settings, or otherwise improve his or her situation.

ASSOCIATION MISSION, BELIEFS AND VALUES

Mission

The purpose of the Kansas Association of Rehabilitation Facilities is to serve its membership in developing and promot-

ing quality programs for individuals with disabilities and to communicate essential information between its membership and its publics.

Beliefs and Values

The Association is founded upon certain shared beliefs and values which are an expression of our mission and pur-

pose as individuals, as professionals, as facilities and as a voluntary organization.

We believe in the inherent dignity of the individual with disabilities.

We believe that no applicant or participant in services, employment or housing should be discriminated against on the basis of race, color, national origin, religion, sex, age, or handicap.

We believe in the community's right and responsibility to provide services that are reasonably accessible and available on a local or regional basis to individuals with disabilities.

We believe that it is the responsibility of government to address the needs of individuals disabled at birth, or by illness or injury; and provide needed support and reimbursement for services needed to assist them to live as independently as possible.

We believe in integrating individuals with disabilities into community programs/services, business and industry, and social settings without compromising the quality of service needed to meet each person's needs.

We believe that government should provide incentives to business and industry to promote employment and other opportunities for individuals with disabilities.

We believe that transitional living support, and medical and vocational rehabilitation should be provided by the private sector (insurance) to prevent long term government support through SSI, SSDI and long term care.

We believe that services should be available in the community to prevent institutionalization.

STATEWIDE POLICY RELATING TO ZONING GROUP HOMES

DISCUSSION OF ISSUE:

Currently, each municipality in Kansas has its own ordinances and regulations relating to the number of unrelated persons who may live together as a group in single family residential areas. In some cities, ordinances specify four or fewer; while in others, five or fewer unrelated persons may live together. In yet others, group homes may only be established via special use permits.

Community-based social services systems for persons with mental illness, mental retardation or other developmental disabilities, and physical handicaps have been developed over the past ten to twelve years through a combination of federal, state and local funding. Licensing and monitoring of such community-based programs is primarily the responsibility of the Kansas Department of Social and Rehabilitation Services and/or the Kansas Department of Health and Environment utilizing statewide standards/regulations.

Expansion of community-based residential programs for persons with such handicapping conditions is urgently needed as illustrated in the Kansas Long Range Mental Retardation Plan and the Kansas Long Range Mental Health Plan.

Since it is widely accepted that persons with such handicaps should be served in the least restrictive environment possible, e.g. community-based vs institutional placement, agencies/ providers are seeking: 1.) to meet the growing demand for services, and 2.) to integrate persons with handicaps with the community and its resources. This process has typically required that agencies/providers spend vast amounts of resources (time and dollars) to obtain properly zoned real estate for the purpose of establishing group homes to serve individuals with handicaps.

RECOMMENDATIONS FOR CHANGE:

KANSAS ASSOCIATION of REHABILITATION FACILITIES recommends the following changes:

1. That statewide policy be established through H.B. 2275 to allow group homes for eight or fewer persons with handicapping conditions in single family residential areas
2. That, in order to protect the integrity of neighborhoods and to encourage appropriate integration of handicapped persons within the community, group homes used for this purpose should be separated by an appropriate distance from other such group homes
3. That H.B. 2275 be amended as follows: to include multi-family zoned areas; to require a 2/3 majority vote of local the local governing body for group homes to be allowed closer than 1,000 feet from one another; to exempt or "grandfather" existing group homes or those under construction; to allow the establishment of group homes which conform to existing, less stringent, local density regulations and zoning regulations

FOREWORD

This Handbook deals with the Section 202 Direct Loan Program for Housing for the Elderly or Handicapped and the use of Section 8 Housing Assistance Payments in such housing. Together, they have played a significant role in the resurgence of this different and increasingly important segment of housing and community development.

Housing the elderly or handicapped requires that special consideration be given to such factors as location and site, architectural and special design features, and the inclusion of a wide range of services and programs. As discussed below, these factors are linked together to help offset the problems which tend to accompany the aging process: reduced incomes; loss of spouses, relatives and friends; dispersal of families; declining health, and how to use vast increases in leisure time. When these factors are melded together, they can help the elderly to remain independent and prevent their premature institutionalization. For the handicapped, proper consideration of these same factors can mean escape from virtual imprisonment in their own homes, or in many cases release from the curse of institutional living.

Given these concerns, sites are selected to avoid steep inclines, noxious odors and the like. Architectural barriers, such as steps and narrow doorways are eliminated to assure ingress and egress, liveability of units and access to all areas by all residents. Buildings are designed to meet special safety requirements, wider corridors are included, nonslip flooring is installed, shelves and electric outlets are lower than usual and grab-bars are provided. Private kitchens and bathrooms are included, with or without provisions for central dining. These are the kinds of requirements which generally are apt both for the elderly and the handicapped.

