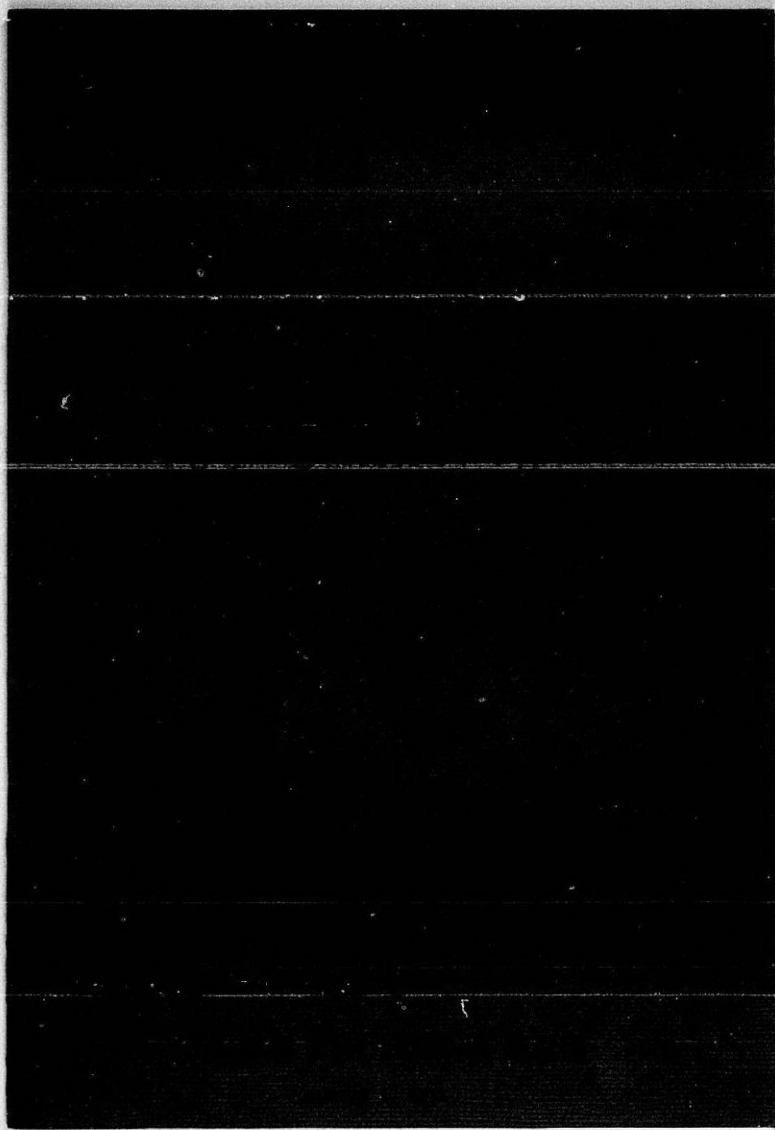


DR 72-5 - Possible Amendment to zoning ordinance re rehabilitative facilities, Monica House, etc. & possible BZA exception

3
M A P C 8-24-72 Authorize to Advocate

M A P C Approve to Advocate 10/2/72

B C C Approved as recommended 11/14/72



KANSAS STATE BOARD OF HEALTH
REGULATIONS
for
GROUP BOARDING HOMES FOR CHILDREN
Effective January 1, 1972

Prepared by

The Division of Maternal and Child Health
of
The Kansas State Department of Health

in cooperation with

The Division of Child Welfare Services
of
The State Department of Social Welfare

REGULATIONS FOR GROUP BOARDING HOMES
FOR CHILDREN IN KANSAS

28-4-135 DEFINITIONS

1. Group Boarding Home for Children

A. A Group Boarding Home is a residential facility in which from five to ten children (unattended by parent or guardian) are cared for 24 hours a day. (Authorized by KSA 65-503, 65-508)

B. A Group Boarding Home shall include three types:

1. Young people from 12 to 16 years of age.
2. Specialized care for children with multiple handicaps.
3. Emergency shelter care for children. (Authorized by KSA 65-504, 65-508)

2. License

A license to operate a groupboarding home for children is issued by the Division of Maternal and Child Health, Kansas State Department of Health under the authority given to it in KSA 65-501 through 65-515 with approval of the Division of Child Welfare Services, Kansas State Department of Social Welfare and the State Fire Marshal.

A. Full License - Full licenses will be granted for a term of one year, when the facility meets all licensing requirements. (Authorized by KSA 65-504)

B. Provisional License - Provisional licenses may be issued to all facilities complying with the statutes but not complying with departmental regulations for a full license. This license is issued at the discretion of the Division of Maternal and Child Health, Kansas State Department of Health, pending satisfactory compliance. Provisional licenses shall be granted for a period of six months, after receipt of one half the statutory fee; shall not be renewed until the applicant has submitted a detailed statement of improvements effected or efforts at improvement made during the preced-

ing six months; and shall
(Authorized by KSA 65-

3. Placing Agent

Placing agency is the person possessing the legal rights to
65-503, 65-508)

28-4-136 LICENSING

1. No child shall be placed in a group boarding home by a placing agent unless said agent has a license issued by the Kansas State Department of Health. (Authorized by KSA 65-

2. No organization shall operate a group boarding home unless licensed to do so by the Kansas State Department of Health. (Authorized by KSA 65-

3. Any organization desiring to operate a group boarding home shall apply for a license to do so on the application forms. (Aut

4. Representatives from the Kansas State Department of Social Welfare and the State Fire Marshal; shall visit the group boarding home for purposes of licensing and inspection of its operation. (A

5. Upon receiving notification that a license application has been approved and preliminary approval has been granted, the applicant shall forward to the Kansas State Department of Health the license fee, the amount of which shall be as follows:
A. A full license for a group boarding home for children shall be \$100. (Authorized by KSA

B. A provisional license for a group boarding home for children shall be \$50. (Authorized by KSA 65-506, 65-512)

ing six months; and shall not be renewed more than once.
(Authorized by KSA 65-503, 65-508)

3. Placing Agent

Placing agency is the person, social agency, or court possessing the legal rights to place a child. (Authorized by KSA 65-503, 65-508)

28-4-136 LICENSING PROCEDURES

1. No child shall be placed in a group boarding home by any placing agent unless said boarding home is in possession of a license issued by the Kansas State Department of Health. (Authorized by KSA 65-501, 65-503, 65-504, 65-506)
2. No organization shall conduct a group boarding home unless licensed to do so by the Kansas State Department of Health. (Authorized by KSA 65-503, 65-504)
3. Any organization desiring to conduct a group boarding home shall apply for a license to do so on State Department of Health application forms. (Authorized by KSA 65-503, 65-504)
4. Representatives from the Kansas State Department of Health, State Department of Social Welfare, and of the State Fire Marshal; shall visit the group boarding home to make evaluations for purposes of licensing and providing on-going supervision of its operation. (Authorized by KSA 65-504, 65-512)
5. Upon receiving notification that the application for license has been approved and prior to receiving the license, the applicant shall forward to the State Department of Health the license fee, the amount of which shall be as follows:
 - A. A full license for a period of one year----- \$5.00
(Authorized by KSA 65-505)
 - B. A provisional license for a period of six months -- \$2.50
(Authorized by KSA 65-501, 65-503, 65-504, 65-505, 65-506, 65-512)

6. Terms of License

- A. A group boarding home license may be issued to a facility that has the physical capacity, and plans to care for no less than five (5) but no more than ten (10) unrelated children.
- B. The number of children permitted in the care of a group boarding home shall be reduced by the number of a family's own children residing in the home, unless separate space is provided for the house parents and their children. (See 28-4-139, G)
- C. A group boarding home shall not be licensed for the care of children under twelve (12) years of age except for specialized care.
- D. The number and age range of children which may be cared for in a group boarding home shall be specified in each license.
- E. A group boarding home for children shall not accept adults for care. (Authorized by KSA 65-510)
- F. No activities for compensation, other than the group boarding care for children, shall be carried out in the home by the house parents or supervising agents.
- G. Any license issued for a group boarding home shall be valid only for the address for which the license is issued. New applications are required for each change of address.
- H. The administrative organization or agency shall inform the licensing authority when it desires the application be withdrawn or the license not be renewed. The State Department of Health shall notify the administrative organization or agency and other appropriate agencies that the home is considered closed and the license terminated.
- I. Should the application be denied by the Kansas State

Department
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Department of Health, the procedures under KSA 65-504, 65-506, 65-508, 65-510 shall be followed.

28-4-137 ORGANIZATION AND ADMINISTRATION

1. Organization

- A. The group boarding home or its parent body shall be incorporated in the State of Kansas as a non-profit corporation or be a corporation qualified in the State and shall operate in accordance with an established constitution and by-laws.
- B. A copy of the Articles of Incorporation and By-Laws shall be furnished to the Kansas State Department of Health. It shall include a non-discrimination statement.

2. Governing Board

- A. The corporation shall have a board of directors which is responsible for its policies, financing and general management.
- B. Members of the board shall be men and women who represent a variety of community interests so that they may interpret the services of the corporation to the community and the needs of the community to the corporation. The board members shall be chosen because of their interest in family and child welfare. Their number shall be large enough to be representative of the constituency and/or community supporting the corporation, yet small enough to avoid unwieldiness.
- C. Board members shall be elected or appointed for a definite term of office; provision shall be made for the rotation of membership. The Board shall meet monthly or as often as necessary to insure proper functioning of the corporation.
- D. A group boarding home shall have sound plans and policies of organization and administration clearly defining legal responsibility, administrative authority, and responsibility for health services.

legal requirements of the State and of the community as to zoning, fire protection, water supply and sewage disposal, and to local building codes or to recognized national building codes where no local code exists. (Authorized by KSA 65-508)

2. Location and Grounds

- A. Group homes serving children and youth shall be located near public school facilities and convenient transportation providing reasonable accessibility to churches, medical and dental services, recreational and cultural facilities.
- B. There shall be sufficient outside play space available for the children, determined by the number and ages of children and youth. (Authorized by KSA 65-508)

3. Indoor Areas

- A. A group home shall be a residential structure large enough to house 5 to 10 children or youth and the house parents, and shall provide space for substitute house parents.
- B. Living rooms and indoor play space shall have proper heating, lighting and ventilation. There shall be adequate space for recreation, study room, and food preparation and service. Minimum ceiling height shall be 8 feet.
- C. There shall be a telephone which is readily available at all times.
- D. Sleeping facilities for children in care shall be limited to first and second floors, and shall not be below ground level. Bedrooms shall provide no less than 700 cubic feet of space per child in single rooms, and an average of not less than 500 cubic feet of space per child in bedrooms accommodating more than one child. The minimum square footage of free floor space shall be 80 square feet per person in single rooms, and an average of not less than 60 square feet per person in rooms accommo-

dating more than one person. Minimum ceiling height shall be 7'8" over 90% of the room area. It is desirable to have an extra bedroom for guests of the children.

