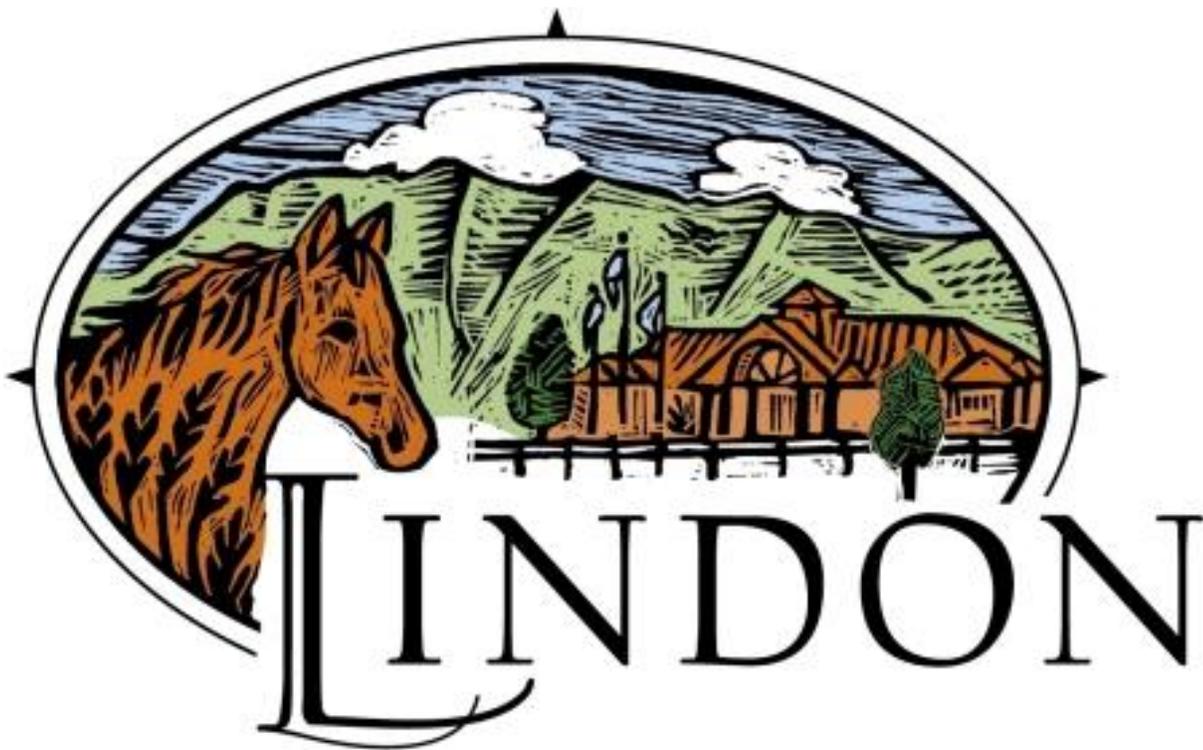


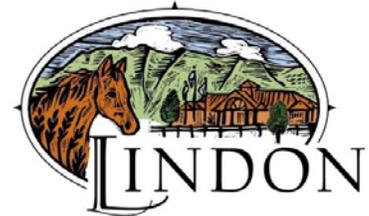
Lindon City Planning Commission Staff Report



November 11, 2014

Notice of Meeting

Lindon City Planning Commission



The Lindon City Planning Commission will hold a regularly scheduled meeting on **Tuesday, November 11, 2014** in the Council Room of Lindon City Hall, 100 North State Street, Lindon, Utah. The meeting will begin at **7:00 P.M.** This meeting may be held electronically to allow a commissioner to participate by video or teleconference. The agenda will consist of the following:

AGENDA

Invocation: By Invitation

Pledge of Allegiance: By Invitation



Scan or click here for link to download agenda & staff report materials.

1. **Call to Order**
2. **Approval of minutes from August 12, 2014 and October 28, 2014**
3. **Public Comment**

*(Review times are estimates only.)
(60 minutes)*

4. **Continued Item — Site Plan — Reflections Recovery Center, 145 South 200 East**
Ron Wentz of Reflections Recovery Center seeks site plan approval for a residential substance use disorder and mental health recovery center for up to 16 residents at 145 South 200 East in the R1-20 (Single Family Residential) zone. This item was continued from the September 23, 2014 Planning Commission meeting.
NOTE: The Planning Commission will act as the final land use authority for this item and will make a final decision on the application. The City Council initially invoked section 17.08.090 of the Lindon City Code to become the final land use authority for the item. However, the City Council has reassigned the Planning Commission as the final land use authority for this application. The City Council will act as the appeal authority if the final decision of the Planning Commission is appealed.
(20 minutes)
5. **Conditional Use Permit — Planet Power Toys, 165 South State Street**
Lynn Clingo of Planet Power Toys, LLC requests approval of a conditional use permit to operate as a licensed dealer for sales and service of automobiles, boats, RVs, adult and youth ATVs and UTVs, scooters, dirt bikes and motorcycles at 165 South State Street in the General Commercial (CG-A) zone.
6. **New Business (Reports by Commissioners)**
7. **Planning Director Report**

Adjourn

Staff Reports and application materials for the agenda items above are available for review at the Lindon City Planning Department, located at 100 N. State Street, Lindon, UT. For specific questions on agenda items our Staff may be contacted directly at (801) 785-7687. City Codes and ordinances are available on the City web site found at www.lindoncity.org. The City of Lindon, in compliance with the Americans with Disabilities Act, provides accommodations and auxiliary communicative aids and services for all those citizens in need of assistance. Persons requesting these accommodations for City-sponsored public meetings, services programs or events should call Kathy Moosman at 785-5043, giving at least 24 hours notice.

Posted By: Jordan Cullimore
Time: ~11:00 am

Date: November 7, 2014
Place: Lindon City Center, Lindon Public Works, Lindon Community Center

Item I – Call to Order

November 11, 2014 Planning Commission meeting.

Roll Call:

Ron Anderson
Sharon Call
Rob Kallas
Mike Marchbanks
Matt McDonald
Andrew Skinner
Bob Wily

Item 2 – Approval of Minutes

Joint PC/CC Work Session – Tuesday, August 12, 2014
Planning Commission – Tuesday, October 24, 2014

2 The Lindon City Council and Lindon City Planning Commission held a Joint Work
Session on **Tuesday, August 12, 2014 at 6:00 p.m.** in the Lindon City Center, City
Council Chambers, 100 North State Street, Lindon, Utah.

4 **WORK SESSION** – 6:00 P.M.

6 Conducting: Mayor Acerson

8 **PRESENT**

10 Jeff Acerson, Mayor
12 Matt Bean, Councilmember
14 Van Broderick, Councilmember
Jacob Hoyt, Councilmember
16 Carolyn Lundberg, Councilmember
Sharon Call, Chairperson
18 Ron Anderson, Commissioner
Mike Marchbanks, Commissioner
20 Rob Kallas, Commissioner
Bob Wily, Commissioner
22 Andrew Skinner, Commissioner
Matt McDonald, Commissioner

ABSENT

Randi Powell, Councilmember

24 **Staff Present**

26 Adam Cowie, City Administrator
Hugh Van Wagenen, Planning Director
28 Jordan Cullimore, Associate Planner
Brian Haws, City Attorney
Kathy Moosman, City Recorder

30 **1. Call to Order** – The meeting was called to order at 6:00 p.m.

32 **2. Discussion Item:** Lindon City Council and Planning Commission will conduct a joint
work session to discuss future plans and policies related to development of the 700
34 North Corridor.

36 Hugh Van Wagenen, Planning Director, opened the discussion by stating the two
governing bodies have been brought together to discuss future plans and policies related
38 to the 700 North Corridor development which has been built for about a decade now with
not a lot of development. He noted the purpose for discussion tonight is to build some
40 sort of consensus and to incorporate the same vision regarding the corridor. Mr. Van
Wagenen explained that the Planning Commission acts as the land use authority and the
42 City Council is the final decision maker and authority. Mr. Van Wagenen then gave some
background and presented three (3) maps for reference; Lindon City Zoning Map,
44 Community CDA Map and the General Plan Map. Mr. Van Wagenen noted it is
paramount that the CDA boundary go off of either side of the 700 north corridor which is
46 about 500 ft. to the north and 500-600 ft. below to give a quick idea of what is being

2 talked about. Mr. Van Wagenen then referenced a link to a survey sent with 12 questions
4 for the attendees to fill out. He directed them to go through each question individually
6 and answer the questions. He added if they have any questions to please ask as we go
8 along. Mr. Van Wagenen then referenced the maps laid out on the tables for review and
explained the purpose of each map. He noted the bulk of the time tonight will be spent
talking about the survey questions. Mr. Van Wagenen then went over the answers to the
survey questions submitted by the attendees including strengths, weaknesses and what
types of land uses followed by some general discussion.

10 At this time Mr. Van Wagenen turned the time over to David Adams,
12 representative of the ownership group on the north side of 700 north. Mr. Adams pointed
14 out there is a lot of competing land and depending on what your vision is and what you
16 are trying to draw to the area there is still a lot of competing land. Which means there is
land that is available for the same use that could be closer to other interchanges.
Councilmember Lundberg mentioned the projection of how many people there will be
between a 3 and 5 mile radius from Highland to Orem. She noted that the Pleasant
Grove/Lindon interchange was rated 4th highest out of 10 interchanges through 2020.

18 Mr. Van Wagenen explained the transit hub for the Trax line will go into Pleasant
20 Grove and American Fork and up to Lehi. He noted that UTA owns Trax and the
alignment of a possible future light rail would go down the corridor and the alignment
22 study will determine the stations and how much influence the municipalities will have.
He added that they are federally funded projects. H noted that cities have to be more pro-
24 active if they want to attract transit hubs but they are not willing to change their land use
policies to get it and there is the ability and potential for them to achieve this. There was
then some general discussion regarding transit hubs.

26 Mr. Adams brought up another aspect to consider, that being the “Evermore”
28 project, and if it does come to fruition the way it is intended it will draw “super-regional”
attention on this area and Lindon can possibly capitalize on this site. They intend to and
30 seem to have the money and ability to make that work; they are expecting to be a national
draw and expect to be in operation by 2016. Mr. Adams noted that a convention hotel
will in fact be going in the area also, and these kinds of things may give Lindon City the
32 opportunity to have a “super-regional” site. Mr. Adams added that as soon as they decide
on a transit line they have to have an interest in a location or they will be gone. There was
then some additional conversation regarding these comments.

34 Mr. Adams commented that the question should be framed as not when will the
36 frontrunner (Trax) come but how far away it is and if we will be able to pay for it; there a
lot of different mechanisms to pay. Mr. Adams pointed out we are not thinking 20 years
38 from now, we could be thinking 5 years from now. He is suggesting to not think in terms
of when frontrunner will be put there but when will the funds be available for it to be
40 purchased, whether it is the City, MAG, a federal grant or somebody with some foresight
to buy the locations, then is it not a strenuous holding issue.

42 At this time Mr. Van Wagenen suggested scheduling another work session as
there is still a lot of discussion that needs to take place. It was determined to hold another
work session on August 26, 2014 at 6:00 pm.

44 Mayor Acerson called for any further comments or discussion from the Council or
46 Commission. Hearing none he adjourned the meeting.

Adjourn – The meeting was adjourned at 7:00 p.m.

2

Approved – November 5, 2014

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6

Kathryn Moosman, City Recorder

8

10 Jeff Acerson, Mayor

12

14 Sharon Call, Chairperson

2 The Lindon City Planning Commission held a regularly scheduled meeting on **Tuesday,**
3 **October 28, 2014 at 7:00 p.m.** at the Lindon City Center, City Council Chambers, 100
4 North State Street, Lindon, Utah.

6 **REGULAR SESSION** – 7:00 P.M.

7 Conducting: Sharon Call, Chairperson
8 Invocation: Matt McDonald, Commissioner
9 Pledge of Allegiance: Bob Wily, Commissioner

10 **PRESENT**

11 Sharon Call, Chairperson
12 Ron Anderson, Commissioner
13 Mike Marchbanks, Commissioner
14 Rob Kallas, Commissioner
15 Bob Wily, Commissioner
16 Matt McDonald, Commissioner
17 Hugh Van Wagenen, Planning Director
18 Jordan Cullimore, Associate Planner
19 Kathy Moosman, City Recorder

10 **ABSENT**

11 Andrew Skinner, Commissioner

22 **Special Attendee:**

23 Councilmember Matt Bean

- 24
- 25 1. **CALL TO ORDER** – The meeting was called to order at 7:00 p.m.
 - 26 2. **APPROVAL OF MINUTES** – The minutes of the regular meeting of September 23,
27 2014 were reviewed.

28

29 COMMISSIONER KALLAS MOVED TO APPROVE THE MINUTES OF THE
30 REGULAR MEETING OF SEPTEMBER 23, 2014 AS WRITTEN. COMMISSIONER
31 WILY SECONDED THE MOTION. ALL PRESENT VOTED IN FAVOR. THE
32 MOTION CARRIED.

33 3. **PUBLIC COMMENT** –

34

35 Chairperson Call called for comments from any audience member who wished to
36 address any issue not listed as an agenda item. There were no public comments.

37 **CURRENT BUSINESS** –

- 38
- 39 4. **Public Hearing** – *General Plan Amendment, Colmena Group, Approx. 600 South &*
40 *Geneva Road.* Bryan Stevenson of Coleman Group requests a General Plan Map
41 amendment to change the General Plan designation of property located at
42 approximately 600 South and Geneva Road from Commercial to Light Industrial.
43 The applicant intends to establish retail and office/warehousing uses on the site.
44

2 Recommendations will be made to the City Council at their next available meeting
after Planning Commission review.

4 COMMISSIONER ANDERSON TO OPEN THE PUBLIC HEARING.
6 COMMISSIONER MARCHBANKS SECONDED THE MOTION. ALL PRESENT
VOTED IN FAVOR. THE MOTION CARRIED.

8 Jordan Cullimore, Associate Planner, opened the discussion by giving an
overview of this agenda item. He explained this is a request by Bryan Stevenson and
10 Lance Bullen of Colmena Group for approval of a General Plan Map amendment to
change the General Plan designation of property located at approximately 600 South and
12 Geneva Road (across from the Harley-Davidson dealership) from Commercial to Light
Industrial. He then referenced the conceptual site plan showing the area in question
14 noting the current general plan designation is commercial and the zoning is CG-A8. He
further noted the applicant is wanting to establish a retail and office/warehousing use on
16 the site and has the property under contract through Anderson/Geneva. He added that
recommendations will be made to the City Council at their next available meeting after
18 Planning Commission review.

20 Mr. Cullimore explained that the applicant proposes to develop the parcels with a
site configuration similar to the site plan concept included in the packet (attachment 4).
He explained the southernmost structure that fronts along 600 south will be a gasoline
22 service station, and the northernmost structure will be office/warehousing space and will
have an architectural design similar to the design portrayed in attachment 5 (included in
24 the packets).

26 Mr. Cullimore noted the current zoning (CG-A8) allows for gasoline service
stations, but does not permit office/warehousing uses. He added that staff initially
advised the applicant that the Mixed Commercial General Plan/zone designations would
28 best accommodate their proposal, but after further review it was identified that the
minimum zone area for the Mixed Commercial zone is 15 acres, and this request would
30 not satisfy the 15 acre requirement. Staff then advised the applicant that a general
plan/zone change to Light Industrial would comply with code requirements and still
32 allow the applicant to develop the site according to their plans.