Other problems also must be considered. Because the elderly face declining physical capacities and health, a variety of health and medical facilities and services should be available in the community. Lower than average incomes combined with lessened energy make reasonable rents and convenience to transportation, shopping, personal and other services critical to the residents of these projects. Opportunities for meaningful involvement in voluntary services and other community affairs, part-time employment, and participation in a variety of recreational activities need to be available and encouraged. Aging often is accompanied by the loss of one's spouse, as well as other relatives and friends. Children grow up, move and raise their own families. Thus, older people may need new friends and new companions as an offset to their departure. The handicapped, too, have similar, if not the same problems, and they too, need to be given careful and humane consideration and attention.

Although these problems cannot be eliminated entirely, the combination of special architectural considerations and design features with a variety of services and activity programs can help offset them to a very significant degree. In any event, it is particularly important that such housing not be viewed as simply another institution among institutions, or as the last stop in life. Rather, it offers wider choices of where and how to live and opportunities for new friendships. This is housing in the community which challenges its residents to engage in meaningful activities as they wish, to seek and enjoy new adventures---to get further out of life---all while retaining their own self-identification as independent, contributing members of society.

4-18. LOCATION ANALYSIS. Site location is of the utmost importance in the success of any housing development. Proper site location can greatly influence the success or failure of housing for the elderly or handicapped.

a. Remote or isolated locations are to be avoided.

- (1) It is essential that residents of projects for the elderly or handicapped have ready access to religious institutions, hospitals or clinics, and other community services, shopping, recreational facilities, and public transportation.
- (2) Shopping facilities for day-to-day necessities such as groceries and drugs should be within walking distance, or delivery at reasonable cost must be available.
- (3) Convenience of location to others upon whom the residents of the project may depend also is important. The location should be readily accessible to project employees, some of whom may require public transportation.
- (4) Steep and uneven topography should be avoided, and sites should be barrier free.

b. The site criteria set forth in this paragraph represent the ideal situation. However, it should be recognized that all characteristics, such as, proximity to religious, medical, community services, shopping, recreational facilities, and public transportation, will not always be present. These criteria are not intended to rule out housing in rural areas or any metropolitan area which is rural in character. Other factors, such as, the Sponsor's and Borrower's willingness, capacity, and plan to provide needed services to compensate for the lack of facilities in rural areas also should be considered.

c. The appraiser's overall analysis with regard to acceptability of the location(s) for housing for the elderly shall be made in compliance with the Site and Neighborhood Standards, (Section 880.206(a)(e)(q)(h) and (j)) set forth in Items (1)-(5), below, as well as the Flood Plain Management and Wetlands Protection Requirements set forth in Items (6) and (7), respectively, below.



Special Attention of:
All Regional Administrators and
Directors, Offices of Housing
and Administration
All Field Office Managers, Chiefs,
and Directors of Housing Development
and Management

Notice

H 84-6

Issued: 1/13/84

Expires: 9/30/84

Cross References: Handbook 4571.1 REV 2

Subject: Clarification for Processing Group Home Projects
Under Section 202

1. **PURPOSE.** This Notice is to provide clarification of outstanding instructions for processing group home projects financed under the Section 202 program. It incorporates the provisions of Notice H 83-26, dated 5/17/83, which expired 11/30/83.
2. **BACKGROUND.** Group home projects are primarily intended to provide housing for the developmentally disabled or the chronically mentally ill, and HUD's policy is to limit its approval for such housing to small group homes. Although group homes for up to 15 persons per site are now permitted, ~~facilities for six to eight persons are preferable in order to provide a more normal and home-like non-institutional environment.~~

A developmentally disabled person is defined as an individual with a severe, chronic disability which —

- (A) is attributable to a mental or physical impairment or combination of mental and physical impairments;
- (B) is manifested before the person attains age twenty-two;
- (C) is likely to continue indefinitely;
- (D) results in substantial functional limitations in three or more of the following areas of major life activity:
(i) self-care, (ii) receptive and expressive language,
(iii) learning, (iv) mobility, (v) self-direction,
(vi) capacity for independent living, and (vii) economic self-sufficiency; and
- (E) reflects the person's need for a combination and sequence of special, interdisciplinary, or generic care, treatment, or other services which are of lifelong or extended duration and are individually planned and coordinated.

HMMD: Distribution: W-3-1, W-2(H), W-3(H), R-1, R-2, R-3, R-3-1(H), R-3-2, R-3-3, R-6, R-6-6, R-6-2, R-7, R-7-1, R-7-2, R-8, R-8-1

TO: The Kansas House of Representatives
Local Government Committee

FROM: Rud Turnbull

(ATTACHMENT VII)

2/25/85

Re: H.B. 2275, AN ACT concerning zoning; relating to group homes

Date: February 25, 1985

Identification: President Elect of the American Association
on Mental Deficiency
Member of Governmental Affairs of the
Association for Retarded Citizens - USA
Former Secretary of ARC-USA
Attorney (familiar with Cleburne case -
helped write brief)
Past Member of Kansas Planning Council on
Developmental Disabilities - 2 years
Parent of mentally retarded young adult

Discussion:

