

Approved February 1, 1989  
Date

MINUTES OF THE SENATE COMMITTEE ON LOCAL GOVERNMENT

The meeting was called to order by Sen. Don Montgomery at  
Chairperson

9:00 a.m./~~p.m.~~ on January 31, 1989 in room 531-N of the Capitol.

All members were present except:

Senators Gaines and Steineger - Excused

Committee staff present:

Mike Heim, Legislative Research  
Emalene Correll, Legislative Research  
Theresa Kiernan, Revisor of Statutes  
Shirley Higgins, Committee Secretary

Conferees appearing before the committee:

Dennis Schwartz, State Watershed Association  
Paul Klotz, Association of Community Mental Health Centers of Kansas  
Cecil Eyestone, Kansas Alliance for the Mentally Ill  
Al Nemec, State Department of Social and Rehabilitation Services

The meeting began with the request for the introduction of a bill by Dennis Schwartz, State Watershed Association. (See Attachment I). The bill is intended to deal with situations in newly formed districts which have problems with easements which may not be recorded or recorded incorrectly, and a subsequent owner tries to recover damages. Also, in rural or unpopulated areas, easements are taken in blanket forms, and a subsequent landowner attempts to have the easement declared invalid because of a slight deviation found. This bill would prevent future problems in these situations.

Sen. Ehrlich made a motion to introduce the bill and refer it back to committee, Sen. Daniels seconded, and the motion carried.

Attention was turned to SB 17 concerning zoning for group homes for mentally ill persons. Paul Klotz, Association of Community Mental Health Centers of Kansas, testified first in support of the bill. (See Attachment II). He added that the fear of the mentally ill is always present, but there is no more of a problem with those that would be in the group homes than there is in the population at large. Furthermore, at this time mentally ill people are already living in the community in the home of parents or relatives because they have no other alternative. Mr. Klotz also stated that their studies show that property values do not decline where group homes are located. He also wanted to make it clear that there is a clear distinction between a half-way house and a group home for the mentally ill.

The Chairman asked if it would be certified that those mentally ill persons living in group homes are not dangerous to themselves or the community. Mr. Klotz answered that there is no way to predict this for anyone, however, these people are carefully evaluated. A lot of these people are now homeless and indigent, and this would give them a home.

Sen. Ehrlich asked for a definition of the difference between the mentally ill and the retarded. Mr. Klotz explained that retardation is congenital whereas mentally ill is a condition of living that could affect anyone during his life. Sen. Ehrlich asked further if the bill is using the same category for mentally ill as retarded, and Mr. Klotz agreed, adding that some have both problems.

Sen. Petty asked if those released to group homes would have a history of violence and if there would be ongoing supervision. Mr. Klotz said every attempt is made to not release anyone who is dangerous, and there is active, continuing treatment or supervision in the homes if needed. He noted too that some mentally ill persons function very well with no indication they are

CONTINUATION SHEET

MINUTES OF THE SENATE COMMITTEE ON LOCAL GOVERNMENT

room 531-N, Statehouse, at 9:00 a.m. ~~p.m.~~ on January 31, 1989.

mentally ill. Sen. Petty asked further what the value is of locating the group homes in a family residence area. Mr. Klotz answered that it is beneficial to locate these persons in a "normal" community to help them in attitudes about themselves.

Staff asked if any attempt was made to define "mentally ill" for this law. Mr. Klotz said there was no such attempt. Staff continued that the involuntary commitment law would involve group homes, thus, these individuals may be ones not released from SRS. Mr. Klotz agreed but noted that this bill adds more structure to an already highly structured law. He reiterated that mental illness is not a certain group of people but includes all of us.

Cecil Eyestone, Kansas Alliance for the Mentally Ill, followed with further testimony in support of SB 17. (See Attachment III).

The Chairman called the committee's attention to a letter from Janet Blanchat, an emotionally disabled person, in support of SB 17. (See Attachment IV).

Al Nemec, State Department of Social and Rehabilitation Services, gave final testimony in support of the bill. (See Attachment V). Sen. Langworthy asked if the state currently owns any group homes or anticipates owning any. Mr. Nemec answered that the state does not and would not own the group homes, but it will provide funding assistance. The majority will be privately owned, not by counties as most counties work with established community health centers. Sen. Langworthy asked who monitors the people in charge if these group homes. Mr. Nemec said monitoring would have to come from SRS where there is authority to establish regulations for group home licensing. Currently, there are minimum requirements for adult group homes, and they have to rely on providers of service to determine individuals who can enter these homes. Sen. Langworthy asked further if there will be an attempt to move mentally ill persons out of state institutions into group homes to ease overcrowding in the institutions. Mr. Nemec assured the committee that this would not be the case, however, there will be an overall attempt to increase discharges and better screen who is admitted into state institutions.