34 Mr. Cullimore went on to say that city code requires that any zone change must be
consistent with the City's General Plan Designation; the current General Plan designation
is commercial. He noted the applicant is requesting that the General Plan designation be
36 changed to Light Industrial to permit the zone change and allow their desired uses.

38 Mr. Cullimore re-iterated the General Plan currently designates the property as
Commercial. He went on to say this category includes retail and service oriented
businesses and shopping centers that serve community and regional needs. Mr.
40 Cullimore stated that the applicant requests that the General Plan designation of the
property be changed to Light Industrial, which accommodates manufacturing, industrial
42 processes, and warehousing uses not producing objectionable effects. He further stated
the Light Industrial designation also allows some appropriate related retail uses such as
44 gasoline service stations.

46 Mr. Cullimore the presented the following analysis followed by discussion:

1. Relevant General Plan policies to consider in determining whether the requested change will be in the public interest:

- a. It is the purpose of the industrial to provide for employment and manufacture of materials which are essential to the economy of Lindon City and to provide areas in appropriate locations where a combination of research and development, manufacturing, and industrial processing and warehousing may be conducted.
- b. The goal of industrial development is to promote employment opportunities, quality businesses, and environmentally clean industrial and technology development which will provide a diversified economic base and will complement local retail, commercial, and industrial establishments in harmony with the community's overall country image and identity as reflected in the Community Vision Statement.
 - i. Objectives of this goal are to:
 1. Encourage the development of high quality, aesthetically pleasing business park areas incorporating major landscape features.
 2. Identify those areas most appropriate for business park development in future growth areas, such as major highway access areas.
 3. Establish and enforce standards with respect to environmental concerns such as; noise, air quality, odor and visual.
 4. Increase the city's business base in the technology sector, building on the existing base and growing technology infrastructure, and consider expanding the Research and Development zones.
 - c. Applicable city-wide land use guidelines:
 - i. The relationship of planned land uses should reflect consideration of existing development, environmental conditions, service and transportation needs, and fiscal impacts.
 - ii. Transitions between different land uses and intensities should be made gradually with compatible uses, particularly where natural or man-made buffers are not available.
 - iii. Commercial and industrial uses should be highly accessible, and developed compatibly with the uses and character of surrounding districts.

Mr. Cullimore then referenced an aerial photo of the proposed area to be re-classified and photographs of the existing site, the applicant's proposal, the conceptual site plan and also the conceptual architectural renderings.

Commissioner Kallas asked Mr. Cullimore for a reminder of how the architectural requirements will change if the zone change is approved. Mr. Cullimore stated as it is currently written they will be able to use concrete tilt-up or colored concrete tilt-up in

the light industrial zone as well as metal buildings, which is less stringent.

2 Commissioner Kallas then asked the applicants to describe the architectural design of
their building. Mr. Bullen stated their building will be similar to a lot of products being
4 built recently which is a modern, “clean” warehouse. The applicant then presented a
drawing of the proposed building noting it is predominantly concrete tilt-up with a glass
6 storefront (along the face that is visible from Geneva Road). He added they will also be
using some different colors (concrete and efface material) to get some architectural
8 relief and to provide some locations for signage. Mr. Bullen explained that because this
building is a relatively small footprint the average percentage of something other than
10 tilt up is pretty large as a percentage of the frontage (which will look more like a retail
front because of the size). He went on to say this is market driven more than anything
12 else because a lot of tenants today are interested in space like this as far as needs and
uses and want a nice storefront presence. He noted this is a trend in the country on a
14 larger scale as there is a lot of flex space being used.

Commissioner Kallas pointed out that most of what the applicant is explaining
16 would fit under the mixed commercial zone. Mr. Cullimore agreed with that statement
noting the reason they are not requesting that zone is that the ordinance requires a
18 minimum zone size. Commissioner Kallas mentioned that he feels Geneva Road will
ultimately be a nice commercial street with less industrial in the future, so if the zone is
20 changed from commercial to industrial he would feel better about doing it with what the
applicant has presented as it has more of a commercial line of structure. Commissioner
22 Wily inquired if the 15 acre requirement can be waived. Mr. Cullimore stated that the
code does not allow it to be waived, noting it was recently dropped from 30 to 15 acres.

24 Mr. Bullen pointed out because there is not access to cross the railroad tracks
along Geneva Road they feel like the highest value space will be on the corner, and the
26 further south down Geneva Road the uses change. Commissioner McDonald mentioned
the high interest of Maverick Corporation of frontage on Geneva Road, noting in
28 discussion with them this would be one of their larger store (5,000 sq. ft.) layouts
because this is their core market (industrial construction). Chairperson Call observed
30 what the applicants are proposing is very similar to what is already developing in the
area. Mr. Stevenson commented from what is on the north side of the road extending
32 west is similar and it is what the market is currently calling for with a lot of demand. He
explained this corner would be hard to get a retailer to locate there (because of direct
34 access) so it lends itself to a flex space type building.

Mr. Cullimore brought up the fact, from staff’s analysis, that it makes sense to
36 preserve the retail component along the frontage. Commissioner Anderson expressed the
same concerns as Commissioner Kallas that if the zone is changed there may be the
38 potential of slipping back in with a metal building in the future. The applicant stated
they do not plan on using metal as they are not marketable and cost a lot to maintain and
40 are seldom built; he would not have a problem with agreeing to not build a metal
building. Commissioner Kallas asked if a condition of approval could be that the
42 structure will meet the architectural requirements of the CG-A8 zone. Mr. Van Wagenen
stated they could recommend a condition of requiring a concrete tilt up building or at the
44 least not a metal building. Commissioner Kallas also asked this is approved with mixed
commercial architectural standards and if something fell through, would it not have to
46 revert back so quickly. Mr. Van Wagenen advised the Commission to keep in mind that
the last time this was done it was a bit cumbersome, and the way to avoid this issue is to
48 say the site plan changes substantially from what is being approved, including

2 architectural elevations, then the zone would revert back into the light industrial zone;
3 what they cannot do is talk about ownership, but outside of that, by the nature of the
4 request, those stipulations can be made. There was then some additional discussion by
5 the Commission regarding this agenda item.

6 Chairperson Call called for any further discussion. Hearing none she called for a
7 motion with the conditions discussed.

8 COMMISSIONER KALLAS MOVED TO RECOMMEND TO THE CITY
9 COUNCIL APPROVAL OF THE APPLICANTS REQUEST TO CHANGE THE
10 GENERAL PLAN DESIGNATION OF THE LOTS IDENTIFIED BY UTAH COUNTY
11 PARCEL #38:425:00008 FROM COMMERCIAL TO LIGHT INDUSTRIAL (LI)
12 WITH THE FOLLOWING CONDITIONS 1. THE SITE MUST MEET THE MC ZONE
13 ARCHITECTURAL REQUIREMENTS AND 2. THE SITE MUST INCLUDE A
14 CONVENIENCE STORE/GAS STATION COMPONENT ALONG THE 600 SOUTH
15 FRONTAGE. COMMISSIONER ANDERSON SECONDED THE MOTION. THE
16 VOTE WAS RECORDED AS FOLLOWS:

17 CHAIRPERSON CALL	AYE
18 COMMISSIONER ANDERSON	AYE
19 COMMISSIONER KALLAS	AYE
20 COMMISSIONER MARCHBANKS	AYE
21 COMMISSIONER WILY	AYE
22 COMMISSIONER MCDONALD	AYE

23 THE MOTION CARRIED UNANIMOUSLY.

24
25 5. **Public Hearing** – *Zone Map Amendment, Colmena Group, Approx. 600 South and*
26 *Geneva Road.* Bryan Stevenson of Coleman Group requests a Zone Map amendment
27 to change the zoning designation of property located at approximately 600 South and
28 Geneva Road from General Commercial A8 (CG-A8) to Light Industrial (LI). The
29 applicant intends to establish retail and office/warehousing uses on the site.
30 Recommendations will be made to the City Council at their next available meeting
31 after Planning Commission review.

32
33 Mr. Cullimore led the discussion by stating this item is the second part of a two
34 part approval that has already been discussed. He noted this action would put into effect
35 the zoning in compliance with the general plan amendment that was just approved.

36 Mr. Cullimore also explained the current zoning (CG-A8) allows for gasoline
37 service stations, but does not permit office/warehousing uses. Staff initially advised the
38 applicant that the mixed commercial general plan/zone designations would best
39 accommodate their proposal, but upon further review, it was identified that the minimum
40 zone area for the Mixed Commercial zone is 15 acres. He noted this request would not
41 satisfy the 15 acre requirement. Consequently, staff advised the applicant that a general
42 plan/zone change to Light Industrial would comply with code requirements and still
43 allow the applicant to develop the site according to their plans. Mr. Cullimore also
44 presented an aerial photo of the proposed area to be re-classified, photographs of the
45 existing site, the applicant's proposal, conceptual site plan, and the conceptual
46 architectural renderings followed by discussion.

47 Commissioner Kallas inquired what the next step will be. Mr. Cullimore stated it
48 will go before the City Council for zoning approval and then will likely go to the

2 Development Review Committee several times to tie down the technical issues then they
3 will submit the site plan for approval. He noted that applicants have indicated they are
4 still in discussions with the convenience store operator as to whether or not the
5 convenience store is going to be operated under a ground lease or subdivided into two
6 parcels and sell off one parcel, so dependent upon the discussions it will determine the
7 site plan conditions (one or two parcels). There was then some lengthy general
8 discussion regarding this issue and the conditions attached with the previous motion and
9 associated time frames. Mr. Van Wagenen clarified as discussed, from staff perspective,
10 the same conditions can be included in this motion for the zone change.

11 Chairperson Call called for any public comments at this time. Hearing none she
12 called for a motion to close the public hearing.

13 COMMISSIONER ANDERSON MOVED TO CLOSE THE PUBLIC
14 HEARING. COMMISSIONER MCDONALD SECONDED THE MOTION. ALL
15 PRESENT VOTED IN FAVOR. THE MOTION CARRIED.

16 Chairperson Call called for any further discussion from the Commission. Hearing
17 none she called for a motion.

18 COMMISSIONER KALLAS MOVED TO RECOMMEND TO THE CITY
19 COUNCIL APPROVAL OF THE APPLICANTS REQUEST TO CHANGE THE
20 ZONING DESIGNATION OF THE LOTS IDENTIFIED BY UTAH COUNTY
21 PARCEL #38:425:00008 FROM GENERAL COMMERCIAL A8 (CG-A8) TO LIGHT
22 INDUSTRIAL (LI) WITH THE FOLLOWING CONDITIONS 1. THE SITE MUST
23 MEET THE MC ZONE ARCHITECTURAL REQUIREMENTS AND 2. THE SITE
24 MUST INCLUDE A CONVENIENCE STORE/GAS STATION COMPONENT
25 ALONG 600 SOUTH FRONTAGE. COMMISSIONER MCDONALD SECONDED
26 THE MOTION. THE VOTE WAS RECORDED AS FOLLOWS:

27 CHAIRPERSON CALL	AYE
28 COMMISSIONER ANDERSON	AYE
29 COMMISSIONER KALLAS	AYE
30 COMMISSIONER MARCHBANKS	AYE
31 COMMISSIONER WILY	AYE
32 COMMISSIONER MCDONALD	AYE
33 THE MOTION CARRIED UNANIMOUSLY.	

34 **5. New Business (Reports by Commissioners) –**

35 Chairperson Call called for any new business or reports from the Commissioners.
36 Commissioner McDonald reported that he recently attended some training regarding
37 public meetings and noted it was beneficial. He questioned if there is a section in the
38 ordinance that states what the Commission's responsibilities are and questioned the
39 yearly required training for Commissioners. Mr. Cullimore stated the ordinance section
40 regarding Commission responsibilities is title 17.08 of the city code. He also noted the
41 training with the Commission was recently presented before he was appointed; which is
42 typically conducted by City Attorney, Brian Haws. There was then some general
43 discussion regarding Planning Commission responsibilities. Chairperson Call brought up
44

2 the previously discussed weed issue along a fence line on Center Street. Mr. Cullimore
3 stated they are aware of this issue and it will be addressed and taken care of as soon as
4 possible. Commissioner Kallas questioned if staff will have the analysis done on the
5 Recovery Center by then the November 11th meeting. Mr. Van Wagenen confirmed they
6 plan to have everything vetted so the Commission is familiar and comfortable with the
7 issue prior to the meeting. There was then some general discussion regarding this issue.

8 **6. Planning Director Report–**

10 Mr. Van Wagenen gave an update on the Ivory Development noting they will be
11 meeting with the committee (super DRC) to discuss time lines and figures etc. Mr. Van
12 Wagenen emphasized to the Commission to make sure and voice any concerns or
13 reservations they may have about the proposed development and talk about things early
14 on. Mr. Van Wagenen also reported that Ron Anderson has submitted his resignation and
15 he has agreed to stay on until the group home issue is complete. Mr. Van Wagenen noted
16 the “Hallows Eve” party will be held at the Community Center on October 30th.
17 Chairperson Call called for any further comments or discussion. Hearing none she called
18 for a motion to adjourn.

20 **ADJOURN –**

22 COMMISSIONER MARCHBANKS MADE A MOTION TO ADJOURN THE
23 MEETING AT 9:05 P.M. COMMISSIONER MCDONALD SECONDED THE
24 MOTION. ALL PRESENT VOTED IN FAVOR. THE MOTION CARRIED.

26 Approved – November 11, 2014

28
30 _____
31 Sharon Call, Chairperson

32
34 _____
35 Hugh Van Wagenen, Planning Director

Item 3 – Public Comment

1 - Subject _____
Discussion

2 - Subject _____
Discussion

3 - Subject _____
Discussion

Item 4: Continued Item — Site Plan — Reflections Recovery Center, 145 South 200 East

Ron Wentz of Reflections Recovery Center seeks site plan approval for a residential substance use disorder and mental health recovery center for up to 16 residents at 145 South 200 East in the R1-20 (Single Family Residential) zone. This item was continued from the September 23, 2014 Planning Commission meeting. The Planning Commission will act as the final land use authority for this item and will make a final decision.

<p>Applicant: Ron Wentz Presenting Staff: Hugh Van Wagenen</p> <p>General Plan: Residential Low Zone: Single Family Residential (R1-20)</p> <p>Property Owners: DAR2, LLC Address: 145 South 200 East Existing Parcel IDs: 53:208:0004 Lot Size (Proposed): 1.293 acres</p> <p>Type of Decision: Administrative Council Action Required: No</p>	<p><u>SUMMARY OF KEY ISSUES</u></p> <ol style="list-style-type: none">1. Whether to grant site plan approval for a residential substance use disorder and mental health recover center.2. Whether to grant a reasonable accommodation from the occupancy requirement in subsection 17.70.040(6) of the Lindon City Code and allow up to 16 occupants instead of 4. <p><u>MOTION</u> I move to (<i>approve, deny, continue</i>) the applicant's request for site plan approval of the Reflections Recovery Center with the following conditions (if any):</p> <ol style="list-style-type: none">1.2.3.
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DESIGNATION OF LAND USE AUTHORITY

The Planning Commission will act as the final land use authority for this item and will make a final decision on the application. The City Council initially invoked section 17.08.090 of the Lindon City Code to become the final land use authority for the item. However, the City Council has reassigned the Planning Commission as the final land use authority for this application. The City Council will act as the appeal authority if the final decision of the Planning Commission is appealed.