1. Kansas needs this bill to make living in the community a right rather than a privilege for our mentally handicapped citizens.
2. The trend, in Kansas, seems to be to allow these group homes in single family zones, but obtaining this approval at the local level diverts energy from the mission of agencies who provide the programs.
3. H.B. 2275 is consistent with the trend in the U.S. with twenty-six other states having legislation prohibiting exclusionary zoning practices relating to group homes for the handicapped.
4. H.B. 2275 is consistent with case law in the United States.
5. Although there is a case before the Federal Supreme Court, Cleburne, Texas vs Cleburne Independent Living Center, the case will not necessarily be a solution. The court may strike down the local ordinance that no homes for the feebleminded will be allowed, but it may not give guidance concerning zoning issues.
6. The American Bar Association and the American Society of Planning Officials favor such State Legislation.
7. Property values do not go down and turn-over in property ownership does not go up due to the establishment of group homes in neighborhoods. Studies in New York, Pennsylvania, Minnesota, and Wisconsin substantiate this.
8. The literature does not support that the mentally retarded or developmentally disabled are more dangerous than the average person. In fact, the literature suggests that due to the increased supervision provided to the individuals, they are less likely to be dangerous.
9. Group homes are less expensive than institutions.
10. Group homes tend to be better than institutions in helping the individuals served develop daily living skills.



RESIDENTIAL ALTERNATIVES, *i n c.*

... a levels approach to providing housing for disabled persons.

Dr. Gary Condra, President
2401 Brookside Dr.
Lawrence, KS 66046

(ATTACHMENT VIII)

2/25/85

Testimony on House Bill 2275

(913) 843-3643

My name is Gary Condra and I live in Lawrence, Kansas. In 1972, as Executive Director for a community mental retardation facility in Lawrence, I helped to open one of the first group homes in Kansas for the mentally retarded. Since then, I have helped three corporations to open a total of 17* group homes and 20 apartments, serving a total of 138* adult residents.

I commend the Committee for considering House Bill 2275, because I firmly believe in its intent of simplifying the development of group homes for the disabled. However, I have two concerns with the Bill as it currently exists. First, I ask that you include "duplex or multi-family dwellings" wherever the phrase "single family dwellings" appears. Without this addition, the Bill will allow for group homes of up to eight residents in single family zoned areas while duplex and multi-family zoned areas will still restrict the number of residents to only four or five persons per home. There are circumstances where duplex or multi-family zoned areas are actually preferred to single family zoned areas for placement of group homes.

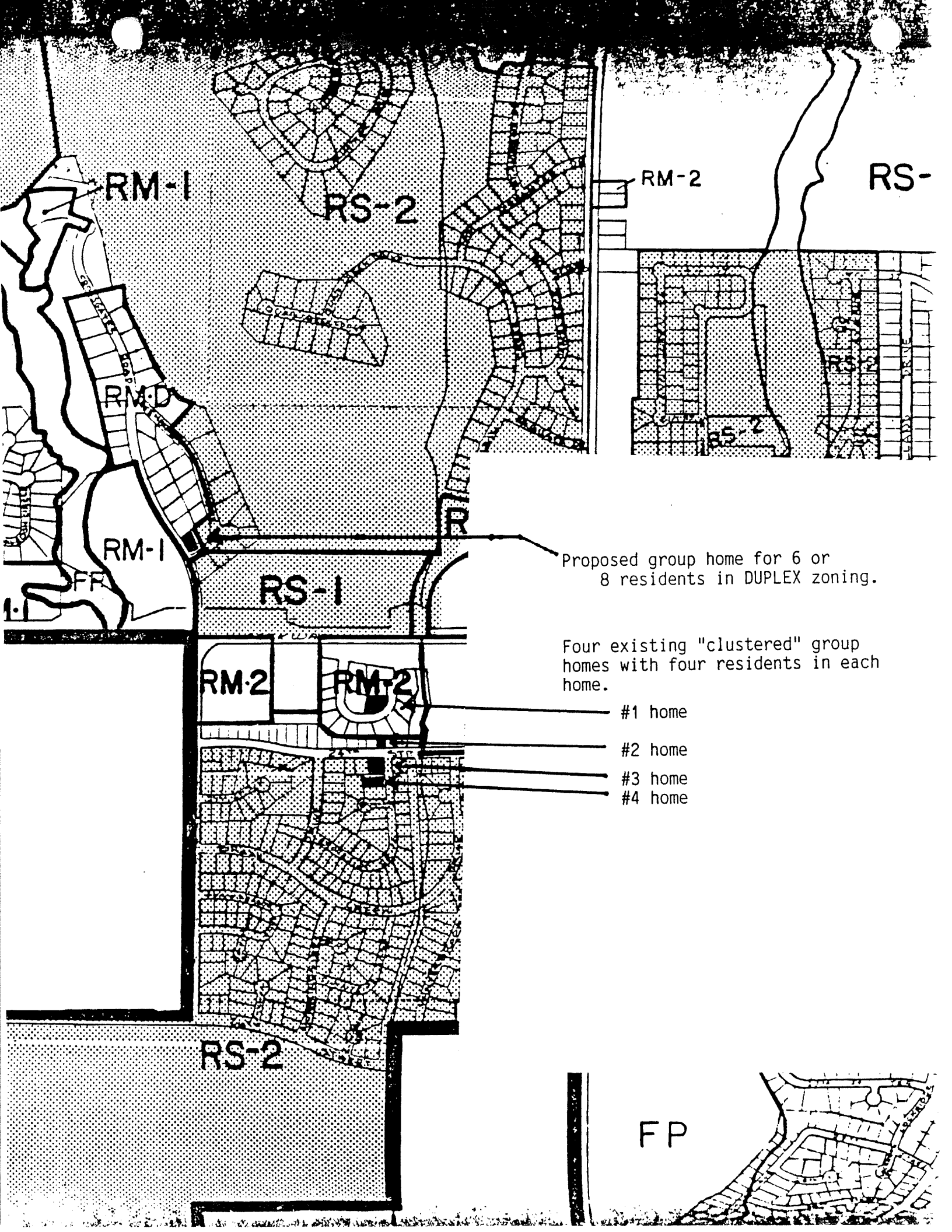
Secondly, with respect to the limiting of one group home per 1,000 feet, I ask that this provision only apply to group homes housing more than five residents per home. In Lawrence, I currently have four group homes with four residents in each home. These homes are in a new area of single and duplex zoned homes, in a well designed "cluster" arrangement. These homes are not 1,000 feet apart. However, the "cluster concept" is often a preferred method of providing community living opportunities for the disabled.