All sleeping rooms shall be outside rooms with operable windows, well-ventilated, adequately lighted, appropriately heated or cooled. No rooms bearing on dark courts or alleyways shall be permitted. No child shall be permitted to sleep in rooms designated for other purposes. Walls shall be appropriately and attractively decorated and washable.

A separate bed with level springs, good mattress, and adequate bedding shall be provided for each individual. Each child or youth shall have space for his individual clothes and possessions.

E. Toilet and bathing facilities shall be convenient to sleeping quarters, living and recreation rooms, with adequate facilities for boys and girls, and for house parents. There shall be an adequate supply of hot and cold water at all times, with sufficient safety controls.

1. For each five children or youth of each sex, there shall be at least one toilet, one lavatory and a bathtub or shower.
2. All bathrooms shall be ventilated. Inside bathrooms shall have a mechanical system to the outdoors with minimum of four air changes per hour.

F. The group home shall contain adequate central storage for household supplies, bedding linen, out-of-season clothing, luggage and play equipment. These facilities are in addition to individual closet and storage space in bedrooms for the children and house parents.

G. Living Quarters

1. Adequate living space shall be provided for house parents.
2. Provision shall be made for sleeping accommodations for substitute house parents.

H. Windows and doors shall be maintained in good repair unless areas are otherwise specified.

I. The laundry equipment shall be properly installed and equipped with appropriate protective safety devices.

J. Sewerage and water supply shall conform with codes established by the State. "Amendments and Additions to the Building Code of Kansas 28-4-50 for Water Supply and Sewerage" and "Consolidated Child Care Act of 1968."

K. The agency shall provide adequate parking facilities for child care motor vehicles. All motor vehicles shall be properly licensed and insured with public liability coverage. All motor vehicles shall have valid motor operator licenses.

L. Appropriate fire extinguishers shall be provided in accordance with the fire code as published and amended by KSA 66-28-4-140 FIRE SAFETY.

28-4-140 FIRE SAFETY

1. The building used for child care shall be structurally sound, in good repair, and maintained that a reasonable person would expect for all occupants. The building shall be available for use at all hours of every day of emergency.

2. There shall be at least one exit from the building. Exits shall be clearly marked and in event fire occurs shall not be so located that they are adjacent to a sleeping room or bathroom. Basements or stories shall be used to house parents.

- H. Windows and doors shall be screened in warm weather, unless areas are air conditioned.
- I. The laundry equipment shall be conveniently located and equipped with adequate modern equipment and protective safety devices.
- J. Sewerage and water supply shall conform to sanitation codes established by the state, county or city. (See "Amendments and Revisions in Board of Health Regulations 28-4-50 through 28-5-55. Minimum Standards for Water Supplies and Sewage Disposal Systems in Licensed Child Care Homes.")
- K. The agency shall provide adequate and safe transportation for children and youth, and house parents. All motor vehicles used for the transportation of agency clientele or employees, shall be adequately covered with public, liability insurance. Drivers shall have a valid motor operator's license.
- L. Appropriate physical facilities, equipment, and furnishings shall be provided when children with handicapping conditions are to live in the home. (Authorized by KSA 65-508)

28-4-140 FIRE SAFETY STANDARDS

1. The building used for a group boarding home shall be structurally sound, in good repair and so arranged and maintained that a reasonable degree of safety will be provided for all occupants. Adult supervision shall be present 24 hours of every day to assist in evacuation of home in case of emergency.
2. There shall be at least two exits provided for each floor of the building. Exits shall be located remote from each other in event fire renders one exit impassable. An exit shall not be so located that it would be necessary to pass through a sleeping room or a bathroom to reach emergency door. Basements or stories above the second floor, shall not be used to house parents and children.

3. Wall, partition and ceiling materials shall provide a fire resistive rating equivalent to gypsum wall board or plaster, except that not more than 20% of wall areas may be covered with paneling material with a class C rating, provided exitways shall not be so paneled. Carpeting shall be slow burning or flame resistant type with relatively dense weave and short pile. Long pile cotton or rayon types are not approved.
4. The electrical system shall be adequate for its intended use, properly fused, and installed in compliance with the National Electrical Code.
5. A central heating system shall be required. The system shall have a complete 100% flame failure safety control with main fuel valve shut off. Auxiliary heat shall not be used.
6. The building shall be kept free from accumulation of combustible trash and rubbish. Storage of flammable liquids or materials in a building is prohibited.
7. The home shall meet all state and local legal requirements pertaining to fire protection. Each building shall be equipped with approved fire extinguishers listed by Underwriters Laboratories. Every home shall have a clearly worked out plan in case of fire or other emergency requiring evacuation. This plan shall be written and posted on each floor. (Authorized by KSA 65-508)

28-4-141 FOOD SERVICE STANDARDS

1. The children shall be supplied with food in accordance with the current recommended dietary allowances for the child's age, physical condition, and physical activity.
2. Menus shall be planned a week ahead and shall consider school lunch menus. A copy of all menus, as served, shall be kept on file and available for inspection.
3. Consultation services of a nutritionist shall be obtained for menu planning, food service, and feeding problems. (Authorized by KSA 65-508)

4. Home canned food be served in a gro

28-4-142 QUALIFYING PERSON

1. The group boardin years of age or less ture and well-bala of wholesome adu over 21 shall be i
 2. Group boarding p ical health. The itual, and moral
 3. The group boardi and understandi accepted method
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 5. Staff members sha in order to imp practice.
 6. Health certifica cense can be iss
 7. The income of t or other resourc to maintain an c as far as essent KSA 65-508, 6
- 28-4-143 CARE
1. Each child shal ing the period

4. Home canned foods, other than jams and jellies, shall not be served in a group boarding home.

28-4-142 QUALIFICATIONS OF GROUP BOARDING HOME PERSONNEL

1. The groupboarding home parents shall not be more than 60 years of age or less than 21 years of age. They shall be mature and well-balanced individuals who can offer examples of wholesome adult relationships to the children. Someone over 21 shall be in the home at all times.
2. Group boarding parents shall be in good mental and physical health. They shall be able to offer intellectual, spiritual, and moral guidance to a child.
3. The groupboarding home personnel shall possess knowledge and understanding of the needs of children, and practice accepted methods of child care.
4. A boarding home shall not receive a license when any member of the household has been convicted of a felony involving intentional bodily harm or has a history of sex deviation or commission of a sexual offense.
5. Staff members shall attend meetings, training sessions, etc., in order to improve their knowledge, understanding and practice.
6. Health certificates shall be renewed annually, before a license can be issued.
7. The income of the group boarding parents from employment or other resources shall be reasonably steady and sufficient to maintain an adequate standard of living for the family, as far as essential needs are concerned. (Authorized by KSA 65-508, 65-510)

28-4-143 CARE OF CHILDREN

1. Each child shall be treated as a member of the group during the period of his care, sharing privileges and duties of

the household according to his age and capacity, and receiving care and training according to his special abilities or limitations.

2. Corporal punishment shall be prohibited. No cruel or unusual forms of punishment shall be used; and the child shall be protected against all forms of neglect, exploitation, or degrading forms of discipline; and no child shall be confined in any dark space. The use of corporal punishment shall be considered adequate cause for revocation of license, or of closure of a home under study.
3. Each child shall be given educational, recreational, and cultural opportunities which will develop his abilities, his individual judgment, and his sense of moral and social responsibility.
4. Each child shall have proper adult supervision befitting his age at all times.
5. Vacation, after school, and other jobs shall only be arranged with the social worker's knowledge.

28-4-144 PLACEMENT AND REMOVAL OF CHILDREN

1. The placing agent, or other person responsible under the law for the care and custody of each child, shall make arrangements at the time of placement for the financial responsibility for services of the group boarding home and for necessary medical and dental care. (Authorized by KSA 65-508)
2. There shall be a written agreement between the placing agent and the group boarding home setting forth the terms of placement of children and their removal, and providing that the parent, guardian, or supervising agency shall retain the right to withdraw the child from the boarding home with or without the consent of the boarding parents.
3. No child from outside the state of Kansas shall be accepted for boarding care without prior approval of the State Department of Social Welfare. (Authorized by KSA 65-506, 65-507, 65-508)

28-4-145 HEALTH SERVICES

1. The responsible Board of Health shall range with a licensed physician for the children, and to the following requirements:
 - A. Health examination shall be obtained as soon as possible. The examination shall be obtained as provided by the Department of Health, Kansas State Department of Health.
 - B. Correction of defects shall be provided.
 - C. Prevention:
 - 1) Immunization against preventable diseases. The Department of Health, shall provide health department.
 - 2) Test for tuberculosis.
 - 3) Laboratory work.
 - D. Special examination for neurological conditions.
 - E. Written orders for treatment, including the use of drugs.
 - F. Arrangements for dental care.
2. The Board, Director of Health, or local dentist for dental care.
3. The admitting agent shall obtain the parent or guardian's consent for surgery, and shall obtain the parent or guardian's consent for registration.

28-4-145 HEALTH SERVICES

1. The responsible Board, Director, or houseparent shall arrange with a licensed physician to provide medical care of the children, and to develop written policies to meet the following requirements:
 - A. Health examination. An admission physical examination shall be obtained before admission if possible, or as soon as possible after admission. Annual examination shall be obtained. These shall be on the forms provided by the Division of Maternal and Child Health, Kansas State Department of Health.
 - B. Correction of defects.
 - C. Prevention:
 - 1) Immunizations as recommended by the Division of Preventable Diseases, Kansas State Department of Health, shall be given by the physician or local health department.
 - 2) Test for tuberculosis.
 - 3) Laboratory work as indicated.
 - D. Special examinations, such as for vision, hearing, and neurological conditions.
 - E. Written orders for routine care of minor illnesses, including the use of aspirin and laxatives, and first aid.
 - F. Arrangements for consultation when indicated.
2. The Board, Director, or houseparent shall arrange with a local dentist for dental examination and follow-up services.
3. The admitting agent shall obtain a written consent from the parent or guardian for medical and dental care, including surgery, and shall also obtain a written agreement from parent or guardian regarding payment for such services.