BACKGROUND

1. This is a site plan application for approval of a 7,822 square foot residential substance use disorder and mental health recovery center.
2. The applicant is requesting a reasonable accommodation from Lindon City Code 17.70.040(6) to allow 16 residents instead of 4.
3. This item was continued from the September 23, 2014 Planning Commission meeting.

DISCUSSION & ANALYSIS

Staff Discussion and Analysis of Lindon City Code Requirements

Applicable Lindon City Code sections addressing requirements for group homes for persons with a disability are listed below. Staff analysis is included in **bold**.

Section 17.70.020 General Definitions

1. For the purposes of this section, certain terms and words are defined and are used in this title in that defined context. Any words in this title not defined in this chapter shall be as defined in Webster's Collegiate Dictionary.
2. As used in this section, the following words shall be defined as follows:

Elderly; Elderly shall mean a person who is 60 years or older.

Group Home; When not used in specific context in relations to a particular type of facility, group home shall include a residential facility for elderly persons, a group home for persons with a disability, a juvenile group home, a transitional/treatment group home, or a transitional victim home.

Resident; Resident shall mean persons receiving the benefit of services and facilities provided by a group home, excluding staff and care providers.

...

Section 17.70.040 Group Home for Persons With Disabilities

1. Group homes for persons with a disability shall be a permitted use in all residential zones, and requires site plan approval by the Planning Commission.
The applicant has submitted a land use application for site plan approval of a residential treatment facility in an existing dwelling in the Single Family Residential (R1-20) zone.
2. Disabled or Disability under this section shall mean, with respect to a person, a person who has a physical or mental impairment which substantially limits one or more of that person's major life activities or has a history of having such an impairment. Disabled or Disability does not mean an impairment or limitation caused by addiction and current use of a controlled substance or alcohol. Disabled or Disability also does not mean an impairment or limitation resulting from or related to kleptomania, pyromania, or any sexually related addiction or disorder, including but not limit to, sex and pornography addictions, transvestism, transexualism, pedophilia, exhibitionism, voyeurism, gender identity disorders (those not resulting from physical impairments), or any other sexual behavior disorder.
The applicant has indicated that the facility will only serve individuals that are considered disabled under Federal guidelines.
3. Each group home for person with a disability is subject to state licensing procedures and must provide the city proof of a valid license issued by the Utah S[t]ate Division of Licensing and compliance with Department of Human Services standards.
The applicant has passed pre-certification standards through the Utah State Division of Licensing and Department of Human Services. The facility will receive a license after final inspection. Staff recommends that the Planning Commission require, as a condition of approval, that the applicant present the license to the City within sixty (60) days of site plan approval.
4. The group home shall conform to all applicable building, fire, health and safety codes and requirements for facilities of this type and for the zoning in which they are constructed.

The applicant is currently working with Building and Fire Inspection Officials to achieve compliance with this requirement. Lindon City's Building Official has determined that the applicant will be able to meet applicable code requirements. The plans are working their way through administrative plan review. Staff will ensure that all code requirements are satisfied before issuing a building permit to complete the work.

5. The structure shall be capable of use as a group home for persons with a disability, which includes being fully handicap accessible, without structural or landscaping alterations that would change the residential character of the structure. A site plan must be submitted showing any alteration of the structure or landscaping. Any alterations must be approved by the Planning Commission before a permit is issued.

The applicant has submitted plans, which have been reviewed by staff. No significant structural changes have been proposed. Landscaping and surfacing alterations will accommodate on-site parking required by the Lindon City Code, while maintaining a character that is conducive to residential settings. A review of aerial photography indicates that it is not uncommon on residential lots in Lindon for a dwelling to have a parkable surface in a side yard that extends into the rear yard of the dwelling.

6. Occupancy of the structure shall be such that each resident is provided adequate personal space. A residential facility shall ensure that each bedroom space in the facility has a floor area, exclusive of closet space, of at least 74 square feet for initial occupant and an additional 50 square feet for each other occupant of this space, but in no case shall the group home have any more than four (4) residents at any given time.

The applicant has submitted calculations showing compliance with the bedroom floor area requirements. Regarding the maximum occupant limitation, the applicant proposes to house 16 unrelated individuals in the dwelling. This proposal does not comply with the Code's 4 resident occupancy maximum. Consequently, the applicant is requesting a reasonable accommodation under the Federal FHAA and ADA to allow up to 16 unrelated individuals in the home, instead of 4. See the brief from Lindon City Attorney Brian Haws for an explanation of the reasonable accommodation process (attachment 1) Also, see staff's memorandum on the reasonable accommodation for staff analysis and conclusions regarding the request (attachment 2).

- ~~7. No group home for persons with a disability shall be established or maintained within three fourths of a mile (3,960 feet) of another group home for the elderly, a group home for persons with a disability, a juvenile group home, a transitional/treatment group home, or a transitional victim home as measured in a straight line between the closest property line of the proposed group home and the closest property line of the existing group homes identified above. NO group home that has residents with disabilities related to any form of substance abuse or that have a history of past violence, sexual aggression or any offense involving a weapon or which resulted in serious bodily injury to another person shall be established within 500 feet of a licensed daycare, or public or private school as measured in a straight line between the closest property lines of the propose group home and the school/daycare lot.~~

Lindon City's Attorney has advised staff that this provision violates Federal Standards, and should not be applied.

8. The facility shall provide one off-street parking space for each sleeping room, plus adequate parking for visitors and staff. In no case shall the facility have less than three off-street parking spaces.

The applicant's floor plan identifies 7 sleeping rooms. Residents will not have their own vehicles, and there will be anywhere from 2-6 employees on premise at any time. As noted above, the applicant has indicated that visitors will visit only occasionally, and not in large numbers. The site plan proposes 9 employee spaces, 6 guest spaces, and an additional 2 ADA accessible spaces for a total of 17 off-street parking spaces in the rear yard of the dwelling. The proposed number of spaces satisfies Lindon City Code requirements and appears sufficient to accommodate the facility's parking needs.

9. The facility shall have six foot site obscuring fencing along the side and back yards that is constructed in a manner consistent with the residential character of the neighborhood. Such fencing shall be constructed and maintained in accordance with the Lindon City Code. The Planning Commission shall approve the style and design of any fencing before a permit is issued. A chainlink fence with slats shall not be considered site obscuring for the purposes of this section.

The applicant indicates that vinyl residential fencing will be installed along the side yards, and around the perimeter of the back yard. Renderings of the proposed style and design are included in attachment 4.

10. No portion of the facility's front and side yard setbacks shall be used to provide parking spaces as required by this section without prior approval of the Planning Commission. Any use of the yard as parking space shall not change the residential character of the property.

The proposed site plan does not identify any portion of the required front or side yard as parking area. Regarding the residential character of the property, a review of aerial photography indicates that it is not uncommon on residential lots in Lindon for a dwelling to have parkable surface in a side yard that extends into the rear yard of the dwelling.

11. The group home operator shall provide the city proof of adequate insurance for the program's vehicles, hazard insurance on the home, and liability insurance to cover residents and third party individuals.

The applicant has verified that they will provide applicable proof of insurance. Staff will ensure this requirement is satisfied.

12. The group home operator shall provide proof that each of the residents admitted to the facility falls within the definition of disability as set forth in this section and that the disability substantially limits the resident in a major life function.

Staff will ensure this requirement is satisfied.

13. The facility shall provide training or treatment programs for residents with disabilities which are in compliance with department of Human Services standards, as set forth in the Utah Administrative Code.

The applicant has indicated that they will comply with this requirement. Staff will ensure this requirement is satisfied.

14. Any group home for person with disability that have a history of past violence, sexual aggression or any offense involving a weapon or which resulted in serious bodily injury to another person, which is constructed within 1000 feet of a school or licensed daycare, as measured in a straight

line between the closest property lines of the proposed group home and the school lot, shall provide in accordance with rules established by the Department of Human Services under Title 62A, Chapter 2, Licensure of Programs and Facilities;

- a. 24-hour supervision for residents; and
- b. 24-hour security measures.

The applicant has indicated that the facility will not admit persons with a history of sexual offence or violence. The applicant also states that the facility is monitored continually.

15. The facility shall not accept any resident that would pose a direct threat to the health and safety of others in the facility or community or who in the past has posed a threat to the health and safety of others or whose tenancy would likely create a risk of substantial physical damage to others. The owner or operator of the facility shall conduct an individualized assessment of each person desiring to become a resident of the facility to determine if such person would constitute a threat prior to allowing occupancy of the facility by such a person. The assessment shall be conducted by a licensed psychologist, social worker or other licensed individual qualified to perform such assessments. Assessments shall include, but not be limited to, consideration for such things as past criminal histories and/or violent acts of the individual, the amounts of time that have lapsed since such acts, and treatments the individual has received. Evaluations of individuals who have committed acts of sexual aggression or criminal sex acts shall also include psycho-sexual evaluations by a licensed psychiatrist or an individual holding a PhD in psychology. No individual determined to pose a risk for commission of sexual offenses, or being classified as having predatory tendencies may be accepted as a resident.

The applicant has indicated that individuals with a history of sexual offence or violence will not be admitted into the program.

16. Prior to the initial occupancy of a group home for person with disabilities and at least quarterly thereafter, the owner or operator of the group home for persons with disabilities shall certify, in a sworn affidavit, that individualized assessments have been performed on each resident and that each resident meets the requirements of this section. Upon request, the owner or operator of the group home for persons with disabilities shall provide documentation and records to verify compliance with this section.

Staff will ensure this requirement is satisfied.

17. The facility shall comply with all applicable state and federal laws, including laws related to access.

The applicant has indicated that the facility will comply with this requirement.

18. To ensure the safety of the residents and surrounding community, the facility operators shall develop a safety plan demonstrating adequate supervision and control of the residents. The safety plan shall be reviewed by law enforcement officials and shall be approved by the Planning Commission.

A safety plan has been submitted to the Police Department, and is included in attachment 7 of the applicant materials portion of the staff report, for review. Lindon City Chief of Police, Cody Cullimore, has reviewed the safety plan and has indicated that, if the facility operates according to practices identified in the application submittal, the plan is sufficient for this type of facility.

Section 17.70.050 Procedure For Approval and Annual Renewal of Permit for a Group Home for Persons With Disabilities

1. At least ten (10) days before the Planning Commission hears the application for a group home for persons with disabilities, the city shall provide written notification, either in person or by first class mail, to all citizens living within or owning property within 750 feet of the proposed site of the group home as measured in a straight line between the closest property lines of the proposed group home and the neighboring lots.
2. Upon review of an application for a new group home for persons with disabilities and upon determination of compliance with all of the above requirements, the application may be approved. However, where in the opinion of the Planning Commission, the information provided by the applicant is insufficient for the group home for persons with disabilities is not in compliance with the requirements of section 17.70, the application may be denied. The city shall provide written notice of approval for the proposed group to all citizens living within or owning property within 750 feet of the proposed site of the group home as measured in a straight line between the closest property lines of the proposed group home and the neighboring lots. If the application is denied, the city shall provide the applicant written notice of the decision to deny the application. This notice of approval or denial shall be in addition to the notice required in paragraph 1 and shall be provided either in person or by first class mail within 5 days of the decision.
- ~~3. Upon receipt of approval of the Planning Commission, the operator of the group home for persons with a disability shall be eligible to secure an annual permit from the city. Said permit shall be valid for one calendar year and shall be renewed annually subject to;
 - a. The receipt of a renewal application that shall include the information and certifications required under Section 17.70 above and a certification that none of the resident pose a threat as of the date of renewal; and
 - b. at least ten (10) days before the Planning Commission hears the renewal application, the city shall provide written notification, either in person or by first class mail, to all citizens living within or owning property within 300 feet of the site of the group home.
 - c. A finding by the Planning Commission that during the preceding year the group home had been operated in compliance with the terms of section 17.70 and any other conditions of approval.~~

Lindon City's Attorney has advised staff that this provision does not apply to the present application.

4. A permit to operate a group home for persons with a disability shall be;
 - a. nontransferable and shall terminate if the structure is devoted to a use other than a group home for persons with disabilities or the structure fails to comply with all building, safety, health and zoning requirements of Lindon City.
 - b. Shall terminate if at any time it is demonstrated to the Planning Commission that;
 - i. The structure fails to comply with the requirements of section 17.70; or
 - ii. The program has failed to operate in accordance with the requirements of section 17.70.

Analysis of Applicant's Reasonable Accommodation Request

A memorandum from Lindon City Attorney Brian Haws addressing standards to follow and factors to consider when making a reasonable accommodation determination is included in attachment 1 below. Staff has also prepared a memorandum applying the recommended standards to the applicant's request for reasonable accommodation from section 17.70.040 to allow up to 16 unrelated individuals to reside in the home (attachment 2). The conclusion of the memorandum is to approve the site plan and grant the requested reasonable accommodation to house up to 16 unrelated, disabled individuals in the home.

Conclusions

Other than the request to house 16 unrelated, disabled individuals in the facility, the applicant's request for site plan approval complies with Lindon City Code (LCC) requirements.

The applicant has requested an accommodation under the Federal FHA and ADA from the four occupant limit required by LCC 17.70.040(6). The requested accommodation is to allow up to 16 unrelated, disabled individuals to live together in the facility. An analysis of the request for accommodation has concluded that the request is reasonable and necessary to allow disabled individuals equal opportunity to choose to live in residential housing.

MOTION

I move to (*approve, deny, continue*) the applicant's request for site plan approval of the Reflections Recovery Center and (*grant, deny, continue*) the applicant's request for reasonable accommodation to allow up to (#) residents in the facility, with the following conditions (if any):

- 1.
- 2.
- 3.

ATTACHMENTS

1. City Attorney's Memo on Request for Reasonable Accommodation
2. Staff's Analysis of Reasonable Accommodation Request
3. LYRB's Financial Analysis of Reflections Recovery Center
4. Fence Examples
5. Engineer's Opinion on Traffic Effect
6. Additional Documents Submitted after the September 23, 2014 Planning Commission meeting
7. Additional Documents Submitted before the September 23, 2014 Planning Commission meeting

HANSEN WRIGHT EDDY & HAWS, P.C.
ATTORNEYS

233 South Pleasant Grove Blvd., Suite 202
Pleasant Grove, Utah 84062

TELEPHONE (801) 443-2380
FACSIMILE (801) 796-0984

JAMES "TUCKER" HANSEN
KASEY L. WRIGHT
MARK D. EDDY
BRIAN K. HAWS
MELISSA K. MELLOR
TIMOTHY G. MERRILL

LARAMIE D. MERRITT
MATTHEW R. CRANE
BENJAMIN A. KEARNS

OF COUNSEL:
M. REED ADAMS

MEMORANDUM

TO: Lindon City Planning Commission

FROM: Brian Haws, Lindon City Attorney

DATE: September 19, 2014

RE: Reflections Recovery Center Request for Reasonable Accommodation

RE: Handicapped Housing Regulations and Candalight Properties

The purpose of this memorandum is to provide a legal opinion regarding the application of Reflections Recovery Center to establish a group home, its request for reasonable accommodation under the Americans with Disabilities Act, and the application of City's Development Code in dealing with the regulation of housing for persons with disabilities.