Another way to handle this matter will be to say that House Bill 2275 shall not apply to group homes which already conform to existing local density regulations (ie. four or five residents maximum per home).

Respectfully submitted:

Gary Condra, President
Residential Alternatives, Inc.

*Three homes were "cottages" serving 15 residents each.



RM-1

RS-2

RM-2

RS-

RM-1

RM-1

RS-1

Proposed group home for 6 or 8 residents in DUPLEX zoning.

Four existing "clustered" group homes with four residents in each home.

RM-2

RM-2

#1 home

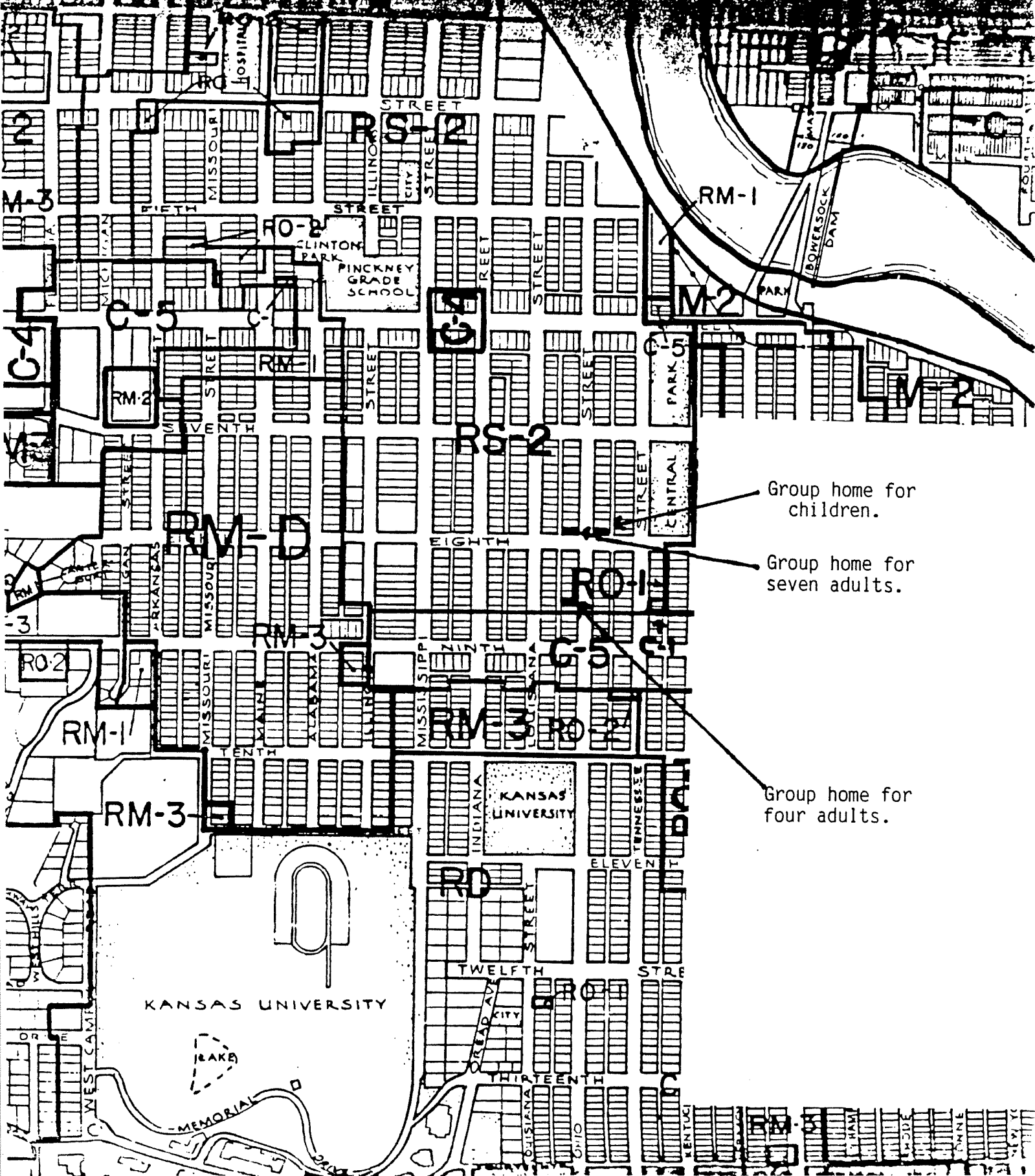
#2 home

#3 home

#4 home

RS-2

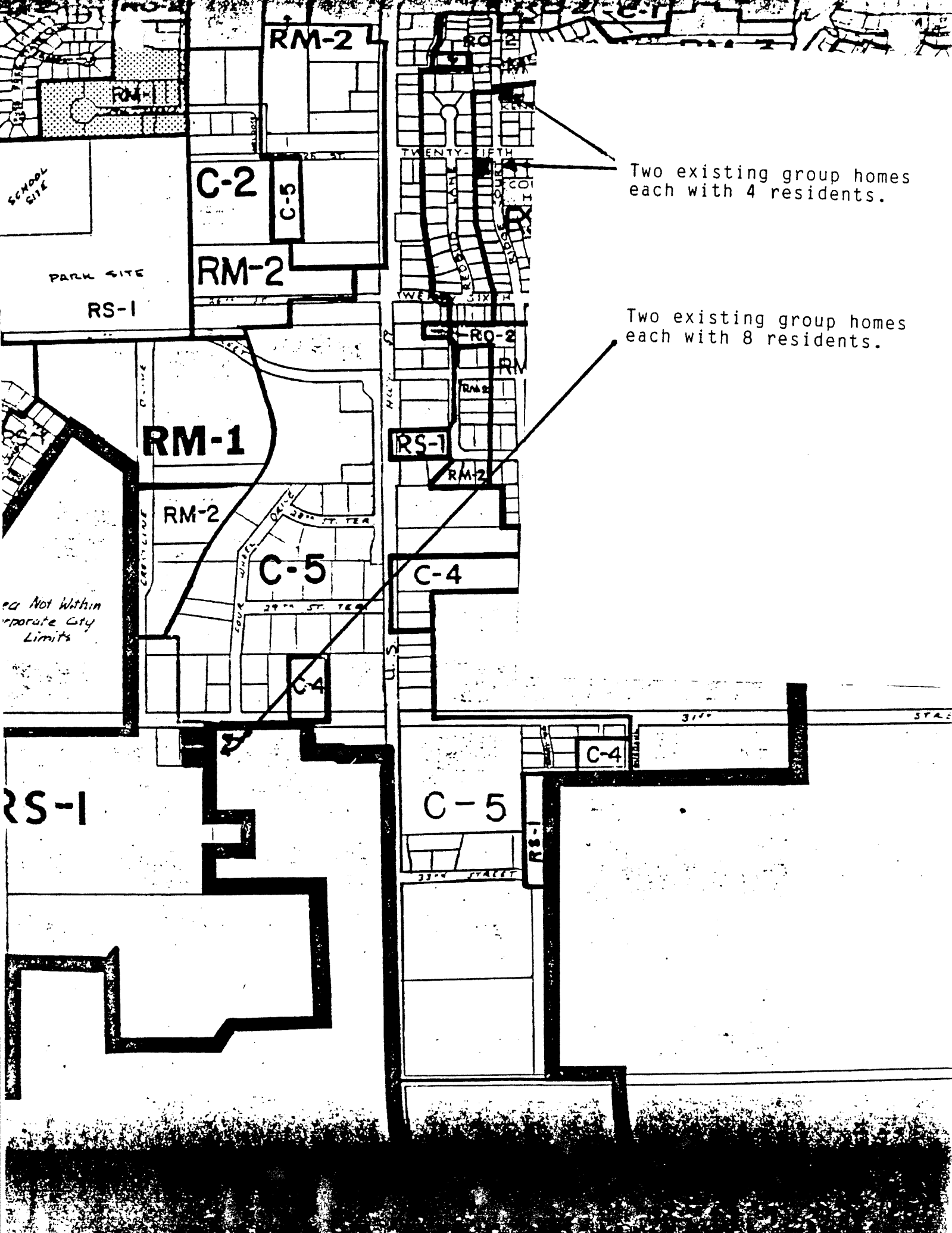
FP



Group home for children.

Group home for seven adults.

Group home for four adults.



RM-2

C-2

C-5

RM-2

RM-1

RM-2

C-5

C-4

RS-1

RM-2

C-5

C-4

RS-1

Two existing group homes each with 4 residents.

Two existing group homes each with 8 residents.