4. The child or adolescent who requires nursing care shall not be kept in the regular group boarding home.
5. Medicines, poisons, firearms, and other potentially dangerous substances and instruments, shall be kept locked. The medicine cabinet shall be located in the house parents' room. Internal and external medicines shall be kept in separate sections. All prescription medicines must have the name of the individual, the physician, show the dosage and time, and must be discarded or sent with the person if he is to continue to use them.
6. The community health nurse, who evaluates the home for licensing, shall be used as a consultant on health matters. (Authorized by KSA 65-507, 65-508, 65-510)

28-4-146 RECORDS

1. A register shall be kept by the group boarding home parents (or director) of all children under care, with name, birth-date, and names of parents or legal guardians.
2. Social case records shall be kept on each child in care.
3. The group boarding home parents or the director shall report the admission or discharge of a child within 48 hours, by mail, to the Division of Maternal and Child Health of the Kansas State Department of Health, on admission and discharge forms furnished by the Department. The death of a child in boarding care shall be reported promptly to the Division of Maternal and Child Health of the Kansas State Department of Health. Semi-annual rosters shall be required.
4. Medical and dental records shall be kept on forms issued by the Division of Maternal and Child Health of the Kansas State Department of Health and shall be kept up-to-date at all times. They shall be initiated on or before the time of placement and shall be kept with the children in the boarding homes. These records shall be taken to the physicians' or dentists' offices for all visits. The records shall be moved with the child from one licensed boarding home to another. The boarding home operator shall record the illnesses, in-

juries, visits to
information in the
record.

5. Any improper dis-
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juries, visits to physician and dentist and other pertinent information in the follow-up notes of the child's medical record.

5. Any improper disclosure of medical and dental records or social history regarding the children shall cause the revocation or suspension of the license in force, or the closure of a home under study. (Authorized by KSA 65-507, 65-508)

28-4-147 COMPLIANCE WITH REGULATIONS

1. The Kansas State Department of Health shall revoke a license or deny an application in any case in which there is a failure of compliance with the provisions of the foregoing regulations. (Authorized by KSA 65-501, 65-504, 65-506, 65-508, 65-510, 65-512, 65-513, 65-514, 64-515)

28-4-148 EXCEPTIONS PERMITTED

1. An exception to these regulations may be allowed by the Joint Licensing Committee where it is found that such exception would not violate the existing applicable statutory requirements, nor discriminate against other existing license holders. The nature of the exception, the conditions attached to it, and its duration shall be in writing, and written notification shall be given to the group boarding home personnel and the supervising agency. (Authorized by KSA 65-508)

WICHITA-SEDGWICK COUNTY

DATE

METROPOLITAN AREA PLANNING DEPARTMENT

November 8, 1972

TO Board of City Commissioners
FROM Robert A. Lakin, Director of Planning *RL*
SUBJECT DR 72-6 - Amendment to the Zoning
Ordinance Re: Rehabilitation Homes

Over the last two or three years we have had several zoning applications from organizations wanting to develop housing for the purposes of rehabilitating those with some type of problem. These areas of rehabilitation have included dependent and neglected children, delinquent juveniles, and alcoholics, and we will probably see similar type facilities proposed for mentally retarded, adult parolees, pre-delinquent juveniles, those juveniles on probationary parole, emotionally disturbed, and drug addicts.

In each of these instances, it has been necessary for the applicants to request "B" Multiple family zoning in order to obtain a zoning category which would allow this type of use. These uses have generally been categorized as institutional and eleemosynary type uses. In most of those places where "B" Multiple-family would either be appropriate (along arterials) or in older neighborhoods (many of which are in a deteriorating state), the environment has not been that which those involved in the rehabilitation program had hoped to achieve. Apparently one of the more significant parts of the rehabilitation programs is the ability to establish a near normal living environment for the people to make their re-entry into society.

I have been in contact with Mrs. Kay Arvin who represents Monica House, and have discussed this matter with Hugh Gibson of the Community Planning Council, and Dr. Bauman of the Health Department. They were all of the opinion that some adjustment needed to be made in the zoning ordinance. It appeared that there were at least two ways that such could be accomplished. One would be to re-define what is a family, so that they could locate in the "AA" or any other residential district where single-family homes are located. The problem with the existing definition is the number of unrelated people (maximum four) that is considered a family. To accommodate rehabilitation efforts the number would have to go up - eight, ten, unlimited? This approach was questioned because it seemed that any definition opened up the area to almost all types of activity which would include fraternity houses, communal living, etc. In the areas where many people are to be allowed to live within or as a single organizational unit, it would seem more appropriate that "B" Multiple family be utilized.

Page 2 - Board of City Commissioners
November 8, 1972

The second alternate would be to write an exception into the City zoning ordinance under which the Board of Zoning Appeals could by special permit grant such authority to utilize homes for rehabilitation purposes. A similar type of device was used to allow art associations, community theater work shops and similar uses in all residential districts. The type of conditions which must be met prior to granting such approval would be the controls to assure the neighborhood that there would be a minimizing adverse affect upon the neighborhood if such permission was granted.

As a result of this analysis, the Planning Commission, at its meeting of August 24, 1972, instructed that an amendment be prepared whereby rehabilitation homes could be permitted in all residential areas, subject to the approval by the Board of Zoning Appeals.

Attached is an amendment which was considered by the Planning Commission at a public hearing on October 26, 1972. The amendment proposes definitions for Group Boarding Homes for Children and Halfway House-Group Homes. This proposal will authorize the Board of Zoning Appeals the jurisdiction to consider and approve the location of rehabilitation homes in either the "AA", "A" or "RB" Districts under certain conditions and requirements. The action of the Planning Commission was to recommend that the amendment be adopted.

Consideration of this amendment is scheduled for your consideration at your meeting of November 14, 1972.

RAL:ber

Attachment

cc: Ralph Wulz, City Manager
John Dekker, Director of Law

ORDINANCE NO. 22-412

AN ORDINANCE RELATING TO REHABILITATION HOMES AS "EXCEPTIONS" IN THE "AA" ONE FAMILY DWELLING DISTRICT, THE "A" TWO FAMILY DWELLING DISTRICT AND THE "RB" FOUR FAMILY DWELLING DISTRICT, AMENDING SECTION 28.04.020 OF THE CODE OF THE CITY OF WICHITA, KANSAS, AND ADDING SECTION 28.04.185 - EXCEPTIONS TO USE REGULATIONS - REHABILITATION HOMES.

BE IT ORDAINED BY THE GOVERNING BODY OF THE CITY OF WICHITA, KANSAS:

SECTION I - That Section 28.04.20 of the Code of the City of Wichita, Kansas, be amended as follows:

The following definitions shall be added to this Section:

GROUP BOARDING HOME FOR CHILDREN. A residential facility for five or more children, who, for various reasons, cannot reside in their natural home and where 24 hour adult care and supervision and consultation may be available, and which is licensed by the Kansas State Board of Health.

HALFWAY HOUSE - GROUP HOME. A residential facility for five or more adults who have been institutionalized for various reasons and released, or who have or have had physical or social disabilities which make operation in society difficult and require the protection of a group setting to facilitate the transition to a functional member of society (e.g., former convicts, alcoholics, drug addicts, mental patients, etc.); provided shelter, supervision and residential rehabilitative services.

SECTION II. The following shall become Section 28.04.185:
Section 28.04.185 Same - Rehabilitation Homes

1. The Board or Zoning Appeals may, by special permit, grant exceptions and authorize rehabilitation homes such as group boarding homes for children or halfway houses, to be located in the "AA", "A" or "RB" residential zoning districts subject to the following conditions and requirements:
 - 1.1 The home and its sanitary facilities shall comply with all State and local codes.
 - 1.2 The board shall determine the number of occupants permitted based on the sleeping capacity of the facility, and the number of required parking spaces for each individual case.
 - 1.3 The use shall comply with the regulations of either the Kansas State Board of Health, or the licensing requirements of other authorized State agencies; and the program shall be sanctioned by appropriate State or local agencies, or local United Way, Health Planning or Comprehensive Planning Agencies.

1.4 The board shall take into consideration the proximity and location of other such rehabilitation facilities within the neighborhood so as not to change the character of the area or impact a given area with such uses.

1.5 The board of zoning appeals may include additional conditions as deemed necessary to provide for orderly development.

SECTION III. This ordinance shall be included in the Code of the City of Wichita, Kansas, and shall be effective upon its passage and publication once in the official City paper.

PASSED AND APPROVED at Wichita, Kansas, this 21st
day of November, 1972.

Glenn J. Shanahan
Mayor

ATTEST:

Ralph C. Eberly
City Clerk

(SEAL)

C. J. S.

November 10, 1972
155 Hillsdale Drive
Wichita, Kansas 67230

The Honorable Jack Shanahan
Mayor of Wichita, Kansas
204 South Main
Wichita, Kansas 67202

Your Honor:

Members of Monica House, Inc. board of directors join me in urging support of the Wichita City Commission for changes to Title 28, the Code of the City of Wichita, as approved by Wichita-Sedgwick County Area Planning Commission on October 26, 1972.

The proposed amendment seems to be a fair and equitable method of locating rehabilitation homes for certain groups of people who need guidance in becoming productive citizens of our community.

During the past nineteen months the staff of Metropolitan Area Planning Department and members of MAPC have been very considerate of our efforts to locate residential group homes for dependent, neglected, and troubled teen-age girls. We wish to convey to you our keen appreciation for the concern shown and services given by Robert Lakin, his staff, especially Jack H. Galbraith, and members of MAPC.

Sincerely,

Alberta Reynolds, Pres.
MONICA HOUSE, INC.

cc: Dr. James M. Donnell
Jack Green
Dr. Garry Porter
John S. Stevens

November 8, 1972

Board of City Commissioners

Robert A. Lakin, Director of Planning

DR 72-6 - Amendment to the Zoning
Ordinance Re: Rehabilitation Homes

Over the last two or three years we have had several zoning applications from organizations wanting to develop housing for the purposes of rehabilitating those with some type of problem. These areas of rehabilitation have included dependent and neglected children, delinquent juveniles, and alcoholics, and we will probably see similar type facilities proposed for mentally retarded, adult parolees, pre-delinquent juveniles, those juveniles on probationary parole, emotionally disturbed, and drug addicts.

In each of these instances, it has been necessary for the applicants to request "B" Multiple family zoning in order to obtain a zoning category which would allow this type of use. These uses have generally been categorized as institutional and eleemosynary type uses. In most of those places where "B" Multiple-family would either be appropriate (along arterials) or in older neighborhoods (many of which are in a deteriorating state), the environment has not been that which those involved in the rehabilitation program had hoped to achieve. Apparently one of the more significant parts of the rehabilitation programs is the ability to establish a near normal living environment for the people to make their re-entry into society.

I have been in contact with Mrs. Kay Arvin who represents Monica House, and have discussed this matter with Hugh Gibson of the Community Planning Council, and Dr. Bauman of the Health Department. They were all of the opinion that some adjustment needed to be made in the zoning ordinance. It appeared that there were at least two ways that such could be accomplished. One would be to re-define what is a family, so that they could locate in the "AA" or any other residential district where single-family homes are located. The problem with the existing definition is the number of unrelated people (maximum four) that is considered a family. To accommodate rehabilitation efforts the number would have to go up - eight, ten, unlimited? This approach was questioned because it seemed that any definition opened up the area to almost all types of activity which would include fraternity houses, communal living, etc. In the areas where many people are to be allowed to live within or as a single organizational unit, it would seem more appropriate that "B" Multiple family be utilized.