In dealing with the current application and request, it is important to understand the historical and legal background the City is obligated to consider in making its determination in deciding this matter.

LEGAL LANDSCAPE FOR REGULATING DISABILITY HOUSING

Up until May 2013, Utah state law allowed municipalities to place several unique regulations on residential facilities for persons with a disability. These regulations included reasonable dispersal requirements, occupancy limits, and security and supervision requirements. See UCA § 10-9a-520 (2005 Version). Lindon's current ordinance was drafted and adopted under these state provisions and incorporated many of these provisions in its terms and conditions.

However, since 2005 there have been numerous federal cases in which many similar provisions from other states have been successfully challenged and struck down as violating the Federal Fair Housing Act and the Americans with Disabilities Act. Recognizing these changes in federal housing discrimination laws as discussed below, the state legislature has repealed all of these allowed regulations. Now, a municipality may only regulate a residential facility for persons with a disability "to the extent allowed by: Title 57, Chapter 21, Utah Fair Housing Act,

and applicable jurisprudence; the Fair Housing Amendments Act of 1988, 42 U.S.C. Sec. 3601 et seq., and applicable jurisprudence; and Section 504, Rehabilitation Act of 1973, and applicable jurisprudence.” UCA § 10-9a-516. As discussed below these state and federal laws greatly restrict the ways in which a municipality may regulate residential facilities for persons with a disability.

FAIR HOUSING ACT OF 1988 (FHAA)

The original Fair Housing Act prohibited discrimination in housing on the basis of a person’s race, color, religion, sex, or national origin. However, in 1988 Congress amended the Act to also include prohibitions on housing discrimination based on a person’s disability or familial status. Since then, federal courts have handed down hundreds of rulings interpreting and applying the FHAA in a variety of housing contexts.

The FHAA “is intended to prohibit the application of special requirements through land-use regulations, restrictive covenants, and conditional or special use permits that have the effect of limiting the ability of the handicapped to live in the residence of their choice in the community.” *Bangerter v. Orem City Corp.*, 46 F.3d 1491, 1494 (10th Cir. 1995).

The FHAA defines a disability or a “handicap,” as “(1) a physical or mental impairment which substantially limits one or more of such person’s major life activities, (2) a record of having such an impairment, or (3) being regarded as having such an impairment, but such term does not include current, illegal use of or addiction to a controlled substance.” 42 USC § 3602(h). This includes persons who are recovering from alcohol and drug addiction. In the land-regulation context, the FHAA prohibits three types of discrimination: (1) disparate treatment, (2) disparate impact, and (3) failure to make reasonable accommodation. Each of these is discussed below.

1. Disparate Treatment or Intentional Discrimination

Disparate treatment occurs where a municipality treats disabled people differently than other similarly situated people who are not disabled. *Bangerter v. Orem City Corp.*, 46 F.3d at 1501. A person does not need to show that the municipality acted with malice or discriminatory animus, only that they were intentionally treated differently. *Id.* This is proved either by direct evidence or circumstantial evidence. *Cinnamon Hills Youth Crisis Center, Inc. v. Saint George City*, 685 F.3d 917, 919 (10th Cir. 2012)

Direct evidence of discriminatory intent is proved where the record shows that a city intentionally denied someone a special use permit or variance, for example, because he was handicapped. Direct evidence is also shown where a land use regulation expressly singles out disabled people for special treatment. We call this type of regulation facially discriminatory because it discriminates “on the face” of the regulation. In *Bangerter*, for example, Orem enforced a housing ordinance requiring that residents of handicapped group homes have 24-hour supervision, but no such supervision was required for non-handicapped group home residents. *Bangerter v. Orem City Corp.* at 1502. The regulation itself expressly treated the two groups differently. In contrast, St. George’s regulations prohibited all group homes from locating in certain commercial areas, not just handicapped group homes. See *Cinnamon Hills*, 685 F.3d at 917-18.

FHAA jurisprudence uses the term “discrimination” to describe when the disabled are treated differently. It is important to note, however, that the FHAA does not necessarily prohibit all discrimination against the disabled, but only *illegal* discrimination that harms disabled persons. It does not prohibit municipalities from providing special treatment to the disabled that actually benefits them, instead of harming them. *Bangerter v. Orem City Corp.* at 1504.

However, courts are wary about “accepting the justification that a particular restriction upon the handicapped really advances their housing opportunities rather than discriminates against them in housing.” *Id.* The court in *Bangerter* explained:

Restrictions that are based upon unsupported stereotypes or upon prejudice and fear stemming from ignorance or generalizations, for example, would not pass muster. However, restrictions that are narrowly tailored to the particular individuals affected could be acceptable under the FHAA if the benefit to the handicapped in their housing opportunities clearly outweigh whatever burden may result to them. *Id.* at 1504. Any restrictions must meet Congress’ underlying objective in passing the FHAA, which is to “extend the principle of equal housing opportunity to handicapped persons...and end discrimination against the handicapped in the provision of housing based on prejudice, stereotypes, and ignorance.” *Id.*

The FHAA also specifies that it does not require that a dwelling be made available to “an individual whose tenancy would constitute a direct threat to the health or safety of other individuals or whose tenancy would result in substantial physical damage to the property of others,” regardless of whether they are considered handicapped. 42 U.S.C. § 3604(9). This means that municipalities may place “reasonable restrictions on the terms or conditions of housing when justified by genuine public safety concerns.” *Bangerter v. Orem City Corp.* at 1503.

Again, however, municipalities must carefully check their motivations here. “Restrictions predicated on public safety cannot be based on blanket stereotypes about the handicapped...[and] [g]eneralized perceptions about disabilities and unfounded speculations about threats to safety are specifically rejected as grounds to justify exclusion.” *Bangerter v. Orem City Corp.* at 1503. In other words, if restrictions are imposed based upon a public safety concern, those concerns must be specifically and clearly articulated on the record, and they must not be based upon speculation or conjecture, but instead must be backed up by clear and convincing empirical evidence. If concern or increases in crime are to be cited as the reason for imposing a condition, there must be correlating studies that clearly show that the specific use has consistently lead to an increase in crime. If the concern is traffic or noise, again studies may be produced to show the use will generate inordinate amount of traffic or noise. Every condition imposed must be backed by supporting empirical evidence.

Specific Application of FHAA: Dispersal Requirements

One type of facially discriminatory regulation that has been particularly challenged under the FHAA is dispersal requirements mandating that disabled housing be separated by certain distances or otherwise dispersed throughout a municipality. The types of regulations have almost always been found to violate the FHAA.

For example, in *Montana Fair Housing, Inc. v. City of Bozeman*, 854 F.Supp.2d 832 (D. Mont. 2012), the court shot down a zoning scheme that prohibited elder care facilities in certain residential districts as facially discriminatory against the disabled in violation of the FHAA. The court also disagreed with the city's argument that the zoning scheme was justified because it was necessary to preserve the residential character of the applicable zones because the City had no evidence that the scheme benefitted the disabled in anyway. *Id.*

In *Human Resources Research & Man. Group, Inc. v. County of Suffolk*, 687 F.Supp.2d 237 (E.D.N.Y. 2010), the court shot down a local ordinance prohibiting more than four "substance abuse houses" in a two square mile area because it facially discriminated against the disabled in violation of the FHAA. The county argued that the dispersal requirements were necessary to ensure that "one neighborhood's resources and facilities are not unduly drained while other are unaffected." *Id.* at 258. The court rejected this justification because it did not benefit the disabled or respond to legitimate safety concerns raised by the specific disabled individuals. *Id.* at 259-60.

In *Nevada Fair-Housing Center, Inc. v. Clark County*, 565 F.Supp.2d 1178 (D. Nev. 2008), the court shot down an ordinance mandating a minimum 1500 foot dispersal requirement between group homes because the ordinance applied different standards to persons on the basis of their disability in violation of the FHAA. The county provided no justification for its discriminatory treatment. *Id.*

In *Larkin v. State of Michigan Dep't of Social Servs.*, 89 F.3d 285 (6th Cir. 1996), the court invalidated a 1500 foot spacing requirement for group homes. The court also rejected the state's argument that the spacing requirement integrated the disabled into the community and prevented "clustering" and "ghettoization" because the state presented no evidence to support these arguments or to show that the dispersal requirement benefitted the disabled in anyway.

Courts have also struck down dispersal requirements in the following cases for various reasons: *U.S. v. City of Chicago Heights*, 161 F.Supp.2d 819 (N.D. Ill. 2001) (striking down statute imposing 1,000-foot spacing requirement where defendant asserted an interest to "facilitate normalization" and to "preserve the residential character of the neighborhood"); *Oconomowoc Resid. Progs., Inc. v. City of Greenfield*, 23 F.Supp.2d 941 (E.D. Wisc. 1998) (finding that 2,500 foot spacing requirement as applied to group homes for the mentally disabled violated the FHAA); *Horizon House Developmental Servs., Inc. v. Twp. Of Upper Southampton*, 804 F.Supp. 683 (E.D. Pa. 1992) ("There is no evidence in the record to support the perception that group homes are a 'burden' on the neighborhood or that harm will come to the residents of the group homes by living within 1,000 feet of each other.").

In fact, we have only found one example where a court has validated a dispersal requirement for disabled housing. In *Familystyle of St. Paul, Inc. v. City of St. Paul, Minn.*, 923 F.2d 91 (8th Cir. 1991), the court found that dispersal requirements for group homes did not violate the FHAA because they furthered the government's proper interest of integrating the mentally ill into the mainstream community. However, it is important to note that in this one

case, the facts generally supported this finding because there were already 21 similar treatment homes in a one and one-half block area.

This is a very good example of how the facts will dictate the outcome. Because it was apparent in the *Family style* case that there was a clear clustering of these types of home that was altering the nature of the neighborhood and turning it into a de facto group home zone, the court found that the restriction was not discriminatory but served a legitimate public purpose of spreading the group homes out so as to help maintain more traditional family feel the home the disabled had available them the.

It also important to note another significant difference in the *Family Style* case. There the Eighth Circuit applied a lower "Rational Basis" standard when scrutinizing government's treatment of the disabled. All other circuits, including the Tenth Circuit (in which Utah is located), apply a heightened standard of "Clear and Convincing Evidence" when scrutinizing a municipality's justification for applying discriminatory housing regulations. As discussed above, in Utah, such a regulation would only be justified where it either benefits the disabled or responds to legitimate safety concerns raised by the particular individuals affected, rather than being based on stereotypes. See *Bangerter v. Orem City Corp.* at 1503-04. As shown by the cases above, this is a very tough standard to meet.

2. Disparate Impact

This is not really at issue in the current application, but it is good to understand in case such a claim is later raised.

Disparate impact is where there is no evidence of intentional discrimination, but where the effect of a regulation has a discriminatory impact on the disabled and prevents them from having equal access to housing. A person complaining of disparate impact must prove actual or predictable discrimination. See *Corporation of Episcopal Church in Utah v. West Valley City*, 119 F.Supp.2d 1215, 1219 (D. Utah 2000). "An evaluation of disparate impact requires a comparison with other similarly sized groups living together." *Id.* at 1220. The plaintiff must then show that they have been treated differently than similarly situated groups. *Id.* Once this is shown, then the burden shifts to the municipality to prove that "its actions furthered a legitimate governmental interest, and that no other, less discriminatory, alternative would serve the public interest.." *Corporation of Episcopal Church in Utah v. West Valley City* at 1219.

3. Reasonable Accommodation

"[D]iscrimination includes...a refusal to make reasonable accommodations in rules, policies, practices, or services, when such accommodations may be necessary to afford such [disabled] person equal opportunity to use and enjoy a dwelling." 42 U.S.C. § 3604(3)(B). This requires a municipality to make an affirmative exception in an otherwise valid law or policy when necessary. In other words, a city must change "some rules that are generally applicable so as to make its burden less onerous on the handicapped individual." *Bangerter v. Orem City Corp.* at 1501-02.

A municipality is not automatically required to grant every request for accommodation made by a disabled person. Rather, it is only required to grant accommodations that are *necessary* to afford the disabled person equal opportunity to use and enjoy a residential environment. The FHAA “requires accommodations that are necessary (or indispensable or essential) to achieving the objective of equal housing opportunities between those with disabilities and those without. *Cinnamon Hills*, 685 F.3d at 923. In other words, the point of a reasonable accommodation is to provide the same opportunities that those without disabilities enjoy; it does not require municipalities to provide better opportunities for the disabled. See *Cinnamon Hills* at 923.

However, it is important to understand that the federal statutes also require that persons with disabilities be given the same scope of opportunities or choices as non-disabled persons. In other words, just because there may be another residence available, a disabled person is not forced to accept that alternative, if their preferred residence can be made available through a reasonable accommodation.

As we are dealing with a request for reasonable accommodation in the present application, it would be beneficial to outline the factors that the courts have articulated can be considered in deciding if the requested accommodation should be granted.

- **Whether the housing, which is the subject of the request, will be used for residential purposes by a person with a disability as defined under the federal statutes.**
- **Whether the requested accommodation is necessary to make specific housing available to a person with a disability as defined under the federal statutes.**
- **Whether the requested accommodation would impose an undue financial or administrative burden on the City.**
- **Whether the requested accommodation would fundamentally alter the nature of the City's zoning plan.**
- **Whether the requested accommodation or facility otherwise complies with zoning requirements such as lot size, setbacks, etc.**
- **The potential impact on surrounding areas which cannot be mitigated.**
- **Whether the physical attribute of the property and structure are consistent with the residential nature of the zoning.**
- **Whether there are reasonable alternatives to the requested accommodation that would provide an equivalent level of benefit.**
- **Whether any of the accommodated residents will pose a direct threat to public safety.** (In this application where Reflections is seeking approval of substance abuse recovery home, this has to be an evaluation of specific individual residents based on

reliable objective evidence, and not an evaluation of the general type of resident that will be allowed in the facility. Case law has consistently found that recovering addicts who are not currently abusing substances do not generally pose a direct threat to public safety.)

- **Whether the proposed accommodation complies with other building, health and safety requirements, including state building and fire codes.**
- **Whether the proposed accommodation would result in substantial risk of damage to property of others.**
- **Whether the proposed facility would provide adequate off street parking for residents and visitors.**

See *Corporation of Episcopal Church in Utah v. West Valley City*, 119 F.Supp.2d at 1221.

UTAH FAIR HOUSING ACT (UFHA)

The Utah Fair Housing Act prohibits municipalities from employing discriminatory housing practices because of a person's race, color, religion, sex, national origin, familial status, source of income, or disability. UCA § 57-21-5(1). A discriminatory housing practice includes "a refusal to make reasonable accommodations in rules, policies, practices, or services when the accommodation may be necessary to afford the person equal opportunity to use and enjoy a dwelling." UCA § 57-21-5(4)(b).

It is a defense to a claim of discrimination under the UFHA "that the complainant has a disability that, in the circumstances and even with reasonable accommodation, poses a serious threat to the health or safety of the complainant or others." UCA § 57-21-4(2).