Sen. Ehrlich had questions as to the cost saving factor in SB 17. Mr. Nemec said it is unknown at this time if the state can still access federal funds. The group home operation will be in the neighborhood of \$56 to \$75 per day.

Sen. Petty asked if all types of referrals to group homes would be monitored by SRS. Mr. Nemec said they would because even those authorized by community health centers would be monitored as SRS monitors these centers and reviews any problems that might arise. Sen. Petty asked further what the public safety criteria of SRS is in determining if a person would function best in a group home. Mr. Nemec said there is not much in the statutes that would pertain to this. It is not defined specifically who can be served in a mental health center.

Sen. Ehrlich asked what the cost in nursing homes dealing with mentally retarded would be as opposed to the cost in group homes. Mr. Nemec replied that pure nursing homes would not be housing mentally retarded persons.

The Chairman called the committee's attention to written testimony by Chip Wheelen of the Kansas Psychiatric Society in support of SB 17 which had been previously passed out. (See Attachment VI).

The minutes of January 26 were approved.

The meeting was adjourned.



SENATE BILL NO. \_\_\_\_\_

An Act relating to Rural Water Districts -  
Easements - Limitations of Actions.

Be it enacted by the Legislature of the State of  
Kansas:

Section 1. Easements. No action or suit may be brought against a Rural Water District established under the laws of this State, or against any agent, servant of employee thereof by reason of the maintenance of a water line on any real property after the expiration of a period of two years of continuous maintenance of such water lines.

Section 2. Effective date. This Act shall take effect and be in force from and after its publication in the statute book.

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Senate Local Gov't

Attachment I



## Association of Community

### Mental Health Centers of Kansas

835 S.W. Topeka Ave., Suite B/Topeka, Kansas 66612/913 234-4773

*Paul M. Klotz, Executive Director*

#### POSITION STATEMENT ON S.B. 17 JANUARY, 1989

This Association supports the legislative policy expressed in current law and Senate Bill 17. Mental Health Centers are increasingly asked to provide services in the community that heretofore have been provided at a state institutional level. This means that community living space will need to be found for Kansans suffering from mental illness. Many of these citizens are already successfully living in the community on an individual or group basis. We agree with passage of existing law relative to group homes and zoning. We support passage of S.B. 17 in that it adds a population in need of similar attention and treatment.

Thank you!

CONTACT: Paul M. Klotz  
Executive Director

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Attachment II

Kermit George  
President

John Randolph  
President Elect

Steve Solomon  
Vice President

Dwight Young  
Past President

Jim Sunderland  
Treasurer

Eunice Ruttinger  
Secretary

Pam Bachman  
Bd. Memb. at Large

# Kansas AMI

Kansas Alliance For The Mentally Ill

Hearing on Senate Bill No. 17

Senate Committee: Local Government

Chairperson: Don Montgomery

Speaker: Cecil Eyestone, Manhattan, KS., president of the Kansas Alliance For The Mentally Ill.

The Kansas Alliance For The Mentally Ill highly favor this legislation concerning zoning, relating to group homes for mentally ill persons.

We felt that the legislation passed last year, discriminated against these citizens of our community and are pleased steps are being taken to right this situation.

As it stands now in our communities, those suffering with a mental illness, when released from a state hospital or referred to a mental health center for care have almost no options as to where they can live. If their family cannot take them in, where do they go? To the streets?

The National Institute of Mental Health estimates that one percent of the population is long-term mentally ill. With the Kansas population of 2.4 million, this would mean there are 24,000 people with long-term mental illness in Kansas.

We have a 35 year old son with a mental illness, who was released in August of 1987 from the Topeka State Hospital to return to his community. Unable to hold a job, let alone secure one; no income or savings, where would he have lived or existed if we hadn't taken him into our home? Our society still has the belief that all persons with a mental illness are crazy and are best confined in an institution.

Studies indicate those mentally ill and receiving medication and care, are no more dangerous than our next door neighbors. We feel that mentally ill persons, most whom are suffering from a brain disease should be treated fairly, as we do other ill persons. Why shouldn't they be allowed proper housing in our communities? We treat animals more humanly!

We thank you for this opportunity to share our feelings with you.

Senator Don Montgomery  
Kansas Statehouse  
Room 503-N  
Topeka Kansas 66612

Janet Blanchat  
412 Alma  
St. Marys Kansas 66536

Dear Senator Montgomery

My name is Janet Blanchat. I am emotionally disabled and I understand your committee, Local Government, is holding hearings on **Senate Bill 17**, a bill that would allow group homes for the emotionally disabled in residential areas.