Page 2 - Board of City Commissioners
November 8, 1972

The second alternate would be to write an exception into the City zoning ordinance under which the Board of Zoning Appeals could by special permit grant such authority to utilize homes for rehabilitation purposes. A similar type of device was used to allow art associations, community theater work shops and similar uses in all residential districts. The type of conditions which must be met prior to granting such approval would be the controls to assure the neighborhood that there would be a minimizing adverse affect upon the neighborhood if such permission was granted.

As a result of this analysis, the Planning Commission, at its meeting of August 24, 1972, instructed that an amendment be prepared whereby rehabilitation homes could be permitted in all residential areas, subject to the approval by the Board of Zoning Appeals.

Attached is an amendment which was considered by the Planning Commission at a public hearing on October 26, 1972. The amendment proposes definitions for Group Boarding Homes for Children and Halfway House-Group Homes. This proposal will authorize the Board of Zoning Appeals the jurisdiction to consider and approve the location of rehabilitation homes in either the "AA", "A" or "RB" Districts under certain conditions and requirements. The action of the Planning Commission was to recommend that the amendment be adopted.

Consideration of this amendment is scheduled for your consideration at your meeting of November 14, 1972.

RAL:ber

Attachment

cc: Ralph Wulz, City Manager
John Dekker, Director of Law

Wichita Youth Home, Inc.

P. O. Box 8042 Mungler Station
WICHITA, KANSAS 67208

October 29, 1972

Mr. Jack Galbraith
Chief Planner
Metropolitan Area Planning Department
104 S. Main
Wichita, Kansas 67202

Dear Mr. Galbraith,

I want to thank you for your support and for keeping me informed on the Amendment to the Zoning Ordinance DR 72-6. We heartily support the proposed change and commend the Planning Commission and Kay Arvin of Monica House for undertaking this needed change.

Sincerely,

Judy Slawson
Mrs. Don Slawson
President

cc: Hugh Gibson
Mrs. Kay Arvin
Mrs. Alberta Reynolds



October 27, 1972

Mrs. Kay Arvin, Attorney
Century Plaza Building
Wichita, Kansas 67202

Re: DR 72-6 - Amendment to
Zoning Ordinance

Dear Mrs. Arvin:

At the regular meeting of the Wichita-Sedgwick County Metropolitan Area Planning Commission on October 26, 1972, the above matter was considered. It was the action of the Commission to recommend approval of the amendment as advertised.

This proposed change will be forwarded to the Board of City Commissioners for their consideration on November 14, 1972, the meeting to be held in Room 201 City Building, 204 South Main, starting at 9:00 a.m.

If you have any questions concerning this matter, please call our office.

Sincerely,

Jack H. Galbraith
Chief Planner

JHG:ber

cc: Hugh Gibson, Community Planning Council
520 Insurance Building 67202
Mrs. Judy Slawson, 330 North Belmont 67208
Mrs. Alberta Reynolds, 155 Hillsdale Drive 67230

WICHITA-SEDGWICK COUNTY

DATE

METROPOLITAN AREA PLANNING DEPARTMENT

October 20, 1972

TO Wichita-Sedgwick County Metropolitan
Area Planning Commission

FROM Jack H. Galbraith, Chief Planner *JHG*

SUBJECT DR 72-6 - Amendment to the Zoning Ordinance
Re: Rehabilitation Homes

At your meeting of August 24, 1972, you considered whether or not an amendment should be prepared whereby rehabilitation homes should be permitted in all residential areas, subject to the approval by the Board of Zoning Appeals. Your action was to authorize the preparation and advertising of an amendment to the Zoning Ordinance to be considered at a public hearing.

Attached is an amendment which proposes definitions for Group Boarding Homes for Children and Halfway House - Group Homes. This proposal will authorize the Board of Zoning Appeals the jurisdiction to consider and approve the location of rehabilitation homes in either the "AA", "A" or "RB" Districts under certain conditions and requirements.

Consideration of this proposed amendment has been advertised for your meeting of October 26, 1972. If you have any questions on this proposal prior to your meeting, please call.

JHG:ber

Attachment

() Published in the Daily Record on October 5, 1972

OFFICIAL NOTICE

TO WHOM IT MAY CONCERN AND TO ALL PERSONS INTERESTED:

NOTICE IS HEREBY GIVEN that on THURSDAY, October 26, 1972, the WICHITA-SEDGWICK COUNTY METROPOLITAN AREA PLANNING COMMISSION, in Room 401 City Building Annex, 104 South Main, Street, Wichita, Kansas, at 1:30 p.m., will consider the following change to Title 28, the Code of the City of Wichita, Kansas:

Section 28.04.020. Definitions

The following definitions shall be added to this Section:

GROUP BOARDING HOME FOR CHILDREN. A residential facility for five or more children, who, for various reasons, cannot reside in their natural home and where 24 hour adult care and supervision in a home setting is provided, and where professional supervision and consultation may be available, and which is licensed by the Kansas State Board of Health.

HALFWAY HOUSE - GROUP HOME. A residential facility for five or more adults who have been institutionalized for various reasons and released, or who have or have had physical or social disabilities which make operation in society difficult and require the protection of a group setting to facilitate the transition to a functional member of society (e.g. former convicts, alcoholics, drug addicts, mental patients, etc.); provide shelter, supervision and residential rehabilitative services.

The following Section shall be added.

Section 28.04.185 Same - Rehabilitation Homes

1. The Board of Zoning Appeals may, by special permit, grant exceptions and authorize rehabilitation homes such as group boarding homes for children or halfway houses, to be located in the "AA", "A" or "RB" residential zoning districts subject to the following conditions and requirements:

1.1 The home and its sanitary facilities shall comply with all State and local codes.

1.2 The board shall determine the number of occupants permitted based on the sleeping capacity of the facility, and the number of required parking spaces for each individual case.

1.3 The use shall comply with the regulations of either

the Kansas State Board of Health, or the licensing requirements of other authorized State agencies; and the program shall be sanctioned by appropriate State or local agencies, or local United Way, Health Planning or Comprehensive Planning Agencies.

1.4 The Board shall take into consideration the proximity and location of other such rehabilitation facilities within the neighborhood so as not to change the character of the area or impact a given area with such uses.

1.5 The Board of Zoning Appeals may include additional conditions as deemed necessary to provide for orderly development.

The proposed amendments will there be discussed and considered by the said Wichita-Sedgwick County Metropolitan Area Planning Commission, and all persons interested in said matter will be heard at this time concerning their views and wishes, and any protest against any of the provisions of the proposed changes to the Zoning Ordinance will be considered by the Commission as by law provided.

WITNESS my hand and seal this 4th day of October, 1972.

ROBERT A. LAKIN,
Secretary,

Wichita-Sedgwick County Metropolitan Area Planning Commission.
(SEAL)

WICHITA—SEDCWICK COUNTY



METROPOLITAN AREA PLANNING
COMMISSION

AMHERST 2-0611 — AREA CODE 316
CITY BUILDING ANNEX
104 S. MAIN ST.
WICHITA, KANSAS 67202

October 5, 1972

Mrs. Kay Arvin, Attorney
Century Plaza Building
Wichita, Kansas 67202

Dear Mrs. Arvin:

Attached is a copy of the official notice proposing to amend the City Zoning Ordinance authorizing the Board of Zoning Appeals to grant exceptions for rehabilitation homes in the "AA", "A", and "RB" districts. This proposed amendment is scheduled for consideration by the Planning Commission at their meeting on October 26, 1972.

If you have any comments or suggested changes we would appreciate your thoughts prior to their meeting.

Sincerely,

Jack H. Galbraith
Chief Planner

cc: Hugh Gibson, Community Planning Council, 520 Insurance
Building 67202
Mrs. Judy Slawson, 330 North Belmont 67208
Mrs. Alberta Reynolds, 155 Hillsdale Drive 67230

JHG:rw
attachment

Thanks so much. Your additions are so excellent - I would have no changes to recommend.

KKA



aspo

DP-22-6

American Society of Planning Officials
1313 East Sixtieth Street Chicago Illinois 60637 Telephone 312: 324-3400

Planning Advisory Service

August 18, 1972

Robert A. Lakin
Director of Planning
Wichita-Sedgwick County Metropolitan
Area Planning Department
104 South Main Street
Wichita, Kansas 67202



Dear Mr. Lakin:

This letter is in response to your inquiry concerning the planning and regulatory treatment of non-institutional, residential social welfare facilities. Your inquiry is of particular interest to me because I am now in the process of preparing a questionnaire (on this topic) to be sent to a sample of larger city (100,000+) planning agencies. We first considered taking a closer look at this category of land use in the course of the zoning clinic at this year's ASPO convention, where a significant percentage of the questions involved the zoning treatment of such facilities. Subsequently a law firm here in Chicago became interested in the exclusionary effect of zoning policies with respect to this type of facility, and we agreed to collaborate on collecting data about their regulation.

It is our intent to publish the results of this questionnaire as a PAS report, but I seriously doubt whether the report would be ready before the end of the year. Before drafting the questionnaire, I made a thorough search of our files but could find little pertinent information. Most of what I did find dealt with nursing homes for the aged.

I have enclosed one report on "Care Facilities" prepared by the City of San Rafael Planning Department in 1968. It is perhaps most useful as an example of the way in which a community described and categorized these kinds of facilities. The report goes on to apply the categories to the city's zoning districts; some are permitted as of right, but most by special permit. Absent, however, is any indication of the criteria or standards to be followed by the cognizant body (planning commission, BZA, or governing body) in approving a special permit.

Robert A. Lakin

-2-

August 18, 1972

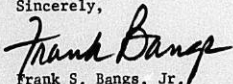
At the moment we have no examples of criteria which reflect "good" planning or regulatory practice. You have suggested some of what I believe should be the more important ones in your letter; *i.e.*, the presence of certification by state agencies, where appropriate; evidence of program controls designed to reduce the possibility of negative impacts on the surrounding residential community, etc. It would seem that the basic issues present in any regulatory situation also operate here. The more detailed the standards and criteria, the more difficult it may be to accommodate them to an individual situation. The more vague and general they are, the more they present an opportunity for abuse.

In Milwaukee, the Board of Appeals may grant a special exception for "group homes and residential care centers" where it finds that the requested use is "consistent with the spirit and purpose and intent of this ordinance, will not substantially injure the appropriate use of neighboring property and will serve the public convenience and welfare." If the board were required to make findings of fact in support of its conclusions on these criteria, perhaps the special exception procedure would have more meaning. As it stands, it may only serve as a sounding board for the exclusionary effect of the typical public reaction to residential treatment facilities: "It's a good idea, but I don't want them next to my home."