An analysis of the legality of a land use regulation under the UFHA is essentially the same as under the FHAA.

CONCLUSION

Given the current state of the law, it really is not a question of whether or not the City must make some accommodation to its current requirements. It is clear that the City must do this. It is really a question of what is necessary to accommodate the applicants based on the service they provide to disabled persons and what is a reasonable accommodation that does not go so far as to alter the neighborhood so as to fundamentally change its residential nature.

BRIAN K HAWS
LINDON "CITY ATTORNEY"

IN THE PLANNING DEPARTMENT OF
LINDON CITY, STATE OF UTAH

MEMORANDUM

In the Matter of a request for REASONABLE ACCOMMODATION
from Lindon City Code 17.70.040 to house sixteen unrelated persons with a disability in a
single-family dwelling at 145 South 200 East, Lindon, Utah, 84042.

Requested by Ron Wentz on behalf of Reflections Recovery Center, a residential substance use
disorder and mental health recovery facility for disabled individuals

FILE NO. 14-038-8

Before the Lindon City Planning Commission

Lindon City staff submits this memorandum to analyze a request by Ron Wentz of
Reflections Recover Center for a reasonable accommodation from the City's zoning ordinance to
house up to sixteen unrelated individuals in a single-family dwelling at 145 South 200 East, in
the R1 (Single Family Residential) Zone.

BACKGROUND

Ron Wentz, representative for Reflections Recovery Center, proposes to house sixteen
unrelated individuals in a single-family dwelling in the R1 (Single Family Residential) zone,
located at 145 South 200 East, contrary to the occupancy requirement of Lindon City Code
17.70.040(6), which allows up to four unrelated individual in a group home for persons with
disabilities.

Federal law requires municipalities to make reasonable accommodations from Code
requirements if necessary to allow occupancy of a residential facility for persons with a

disability. See 42 U.S.C. § 3604(3)(B). Ron Wentz, on behalf of Reflections Recovery Center, has applied for a reasonable accommodation.

FACTS

1. Ron Wentz, representative of Reflections Recovery Center, proposes to house sixteen unrelated, disabled individuals in the residential dwelling located at 145 South 200 East, Lindon, Utah.
2. The residential dwelling located at 145 South 200 East, Lindon, Utah, is owned by DAR2, LLC. DAR2, LLC is a registered business with the Utah Division of Corporations and Commercial Code. According to the Division of Corporations and Commercial Code business search website, Ron Wentz is the registered agent for DAR2, LLC.
3. The dwelling sits on a 1.293 acre lot. The lot is in the R1 Single Family Residential Zone in a typical single-family residential neighborhood.
4. The home is 7,822 square-foot dwelling with seven bedrooms and six and a half bathrooms.
5. The proposed use will house no more than sixteen disabled individuals at one time.
6. Residents will have shared bedroom, bathroom, recreational, cooking, dining, and living facilities.
7. There will be 4-6 staff members working in the home per day assisting residents as needed on a 24-hour basis. There will never be less than two staff members on premise at any time.
8. Residents live in the home voluntarily, and not as part of or in lieu of confinement, rehabilitation, or treatment in a correctional facility.

9. Residents will not drive motor vehicles, and they are not permitted to have their own motor vehicle on premise.
10. On a normal day, there will likely be 6-8 vehicles on site at a time.
11. The home provides no overnight quarters for visitors of the residents.
12. Lindon City Code 17.70.040(6) allows up to four unrelated individuals in the home, unless a reasonable accommodation is necessary under the Federal FHA and ADA.

APPLICABLE LAW AND POLICY

The Fair Housing Act, 42 U.S.C. §§ 3601 – 3619, and the Utah Fair Housing Act, Utah Code §57-21-1—57-21-14, prohibit discrimination in housing on the basis of race, color, religion, sex, national origin, familial status, and disability. Lindon City Attorney Brian Haws has outlined factors to consider when determining whether to grant reasonable accommodations to City ordinances, policies, practices, or procedures when reasonable accommodations are necessary to comply with Title II of the ADA, the Fair Housing Act (“FHA”), as amended, or other federal and state laws and regulations. These factors are outlined below and applied to the Applicant’s request for a Reasonable Accommodation.

1. Whether the housing, which is the subject of the request, will be used for residential purposes by a person with a disability as defined under the federal statutes.

Applicant has confirmed that Reflections Recovery Center will serve only disabled individuals, as defined by Federal Law.

2. Whether the requested accommodation is necessary to make specific housing available to a person with a disability as defined under the federal statutes.

An accommodation is necessary when, without the requested accommodation, disabled individuals will be denied the equal opportunity to live in a residential neighborhood. An equal opportunity in this context is the opportunity to choose to live in a residential neighborhood.

Oconomowoc Residential Programs v. City of Milwaukee, 300 F.3d 775, 784. Accordingly, the analysis in the present case is whether the requested accommodation is necessary to allow disabled individuals to choose to live in the neighborhood in which Reflections Recovery Center proposes to locate.

A disabled individual may not live in a residential treatment facility if the facility does not exist. To exist, the operation must be financially successful. “If an applicant for an accommodation from a maximum-occupant limitation shows that an increased number of residents is necessary for a facility for disabled residents to be financially successful, the requested accommodation is necessary.” *Lewis v. Draper City*, 2:09-CV-589 TC, 2010 WL 3791404 ID. Utah Sept. 22, 2010).

Consequently, Lindon City requested financial documents from the applicant and had the documents reviewed by Lewis Young Roberson & Burningham, Inc. (LYRB), a financial consultant, to determine whether the requested accommodation is necessary to allow the facility to succeed. LYRB’s analysis has indicated that 16 occupants is necessary for the facility to have a change to be financially successful. The financial analysis is included in attachment 3 of the staff report.

3. Whether the requested accommodation would impose an undue financial or administrative burden on the City.

The City has not identified evidence, and no evidence has been submitted to the City, that would indicate that the accommodation will impose an undue financial or administrative burden on the City.

4. Whether the requested accommodation would fundamentally alter the nature of the City's zoning plan.

The City has not identified evidence, and no evidence has been submitted to the City, that

would indicate the accommodation will fundamentally alter any City program or law. The zoning scheme promotes a residential environment. Sixteen adults in a home of this size, who will not have their own vehicles, does not alter the residential character or goals of the zone.

5. Whether the requested accommodation or facility otherwise complies with zoning requirements such as lot size, setbacks, etc.

The facility will otherwise comply with all other zoning requirements.

6. The potential impact on surrounding areas which cannot be mitigated.

The surrounding uses are single family residential uses. It would be permissible under current zoning requirements for a home of this size to have 16 related residents. The dwelling has seven bedrooms and could adequately accommodate the number of residents requested. Additionally, the proposed site plan accommodates employee parking, visitor parking, and parking needs related to transporting the residents on-site. Residents will not be allowed their own vehicles. The applicant has indicated that visitors will visit only occasionally, and not in large numbers. Lindon City's Engineer has indicated that the requested accommodation will not have a significant impact on local traffic or on-street parking (see attachment 5 of the staff report). It appears that the requested accommodation will have little impact on surrounding uses.

7. Whether the physical attribute of the property and structure are consistent with the residential nature of the zoning.

The lot is a 1.293 acre lot located on a residential street that is designated as a minor collector. The dwelling was originally constructed in 1996 as a two-storey single family residence. The proposed floor plan identifies seven bedrooms, six and a half bathrooms, common living space, and room for 17 off-street parking spaces. This type of structure appears to be consistent with the residential nature of the neighborhood.

Proposed landscaping and surfacing alterations will accommodate on-site parking

required by the Lindon City Code, while maintaining a character that is conducive to residential settings. A review of aerial photography indicates that it is not uncommon on residential lots in Lindon for a dwelling to have a parkable surface in a side yard that extends into the rear yard of the dwelling.

8. Whether there are reasonable alternatives to the requested accommodation that would provide an equivalent level of benefit.

The analysis here is whether an accommodation other than the one requested would allow disabled individuals to choose to live in this dwelling. LYRB's analysis of the facility's financial viability indicates that the facility needs the accommodation to exist. Consequently, there are no reasonable alternatives to the requested accommodation that would allow disabled individuals to choose to live in the dwelling.

9. Whether any of the accommodated residents will pose a direct threat to public safety. (In this application where Reflections is seeking approval of substance abuse recovery home, this has to be is an evaluation of specific individual residents based on reliable objective evidence, and not an evaluation of the general type of resident that will be allowed in the facility. Case law has consistently found that recovering addicts who are not currently abusing substances do not generally pose a direct threat to public safety.)

The City has not identified evidence, and no evidence has been submitted to the City, that would indicate that any of the accommodated residents will pose a direct threat to public safety. In the case that evidence is presented to the City that a specific resident poses a direct threat to public safety, law enforcement will address the individual appropriately.

10. Whether the proposed accommodation complies with other building, health and safety requirements, including state building and fire codes.

The applicant has applied for a building permit from the Lindon City Building Department. Lindon City's Building Official will ensure that the dwelling complies with all building and fire codes before operating.

11. Whether the proposed accommodation would result in substantial risk of damage to property of others.

The City has not identified evidence, and no evidence has been submitted to the City, that would indicate that the requested accommodation will result in substantial damage to the property of others.

12. Whether the proposed facility would provide adequate off street parking for residents and visitors.

The applicant's floor plan identifies 7 sleeping rooms. Residents will not have their own vehicles, and there will be anywhere from 2-6 employees on premise at any time. As noted above, the applicant has indicated that visitors will visit only occasionally, and not in large numbers.

The site plan proposes 9 employee spaces, 6 guest spaces, and an additional 2 ADA accessible spaces for a total of 17 off-street parking spaces in the rear yard of the dwelling. The proposed number of spaces satisfies Lindon City Code requirements and appears sufficient to accommodate the facility's parking needs.

CONCLUSION

The above analysis of the request for accommodation indicates that the request is reasonable and necessary to allow disabled individuals equal opportunity to choose to live in residential housing.

SAMPLE ORDER

Based upon good cause showing, the Planning Commission hereby **GRANTS** the request for Reasonable Accommodation from Lindon City Code 17.70.040(6) to allow up to 16 unrelated, disabled individuals to reside in the dwelling at 145 South 200 East, Lindon, Utah, subject to the following conditions:

1. Notice of the accommodation shall be recorded with Utah County;
2. This reasonable accommodation to LCC 17.70.040(6) allows 16 unrelated, disabled, individuals to occupy the dwelling;
3. The reasonable accommodation terminates when the dwelling is no longer used as a home for persons with a disability;
4. This reasonable accommodation does not run with the land; and
5. The dwelling must be operated to comply with building, health, and safety requirements, including state or local licensing laws where applicable.

The above listed requirements address Lindon City’s concerns while allowing for the use of the property to accommodate the needs of the occupants with disabilities.

Dated this _____ day of _____, _____.

Sharon Call
Planning Commission Chairperson



ANALYSIS OF REASONABLE ACCOMMODATION REQUEST BY REFLECTIONS RECOVERY CENTER

PERFORMED FOR LINDON CITY
November 7, 2014

SCOPE OF WORK: Lewis Young Robertson & Burningham, Inc. (“LYRB”), has at the request of Lindon City, undertaken to review the financial operating projections supplied by Reflections Recovery Center, (“RRC”), pertaining to their application for a reasonable accommodation in the permitted number of residents to be allowed at their proposed facility.

The scope of LYRB’s inquiry is limited to an evaluation of the revenue and expense assumptions supplied to the City by RRC and determine, to the extent possible, comparative cost and revenue data for facilities of similar size to that proposed by RRC, and to evaluate RRC’s data regarding the number of residents they would require to be profitable at a given occupancy level.

LYRB’S UNDERSTANDING OF CURRENT SITUATION: RRC has applied to the City for permission to open a 16-bed facility. The reason RRC has requested a maximum of 16 beds is due to State regulatory limitations on the maximum number of beds in order to be classified as an R-4 facility and thus subject to less stringent regulatory requirements than a facility with more than 16 beds. LYRB’s understanding of current City ordinances is that RRC, absent the granting of a reasonable accommodation request by the City, would be limited to a maximum of no more than four (4) beds.

METHODOLOGY: LYRB undertook to obtain information from the following sources by the means indicated:

- ☞ Financial Projections supplied by RRC and additional information obtained in response to questions submitted to RRC.
- ☞ Written attestation from various firms stating that the cost assumptions used by RRC were within industry norms.
- ☞ Discussions with Lindon City Staff
- ☞ Contact with other residential treatment facilities in Utah offering services similar to those to be offered by RRC. This included information on the number of patients for which they are licensed, the cost of treatment, staffing levels and other measures by which to compare to RRC.

- ☰ Review of Utah regulatory requirements relative to required staffing levels, including professional licensure where applicable, and other regulatory requirements such as minimum accommodations per patient (i.e. bedroom space, number of bathrooms, etc.) which all residential treatment facilities must meet.
- ☰ Discussions with other sources of data on the residential treatment industry such as banks and other financial professionals involved in lending to such facilities.
- ☰ Analysis of the sensitivity of cost and revenue projections to differing patient levels.

GENERAL OBSERVATIONS:

- ☰ **Industry Transparency and Availability of Data:** The for-profit residential treatment business is characterized by many facilities offering a wide range of treatment options, amenities and accommodations. The majority of these residential treatment centers are privately owned and do not release financial data as would a publicly traded company. As a result, LYRB was not able to obtain detailed financial statements from any of the facilities we contacted. While some for-profit residential treatment firms were unwilling to talk with us, some were willing to discuss their authorized capacity (a matter of public record), their approximate cost of treatment and their staffing levels.

In the absence of verifiable data regarding other competing facilities, LYRB has no evidence that the costs and expenses RRC assumes in their pro forma are factually incorrect although LYRB does question the degree to which some costs are fixed as represented by RRC or are, to some degree, variable based on the number of patients in the facility. LYRB did not observe anything in RRC's projections that appeared demonstrably false or misleading.

- ☰ **REGULATORY ENVIRONMENT:** The State of Utah Human Services Division has regulatory authority over the licensing of residential treatment programs and applies the required standards to all such facilities. By interviewing State regulatory officials and reviewing the State Code, we were able to determine with reasonable accuracy, the required staffing levels and, where applicable, the professional training and credentials required for staff. We could then compare these minimum requirements to RRC's pro-forma to evaluate its adequacy.
- ☰ **MARKET FACTORS:** LYRB was not furnished with any type of marketing study performed by, or on behalf of, RRC. Due to time constraints, and lack of publicly available data, LYRB did not undertake such a study nor are we aware of any other independent study. Assumptions about the availability of sufficient patient demand is outside the scope of LYRB's study. Sufficient demand for RRC's services is assumed to exist for purposes of forecasting occupancy levels.

INDUSTRY STANDARDS AND NORMS: LYRB was not able to conduct a wide-ranging survey of industry standards and accepted practices. Anecdotal evidence regarding industry-wide practices related to marketing and patient recruitment using commission-based third-party recruiters was reported but could not be independently confirmed. Pay levels for RRC employees appeared reasonable in light of LYRB’s understanding their duties and responsibilities but could not be compared to levels at other facilities.

Following a meeting with RRC and the City, RRC furnished written statements from outside firms to support the assumptions contained in RRC’s pro forma. These statements were supplied by (i) a CPA firm claiming extensive experience with such treatment centers (LYRB has not independently verified this claim), (ii) two third-party billing firms and (iii) data from PayScale to support RRC’s payroll cost estimates.