SCHOOL SITE

PARK SITE

RS-1

Area Not Within Corporate City Limits

RS-1

TWENTY-FIFTH

TWENTY-SIXTH

TWENTY-SEVENTH

TWENTY-EIGHTH

TWENTY-NINTH

THIRTIETH

THIRTY-FIRST

THIRTY-SECOND

THIRTY-THIRD

THIRTY-FOURTH

THIRTY-FIFTH

THIRTY-SIXTH

THIRTY-SEVENTH

THIRTY-EIGHTH

THIRTY-NINTH

FORTIETH

FORTY-FIRST

FORTY-SECOND

FORTY-THIRD

FORTY-FOURTH

FORTY-FIFTH

FORTY-SIXTH

FORTY-SEVENTH

FORTY-EIGHTH

FORTY-NINTH

FIFTIETH

FIFTY-FIRST

FIFTY-SECOND

FIFTY-THIRD

FIFTY-FOURTH

FIFTY-FIFTH

FIFTY-SIXTH

FIFTY-SEVENTH

FIFTY-EIGHTH

FIFTY-NINTH

SIXTIETH

SIXTY-FIRST

SIXTY-SECOND

SIXTY-THIRD

SIXTY-FOURTH

SIXTY-FIFTH

SIXTY-SIXTH

SIXTY-SEVENTH

SIXTY-EIGHTH

SIXTY-NINTH

SEVENTIETH

SEVENTY-FIRST

SEVENTY-SECOND

SEVENTY-THIRD

SEVENTY-FOURTH

SEVENTY-FIFTH

SEVENTY-SIXTH

SEVENTY-SEVENTH

SEVENTY-EIGHTH

SEVENTY-NINTH

EIGHTIETH

EIGHTY-FIRST

EIGHTY-SECOND

EIGHTY-THIRD

EIGHTY-FOURTH

EIGHTY-FIFTH

EIGHTY-SIXTH

EIGHTY-SEVENTH

EIGHTY-EIGHTH

EIGHTY-NINTH

NINETIETH

NINETY-FIRST

NINETY-SECOND

NINETY-THIRD

NINETY-FOURTH

NINETY-FIFTH

NINETY-SIXTH

NINETY-SEVENTH

NINETY-EIGHTH

NINETY-NINTH

ONE HUNDREDTH

ONE HUNDRED-FIRST

ONE HUNDRED-SECOND

ONE HUNDRED-THIRD

ONE HUNDRED-FOURTH

ONE HUNDRED-FIFTH

ONE HUNDRED-SIXTH

ONE HUNDRED-SEVENTH

ONE HUNDRED-EIGHTH

ONE HUNDRED-NINTH

TWO HUNDREDTH

TWO HUNDRED-FIRST

TWO HUNDRED-SECOND

TWO HUNDRED-THIRD

TWO HUNDRED-FOURTH

TWO HUNDRED-FIFTH

TWO HUNDRED-SIXTH

TWO HUNDRED-SEVENTH

TWO HUNDRED-EIGHTH

TWO HUNDRED-NINTH

THREE HUNDREDTH

THREE HUNDRED-FIRST

THREE HUNDRED-SECOND

2/25/85

Testimony
to
House Committee on Local Government
Regarding HB 2275
A Bill Pertaining to Group Homes and Zoning
February 25, 1985

Presentor: Mitch Cooper, Executive Director
Topeka Resource Center for the Handicapped

Location: Room 521 South

Time: 1:30 PM

HB 2275 is a bill about more than simply zoning and group homes. It is about living and it is about freedom. Persons without severely disabling conditions are guaranteed a wide degree of latitude in selecting a place to reside and lay claim to their rights of life, liberty and the pursuit of happiness.

Severely handicapped individuals are generally restricted in their range of choices. The obstacles to living as independently as possible in a local community are many. They include architectural and attitudinal barriers.

This bill does not address architectural barriers. It does address attitudinal barriers. In order to gain a more complete understanding for the need for a law to eliminate these undesirable barriers, it is important to examine what currently happens to those persons who must continue to fight for the same rights already promised to their able-bodied counterparts.

When a disabled person decides to relocate, regardless of whether it is from an institutional or another community living setting, a great deal of planning must be done. Some of the special conditions that may be considered, depending upon the nature and severity of the disability, include the availability of persons who can function as personal care attendants, the existence of curb cuts and adequate parking, the proximity to a public bus route, schools and merchants. They may even include the

need for a quiet environment and good neighbors.

If some of these variables appear to be identical to those that you might deem important to consider for your own living situation, it is because, in large part, they are similar. The major difference is that you may choose to live wherever you want, constrained only by your ability and willingness to afford your choice of location, whereas a severely disabled person may need the advantages offered by a structured or unstructured group home setting.

Local ordinances tend to be extremely restrictive in terms of what they consider to be a family for zoning purposes. Many of these ordinances were developed when most disabled persons were merely warehoused in institutions. Community living alternatives, with the exception in some cases of that housing provided by the person's own family, were virtually non-existent and the local ordinances did not have to take such circumstances into account.