As a former resident of Wichita, it would be my hope that the long-time presence of related institutions in the city and state--the Institute of Logopedics and the Menninger Clinics--would make the concept more palatable to Wichitans. Your estimate may be more realistic. It would seem to me that close coordination between sponsoring public and private agencies and the area planning department in both the drafting of appropriate standards and a related public information campaign would be a good course of action.

I will keep Wichita-Sedgwick County in mind as we begin to get data in from the questionnaire this fall and will pass on any information which may be of value to you.

Sincerely,



Frank S. Bangs, Jr.
Editor, Land-Use Controls Service

FSB/ev

Enc: Xerox copy of San Rafael Technical Report No. 6 (1968)

CITY of SAN RAFAEL

DR 72-6

CITY OF SAN RAFAEL
PLANNING DEPARTMENT

1400 Fifth Avenue
San Rafael, Calif. 94902

Herbert G. Hotchner, AIP
Planning Director

Phone 456-1112
Area Code 415

*X-Hospitals-
nursing
homes*

"CARE FACILITIES"

THEIR PLACE IN THE ZONING ORDINANCE
AND IN THE COMMUNITY

Prepared By
Herbert G. Hotchner

June 1968
TECHNICAL REPORT No. 6

ACKNOWLEDGMENT

The San Rafael Planning Department wishes to thank the agencies listed below for their many hours of work in the cooperative effort to produce the results described in this report. For coordinating the efforts of these agencies, particular thanks go to Miss Florence T. Scott, Mr. Alvin Taylor, and Mr. Henry W. Schoenlein.

- Marin County office of the Bay Area Social Planning Council.
- State of California, Department of Mental Hygiene, Division of Local Programs.
- State of California, Department of Social Welfare, Bureau of Social Work, San Rafael Office.
- Marin County Department of Public Social Services.
- Marin County Probation Department.
- Marin County Department of Community Mental Health Services.
- Marin Association for Mental Health.
- Marin Foundation.
- Sunny Hills.
- Golden Gate Regional Center.

A. THE PROBLEM

In recent years, there has been rapid expansion in emphasis upon treating people who have mental, physical, or emotional illnesses or handicaps on an outpatient rather than an institutional basis. Handicaps may stem from a diversity of causes: birth defects, severe illnesses, drugs, alcoholism, etc. Depending on the cause and the resultant disability, various state and federal agencies exercise supervision and provide funding for the residential care and physical rehabilitation of people so afflicted. If institutionalization is required; it is usually for a few days to a few weeks only. The individual then is returned on a leave basis to reside in his community of origin while undergoing a more extensive period of outpatient treatment.

Depending upon their age and the type of problem involved, these handicapped individuals may be placed as individuals in a home, may gather together in groups of six to twelve in multiple family zones with a sort of housemother type of arrangement, or may seek a variety of other combinations of residential facilities. Very often the housing of such individuals will place a structure into a different category in the Fire Code or the Building Code and becomes a matter of concern to the Fire Marshal and the Building Inspector.

From the standpoint of zoning, the effect on the neighborhood may substantially vary. A facility housing ex-drug addicts may be looked upon entirely differently than a facility in which senior citizens with the disabilities of old age are being treated on a convalescent basis. Whether the disabled individuals leave their residence during the daytime or all day long makes a difference. Parking needs sometimes are substantially less than that which is normal for multiple family dwellings or boarding houses.

In the spring of 1967, the San Rafael City Planning Department became aware that it was necessary to better identify what was going on in this whole field of outpatient treatment so as to relate applications for such uses to the terminology and definitions in the Zoning Ordinance.

An increasing number of people were appearing at the counter to find out what they had to do in order that they may use or convert existing residences in various portions of the City for the purpose of housing people who had the variety of handicaps that we are talking about. Property owners and lessors were being stimulated by various state agencies to apply at the local community level for facilities of this type. Unfortunately what they requested did not fit any of the definitions or categories that then existed in the Ordinance. The terms "sanitarium", "rest home", "day care center", etc., just did not fit the uses being applied for. On the other hand, if we treated all of these uses as "rooming and boarding houses", we would be permitting potentially too much change in some locations and be too restrictive on parking requirements for these special uses in other instances.

At the same time, as a result of Medicare and similar state programs, zoning terminology relating to hospitalization began to not fit that for which applications were being made. At one time the terms "hospital", "convalescent hospital", and "rest home" satisfactorily dealt with the zoning impact of these facilities as they relate to parking spaces, traffic, and accessory facilities. Under the prompting of federal and state funding, a series of combination facilities with varying proportions of operative or convalescent wings are being requested. In some instances, convalescent facilities were being proposed to which would be added operating rooms and other facilities at a later date. The former separation of active and recuperative treatment facilities was becoming a matter of degree. Here again re-examination became an immediate necessity.

B. THE APPROACH

Realizing that these same problems would be experienced by many cities throughout the State of California as well as by cities in other states, the Marin County office of the Bay Area Social Planning Council volunteered to formulate a committee with representatives of all of the

health and social service agencies to work with the Planning Department in clarifying these programs so that they might be related to zoning. The Planning Director met with this committee on numerous occasions over a nine month period during the course of which the terminology to be used in the Zoning Ordinance (see Appendix A) and the more detailed definitions supplementing it (see Appendix B) were developed.

The committee then worked out the distribution of these uses throughout the various zones in the City of San Rafael Zoning Ordinance. (see Appendix C).

C. APPLICABILITY FOR OTHER CITIES

While the definitions in Appendix A and the distribution of these definitions throughout the zones in Appendix C has been adopted and is proving useful within the City of San Rafael, many jurisdictions will desire to deal with this problem without adopting new terminology throughout. The key information is that contained in Appendix B which identifies the types of things for which people may apply and gives some indication of the potential impact of these applications. The main purpose of this report is to stimulate the recognition of the variety of problems involved and to enable the planners in other jurisdictions to anticipate whether some or all of these uses fit the categories and controls that already exist within their ordinance or whether they need to take additional action, as we did, to accommodate the facilities that they wish to have within their community.

D. POSITION STATEMENT

The committee on zoning of the Marin County Council of the Bay Area Social Planning Council prefaced their work with the following statement that they recommend to each city as a reasonable basis for its approach toward accommodating these residential uses:

"Persons with a mental, physical, or social handicap have the right to appropriate accommodation in the variety of zoning

districts within a community without discrimination.

"Such disabled persons are most frequently accommodated in a variety of facilities which are listed and briefly described in the chart. The majority of these facilities fall within the licensing/certification jurisdiction of either the State Department of Social Welfare, State Department of Mental Hygiene, or State Department of Public Health. The few which are not subject to these licensing controls or regulations usually are under the sponsorship of a local health and welfare agency or sectarian organization. The supervision and standards are maintained by either the licensing and/or placement agency.

"As also indicated in the chart, these facilities are similar to many commonly accepted uses that are provided for in particular zoning districts.

"Facilities for the handicapped should conform to the same general regulations in terms of zoning district location as their similarly defined counterparts."

APPENDIX "A"

PROPOSED AMENDMENTS TO THE DEFINITIONS SECTION OF THE ZONING ORDINANCE
(see Appendix "B" for a detailed description of the facilities listed in each of these definitions).

A. A D D.

I Major Medical Care Facility: is an institution which provides intensive supervision and/or medically supervised treatment to patients who are generally nonambulatory. This category shall include hospitals (general and special), extended care facilities (treatment and convalescent) and children's treatment centers.

II Day Care Facility: is a facility which provides supervised care, therapy, instruction, or medical treatment to individuals during day-time hours. No persons or patients are permitted to remain overnight. This category includes day treatment clinics, children's day centers, and workshops for the handicapped.

III Group Care Facility: is a facility which provides resident services to seven or more individuals of whom one or more are unrelated. These individuals are handicapped, aged, or disabled, are undergoing rehabilitation, and are provided services to meet their needs. This category includes uses, licensed or supervised by any Federal, State, or County health/welfare agency, such as group homes (all ages), halfway houses, resident schools, resident facilities and foster or boarding homes.

IV Family Care Facility: is a facility which provides resident or day care service in a private residence to six or fewer individuals who are not related to the resident household. These individuals are handicapped, aged, disabled or in need of adult supervision, and are provided service and supervision in accordance with their individual needs. This category includes family day care homes for children, foster or boarding homes for children, group homes, and family homes.

B. DELETE.

Definitions for the following and any other terms that refer to facilities included within the scope of the new terms listed above are deleted:

- Hospital
- Convalescent hospital
- Sanitarium
- Rest home
- Nursing home
- Nursery
- Day care center.

APPENDIX "B"

DETAILED DESCRIPTION OF FACILITIES WHICH IN THE STATE OF CALIFORNIA ARE LICENSED, CERTIFIED, OR APPROVED FOR CARE OF ILL OR HANDICAPPED PERSONS AND HOW THEY RELATE TO THE FOUR NEW ALL INCLUSIVE ZONING DEFINITIONS

I MAJOR MEDICAL CARE FACILITIES

1. Hospitals (General):

A facility staffed and equipped to provide various types of intensified hospital care including but not limited to short-term care in acute medical, surgical and obstetrical services.

2. Hospitals (Special):

a. Psychiatric Hospital:

Psychiatric hospital is an institution intended primarily for the admission, diagnosis, and intensive short-term treatment of patients with mental illness or behavior or emotional disorders.

b. Alcoholism Hospital:

Alcoholism hospital is an institution intended solely for the admission, diagnosis, and intensive short-term treatment of patients addicted to excessive use of alcohol, and related conditions.

3. Extended Care Facility:

A facility primarily engaged in providing to inpatients the nursing care and related services for patients who require 24 hour medical, nursing, or rehabilitation services. These facilities include the following types of institutions:

1. Long Term Facility for the Chronic Mentally Ill.
2. Convalescent Hospital
3. Nursing Home
4. Sanitarium
5. Nursery - for the mentally retarded who are provided long term care in cribs.

4. Children's Treatment Center or Child Care Institution:

Children's treatment center is an institution of seven-bed capacity or more intended for the admission and treatment of minors with mental illness or behavior or emotional disorders.

A child care institution is an institution of seven-bed capacity or more intended solely for the admission of children with emotional problems, behavior problems, or mental illness who require supervision and who are provided with an organized program of service.

II DAY CARE FACILITIES

5. Day Treatment Clinic (or hospital):

A facility for the medical and/or psychiatric treatment of patients who are provided with an organized program of treatment and rehabilitative activities under medical supervision. Persons are not permitted to remain overnight.