CONCLUSIONS FROM LYRB’S ANALYSIS:

MARKET DEMAND: RRC presented data to the City in the form of an extract from a study done in November of 2013 by Nielsen and Company, a real estate appraisal and consulting company. The study was conducted for an unidentified facility to be located in American Fork. The study was redacted so that LYRB was unable to determine who commissioned the study.

Only one page of the study, other than the cover page, was furnished to LYRB. The page contained data on the occupancy rates at seven (7) residential treatment facilities located in or near Utah County. The seven facilities range in size from a low of 8 beds to a high of 81 beds with an average of 33 beds. The occupancy data ranges from a low of 80% to a high of 95% with an average of 87.9%. A copy of the table is shown below

Occupancy Rates – Residential Treatment			
Facility & Location	# of Beds	Year Build	Current Occupancy
New Haven 2171 E. 7200 S. Utah County	46	1985/2006	90.0%
The Ascend 6280 W. 9600 N. Highland	8	1980	90.0%
Renaissance Ranch 2829 W. 13800 S., Bluffdale	19	1998	85.0%
Timpview 200 N. 1400 W., Lindon	12	1967	90.0%
Discover Academy 105 N. 500 W., Provo	81	1902/2007	80.0%
Daniels Academy 3725 S. Big Hollow, Daniels	16	2004	85.0%
New Roads 1530 S. 500 W., Provo	48	1975/1978	95.0%
Average			87.9%

Since four of the seven facilities are roughly comparable in size to the proposed RRC facility (see highlighted), LYRB calculated the average occupancy rate for that size range to be approximately 87.5%. Further research by LYRB determined that several of the facilities cited were exclusively for treatment of pre-teen/young adults in a school-type setting thus requiring an approved teaching staff and curriculum. Four of the facilities are for youth with learning disabilities, not substance abuse or addiction problems. Only two of the listed facilities (The Ascend and Renaissance Ranch) appear, in LYRB's opinion, to be comparable to RRC's planned facility in terms of number of beds and types of service provided. Using this small sample size of two would seem to justify a conservative occupancy rate higher than the 80% assumed by RRC. To be consistent with RRC's projections, LYRB has kept the 80% occupancy rate but made provisions in our model for the occupancy rate to be a variable which can be changed on the spreadsheet to determine the impact different occupancy rates will have on the projected viability of RRC.

PROJECTED REVENUES: RRC's projected gross revenue per patient was listed as \$9,500 per month. This fee structure assumes an average patient stay of 30 days. In contacting other facilities, LYRB observed that all have the option of extending a treatment program beyond the basic 30-day course if patients need additional treatment. Such additional treatment is not covered by the base \$9,500 fee and is assumed to be paid for on approximately the same cost-per-day (\$317) basis as the initial 30-day treatment.

Data supplied by RRC, based on their survey of other residential treatment programs in the area - see discussion above, assumed an 80% occupancy rate and an average fee per month of \$9,500 based on their stated expectation of average patient stays. Patient levels required for RRC to achieve profitability are based on RRC's representations.

While our discussion of charges with other facilities yielded a range of between \$9,000 per month to as much as \$50,000 per month depending on the facility, RRC's figure of \$9,500 seemed to be on the low end of the scale compared to facilities that, as best we could judge, were comparable in size. Roughly comparable facilities appeared to charge an average of \$9,000-to-\$12,000 for the first 30 days of treatment.

For purposes of LYRB's analysis, we assumed that RRC's stated per-patient per month revenues were as represented although this too is a variable in our model.

PROJECTED COSTS: RRC's projected staffing levels and cost assumptions for varying patient levels appeared to be consistent both with state requirements and similarly sized facilities. Staffing not strictly required by state law but reasonably to be expected given RRC's business model (i.e. night and weekend staffing, a chef, etc.) appeared appropriate. Compensation levels for full-time and hourly workers, together with benefit levels, appeared reasonable and supported by documentary evidence furnished by RRC.

LYRB noted the following concerns about the costs shown in RRC's Profit and Loss Statement:

1. **COST OF SALES:** RRC's models, which are based on a maximum authorized limit of 16 beds with projected occupancy rates of 80% and 100%, show that Cost of Sales is held constant at 28.21%. This means that the Cost of Sales is wholly dependent on the number of patients admitted to RRC and is the largest variable cost RRC incurs in its operation.
2. **OPERATING EXPENSES.** Expenses listed here were for RRC's website and for Direct Marketing expenses. The residential treatment industry operates primarily through primary care providers such as family doctors, psychiatrists and counselors who refer their patients to treatment facilities. RRC, like other similar facilities, must make these people familiar with their services in order to generate referral business. Additionally, would-be patients themselves, or their family members, may be actively searching for treatment options. Both channels seem to be the norm in the industry and reasonably appear to justify the expenses RRC cites.
3. **CAPITAL REPLACEMENT:** RRC lists this line-item at 5% of gross revenues. We were further informed by RRC that this is to pay back investors, including RRC's owners, for their initial start-up capital investment. Since the only "investment" cited is the remodeling of the building at an estimated cost of \$185,400, the repayment schedule, while dependent on gross revenues rather than being a fixed amount, seems to indicate a relatively short pay-back period of approximately 3 years with no indication of how these revenues will be used once the investment has been repaid.

Further it should be noted that the estimated remodeling costs contemplate a finished facility with 6.5 bathrooms, 7 bedrooms, 5 offices, a kitchen, a dining room, 3 recreation rooms and 3 laundry rooms. A significantly reduced bed capacity will decrease the amount of remodeling that is required which would, in turn, translate to a reduced capital replacement cost. Because LYRB has no basis to forecast remodeling costs for a smaller facility, our model assumes no change to RRC's listed remodeling cost of \$185,400 even though it is reasonable to assume that there would be some level of cost reduction.

4. **GENERAL AND ADMINISTRATIVE:** This category covers a wide range of fixed and variable costs necessary to the running of the facility. This is the single largest line-item listed although it is not broken out in greater detail to identify individual costs.

ANALYSIS OF IMPACT OF BED LIMIT CHANGES: Using RRC's Profit and Loss Statement as a template to facilitate an accurate comparison of RRC's data to LYRB's calculations, we created the attached spreadsheet to provide a side-by-side comparison of RRC's projected revenues, expenses and profit given their implicit or stated assumptions to LYRB's projections of the results of lower patient counts.

RRC's data assumes variability of revenues based on (i) total number of licensed beds at 16, (ii) average occupancy rates of 80% and 100% resulting in an average patient count of respectively 13 and 16 patients, and (iii) a monthly per patient charge of \$9,500. RRC's projected Costs of Sales are held constant at 28.21% of total revenues. Total Sales and Marketing Expenses are assumed to be 1.725% of Revenues at the 80% occupancy level and 1.684% of Revenues at the 100% occupancy level. Capital Repayment is held constant at 5.00% of Revenues. General and Administrative Expenses are projected by RRC to be 61.62% of Revenues under the 80% occupancy scenario and 51.90% of revenues under the 100% occupancy scenario. Finally, Total Taxes is 7.7445% of Revenues at 80% occupancy and 11.49% of Revenues at 100% occupancy.

LYRB had no basis to independently determine if the percentages of costs that RRC assumed are accurate or reflect typical percentages found in the industry. RRC has submitted evidence from CPA and other firms claiming experience and knowledge of the residential treatment industry. The letter submitted generally support RRC's claim that their cost estimates and assumptions are in line with industry standards thus LYRB has continued to use them for purposes of our analysis.

RESULTS OF ANALYSIS: RRC's models, at 80% and 100% occupancy show that RRC would lose approximately \$5,305 per month if they could only fill an average of 80% of a 16-bed limit. In contrast, RRC claims that at an occupancy rate of 100%, they would generate a modest monthly profit of \$2,606 per month. LYRB model attempts to determine at what patient level RRC would be expected to break even.

Since RRC's model assumed either 13 or 16 patients, LYRB has attempted to determine what the impact would be of having an average of 14 (85% occupancy rate) and 15 patients (90% occupancy rate). LYRB's model extrapolated the values for those items which were treated in RRC's model as variable. These items specifically were (i) Sales and Marketing Expenses, (ii) General and Administrative Expenses, and (iii) Total Taxes.

By combining the costs which RRC claims are a fixed percentage with the extrapolated variable cost percentages as applied to the different patient levels, LYRB was able to construct a table showing projected revenues for the average patient levels of 14 and 15 as shown in the table below:

Net Monthly Profit Analysis for Each Scenario				
Occupancy Rate	80%	85%	90%	100%
Avg. # of Patients	13	14	15	16
Total Revenues	\$125,500	\$133,000	\$143,500	\$152,000
Total Cost of Sales	34,840	37,520	40,200	42,880
Gross Profit	88,660	95,480	102,300	109,120
Sales & Marketing Exp.	2,130	2,276	2,419	2,560
Capital Repayment	6,175	6,650	7,125	7,600
Gen. & Admin. Expense	76,095	77,641	78,573	78,890
Operating Expense	84,400	86,568	88,117	89,050
Income from Operations	4,260	8,912	14,183	20,070
Other Income	0	0	0	0
Taxes	9,565	11,961	14,594	17,465
Net Profit	(\$5,305)	(\$3,049)	(\$412)	\$2,606

Since RCC has varying degrees of control over factors such as General and Administrative Expenses, they can potentially achieve a reasonable level of profitability by strict management of expenses and by working diligently to maximize utilization of their facility. As RRC noted in their response to the City’s questions, *“We feel the reductions in net profits (resulting from lower than originally requested bed authorization) can be mitigated through concentrated efforts to attain higher occupancy levels, reduced startup expenses, sooner completion of remodeling allowing facility to open sooner and focused attention on reducing operating expenses.”*

It is clear from RRC’s own assumptions that they will not be able to be profitable, even at a 16-bed level, if they fail to achieve an average occupancy rate of less than 90%. That stated, LYRB believes RRC has much latitude to control many of the costs presumed to be covered under the heading of General and Administrative expenses, or, potentially, to increase revenues via an increase in the monthly rate.

Reflections Recovery Center
Profit and Loss Statement

Reflections Recovery Center Models

	LYRB Model @ 80%	LYRB Model @ 85%	LYRB Model @ 90%	LYRB Model @ 100%
Total Sales Revenue	\$123,500	\$133,000	\$142,500	\$152,000
Total Cost of Sales	34,840	37,520	40,200	42,880
Gross Profit	88,660	95,480	102,300	109,120
Total Sales and Marketing Expense	2,130	2,276	2,419	2,560
Total Capital Repayment	6,175	6,650	7,125	7,600
Total General and Administrative Expense	76,095	77,641	78,573	78,890
Total Operating Expense	84,400	86,568	88,117	89,050
Income from Operations	4,260	8,912	14,183	20,070
Other Income	0	0	0	0
Total Taxes	9,565	11,961	14,594	17,465
Net Profit	(\$5,305)	(\$3,049)	(\$412)	\$2,606

80% Occupancy	100% Occupancy
\$123,500	\$152,000
34,840	42,880
88,660	109,120
2,130	2,560
6,175	7,600
76,095	78,890
84,400	89,050
4,260	20,070
0	0
9,565	17,465
(\$5,305)	\$2,606

Variables within the LYRB Model				
Licensed Beds:	16	16	16	16
Occupancy Rate:	80%	85%	90%	100%
Monthly Revenue per Patient	\$9,500	\$9,500	\$9,500	\$9,500
Average Number of Patients:	13	14	15	16
Cost of Sales (%)	28.211%	28.211%	28.211%	28.211%
Sales & Marketing Expense (%)	1.725%	1.711%	1.698%	1.684%
Capital Repayment (%)	5.000%	5.000%	5.000%	5.000%
Gen. & Admin. Expense (%)	61.62%	58.38%	55.14%	51.90%
Total Taxes (%)	7.745%	8.993%	10.242%	11.490%

Assumptions of RRC's Pro Forma Models		
Licensed Beds:	16	16
Occupancy Rate:	80%	100%
Monthly Revenue per Patient	\$9,500	\$9,500
Average Number of Patients:	13	16
Cost of Sales* (%)	28.211%	28.211%
Sales & Marketing Expense (%)	1.725%	1.684%
Capital Repayment* (%)	5.000%	5.000%
Gen. & Admin. Expense (%)	61.62%	51.90%
Total Taxes (%)	7.745%	11.490%

# of Patients	
14	15
1.711%	1.698%
58.377%	55.139%
8.993%	10.242%

*Percentage does not vary with occupancy rate per RRC's projections

Attachment 4

Fence Examples





Jordan Cullimore <jcullimore.lindon@gmail.com>

Reflections Recovery Center - Effect on Traffic

Mark Christensen <MLC@jub.com>

Wed, Nov 5, 2014 at 5:42 PM

To: Jordan Cullimore <jcullimore@lindoncity.org>

Jordan,

This email is in response to your request that we provide our opinion as to the effect of traffic associated with the proposed Reflections Recovery Center on surrounding roadways.

We understand that it is proposed at 145 South 200 East in Lindon, that the site plan shows parking spaces for 17 vehicles, designated as nine for staff, six for guests, and two for ADA/van parking. We also understand that there will typically be four to six employees at a time at the facility, with a minimum of two at all times. We understand that patients in the facility will not have vehicles.

Lindon's 200 East Street is a designated minor collector street on the Lindon Street Master Plan Map. We estimate that 1,000 or more vehicles per day travel on it, probably with 100 to 200 trips during the peak hour. It has capacity to carry several times that many vehicles.

We do not know how frequently support services will make trips to the facility, and we do not know how frequently guests will come to the facility. However, if we assumed 6 trip ends per day for support services and guests, and 14 trip ends by employees, that would total 20 trip ends, or 40 trips generated by the facility (counting one trip coming and one trip going for each trip end), with most of them occurring at times other than peak hours. If the site were occupied as a home by a large family with 3 or 4 drivers, it could easily generate 10 or 12 trip ends per day, or 20 to 24 trips. That would be about 16 or 20 fewer trips than what the Reflections Recovery Center might generate.

The net effect of the Reflections Recovery Center is probably 16 or 20 trips per day. This would only represent around 2% of the trips on 200 East, and would have no effect on 200 East Street's ability to meet the traffic demand.

With off-street parking for 17 vehicles, we would expect that there would be little need for vehicles associated with the site to park on the street – certainly no more than if the site were occupied by a large family as a home.

While the facility will likely result in more trips than a home occupied by a family, the additional trips will be spread throughout the day, and we believe that the trips would not constitute a nuisance in the neighborhood. In our opinion the site will have a negligible effect on traffic conditions in the area, with no impact needing mitigation.

Mark L. Christensen, P.E.

Project Manager

J-U-B ENGINEERS, Inc.

