

Kozikowski, Marek

From: Destiny Miller <destinymiller1515@yahoo.com>
Sent: Saturday, September 19, 2020 4:27 PM
To: Kozikowski, Marek
Subject: 400 Washington st

This email was sent by someone outside of the City of Middletown.

Hi, I am writing this email to inform you that the people who live in this building (Birchwood) are not happy about the methadone clinic being neighbored to us. If this is going to result in negative impact why are we putting it here? It concerns me that no one in this town cares about who this will be affecting. There are children in this building that do not need to see or be around any of this! My lease is up in February and I will relocate to another town! This is a disgrace this town needs to do better. This is my first year living in Middletown and I'll be sure to NOT recommend anyone moving here.

Destiny Miller

Kozikowski, Marek

From: Lori Davis <loreen417@yahoo.com>
Sent: Sunday, September 20, 2020 6:33 PM
To: Kozikowski, Marek
Subject: Questions & Comments for 9/23 P & Z Public Hearing mtg
Attachments: Methadone Questions.odt; Methadone Clinic Comments II.odt

This email was sent by someone outside of the City of Middletown.

Dear Mr. Kozikowski,

Please find attached 2 separate documents: 3 questions for the Commission and additional comments re: proposed methadone clinic.

I'm assuming that the public will have the opportunity to comment again? My comments, however, are a bit longer than 5 minutes. Not sure how that will work.

By the way, I want to say how impressed I was with how well the last virtual meeting was conducted. I think everyone that wanted to speak had a chance to have their voices heard. Very well organized. Great job!

I am a new resident (3 mos.) to Middletown and I've never participated in something like this before.

Hoping for a good outcome.

Thanks for what you do.

Best regards,
Lori Davis

MIDDLETOWN PLANNING & ZONING COMMISSION

Extended Public Hearing 9/23/20

SUBJECT: Proposed Methadone clinic, 392 Washington St., Mdltn.

Submitted by:

Lori Davis

23 Butternut St., Mdltn.

QUESTIONS

1. Dr. Zuckerman stated in his presentation on 9/9 that he anticipated that more people would seek treatment if this location was approved. I personally called 3 of the Root Center locations: New Britain, Manchester & Norwich – and was told by employees who answered, that there is a client base of about 500 ea. in two of the locations and 700 in the other. On the Torrington location's website, it states that they service 500 patients A DAY. That being said, what does Dr. Zuckerman anticipate as a client base in Middletown?

1b. What is the projected maximum capacity at one time of the interior of the proposed building?

2. In the Application in the section "Zoning Regulation Amendments", it was stated that on April 22, 2020, the Commission unanimously voted to approve PCD "staff-sponsored" amendments to the Codes, which specifically removed methadone clinics from the list of prohibited uses in this "SMH floating zone". Which, in effect, opened the door for a methadone clinic to be considered by special exception.

Then, 3 months later, on 8/6/20, suddenly there was an application for a methadone clinic in this SMH floating zone. My question is: what was the motivation and the purpose behind a *staff sponsored* change to these codes? What generates or triggers a staff-sponsored request to change the Codes?

3. The Root Center already has a location in Middletown at the Saybrook Rd Medical building complex. There is much more parking available there and it is easily accessible via public transportation. Why wouldn't you just expand that location and put the methadone clinic there? What is the compulsion to open a dispensary in the middle of a mixed college campus/residential/business area in the heart of the city limits on an over-used roadway?

Lori Davis
23 Butternut St., Mdltn.

Sept. 18, 2020

ADDITIONAL COMMENTS

re: Proposed methadone clinic at 392 Washington St.

I would like to expand on some of the comments I made at the 9/9/20 Public Hearing.

INCREASED CRIME

Several people (myself included), cited statistics from a 2011 Baltimore study which basically concluded that although the incidence of crime was not as elevated as crime around liquor stores, convenience stores and gas stations – there WAS still crime nonetheless.

And we also heard comments at the Public Hearing on the 9th from a gentleman in law enforcement who shared his experiences and observations, which corroborated the fears and concerns expressed by others of increased crime in the area around a methadone clinic.

I would like to share some excerpts from an article published in the Middletown Press in May, 2017 entitled, ***“Methadone Clinics are needed but they belong in a medical Facility, not residential neighborhoods”***

The author calls attention to methadone clinics that are popping up in residential neighborhoods across CT – and why they are met with resistance from residents. In this instance, in the Hill neighborhood of New Haven.

Quote: “Police are being bombarded with calls from residents who are concerned there are too many people hanging around 495 Congress Ave., where a treatment center for substance abuse is run by the APT Foundation.”

“According to police, they have received numerous reports of people urinating in the area, performing sexual acts, or doing drugs on neighboring streets and on private property.”

“Asst. Police Chief Achilles Generoso said complaints are constant and the problem is so acute that *“it's madness sometimes out there.”* It is estimated that more than 500 people **every day** travel to the Elm City from other municipalities for methadone treatment on Congress Ave. That has *“unfortunate collateral*

damage” for the city, Generoso said.