I regret that I will be unable to testify at this hearing, but I would like to give you a viewpoint of what it's like to be emotionally disabled from a person that has had the experience of being one.

When I was 12, I was diagnosed as having schizophrenia and spent five years in a state mental hospital, then I was discharged and went home and was able to finish high school in 83. I got along quite well considering things.

The same year I went down for some tests to see what my capabilities were and I was told I could not work. Also, I had a lack of motivation, didn't want to do anything. That same year, I got into a day treatment program for my disability. That was the low part of my life. I could not work, go to school, not even drive a car.

Slowly, but surely, I made my way back. In 1984, I got my first volunteer job and that soon led to other things. I was able to stick with volunteer job for almost three years.

Now, with the support of my day treatment program, I do volunteer work twice a week and I get good reports from my bosses. I go to night school, which I started in 87, and just recently, I got my driver's license.

I have done all this despite the fact that my disability still affects me. I still lack self confidence, self esteem, decision making, and some social skills. Sometimes my thinking gets screwed up and I get real emotional, like cry or yell too much when I get upset, and I act inappropriately sometimes, but I have never acted violently toward anyone. I have never been considered "crazy" in the years I've had my disability.

I've offered this point of view because the one point of view that some people think is that emotionally disabled people are "crazy". But this is not true. Many emotionally disabled people go

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Attachment III

on to lead normal lives. We emotionally disabled can be like "normal" people if given a chance to learn from other non-emotionally disabled and that's why I ask your support for Senate Bill 17.

Thank you very much for reading my point of view and I ask you to think about this as you vote on this bill.

Sincerely

*Janet Blanchat*

Janet Blanchat


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Senate LG

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STATE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES  
Statement Regarding Senate Bill 17

1. Title - This bill amends K.S.A. 1988 Suppl. 12-736 by expanding the ban on zoning exclusion to include the mentally ill. K.S.A. 1988 Suppl. 12-736 currently covers homes for physically handicapped, mentally retarded, and other developmentally disabled persons in single family residential areas, notwithstanding local zoning ordinances to the contrary.
2. Purpose - Many disabled persons including the mentally ill are physically segregated from community living arrangements because of local legal barriers which prevent their movement into normal residential areas. Regardless of a growing awareness among health professionals that disabled persons should be provided normal living surroundings to the greatest possible extent, local government officials and residents are not always convinced. There continues to be a shortage of community residential beds for these disabled individuals who need assistance with community living but not hospitalization. The needed residential settings must be available in reasonably close proximity to treatment/ training sites.
3. Background - This Bill will ensure the right of mentally ill and other disabled persons to live in residential communities throughout Kansas because zoning would be uniformly applied by all cities. With this legislation, county and municipal zoning ordinances, and administrative interpretation thereof, would not deny disabled persons their right to benefit from normal residential life in group homes. Limitations on the number of group homes in a given area are made to avoid any claims of excessive concentration.
4. Effect of Passage - Passage of this Bill would ensure that mentally ill, mentally retarded and other disabled individuals have the same right to live in single family areas as others.
5. SRS Recommendations - The Department of Social and Rehabilitation Services supports this Bill and feels that its provisions should be made available to persons who are mentally ill, developmentally disabled, physically handicapped, or mentally retarded.

  
Winston Barton, Secretary  
Social and Rehabilitation  
Services  
(913) 296-3274  
January 31, 1989

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Attachment V



# Kansas Psychiatric Society

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January 31, 1989

TO: Senate Local Government Committee

FROM: Kansas Psychiatric Society *Chip Wheelen*

SUBJECT: Senate Bill 17, As Introduced

Thank you for the opportunity to express our endorsement of SB17. The Kansas Psychiatric Society concurs with the conclusion of the 1988 interim committee which studied the subject of mental health services. It is extremely important that state and local officials adopt policies which encourage the re-integration of mentally ill persons into their home communities.

Members of the psychiatric profession are generally opposed to any governmental policies which discriminate against victims of mental illness. Such policies are usually the product of fears that mentally ill persons may somehow be dangerous to others. Such fears are unfounded and reflect the public's lack of knowledge about the nature and affects of mental illness.

Advances in scientific knowledge have produced modalities of therapy that make it possible to treat even the most debilitating forms of mental illness. Proper diagnosis and treatment can result in a stabilized patient who may return to a productive lifestyle. A conducive environment can be an essential element of the patient's program of therapy.

For these reasons, we urge you to recommend SB17 for passage.

CW:lg

*1-31-89*

*Senate Local Gov't*

*Attachment VI*