240 West Center Street, Suite 200, Orem, UT 84057

p | 801 226 0393 c | 801 319 0730 e | mlc@jub.com**THE J-U-B FAMILY OF COMPANIES:**www.jub.comwww.gatewaymapping.comwww.langdongroupinc.com

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Additional Documents
Post Sept. 23, 2014
Planning Commission
Meeting

1. Citizen Brief

Joshua C. Horrocks (USB # 14680)
HEIDEMAN & ASSOCIATES
2696 North University Avenue, Suite 180
Provo, Utah 84604
Telephone: (801) 472-7742
Facsimile: (801) 374-1724
Email: jhorrocks@heidlaw.com

Attorney for Citizens of Lindon City

**BEFORE THE LINDON CITY COUNCIL,
PLANNING COMMISSION, AND MAYOR**

In re: Reflections Recovery Center Application for Accommodation	BRIEF OF CITIZENS IN OPPOSITION TO APPLICATION OF REFLECTIONS RECOVERY CENTER
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This *Brief* is submitted by citizens of Lindon City, through its undersigned counsel, wherein they oppose the request and application submitted by Ron Wentz and Reflections Recovery Center to convert the single-family residential home located at 145 South 200 East into a residential substance use disorder and mental health recovery center for up to 16 residents.¹

¹ We note the original application submitted by Mr. Wentz and Reflections Recovery Center requested housing for up to 24 residents. It is the citizens understanding that the applicant has since modified that number to a maximum of 16 residents. While both numbers fail to comply with the current zoning allowance, this brief will assume the requested occupancy is for 16 persons.

BRIEF SUMMARY

The Property in questions is located in an R-1-20 “Single-Family Residential” zone, wherein one dwelling unit is allowed on a minimum of 20,000 sq. ft. of realty. The Single-Family Residential zone provides that, “Purposes and Objectives, The Single Family Residential Zones (R1) are established to provide areas for the encouragement and promotion of an environment for family life by providing for the establishment of one (1) family detached dwellings on individual lots that are separate and sheltered from non-residential uses found to be inconsistent with traditional residential lifestyles customarily found within Lindon City’s single-family neighborhoods.” LINDON CITY CODE 17.44.020. The LINDON CITY CODE 17.70.040.1 provides that group homes for persons with a disability are a permitted use in all residential zones. However, the Single-Family Residential zones have no opportunity for more than four unrelated persons, regardless of disability, to live together in a single dwelling. This means that no group of unrelated roommates, friends, missionaries, or others without disabilities could live in a single-family dwelling in the R-1-20 Zone with more than four unrelated persons. Under this backdrop, Reflections Recovery Center seeks preferential treatment – not equal treatment – in order to house 16 unrelated individuals in a single-family neighborhood. Accordingly, there is no necessity for an accommodation.

UTAH CODE ANN. § 10-9a-520(2)(b) states that only “to the extent required by federal law” must municipal ordinances “provide that a residential facility for persons

with a disability is a permitted use in any zone where *similar* residential dwellings that are not residential facilities for persons with a disability are allowed.” There are no similar group living arrangements permitted in Lindon’s R-1-20 Zone for unrelated non-disabled persons in excess of four people. Despite that fact (that *all* group living arrangements exceeding four persons are banned in the R-1-20 Zone, and despite the fact that federal law only requires cities to provide *equal* housing, Reflections Recovery Center seeks an accommodation for *preferential* treatment to allow 16 unrelated persons to live in a single family facility in the R-1-20 Zone.

The following analysis will show that not only is Lindon City’s four-person limitation non-discriminatory and in line with the Fair Housing Act on its face, and possibly exempt entirely, but Reflections Recovery Center cannot show that any accommodation from this facially neutral and equal ordinance is necessary, and certainly not reasonable. By allowing up to 16 unrelated persons, plus staff and visitors, there is no question this group home will fundamentally alter the character and nature of the subject residential neighborhood and residence. *See* LINDON CITY CODE 17.70.040.5, and 17.70.040.10. For these reasons, and as further explained below, the Planning Commission should deny the request for an accommodation and should do so without fear of incurring any liability.

BURDEN OF PROOF FOR FHA APPLICATION AND ACCOMMODATION

Under the Fair Housing Act, it is the applicant's burden “to demonstrate its ... need for the accommodation to the City.” *Keys Youth Sews., Inc. v. City of Olathe*, 248

F.3d 1267, 1275 (10th Cir. 2001). The United States Court of Appeals for the Tenth Circuit—the federal appellate court with jurisdiction over Utah—has made it very clear that a City “cannot be liable for refusing to grant a reasonable and necessary accommodation if the City never knew the accommodation was in fact necessary.” *Id.* It is Mr. Wentz and Reflection Recovery Center’s responsibility to seek out, study the requirements of federal law, and then present sufficient evidence to the City that their request complies with those requirements.

ARGUMENT

I. Lindon’s Occupancy Limitation for Group Homes May Be Exempt from FHA Regulation.

Reflections Recovery Center proposes to house approximately 16 residents at any given time. This is quadruple the current allowance. Under the Fair Housing Act, “Nothing ... limits the applicability of any reasonable local, State, or Federal restrictions regarding the maximum number of occupants permitted to occupy a dwelling.” 42 U.S.C. § 3607(b)(1). In analyzing this language the United States Supreme Court held that this included “maximum occupancy restrictions” that cap the total number of occupants in order to prevent overcrowding of a dwelling. *City of Edmonds v. Oxford House, Inc.*, 514 U.S. 725, 733 (1995). These restrictions are typically based upon the available floor space, or the number or types of rooms. In *City of Edmonds*, the Supreme Court held that such restrictions do not apply to “family composition rules” designed to preserve the family character of a neighborhood based

on the composition of a household rather than the total number of occupants living quarters can contain. *Id.* at 734; *see also Tsombanidis v. City of W. Haven*, 129 F. Supp. 2d 136, 162, 2001 U.S. Dist. LEXIS 1099, 78(D. Conn.2001).

In 2010 the United States District Court for the District of Utah noted that “A rule that ‘caps the total number of occupants in order to prevent overcrowding of a dwelling’ is exempt from the Fair Housing Act.” *Lewis v. Draper City*, 2010 U.S. Dist. LEXIS 100186, 2010 WL 3791404(D. Utah Sept. 21, 2010). It noted, however, that Draper city’s ordinance is not exempt because it prohibits any home with a high number of residents, *regardless of size*. *Id.* (Draper’s ordinance only stated that a group home cannot house more than 8 persons and did not refer to square footage in any way).

In contrast, Lindon City’s ordinance falls in the same vein as the exemplar ordinance cited by the United States Supreme Court in *City of Edmonds*. Lindon City’s ordinance describes a maximum occupancy as it relates to the square footage of the facility, and limits the total number of residents in order to prevent overcrowding of a group home facility. *See* LINDON CITY CODE 17.70.040.6 (Requiring bedroom floor space of 74 square feet for an initial occupant and 50 additional square feet for each other occupant in the same space or bedroom). However, the ordinance also adds in a pure limitation component that can be argued is not related to the size of any facility, but rather to the character of residential neighborhoods. Thus, although there is supporting evidence and case law that the four-person limitation may be entirely exempt

from the FHA, it is wise to perform the FHA analysis in the event the ordinance would not be found exempt by a federal court if litigation were to ensue.

II. The Fair Housing Act

In this case, it is critical to understand the basic contours of the Fair Housing Act.² The FHA prohibits discrimination against persons with disabilities and provides that discrimination includes "a refusal to make reasonable accommodations ... when such accommodations may be necessary to afford such person *equal* opportunity to use and enjoy a dwelling," 42 U.S.C. § 3604(f)(3)(B) (emphasis added). Although the FHA is construed broadly, it is not an end-all statute tying the hands of every city in the nation.³

The United States Supreme Court and federal courts recognize that "Land use planning and the adoption of land use restrictions constitute some of the most important functions performed by local government." *Bryant Woods Inn, Inc. v. Howard County*, 124 F.3d 597, 603 (4th Cir. 1997) (citing *FERC v. Mississippi*, 456 U.S. 742,

² The Americans with Disabilities Act also applies. Although differences exist between the FHA and ADA, courts have applied the same analytical framework to both statutes. *See, e.g., Gamble v. City of Escondido*, 104 F.3d 300, 305 (9th Cir. 1997) (applying the McDonnell Douglas/Burdine test to claim under FHA and FHAA); *Durley v. APAC, Inc.*, 236 F.3d 651, 657 (11th Cir. 2000) (applying the McDonnell Douglas framework for ADA claim).

³ While there is conflict among some federal circuit courts in the definition of residence as it pertains to abuse recovery centers and if the FHA and ADA even apply, the Tenth Circuit cases and Utah federal district court cases have glossed over this issue, and in most cases simply assumed the recovery center is a residence and qualifies under the FHA and ADA. It is because of these assumptions made in the presiding circuit that the residents do not make an in-depth argument that the Reflections Recovery Center is not a residence.

768 n. 30, 102 S.Ct. 2126, 2141 n. 30, 72 L.Ed.2d 532 (1982) ("regulation of land use is perhaps the quintessential state activity")). Land use ordinances have and continue to be upheld in order "to preserve 'the character of neighborhoods, securing 'zones where family values, youth values, and the blessings of quiet seclusion and clean air make the area a sanctuary for people.'" *City of Edmonds v. Oxford House, Inc.*, 514 U.S. 725, 732- 33, 115 S.Ct. 1776, 1780, 131 L.Ed.2d 801 (1995) (citation omitted).

Moreover, the FHA does not provide a "blanket waiver of all facially neutral zoning policies and rules, regardless of the facts." *Oxford House, Inc. v. City of Virginia Beach*, 825 F.Supp. 1251, 1261 (E.D.Va.1993), Disabled persons are not given "*carte blanche* to determine where and how they would live regardless of zoning ordinances to the contrary." *Thornton v. City of Allegan*, 863 F.Supp. 504, 510 (W.D.Mich.1993). In balancing these interests, federal law only requires cities to make a "reasonable accommodation" to afford persons with handicaps "equal opportunity to use and enjoy" housing in those communities. 42 U.S.C. § 3604(f)(3)(B).

The FHA is *not* a federal zoning law, but an anti-discriminatory law designed to ensure only *equal* treatment for persons falling within a protected class, such as those that are handicapped or disabled. Lindon City may enforce its zoning laws so long as it does not result in discrimination.

A. Important Definitions

Handicap: A person is handicapped if he or she has a mental or physical impairment. 42 U.S.C. § 3602(h). "It is well established that individuals recovering

from drug or alcohol addiction are handicapped under the Act.” *See United States v. Southern Management Corp.*, 955 F.2d 914, 917-923 (4th Cir. 1992); *Elliott v. City of Athens*, 960 F.2d 975, 977 (11th Cir. 1992); *Oxford House, Inc. v. Township of Cherry Hill*, 799 F. Supp. 450, 458-60 (D.N.J. 1992); *Oxford House, Inc. v. Town of Babylon*, 819 F. Supp. 1179, 1182 (E.D.N.Y. 1993). However, the FHA definition of a “handicap,” does not include current, illegal use of or addiction to a controlled substance (as defined in section 802 of Title 21). 42 U.S.C. § 3602(h).

Accommodation: “The thrust of a reasonable accommodation claim is that a [city] must make an affirmative change in an otherwise valid law or policy.” *Bangerter v. Orem City Corp.*, 46 F.3d 1491, 1501-02 (10th Cir. 1995).

B. Summary of the necessity requirement for an accommodation

The goal of housing discrimination laws is to afford *equal* housing opportunities to persons with disabilities. “The word [necessity] implies more than something merely helpful or conducive. It suggests instead something ‘indispensable,’ ‘essential,’ something that ‘cannot be done without.’ Oxford English Dictionary, vol. X at 276 (2d ed. 1989). What’s more, the FHA’s necessity requirement doesn’t appear in a statutory vacuum, but is expressly linked to the goal of ‘afford[ing] . . . equal opportunity to use and enjoy a dwelling.’ 42 U.S.C. § 3604(f)(3)(B). *Cinnamon Hills Youth Crisis Ctr., Inc. v. St. George City*, 685 F.3d 917, 923, 2012 U.S. App. LEXIS 13630, 14, 2012 WL 2561883 (10th Cir. Utah 2012). “And this makes clear that the object of the statute’s necessity requirement is a level playing field in housing for the disabled. Put simply, the

statute requires accommodations that are necessary (or indispensable or essential) to achieving the objective of *equal* housing opportunities between those with disabilities and those without.” *Id.* See *Bryant Woods Inn, Inc. v. Howard County, Md.*, 124 F.3d 597, 605 (4th Cir. 1997); *Schwarz*, 544 F.3d at 1227.

The ultimate goal for a necessary accommodation is “to require changes in otherwise neutral policies that preclude the disabled from obtaining ‘the *same* . . . *opportunities* that those without disabilities automatically enjoy.” *Id.* While the FHA requires *equal* housing opportunities for the disabled, it does not require that disabled persons receive *better* opportunities.

In deciding whether an accommodation is necessary, the pertinent question is whether failure to grant the requested accommodation “hurts handicapped people *by reason of their handicap*, rather than . . . by virtue of what they have in common with other people.” *Wisconsin Cmty. Servs., Inc. v. City of Milwaukee*, 465 F.3d 737, 752 (7th Cir. 2006) (*en banc*) (alterations in original). The Tenth Circuit as well as other federal courts throughout the country has used this very analysis for the necessity requirement.⁴ Essentially, there must be a causal link between the accommodation and the necessity for providing handicapped persons an equal opportunity in housing. This requirement poses questions for Lindon City to answer regarding the proposed accommodation. First, is there a comparable housing opportunity for non-disabled

⁴ See, e.g., *Cinnamon Hills*, 685 F.3d at 924; *Lapid-Laurel, LLC v. Zoning Bd. of Adjustment*, 284 F.3d 442, 459 (3d Cir. 2002); *Bryant Woods Inn*, 124 F.3d at 604; *Smith & Lee Assoc. v. City of Taylor*, 102 F.3d 781, 795 (6th Cir. 1996).

persons in the R-1-20 Zone? Next, does failing to accommodate the requested quadruple number of persons hurt handicapped persons because of their handicap rather than their commonality with others (i.e. their number of unrelated persons living in the residence)? Finally, will allowing the accommodation make it so the disabled persons can compete equally in housing with other unrelated non-disabled persons? As shown below, the answer to all these questions is no, and there is no necessity for an accommodation.

C. *Summary of reasonableness requirement for an accommodation*

To determine whether an accommodation is reasonable, cities and courts “may consider as factors the extent to which the accommodation would undermine the legitimate purposes and effects of existing zoning regulations.” *Bryant Woods Inn*, 124 F.3d at 604. The basic purpose of zoning is to bring complementary land uses together, while separating incompatible ones. *See Vill. of Euclid v. Ambler Realty Co.*, 272 U.S. 365, 388, 47 S.Ct. 114, 71 L.Ed. 303 (1926) “Ordering a municipality to waive a zoning rule ordinarily would cause a ‘fundamental alteration’ of its zoning scheme if the proposed use was incompatible with surrounding land uses.” *Schwarz*, 544 F.3d at 1221.

The LINDON CITY CODE 17.70.040 refers in numerous subsections that parking, structural modifications, traffic, and other aspects must be made in a “manner consistent with the residential character of the neighborhood.” Further, the LINDON CITY CODE

17.70.040.5 requires that all group homes be handicap accessible but that any change should not “change the residential character of the structure.”