6. Childrens Day Center:

a. Emotionally Distrubed:

Children's day center is a facility intended solely for the admission of minors with mental illness or behavior or emotional disorders who are provided with an organized program under medical guidance, which shall include education and/or training, handicraft and recreational activities. Children are not permitted to remain overnight.

b. Mentally Retarded:

Children's day center is a facility intended solely for the admission of patients with mental retardation or other handicaps who are provided with a program of education or training, handicraft, vocational and recreational activities. Patients are not permitted to remain overnight.

7. Workshop For Handicapped:

Workshop for handicapped is a facility for handicapped persons 16 years of age and over who are provided with a variety of services, including work training, vocational counseling, sheltered employment, recreational and occupational activities. This facility is under the sponsorship and supervision of a health and/or welfare agency, or sectarian organization.

III GROUP CARE FACILITIES

8. Boarding Home for Aged:

Boarding home for aged is a facility intended for persons over 65 and is licensed by the State Department of Social Welfare or the local public welfare agency.

9. Board and Care Home for Adults:

Board and care home for adults is a facility which is not licensed by a state or local health or welfare agency, but may be subject to the provision of a business license or permit. Handicapped persons accommodated in this facility are placed by local health and welfare agencies. Persons are provided appropriate services in accordance with their needs. Supervision and standards are assured by placement agency through placement agreement.

10. Foster or Boarding Home for Children (7 or more):

Residential *or state*
A foster or boarding home is a group facility licensed by the local welfare agency to provide care and supervision of children in a group setting.

11. Group Home (7 or more persons):

A group home is a facility located in a residential community providing shelter and/or rehabilitation for 7 or more children under the age of 19 years who for various reasons cannot reside in their natural home. Twenty-four hour adult supervision is mandatory and professional supervision and consultation is available to both child care staff and children. The purpose of a group home program is to provide a service for the child who does not need the structure of an institution in that he does not present a threat to the community, yet is not a foster home candidate. The goal of the service is to return home, other placement or emancipation, depending upon the age of the child and the circumstances of his family.

12. Half-way House:

A half-way house is a resident facility which is not licensed by a state or local health or welfare agency but may be subject to the provision of a business license or permit. A transitional facility for handicapped persons 18 years of age or over who are provided short-term rehabilitative services. This facility is usually under the sponsorship of a health or welfare agency, or sectarian organization. Supervision and standards are maintained by a combination of the sponsoring group and placement agency or agencies.

13. Resident School (Mentally Retarded):

Resident school is an institution intended primarily for the admission and treatment of educable and trainable mentally retarded.

14. Resident Facility (Mentally Retarded and other Handicapped):

Resident facility is a facility of seven-bed capacity or more intended solely for the admission of mentally retarded and other handicapped patients who are provided with an organized program of services including training and vocational and recreational activities.

IV FAMILY CARE FACILITIES

15. Family Day Care Home for Children:

A family day care home is a family-size facility licensed by the local public welfare agency to provide care and supervision of children in a home setting during the day.

16. Nursery (Mentally Retarded and other Handicapped Infants):

Nursery facility that provides nursing services primarily in crib accommodations in a family home setting.

17. Foster or Boarding Home for Children:

A foster or boarding home is a family-size facility licensed by the local welfare agency to provide care and supervision of children in a home setting.

18. Group Home:

A group home is a facility located in a residential community providing shelter and/or rehabilitation for 6 or less children permanently under the age of 19 years who for various reasons cannot reside in their natural home. Twenty-four hour adult supervision is mandatory and professional supervision and consultation is available to both child care staff and children. The purpose of a group home program is to provide a service for the child who does not need the structure of an institution in that he does not present a threat to the community, yet is not a foster home candidate. The goal of the service is to return home, other placement, or emancipation, depending upon the age of the child and the circumstances of his family.

19. Family Home or Family Care Home:

A family home or family care home is a facility for mentally ill or mentally retarded adults and children. These facilities are licensed by the State Department of Mental Hygiene or certified by the State Department of Social Welfare. The home is intended solely for the admission of not more than 6 mentally ill and/or emotionally disordered, or mentally retarded patients, who are provided with a program of services and protective supervision in a home setting.



COMMUNITY PLANNING COUNCIL

420 Insurance Building • Wichita, Kansas 67202 • 267-4327 Area Code 316

Health Planning Division
420 Insurance Bldg. - 264-2861

Coalition Planning Division
420 Insurance Bldg. - 267-7333

4-C Division
420 Insurance Bldg. - 267-4327

Community Information and Referral Services
2312 E. Central - 263-7205

Voluntary Action Center
352 N. Broadway - 264-9301

July 28, 1972

Mr. Robert Lakin, Director of Planning
Wichita-Sedgwick Planning Department
City Building Annex
104 South Main
Wichita, Kansas 67202



Dear Bob:

This is in response to your memorandum of July 17th, I will call you further about it after I have had a chance to discuss it with some others here. In the meantime, I can summarize my views.

Simple stated, I am not sufficiently familiar with zoning laws and procedures to express an opinion on the three alternative courses mentioned, but I can concur in your expectation that there are going to be increasing problems along this line. The whole trend in the treatment and care of persons away from their homes is toward small, disbursed group care in larger institutions. The philosophy is one of rehabilitation rather than custodial care, and the rehabilitation concept is one of maintaining assembly of alcoholics, the retarded, and etc., in society. It is increasingly being considered important that people with these special needs for help continue to live in natural, homelike situations, and this requires that they be in residential neighborhoods.

It is unfortunate that there is stigma and apprehension associated with facilities serving these persons. Hopefully this will continue to diminish as people become better informed. In the meantime, some change in the zoning limitations would assist in meeting needs in this area.

Groups for which halfway houses or small group living arrangements are common include alcoholics, mentally retarded, adult parolees or probationers, predelinquent juveniles, delinquent juveniles on probational parole, emotionally disturbed (of different age groups), drug addicts, dependent and neglected children, and dependent and neglected adolescents. Because such facilities are always relatively "open", the intake procedures ordinarily take into consideration the nature of the neighborhood and the limitations indicated by this. Offhand, I don't know how an ordinance could define the kind of guidelines that would be needed, but this type of facility is becoming sufficiently common that I would think that some communities would have a history of zoning experience providing for it.

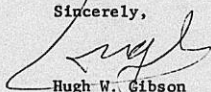
Coordinated Citizen Planning for a Better Community



Mr. Robert Lakin
July 28, 1972
Page 2

If it would be of assistance, I would be happy to pursue the matter further with some who have more direct experience with this type of program. In the meantime, you may wish to contact the new Executive Director of Halfway House and Residential Homes program, Neil Boline. He expects to be attending a national meeting of halfway house personnel within the next several weeks, and perhaps he can get some helpful information there.

Sincerely,



Hugh W. Gibson
Executive Director

HWG/tw

July 17, 1972

Mrs. Kay Arvin
814 Century Plaza Building
Wichita, Kansas 67202

Dear Mrs. Arvin:

Thank you very much for your letter. This is exactly the type of information I was hoping to obtain. I think either your first approach would be a possibility or a modification of the second approach. It is my understanding from our legal counsel that we would not have the ability to provide temporary zoning and let it automatically revert once the use ceased. Changes in zoning can only be accomplished in the same order that they are first obtained - through the appropriate advertising, notice and public hearings. As an alternate to that, I think we could do the same type of thing by putting into the zoning ordinance a provision that says the Board of Zoning Appeals may have the authority to grant such special uses as an exception to the zoning ordinance, provided that it meets the following conditions: (which would be similar to those you suggested), plus such other conditions as may be deemed appropriate in order to maintain the facility within the general character of the neighborhood. A latter example of such condition might be the total number of people that could be taken into the home.

I am forwarding your letter to Dr. Bauman and to Hugh Gibson, pointing out the problems and asking them to provide some comment, particularly as it might relate to other types of rehabilitation programs. I suggested that within a two week period that we could then assemble that material and let me provide a recommendation to the Planning Commission and ask them to give the direction that they would like to take. Thus, I would expect to try to bring this to the Planning Commission sometime in the month of August. Based on their response, we would then prepare the appropriate modifications to the text of the ordinance and be in a position then, hopefully, to handle this problem.

Page 2 - Mrs. Kay Arvin
July 17, 1972

Thank you again for your response and I am sure that we can find
an acceptable way of handling this problem.

Sincerely,

Robert A. Lakin
Director of Planning

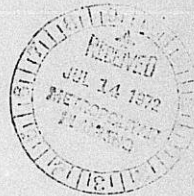
RAL:ber

ARVIN, ARVIN & BUSEY, CHARTERED
ATTORNEYS AND COUNSELORS AT LAW
814 CENTURY PLAZA BUILDING
WICHITA, KANSAS 67202
AREA CODE 316 265-2634

LESTER C. ARVIN
KAY K. ARVIN
RODNEY H. BUSEY

July 13, 1972

Mr. Robert A. Lakin
Director of Planning
Metropolitan Planning Department
City Building Annex
104 South Main Street
Wichita, Kansas 67202



Dear Mr. Lakin:

I have given some thought to the zoning, which we discussed in a telephone conversation, in order to facilitate the acquisition of adequate properties for those interested in group homes. Following are a couple of suggestions, the first of which is designed for the specific purposes of homes such as Monica House, and would not include homes designed for alcoholics or other adult groups:

Zoning Ordinance

For the purpose of this ordinance the word "family" shall be construed to include groups which have been organized to promote the rehabilitation of juveniles when such groups shall:

1. Have duly authorized supervisory personnel serving on a twenty-four hour basis.
2. The juveniles shall have been placed in the home by the Sedgwick County Juvenile Court and/or the Sedgwick County Board of Social Welfare.
3. The dwelling shall have been licensed for operation by the State Board of Health.

If you believe this is too restrictive and too specific, I would like to suggest the following substitute ordinance, which is similar to that being used in other areas. As you

Mr. Robert A. Lakin
July 13, 1972.

#2

probably know this type home is being widely used and other cities are naturally looking for solutions to this same problem. A number of effective answers have been discovered. The following one, I understand, is in use in Massachusetts, but their's does not include the requirement for the licensing; it may or may not be a necessary inclusion. If you do not have one readily available I will be happy to provide you with a copy of the requirements necessary to secure licensing from the State Board of Health. Believe me once you have met those extremely rigid requirements you have placed yourself in a position superior to that of any private home.

A transitional home which is established for the purpose of the rehabilitation of adolescent youth when:

1. Duly authorized supervisory personnel is serving on a twenty-four hour a day basis.
2. A license for such home has been issued by the State Board of Health or other authorized licensing agency.

It is understood that the granting of a Zone B Rating for such home is to be temporary and when the property is no longer used for the above stated purpose, the zone rating previously held shall automatically become effective.

This type ordinance does, it seems to me, solve some of the knotty problems and makes a change more acceptable.

The first ordinance permits the group to be classified as a Zone "A" and does not require a zoning change, you will notice. The second suggestion does require a zone change, but on a temporary basis with an automatic reversion clause. I have not attempted to conform the language specifically with that of the existing ordinances.