Times have changed dramatically for the better, but the majority of these ordinances have not changed. This is largely based on the fact that zoning policies are generally established over time and strongly favor historical precedence as opposed to current circumstances.

The pursuit of these archaic policies has resulted in de facto instances of wrongful discrimination. This situation is harmful to the disabled persons affected, to their families and to the communities within which the discrimination occurs. There are often prolonged legal battles, resulting in the loss of many dollars and long-lasting scars on the community. Fear through ignorance is routinely invoked by those seeking to deny freedom in housing choice and countless valuable hours of community education in relation to the lives and needs of disabled persons are wasted as interested parties choose up sides.

HB 2275 represents a significant step in the elimination of much of this unproductive behavior and the recognition of the rights of disabled persons.

Thank you for your time and consideration.

F. F. M. H.

Families For Mental Health, Inc.

JOHNSON COUNTY

HB 2275

(ATTACHMENT X)

2/25/85

Shawnee Mission, Kans. 66201
February 25, 1985

P. O. Box 2452

I am Walter Gautschi from Merriam, Kansas. I'm here to testify in favor of HB 2275. I am past President of FFMH-Johnson County, and I am on the Housing and Employment Committee for the Johnson County Mental Health Center. I am also on the Eastern Regional Mental Health Action Committee.

I am father of a 24 year old son suffering from a brain disease called schizophrenia who has had to be hospitalized 4 times, simply because there weren't any structured living group homes available after he was released each time from the hospital. The only 10 bed unit available is "Breakthrough" a group home which is constantly full. Breakthrough is the only group home available in Johnson County, which has a population of 270,000 people. After the third release from Osawatomie, having been on the waiting list for a year, he was finally accepted in "Breakthrough House." After having gone through the Breakthrough program, he has been living with a roommate for 3½ years with only 7 days of hospitalization between them.

On the basis of the cost of \$110.00 per day in the hospital versus \$30-40 in a structured group home the savings to the state is substantial. Osawatomie has 50-60 people who could be released today if there were group homes available in our area, so the savings is something to consider.

As a member of FFMH the primary concern has been to obtain more housing. We have run into a brick wall in trying to obtain housing. There is no way to get housing short of lying. As a father I think it is very important to have housing.

Approximately 40 a month come out of Osawatomie and there is nothing available except going back home. The consequence of what we call the "heart breaking revolving door" where after 3 months 70% of people released have to go back to the hospital. They don't find support in the community but, if group homes were available, this wouldn't happen.

The hospital staff are reluctant to release people because they know there is nothing to go to when they are released from the hospital.

These people living in the hospital are costing the state \$110.00 per day. At that rate, they could be living in group homes in the community for 1/3 of that cost, and also learning to be as self supporting as possible. They are able to learn work skills from job training and this gives them better self esteem and not be second class citizens, and to have the best life they can have.

This is long overdue so please give this bill favorable consideration. The results would eliminate a lot of needless heartbreak and suffering.

Walter Gautschi
Walter Gautschi
6526 Burnham Drive
Merriam, Ks. 66202 432-0450

February 25, 1985

Dear Local Government Committee,

(ATTACHMENT XI)

2/25/85

Due to an appointment at K.U. Medical Center for our son, today it is impossible for us to present our support testimony for House Bill No. 2275 in person. Therefore, we hope you will accept it in letter form.

We are parents of a severely mentally retarded and physically handicapped 12 year old boy who has always lived with his family since his birth. He's attended preschools and now public school program in his community too. It is our hope and plan for him to continue to be part of the community as a young adult in a group home. That is why we have become active members of G.A.P. (Topeka Advocates and Parents for Group Homes Alternatives and Programming) which is an organization whose mission is to expand residential and day activity programs to persons severe/profound mental retardation and severe developmentally disability (young adults) now and in the future in Shawnee County and the state. Through our studies with G.A.P. we have learned that the difficult to serve are living in community homes successfully and more economically in other states. We presently have a group home for the difficult to serve in Overland Park, the House on Conser Street, which is proving it is cheaper to live in a group home than an institution in our state. Besides being more humane and a normal life style for our young people.

Our mission can be reached, but we don't need any additional obstacles to overcome, like archic zoning laws in each community. We need our state to continue being progressive, by modernizing our state's zoning laws with a statewide statute. That House Bill No. 2275 will achieve.

Thank You

Karen Testa
Dean and Karen Testa
3610 S.E. 28th St.
Topeka, Kansas 66605

MEMORANDUM

February 15, 1985

TO: House Local Government Chairman
FROM: Kansas Legislative Research Department
RE: H.B. 2206

(ATTACHMENT XII)

2/25/85

H.B. 2206 establishes a procedure for Overland Park to cause the Johnson County Board of Commissioners to dissolve fire districts located within the city upon the city's passage of a resolution creating a city fire department. The bill provides for a transfer of property and funds of the fire districts to the city and authorizes a 8 1/2 mill levy for fire protection purposes.

