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## OLR Bill Analysis

### sHB 5517

#### ***AN ACT CONCERNING THE DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES' RECOMMENDATIONS REGARDING RECOVERY-FRIENDLY LANGUAGE AND VARIOUS REVISIONS TO MENTAL HEALTH AND ADDICTION STATUTES.***

#### **SUMMARY**

This bill changes terminology in various mental health and addiction-related statutes to language that is intended to be person-centered, and recovery-friendly. It primarily does so by replacing the terms (1) "substance abuse" with "substance use," (2) "opiate or opioid addiction" with "opioid use disorder," (3) "detoxification" with "withdrawal management," and (4) "substance abuse counselor" with "alcohol and drug counselor."

Additionally, the bill:

1. requires the Department of Emergency Services and Public Protection (DESPP) to coordinate with the Department of Mental Health and Addiction Services (DMHAS), in addition to the Department of Public Health (DPH) as under current law, when deploying behavioral health professionals after mass shootings (§ 111);
2. updates the membership requirements of certain DMHAS advisory boards to reflect current practice (§§ 112-114); and
3. repeals a statutory provision establishing catchment area councils (community councils that help plan mental health services in a geographic area) and makes related technical changes, removing statutory references to these councils (in practice, their functions are now performed by Regional Behavioral Health Action Organizations) (§§ 115-132)).

EFFECTIVE DATE: October 1, 2026, except the provisions on (1)

deploying behavioral health professionals after mass shootings and (2) advisory boards for DMHAS-operated facilities take effect upon passage.

### **§ 111 — DEPLOYING BEHAVIORAL HEALTH PROFESSIONALS AFTER MASS SHOOTINGS**

The bill requires the DESPP commissioner to coordinate with the DMHAS commissioner, in addition to the DPH commissioner as under current law, when deploying grief counselors and mental health professionals to provide mental health services to mass shooting victims' family members and other people with a close association to them.

By law, these deployments must be made to (1) local community outreach groups in and around the impacted geographic location and (2) any school or higher education institution where a mass shooting victim or perpetrator was enrolled.

### **§§ 112-114 — DMHAS ADVISORY BOARDS**

#### ***Advisory Boards for State-Operated Facilities***

Existing law requires all hospitals and facilities DMHAS operates (partially or wholly) that treat people with psychiatric disabilities or substance use disorders (or both) to have an advisory board that includes members with lived experience of behavioral health disorders (see BACKGROUND). The bill exempts from this requirement the Connecticut Valley Hospital advisory council and Whiting Forensic Hospital oversight board.

By law, facilities must have their superintendent or director make advisory board member appointments, at least two of whom must have lived experience with behavioral health disorders. The bill eliminates current law's requirement that the superintendent or director appoint additional board members when the current membership is less than the number of members they designated and to fill vacancies.

It also eliminates the requirement under current law that (1) appointed members' terms be staggered so that an approximately equal

number of member terms expire in odd-numbered years, (2) members serve no more than two successive terms in addition to any unexpired term they were appointed to fill, and (3) at least one-third of members each represent regional behavioral health action organizations and catchment area councils, which the bill repeals.

The bill also makes related minor and technical changes.

## **BACKGROUND**

### ***DMHAS-Operated Facilities and Advisory Boards***

By law, DMHAS-operated facilities generally include the Capitol Region Mental Health Center, the Connecticut Valley Hospital (including its Addictions and General Psychiatric divisions), the Whiting Forensic Hospital, the Connecticut Mental Health Center, the Franklin S. DuBois Center, the Greater Bridgeport Community Mental Health Center, and River Valley Services (CGS § 17a-458).

A DMHAS-operated facility's advisory board must (1) periodically meet with the facility superintendent or director to advise on the facility's programs and policies, (2) act as a liaison between the facility and residents of its assigned geographic area, and (3) issue reports to the governor and DMHAS commissioner on facility conditions and make recommendations for changes or improvements (CGS § 17a-471).

## **COMMITTEE ACTION**

Public Health Committee

Joint Favorable Substitute

Yea 21    Nay 11    (03/23/2026)