I will be interested in your opinions and hope to hear from you soon. We do appreciate the genuine interest which you and the other board members have shown and

Mr. Robert A. Lakin
July 13, 1972.

#3

the efforts which you are using in helping us solve this
dilemma.

Sincerely,

Kay K Arvin

ARVIN, ARVIN & BUSEY, CHARTERED

KKA:blh

October 5, 1972

John Dekker, Director of Law & City Attorney

Jack H. Galbraith, Chief Planner, MAPD

City Zoning Ordinance Amendment

Attached is a copy of the official notice proposing to amend the City Zoning Ordinance authorizing the Board of Zoning Appeals to grant exceptions for rehabilitation homes in the "AA", "A", and "RB" districts. This proposed amendment is scheduled for consideration by the Planning Commission at their meeting of October 26, 1972.

If you have any comments or suggested changes we would appreciate your thoughts prior to their meeting.

JHG:rw
attachment

cc: Bob Feldner, Supt. of Central Inspection
Don Livingston, Const. Inspection Supervisor
Leland F. Johnson, Bldg. Code Engineer
Joe Donnelly, Maint. Inspection Supervisor
James Aiken, Director of Environmental Health

October 5, 1972

Mrs. Kay Arvin, Attorney
Century Plaza Building
Wichita, Kansas 67202

Dear Mrs. Arvin:

Attached is a copy of the official notice proposing to amend the City Zoning Ordinance authorizing the Board of Zoning Appeals to grant exceptions for rehabilitation homes in the "AA", "A", and "RB" districts. This proposed amendment is scheduled for consideration by the Planning Commission at their meeting on October 26, 1972.

If you have any comments or suggested changes we would appreciate your thoughts prior to their meeting.

Sincerely,

Jack H. Galbraith
Chief Planner

cc: Hugh Gibson, Community Planning Council, 520 Insurance
Building 67202
Mrs. Judy Slawson, 330 North Belmont 67208
Mrs. Alberta Reynolds, 155 Hilldale Drive 67230

JHG:rw
attachment

File PR

ARVIN, ARVIN & BUSEY, CHARTERED
ATTORNEYS AND COUNSELORS AT LAW
814 CENTURY PLAZA BUILDING
WICHITA, KANSAS 67202
AREA CODE 316 268-2634

LESTER C. ARVIN
KAY K. ARVIN
ROONEY H. BUSEY

August 16, 1972

Mr. Robert A. Lakin
Director of Planning
Metropolitan Area Planning Department
City Building Annex
104 South Main
Wichita, Kansas 67202

Dear Mr. Lakin:

Thank you for your letter of August 14th enclosing copy of memo and for your interest in this matter. In regard to the Commission meeting for August 24th at 1:30 p.m. I hope to be present at that time.

Sincerely,

Kay K. Arvin

ARVIN, ARVIN & BUSEY, CHARTERED

KKA:blh



August 14, 1972

Mrs. Kay Arvin, Attorney
Century Plaza Building
Wichita, Kansas 67202

Dear Mrs. Arvin:

Attached is a copy of a memo which I am sending the Planning Commissioners concerning the question of Monica Houses and others. It won't go out until Friday. If there are any inaccuracies or other items you think should be included, please let me know by early Friday morning.

I will place this on our agenda for August 24, and it will appear at the first part of the agenda. Our meeting starts at 1:30 p.m. in Room 401 City Building Annex. I would be pleased to have you here as I am sure you may want to address the Commission on this subject.

Sincerely,

Robert A. Lakin
Director of Planning

RAL:ber

cc: Hugh Gibson, Community Planning Council, 520 Insurance
Building 67202
Mrs. Judy Slawson, 330 North Belmont 67208
Mrs. Alberta Reynolds, 155 Hillsdale Drive 67230

28.04.121 Family care facilities

7. Juvenile Rehabilitation Facilities. The board of zoning appeals may by special permit grant exceptions for the use of structures and property for:

- Juvenile Rehabilitation Facilities
- Juvenile Group Homes

Such permits may be granted for location in any dwelling district subject to the following conditions:

- Compliance with licensing requirements of the State Board of Health
- The juveniles shall have been placed in the home by the Sedgwick Co. Juvenile Court and/or Sedgwick Co. Board of Social Welfare
- Have duly authorized supervisory personnel serving on a twenty-four hour basis.

arwin

Advantages: (1) Allows use without zoning change
(2) State Board of Health licensing requirements for a dwelling are expected to be quite rigid - for example -
□ feet of floor space per person, number of bedrooms, etc.

City of San Rafael zoning ordinance involves complete revision of the zoning ordinance and redefinition of all health care related terms. This appears much too comprehensive for Wichita at present.

A major problem this approach does "solve", however, is the inclusion of ^{facilities for} ~~of~~ these ^{the} health-related problems - drug abuse, alcohol, etc. The size of the facility, i.e. number of patients and intensity of use is considered for each zoning classification from single family on. It may be that one of their euphemisms such as "Family Care Facility" might be appropriate for our use.

Ex. Family Care Facilities
Transitional Facilities for
Rehabilitation for Juvenile
Offenders, Drug-abuse, Alcoholics

Another problem revolves around extent of the revision to Wichita zoning text. Gibson lists: "alcoholics, mentally retarded, adult parolees or probationers, pre-delinquent juveniles, delinquent juveniles on probational parole, emotionally disturbed, drug addicts dependent & neglected children, & dependent & neglected adolescents." For reasons of politics, it might be well to see just what State Board of Health regulations cover. If specific types of institutions/care facilities are named, perhaps they would not have to be listed in the text. Then again, there might be a need to list in order to exclude certain types of facilities.

Good Luck

August 14, 1972

Wichita-Sedgwick County Metropolitan
Area Planning Commission

Robert A. Lakin, Director of Planning

DR 72-6 - Zoning Amendments - Rehabilitation Facilities

Over the last two or three years we have had several zoning applications from organizations wanting to develop housing for the purposes of rehabilitating those with some type of problem. These areas of rehabilitation have included dependent and neglected children, delinquent juveniles, and alcoholics. But we will probably see similar type facilities proposed for mentally retarded, adult parolees, pre-delinquent juveniles, those juveniles on probationary parole, emotionally disturbed, and drug addicts.

In each of these instances, it has been necessary for the applicants to request "B" Multiple family zoning in order to obtain a zoning category which would allow this type of use. These uses have generally been categorized as institutional and eleemosynary type uses. In most of those places where "B" Multiple family would either be appropriate (along arterials) or in older neighborhoods (many of which are in a deteriorating state), the environment has not been that which those involved in the rehabilitation program had hoped to achieve. Apparently one of the more significant parts of the rehabilitation programs is the ability to establish a near normal living environment for the people to make their re-entry into society.

I have been in contact with Mrs. Kay Arvin and have discussed this matter with Hugh Gibson of the Community Planning Council, and Dr. Bauman of the Health Department. I believe they are all of the opinion that some adjustment needs to be made in the zoning ordinance. It appears that there are at least two ways in which we might accomplish this. One would be to re-define what is a family, so that they could locate in the "AA" or any other residential district where single-family homes are located. The problem with the existing definition is the number of unrelated people (maximum four) that is considered a family. To accommodate rehabilitation efforts the number would have to go up - eight, ten, unlimited? I have questioned this approach because it seems that any definition that I can work up opens up the area to almost all types of activity which would include fraternity houses, communal living, etc. In the areas where many people are to be allowed to live within or as a single organizational unit, it would seem more appropriate that "B" Multiple family be utilized.

The second alternate would be to write an exception into the City zoning ordinance under which the Board of Zoning Appeals could by special permit grant such authority to utilize homes for rehabilitation purposes. A similar type of device was used to allow art associations, community theater work shops and similar uses in all residential districts. The type of conditions which must be met precedent to granting such approval would be the controls to assure the neighborhood that there would be a minimizing adverse affect upon the neighborhood if such permission was granted.

Because of the wide range of rehabilitation facilities that might be requested under such a provision, I think the total number of people to live in a residence should be related to the size of the facility. I imagine a home that might have 7 or 8 bedrooms (which is possible) should be allowed to have more people than a 3 bedroom home. Another criteria that probably should be established is that the rehabilitation group have some formal sanction either by a state, federal or local agency, or some local private agency, such as United Fund or Health Planning Council, which could attest to the validity of their techniques and procedures and their responsibility.

Thirdly, where there were no state regulations involved, that the housing arrangement and sanitary facilities should comply with all local codes and be evaluated by the Health Department. A fourth criteria which might be added is that the Board of Zoning Appeals when considering such approval shall consider the impact on the neighborhood and the proximity of and location of other such rehabilitation facilities within the neighborhood. The purpose here would be to not impact a given area which might be blessed with larger older homes which are more adaptable to this use than others. As an example, with as many groups existing needing rehabilitation facilities, an area like College Hill could quickly become filled with rehabilitation facilities, thus changing the character of the area with which they sought to identify.

Because of the apparent urgency of locating some facilities and the necessity to make decisions as to whether to proceed in this fashion or apply for "B" Multiple family zoning, I have told Mrs. Arvin and others that are interested that we would bring this matter to your attention.

It is my recommendation that you authorize us to advertise for public hearing an amendment to the zoning ordinance which would provide the Board of Zoning Appeals the authority to grant permission for rehabilitation facilities in any zoning district, subject to conditions relating to number of people, sponsorship, incidence within a neighborhood and such other requirements as the Commission may feel appropriate to be included.

RAL:ber

Attachments - 3

August 10, 1972

American Society of Planning Officials
1313 East Sixtieth Street
Chicago, Illinois 60637

Gentlemen:

I would appreciate any advice you might have or indication of how other communities are handling zoning problems concerning rehabilitation facilities carried on in residential neighborhoods. Our zoning ordinance has a traditional type definition of family, which limits the number of non-related people who may reside in a single residence as a family. Also, generally our ordinance provides that institutional type uses are first permitted in the multiple-family zoning districts having a maximum allowable density of 74 dwelling units per acre. In Wichita this means that this district is now mainly in the newer apartment areas developing at the fringe, or in older neighborhoods that are largely devoted to boarding house and apartment type conversions. It is rarely found in the same districts where the older substantial single-family homes are located and which provide the best opportunities for rehabilitation type facilities.

We are being confronted by a number of requests to provide for some means of allowing rehabilitation type facilities in what are traditionally well established sound single-family neighborhoods. These small group living arrangements are becoming identified with several areas of rehabilitation, including those for alcoholics, mentally retarded, adult parolees or probationers, pre-delinquent juveniles, delinquent juveniles on probational parole, emotionally disturbed, drug addicts, dependent and neglected children and dependent neglected adolescents.