MH/pk

REMARKS BY MAYOR ED EILERT

2/25/85

CITY OF OVERLAND PARK, KANSAS

BEFORE THE HOUSE LOCAL GOVERNMENT COMMITTEE

REGARDING HB 2206

FEBRUARY 25, 1985

MR. CHAIRMAN AND MEMBERS OF THE COMMITTEE, MY NAME IS ED EILERT, MAYOR OF OVERLAND PARK. I'M APPEARING BEFORE YOU IN SUPPORT OF HOUSE BILL 2206.

FIRE SERVICE IS PROVIDED IN OVERLAND PARK BY FIRE DISTRICTS WHICH ARE GOVERNED BY FIRE BOARDS APPOINTED BY THE COUNTY COMMISSIONERS. THE CITIES OF OLATHE, LEAWOOD, LENEXA, SHAWNEE AND MERRIAM HAVE CONTROL OF AND RESPONSIBILITY FOR FIRE SERVICE IN THEIR COMMUNITIES. OVERLAND PARK DOES NOT. PASSAGE OF HB 2206 WILL PROVIDE US WITH AUTHORITY FOR FIRE SERVICE DELIVERY WITHIN OUR CORPORATE BOUNDARIES.

THE CITY OF OVERLAND PARK IS COMMITTED TO ENSURING ITS RESIDENTS ARE PROVIDED FIRE PROTECTION SERVICE IN THE MOST EFFECTIVE AND COST-EFFICIENT MANNER. THE CITY BELIEVES IT SHOULD HAVE THE AUTHORITY TO DETERMINE AND SECURE THE BEST METHOD FOR THE DELIVERY OF FIRE SERVICE WITHIN THE CORPORATE BOUNDARIES OF THE CITY. THE GOVERNING BODY FIRMLY BELIEVES THE CITY SHOULD BE RESPONSIBLE FOR PROVISION OF FIRE SERVICE.

1. ELECTED CITY OFFICIALS ACCOUNTABLE FULLY TO OVERLAND PARK CITIZENS INSTEAD OF APPOINTED AUTONOMOUS BOARDS WOULD BE RESPONSIBLE FOR FIRE SERVICE.

2. THE PUBLIC WOULD MORE EASILY IDENTIFY WITH THE GOVERNING AUTHORITY REGARDING THE PROVISION OF FIRE SERVICE AND, AS SUCH, PUBLIC ACCOUNTABILITY WOULD BE HEIGHTENED.

IT IS MY UNDERSTANDING THE BOARD OF JOHNSON COUNTY COMMISSIONERS HAVE TAKEN NO POSITION ON THIS BILL.

WE HAVE THE SUPPORT OF THE OVERLAND PARK VOLUNTEER FIRE DEPARTMENT, A NONPROFIT ENTITY PROVIDING FIRE SERVICE PROTECTION WITHIN OUR CITY THROUGH CONTRACT WITH THE OVERLAND PARK FIRE DISTRICT NO. 1 GOVERNING BOARD.

THE CITY INTENDS TO FOSTER MAXIMUM COOPERATION WITH ALL FIRE-SERVICE-PROVIDING AGENCIES IN THE COUNTY.

PASSAGE OF THIS BILL, I BELIEVE, WOULD BE IN THE BEST INTEREST OF THE CITIZENS OF OVERLAND PARK; AND WE URGE YOUR FAVORABLE CONSIDERATION.

THANK YOU.

SESSION OF 1985

(ATTACHMENT XIV)
2/25/85

SUPPLEMENTAL NOTE ON SENATE BILL NO. 12

**As Recommended by Senate Committee on
Local Government**

Brief of Bill*

S.B. 12 amends K.S.A. 10-307 regarding bonded debt limits of counties. The bill makes a clarifying amendment to insure that general obligation bonds issued for county hospital purposes shall not be included as part of county bonded debt limits.

Background

The bill was recommended by the 1984 interim Special Committee on Local Government as a cleanup measure. County hospital laws were recodified in 1984 and placed in a new article 46 of Chapter 19 instead of the previous article 18. The above statute needs a clarifying amendment which was inadvertently missed as part of the recodification.

* Bill briefs are prepared by the Legislative Research Department and do not express legislative intent.

2/25/85

MEMORANDUM

TO: Members of the House Local Government Committee, Ivan Sand,
Chairman

FROM: Tom Bell, Kansas Hospital Association Legislative Liaison

RE: Senate Bill 12

DATE: February 25, 1985

The Kansas Hospital Association wishes to express its support for Senate Bill 12. This bill is a cleanup measure resulting from a technical oversight during last year's session.

County hospital laws were recodified in 1984 and placed in a new Article 46 of Chapter 19 instead of the previous Article 18. K.S.A. 10-307, which exempts general obligation bonds for county hospital purposes from the county bond and debt limit, was inadvertently not amended to reflect this change. Senate Bill 12 merely makes this needed amendment.

The interim Special Committee on Local Government recognized the problem and recommended Senate Bill 12 as a cleanup measure. Although it truly is a technical amendment, Senate Bill 12 is necessary to county hospitals across the state to insure that they are operating within the law. The Kansas Hospital Association therefore urges favorable consideration of this bill.

Thank you for the opportunity to comment regarding this legislation.