The president and CEO of the APT Foundation stated in the article that a new center was set to open that Summer in West Haven and that, quote: “she estimated several hundred people will be diverted from the Congress Ave. location to that one.”

“But the people of W. Haven have also been very vocal that they, too, don't want a methadone clinic in their neighborhood. It's the same in Torrington, where they don't want the one that was approved there either.”

The article further goes on to state that the National Institute on Drug Abuse classifies drug addiction as a mental illness and notes it should be treated like a disease. Which is why a better solution for methadone clinics is to relocate them into hospitals and clinics where addicts can receive treatment just like people are treated for other forms of medical illness.

Again from the article: *quote*: “In a hospital or clinic setting, they could walk amongst people being treated for a variety of illnesses and not be singled out – as is the case at CT Valley Hospital in Middletown.” *End quote*

TRAFFIC CONCERNS

The other area I'd like to comment on is the negative traffic implications with the proposed location. Specifically, I would like to address the Traffic Impact Study presented by the Traffic Engineer from Fuss & O'Neill. (I apologize – I don't remember his name.)

The results presented were completely inaccurate and irrelevant. He stated that he based his findings (and it is listed in the Application materials) on statistics from the CT DOT Jan. 2016 Automatic Traffic Recorder Counts. What he failed to factor in, is that in the last year and half, there have been 6 new businesses that have opened on Washington St. less than a half mile from the proposed clinic location. Further, by his own admission, he stated that the latest traffic counts were low due to Covid. Per the DOT: traffic right now is still 20% lower compared to a year ago.

So if you factor in traffic generated by the new businesses and traffic counts resuming normal levels post-Covid, by the time the clinic opens, traffic volume

will be even more excessive. He also used the "*Clinic*" model to ascertain typical client volume. Does that model take into account client bases of 500-700 clients? I think not.

SIDE NOTE: In my comments on 9/9, I cited client bases of 500-700 in the Root Center's locations in New Britain, Norwich & Manchester. I also saw on the Torrington location's website that they serve "500 clients *A DAY.*" **A DAY!!!**

I also question the final #'s of anticipated traffic per day. The study states that they are projecting *A TOTAL* of 76 vehicles entering & exiting during **peak hours** of 5:30 a.m. to 9:30 a.m. The entering total was stated as 40 and the exiting total as 36 per day. Does this include staff?

Also, Dr. Zuckerman stated in his comments on 9/9 that more people will seek treatment in Middletown if there was a methadone clinic here. Based on the client numbers in their other locations, it seems very likely that this location would grow to similar #'s. Which would be unsustainable. This study assumes a total of only 40 entering during peak hours? This # is totally unrealistic based on current client #'s in other locations.

These #'s also do not take into account Group Therapy hours from 10:30-1:30 and 5:30-8:30, 5 days a week.

So I would respectfully request that the Commission not accept the findings of this traffic impact study, as it is completely inaccurate, and does not reflect the true impact on an already over-used roadway.

LOCATION LOGISTICS

Finally, I would like to again question the reasoning for a methadone clinic **in this location.**

It would seem that this function would make more sense located on a medical or health-related campus. As noted by some at the first Public Hearing, there are empty buildings at CVH. CVH was also referenced in the article I quoted at the beginning of my comments, as a more appropriate setting for a methadone clinic. Most notably, it implied that it would provide some anonymity for the patient seeking treatment for addiction. It would allow patients to not feel "singled out"

and could receive treatment *“just like other people are treated for other medical illness.”*

In fact, in yet another article in the Middletown Press just this past Friday, Sept. 18th, celebrating the grand opening of The Root Center’s Saybrook Rd location, Dr. Zuckerman himself stated, *“Privacy is important to those seeking treatment for opiod addiction.”* Citing that the Saybrook Rd. location being next to other medical offices *“is much different than a solo site where everyone absolutely knows why you’re walking in there.”*

Further, he stated, *“The No. 1 reason why people aren’t getting addiction treatment has nothing to do with the access. It has to do with stigma. People are afraid to be known for this addiction issue. They wouldn’t be afraid to be known for cancer or diabetes, but addiction – yes.”*

So based on these statements, locating a methadone clinic at the proposed location on Washington St. totally contradicts his stated position. This location absolutely epitomizes Dr. Zuckerman’s description of “a solo site where everyone absolutely knows why you’re walking in there.” I don’t think you could find a more public site other than maybe Main St. Middletown. And the statement that people aren’t seeking addiction treatment due to lack of sufficient access, but rather, the stigma - nullifies the argument that the Washington St. location is necessary due to it’s easy access.

It would seem more reasonable to consider either a Saybrook Rd. or a CVH location: both are part of a medical campus, plenty of parking, with good public access.

So if the Commission takes into account the considerable volume of opposition from their constituents around concerns of: increased crime, negative traffic impact issues, maximum capacity questions and the appropriateness of a solo location vs. a location at a medical setting, the only logical conclusion should be that the Washington St. location is completely inappropriate and unreasonable.

However - Please, please know that *no one* is against the need for a methadone dispensary in Middletown. But 392 Washington St. is not the right location.

Thank you very much for taking the time to read this.