We have discussed locally the use of a new definition for "family", but anything that would open this up too widely would most likely not be acceptable in the Wichita area. The other alternative is to either establish a conditional use permit or under Kansas law most likely an exception provision for the Board of Zoning Appeals, which could allow this type of facility in residential areas under such conditions as may be established

Page 2 - American Society of Planning Officials
August 10, 1972

in the zoning ordinance. More specifically to the point is to delineate those types of conditions which are sufficient to protect the neighborhood, such as requiring the foster parents or adult guidance teams minimum number of participants in the given program, certification by certain state agencies, etc.

I would appreciate any information you might have on how other communities may have approached this problem, and more specifically as to some of the specific conditions and criteria that they may have used in their ordinances. Any information you have will be appreciated.

If there are any questions concerning the type of problem that I am attempting to describe, please feel free to call collect.

Sincerely,

Robert A. Lakin
Director of Planning

RAL:ber

ARVIN, ARVIN & BUSEY, CHARTERED
ATTORNEYS AND COUNSELORS AT LAW
814 CENTURY PLAZA BUILDING
WICHITA, KANSAS 67202
AREA CODE 316 265-2634

LESTER C. ARVIN
KAY K. ARVIN
ROONEY H. BUSEY

July 31, 1972

Mr. Robert A. Lakin
Director of Planning
Metropolitan Area Planning Department
City Building Annex
104 South Main
Wichita, Kansas 67202

Dear Mr. Lakin:

With regard to your correspondence to Dr. Bauman and Mr. Gibson relative to finalizing the language for ordinance changes in order to provide for rehabilitative housing, I wonder if we may be overlooking an important element in not specifying "AA", as well as "A" zoning. Many of the large homes which presently are unoccupied, which would be feasible for this type of use, and actually for not much else, are zoned "AA". It appears that we might not be solving the problem if we limit these changes to Zone "A" and failed to include "AA".

I appreciate so much your prompt response to my prior letter and we are awaiting the recommendations which will result.

Sincerely,

Kay K. Arvin

ARVIN, ARVIN & BUSEY, CHARTERED

KKA:blh

cc: Dr. M. Leon Bauman
Community Health Department
1900 East Ninth
Wichita, Kansas

Mr. Hugh Gibson, Director
Community Planning Council
420 Insurance Building
Wichita, Kansas

Mrs. Alberta Reynolds



July 17, 1972

Dr. M. Leon Bauman, Director of Community Health
Hugh Gibson, Executive Director, Community Planning Council

Robert A. Lakin, Director of Planning

DR 72-6 - Possible Amendment of Zoning Ordinance
Re: Rehabilitative Facilities

For some time the question of zoning for rehabilitation facilities has come up as a question under the zoning ordinance. At the present time, the first zoning district in which a facility of this type can go is the "B" Multiple Family District. The specific clause that it goes in under includes philanthropic, eleemosynary and institutional uses. As most of the "B" Multiple Family zoning is confined to older areas or to brand new areas where garden apartments are going, there has been little opportunity apparently to secure the type of housing facility that these groups feel is appropriate for a proper setting to conduct their rehabilitation efforts. More specifically, this has been a problem for the Monica House group. In each instance where we have had a zone change for "B" Multiple Family for a Monica House or other such facilities such as for alcohol rehabilitation, the neighborhoods have become quite disturbed. Of course, you remember the outcry on the facility that Judge Corrigan was trying to establish for boys in the West-link area. I suspect that there will be other similar type problems, including rehabilitation facilities for drug addicts, ex-cons, juveniles and adolescents as well as for alcoholics. I would imagine that each of these facilities have its own special problems. Monica House as such probably has fewer problems than most of the others that I listed. At least this will probably be so in the eyes of the neighborhoods in which they are proposed to be located.

I have discussed this with Kay Arvin who called me asking for some assistance on the Monica House zoning problems. In that phone conversation, I asked her to give me her thoughts on the matter, which she has kindly done. Attached is her letter to me. One approach would be to re-define "family." Currently, it is people living together by blood or marriage and/or four or fewer unrelated persons living together. This is what complicates the Monica House problem - these people are not related by blood or marriage. Such a change in the definition would make it a use by right in any of the dwelling districts within the community. The second proposal suggested by Mrs. Arvin is to allow the "B" zoning to be changed as a temporary measure. It is my belief that this is not possible under Kansas law. Another alternate, however, is to grant to the Board of

Page 2 - Dr. M. Leon Bauman
Mr. Hugh Gibson
July 17, 1972

Zoning appeals of the City of Wichita special authority to grant exceptions in any or part of the residential zoning districts within the community to allow such facilities similar to the conditions established on page one of her letter. This, then, could be a temporary use and could also be utilized to require any other changes or special conditions that would be appropriate. An example of special conditions might be the number of people that could be taken into the home, based on the size of the house and facilities available.

I would appreciate you giving me your thoughts on this matter, particularly as to how it might relate to other types of rehabilitative efforts and the types of conditions that might be generally established in an ordinance to accommodate these uses. Please feel free to give me a call on this if you would like to chat a little on it. It would be my hope to within a week or two assemble the comments and submit a recommendation to the MAPC in which this matter could be discussed.

RAL:ber

Attachment



COMMUNITY PLANNING COUNCIL

420 Insurance Building • Wichita, Kansas 67202 • 267-4327 Area Code 316

Health Planning Division
420 Insurance Bldg. - 264-2861

Coalition Planning Division
420 Insurance Bldg. - 267-7333

4-C Division
420 Insurance Bldg. - 267-4327

Community Information and Referral Services
2312 E. Central - 263-7205

Voluntary Action Center
352 N. Broadway - 264-9301

July 28, 1972

Mr. Robert Lakin, Director of Planning
Wichita-Sedgwick Planning Department
City Building Annex
104 South Main
Wichita, Kansas 67202



Dear Bob:

This is in response to your memorandum of July 17th, I will call you further about it after I have had a chance to discuss it with some others here. In the meantime, I can summarize my views.

Simple stated, I am not sufficiently familiar with zoning laws and procedures to express an opinion on the three alternative courses mentioned, but I can concur in your expectation that there are going to be increasing problems along this line. The whole trend in the treatment and care of persons away from their homes is toward small, disbursed group care in larger institutions. The philosophy is one of rehabilitation rather than custodial care, and the rehabilitation concept is one of maintaining assemblage of alcoholics, the retarded, and etc., in society. It is increasingly being considered important that people with these special needs for help continue to live in natural, homelike situations, and this requires that they be in residential neighborhoods.

It is unfortunate that there is stigma and apprehension associated with facilities serving these persons. Hopefully this will continue to diminish as people become better informed. In the meantime, some change in the zoning limitations would assist in meeting needs in this area.

Groups for which halfway houses or small group living arrangements are common include alcoholics, mentally retarded, adult parolees or probationers, predelinquent juveniles, delinquent juveniles on probational parole, emotionally disturbed (of different age groups), drug addicts, dependent and neglected children, and dependent and neglected adolescents. Because such facilities are always relatively "open", the intake procedures ordinarily take into consideration the nature of the neighborhood and the limitations indicated by this. Offhand, I don't know how an ordinance could define the kind of guidelines that would be needed, but this type of facility is becoming sufficiently common that I would think that some communities would have a history of zoning experience providing for it.

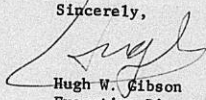
Coordinated Citizen Planning for a Better Community



Mr. Robert Lakin
July 28, 1972
Page 2

If it would be of assistance, I would be happy to pursue the matter further with some who have more direct experience with this type of program. In the meantime, you may wish to contact the new Executive Director of Halfway House and Residential Homes program, Neil Boline. He expects to be attending a national meeting of halfway house personnel within the next several weeks, and perhaps he can get some helpful information there.

Sincerely,



Hugh W. Gibson
Executive Director

HWG/tw

July 17, 1972

Mrs. Kay Arvin
814 Century Plaza Building
Wichita, Kansas 67202

Dear Mrs. Arvin:

Thank you very much for your letter. This is exactly the type of information I was hoping to obtain. I think either your first approach would be a possibility or a modification of the second approach. It is my understanding from our legal counsel that we would not have the ability to provide temporary zoning and let it automatically revert once the use ceased. Changes in zoning can only be accomplished in the same order that they are first obtained - through the appropriate advertising, notice and public hearings. As an alternate to that, I think we could do the same type of thing by putting into the zoning ordinance a provision that says the Board of Zoning Appeals may have the authority to grant such special uses as an exception to the zoning ordinance, provided that it meets the following conditions: (which would be similar to those you suggested), plus such other conditions as may be deemed appropriate in order to maintain the facility within the general character of the neighborhood. A latter example of such condition might be the total number of people that could be taken into the home.

I am forwarding your letter to Dr. Bauman and to Hugh Gibson, pointing out the problems and asking them to provide some comment, particularly as it might relate to other types of rehabilitation programs. I suggested that within a two week period that we could then assemble that material and let me provide a recommendation to the Planning Commission and ask them to give the direction that they would like to take. Thus, I would expect to try to bring this to the Planning Commission sometime in the month of August. Based on their response, we would then prepare the appropriate modifications to the text of the ordinance and be in a position then, hopefully, to handle this problem.

Page 2 - Mrs. Kay Arvin
July 17, 1972

Thank you again for your response and I am sure that we can find
an acceptable way of handling this problem.

Sincerely,

Robert A. Lakin
Director of Planning

RAL:ber

ARVIN, ARVIN & BUSEY, CHARTERED
ATTORNEYS AND COUNSELORS AT LAW
814 CENTURY PLAZA BUILDING
WICHITA, KANSAS 67202
AREA CODE 316 265-2634

LESTER C. ARVIN
KAY K. ARVIN
ROONEY H. BUSEY

July 13, 1972

Mr. Robert A. Lakin
Director of Planning
Metropolitan Planning Department
City Building Annex
104 South Main Street
Wichita, Kansas 67202



Dear Mr. Lakin:

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If you believe this is too restrictive and too specific, I would like to suggest the following substitute ordinance, which is similar to that being used in other areas. As you

Mr. Robert A. Lakin
July 13, 1972.

#2

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It is understood that the granting of a Zone B Rating for such home is to be temporary and when the property is no longer used for the above stated purpose, the zone rating previously held shall automatically become effective.

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The first ordinance permits the group to be classified as a Zone "A" and does not require a zoning change, you will notice. The second suggestion does require a zone change, but on a temporary basis with an automatic reversion clause. I have not attempted to conform the language specifically with that of the existing ordinances.

I will be interested in your opinions and hope to hear from you soon. We do appreciate the genuine interest which you and the other board members have shown and

Mr. Robert A. Lakin
July 13, 1972.

#3

the efforts which you are using in helping us solve this
dilemma.

Sincerely,

Kay K Arvin

ARVIN, ARVIN & BUSEY, CHARTERED

KKA:blh