III. The Requested Accommodation is not “necessary.”

Reflections Recovery Center proposes that occupancy of 16 persons is necessary to make their recovery facility financially and therapeutically viable. This reasoning and reliance fails as a matter of law because Reflections Recovery Center cannot show any comparable housing opportunities for the non-disabled in the R-1-20 Zone, or that Lindon City has any legal duty to fundamentally alter its zoning ordinances to accommodate what appears to only be a financial and not equality need. Further, although group *therapy* may be necessary, Reflections Recovery Center cannot show as a matter of law that group *living* is necessary. Accordingly, there is no legal merit and no necessity for any accommodation to LINDON CITY CODE 17.70.040.6 limiting group homes for disabled persons to a maximum of four unrelated persons. Based on the lack of necessity for any accommodation, the Commission should deny the application.

A. There are no comparable housing opportunities for non-disabled persons.

The presiding federal circuit court over Utah held as recently as July 2012 that “when there is no comparable housing opportunity *for non-disabled people*, the failure to create an opportunity for disabled people cannot be called necessary to achieve equality of opportunity in any sense.” *Cinnamon Hills*, 685 F.3d at 923. (emphasis added). Unrelated, non-disabled people are not allowed to live in groups of more than four anywhere in a Lindon singly family zone including the R-1-20 Zone. This means

that the comparison the Commission must make is not between the recovery center and a traditional family, but between the recovery center and a boarding house or dorm room with 16 unrelated individuals. That is the comparison adopted and supported by the presiding federal court.⁵

When the Commission uses the group home-to-group home comparison, it is clear that Reflections Recovery Center is not relying on the FHA for equal treatment, but instead is seeking preferential treatment. This is the case because all other group homes in Lindon are limited to four persons. *See* LINDON CITY CODE 17.70.030.7, 17.70.060.1. Also, the LINDON CITY CODE 17.02.010.59 limits the definition of “family” to “four, but not more than four (4), non-related persons in a single dwelling unit.” The United States Supreme Court upheld a limited number of unrelated persons in a “family” in *Village of Belle Terre*. 416 U.S. at 9. In doing so, the Supreme Court recognized problems that excessive numbers of unrelated persons can pose to a traditional singly family neighborhood. For example, more cars pass by, including those for residents, staff, and visitors. Wide open, quiet places, with few people are legitimate zoning objectives that can be preserved with municipal zoning laws.

⁵ Furthermore, *Cinnamon Hills* is not the only case in the presiding federal courts to hold that comparable housing is the threshold inquiry for necessity in a requested accommodation. In *Bangerter*, 46 F.3d at 1502, the Tenth Circuit held, “If Bangerter cannot show that group homes *for the non-handicapped* are permitted in Orem ... he will have failed to show that he has suffered differential treatment when compared to a similarly situated group, and his claims will fail under the FHAA.” (emphasis added).

To sum up, Lindon City offers no comparable housing opportunity to a similar group of unrelated and non-disabled individuals. If such a situation were possible, the Commission would be required to accommodate Reflections Recovery Center's request. However, unless Reflections Recovery Center can show that a similar group of 16 unrelated and non-disabled persons could live in the R-1-20 Zone, then they are not receiving unequal treatment and will have failed to show the necessity of their requested accommodation.

B. The Commission does not need to consider individual financial viability in its necessity analysis.

The Tenth Circuit has rejected necessity arguments dependent on the individual financial viability of a project.⁶ Arguing that an accommodation to allow 16 unrelated individuals in the R-1-20 Zone because such is necessary for the financial viability of the Reflections Recovery Center is completely irrelevant and inappropriate as a matter

⁶ *Cinnamon Hills* found that in order for there to be a necessity, a party must show “that the disabled, *because of* their disabilities, are ... less able to take advantage” of housing opportunities “than the non-disabled.” *Cinnamon Hills*, 685 F.3d at 924. This causation rule stems from *Wisconsin Community Servs.*, 465 F.3d 737, which is important because that case (and, more accurately, its progeny) expressly rejected the financial viability analysis. In *Wisconsin Community Servs.*, the economic realities were not caused by the residents' disabilities. Therefore, that evidence and argument was deemed irrelevant “because the mental illness of WCS' patients is not the cause-in-fact of WCS' inability to obtain a suitable facility” and, therefore “does not hurt persons with disabilities *by reason of their* handicap.” *Id.* Courts have held that, “the statute requires only accommodations necessary to ameliorate the effect of the plaintiff's disability so that she may compete equally with the non-disabled in the housing market.”

of law and the Commission should have full confidence in rejecting this argument.⁷

Allowing the necessity determination to consider the financial situation of a handicapped group would force the Commission to apply the financial hardship argument to not only the four-person limitation, but also to building codes referenced in LINDON CITY CODE 17.70.040.4. The Fair Housing Act does not override building safety codes, and it is similarly inaccurate to attempt to let it override the non-discriminatory zoning laws in effect. Financial limitations in housing are not confined to the handicapped, but everyone has limited money to spend on purchasing or maintaining housing. “The law addresses the accommodation of handicaps, not the alleviation of economic disadvantages that may be *correlated with having handicaps*.” *Salute v. Stratford Greens Garden Apartments*, 136 F.3d 293, 301 (2d Cir. 1998). It is not the Commission’s duty to conduct a financial analysis to properly project whether a certain “magic number”⁸ of residents is necessary under the FHA. Accordingly, merely

⁷ Courts recognize a difference between individual financial viability and market financial viability. While the Tenth Circuit has not adopted or rejected market financial viability as a consideration for the necessity analysis, even if it was here, necessity is still not established. The question in market financial viability is whether all similar “businesses as a whole need this accommodation.” *Bryant Woods Inn*, 124 F.3d at 605. There is no evidence showing that a recovery treatment center in the Utah market cannot be viable unless it has the capacity for 16 residents. Consequently, the market financial viability test fails and the accommodation is not necessary.

⁸ At the most recent Planning Commission meeting held September 30, 2014 there were several comments regarding the number of residents needed at the Reflections Recovery Center. The material distributed by Reflections mentioned 20-24 residents. At the meeting numbers from 8 to 22 were mentioned. Now, it has come to the residents’ attention that Reflections has modified its application to request a maximum of 16 residents. It is unknown whether this change is an attempt to alleviate the opposition or

showing that it is costly to operate an addict recovery center does not demonstrate that an accommodation is necessary to avoid discrimination.⁹

C. The Fair Housing Act does not guarantee the availability of group therapy.

In the September 30, 2014 meeting, Reflections Recovery Center argued that a large number (approx. 16) was needed to have the most effective therapeutic treatment. Residents countered these statements by noting to the Commission that they had contacted addiction recovery centers who suggest groups ranging from 3–8 were the most effective. Regardless of the number needed for effective therapy, the Fair Housing Act does not govern and mandate a city accommodate its zoning laws for *therapy*, but only for equality in *housing*. This distinction cannot be overlooked.

The Fair Housing Act only requires “equal opportunity to enjoy a dwelling.” The Tenth Circuit recognized this express limitation to dwellings in *Cinnamon Hills*.

if Reflections is simply finding its way to a magic number for financial viability. In any case, the residents are unaware of hard financial evidence supporting the financial viability argument.

⁹ Some municipalities have misconstrued this consideration of individual financial viability, but have since been overturned and rejected. This misconception was present in an unpublished decision, *Lewis v. Draper City*, Civil No. 2:09-CV-589TC (D. Utah, Sept. 21, 2010). However, the case relied upon by the *Lewis* court actually does not expressly endorse or adopt any particular financial viability test for determining “necessity” under the FHA. Furthermore, in *Cinnamon Hills*, the Tenth Circuit, and district court of Utah, rejected the financial viability argument as it pertains to necessity, and by consequence rejected the reasoning of *Lewis*. Consequently, the most up-to-date precedent in this jurisdiction does not require the Commission to consider individual financial viability in its necessity analysis.

685 F.3d at 924. To interpret the Fair Housing Act to mandate an accommodation for effective therapy goes beyond the express language of the statute. Even so, there is no demonstration that group living is even necessary because of the relevant disabilities. “Not all recovering[] [addicts] need group living.” *Tsombanidis v. West Haven Fire Dept.*, 352 F.3d 565, 576 (2d Cir. 2003). Alcoholics Anonymous and other recovery treatment facilities at the Utah Regional Medical Center show that outpatient therapy can be successful, and thus not necessary. Therefore, the claim that Reflections Recovery Center needs 16 residents to be therapeutically viable is simply not tenable.

Reflections Recovery Center hurts itself in this regard, because it has been discovered that Reflections intends to not only offer resident living treatment, but outpatient services as well. This means that while they request 16 full-time residents, others will be welcome for therapeutic treatments while living in other residences. The sole fact Reflections Recovery Center will provide outpatient services negates their argument for group living as a necessity as well as their argument that 16 full-time residents are necessary for any individual or market financial viability. Because Reflections Recovery Center has chosen this route of providing outpatient services, they cannot rely on group living as a necessity for effective group therapy.

While Lindon’s four-person limitation could possibly affect a better therapeutic opportunity for Reflections Recovery Center, it does not present any unequal housing opportunity. Accordingly, the number of residents required for effective therapy should not be considered in the necessity analysis and the application should be denied.

IV. The Requested Accommodation is not Reasonable.

In determining whether a requested accommodation is reasonable, the Commission must recognize that if the proposed *use* (not building) is not similar to surrounding uses expressly permitted by the zoning code it likely causes a “fundamental alteration of the zoning scheme” and is not reasonable under the FHA. *Schwarz, 544 F.3d at 1221* (emphasis added). Reflections Recovery Center seems focused on the outward appearance of the home only. But the relevant law requires the Commission to examine the entire picture, and not just the size or look of the building. As is stated in numerous portions of the LINDON CITY CODE, any group home for disabled persons must be consistent with the residential character of the neighborhood. . Character includes occupancy, traffic, parking, landscaping, the structure itself, fencing, and more. Other local jurisdictions stand by Lindon in finding that a four-person limitation is an essential element of a zoning scheme meant to preserve the character of single-family neighborhoods. Waiver of that limitation will fundamentally alter the nature of the subject residential neighborhood. Increased traffic will occur in the R-1-20 Zone, the outward appearance will be visibly different from the sides and rear (which are visible in public and neighboring areas) since the structure must be altered to accommodate fire exits and other ADA requirements. Consequently, even if the Commission were to find that Reflections Recovery Center can show necessity for an accommodation, it would be unreasonable to accommodate the recovery center at 16 residents because of the numerous alterations and modifications that would be required, which would destroy

and turn the home into a property inconsistent with the residential character of the R-1-20 Zone.¹⁰

CONCLUSION

There are no comparable housing opportunities for groups of unrelated, non-disabled persons in the R-1-20 Zone and, therefore, the Commission has no duty to accommodate. To accommodate would grant Reflections Recovery Center preferential treatment, not equal treatment. There is no need to consider individual financial viability as a matter of law. Further, the Fair Housing Act does not encompass therapy, but only housing. Also, like all other housing opportunities for more than four unrelated persons, regardless of disabilities, Reflections Recovery Center will fundamentally alter the residential character of the neighborhood by injecting an institutional use into a quiet residential neighborhood. It will increase traffic patterns, population densities, and parking. Finally, the expected 30 to 60 day stays will introduce an enormous culture

¹⁰ Specifically, the Commission is aware that Reflections proposes segregation of male and female patients. The Commission is also aware that the requested number of residents pushes the structure into an institutional category in the IBC; and therefore requires additional alterations to the structure that would not be required in any other dwelling in the R-1-20 Zone. Moreover, the residents believe the proposed parking modifications will not be enough to alleviate the increased parking and traffic that will come from visitors to the residents. An increased number in on-street parking in the area is inconsistent with the quiet and open character of the R-1-20 Zone. These factors alone make the requested accommodation unreasonable and inconsistent with the character of the neighborhood.

of transiency into a long-standing traditional single-family neighborhood in a manner that is not consistent with the residential character of the neighborhood.

For these reasons, the residents respectfully request the Commission deny the application because Reflections Recovery Center cannot meet its burden to obtain an accommodation from the current, non-discriminatory, Lindon zoning ordinances.

DATED and SIGNED *October 16, 2014*,

HEIDEMAN & ASSOCIATES

/s/ Joshua Horrocks
JOSHUA HORROCKS
Attorney

2. Applicant Response to Citizen Brief



DURHAM JONES & PINEGAR, P.C.
3301 N. Thanksgiving Way, Suite 400
Lehi, Utah 84043
801.375.6600
801.375.3865 Fax
www.djplaw.com

Stephen Quesenberry
Attorney at Law
squesenberry@djplaw.com

LINDON CITY
OCT 27 2014
RECEIVED

October 24, 2014

Lindon City
100 North State Street
Lindon, Utah 84042

Dear Lindon City Council, Lindon City Planning Committee, and Mayor:

My name is Stephen Quesenberry. I represent Reflections Recovery Center. This letter is in response to the October 16, 2014 letter and brief submitted on behalf of some Lindon residents by Heideman & Associates. I have carefully reviewed the letter and brief and have found some factual and legal inaccuracies. For example, the third paragraph of the letter references “almost identical” applications for 16 or 18 residents denied by Mapleton, Alpine, and American Fork. The oblique reference to an Alpine application is probably to an application submitted by the Alpine Recovery Center. What the Heideman letter omits is that Alpine City did face litigation after denying the application, including an administrative appeal and then a lawsuit, and that Alpine City ultimately agreed to grant an accommodation of 16 residents. It is unclear whether similar situations occurred in Mapleton and American Fork. But what other cities have done is not directly relevant to the decision Lindon City faces right now.

In considering Reflections Recovery’s application for a reasonable accommodation, you must navigate what can appear to be perilous waters, which often include opposing positions of citizens and the law. I have attempted to summarize the relevant law succinctly below.

Residential treatment facilities and municipalities are both subject to the Federal Fair Housing Act¹, the Americans with Disabilities Act², the Utah Fair Housing Act³, and the state licensing requirements for residential treatment facilities⁴, as well as the Lindon City Code. The Fair Housing Amendments Act specifically requires government entities “to make reasonable accommodations in rules, policies, practices, or services, when such accommodations may be necessary to afford such person equal opportunity to use and enjoy a dwelling.”⁵ Both the Fair Housing Amendments Act and the Americans with Disabilities Act apply specifically to residential treatment facilities and related zoning decisions by local governments.⁶

¹ 42 U.S.C. §§ 3601-3631.

² 42 U.S.C. §§ 12101-12300; 47 U.S.C.A. §§ 225, 611.

³ Utah Code Ann. §§57-21-1 to -14.

⁴ Utah Code Ann. § 62A-2-108.2.

⁵ 42 U.S.C. § 3604(f)(3)(B) (emphasis added).

⁶ See *Oconomowoc Residential Programs v. City of Milwaukee*, 300 F.3d 775, 782 (7th Cir. 2002).

These Federal acts give disabled persons, including those suffering from addiction, the equal opportunity “to choose to live in a residential neighborhood.”⁷ And, “[w]hen a zoning authority refuses to reasonably accommodate these small group living facilities, it denies disabled persons an equal opportunity to live in the community of their choice.”⁸

As interpreted by federal courts, the FHAA and ADA require “accommodation if such accommodation (1) is reasonable, and (2) necessary, (3) to afford a handicapped person the equal opportunity to use and enjoy a dwelling.”⁹ Each of these factors is discussed in more detail below.

1. Reasonable

Determining whether a request for an accommodation is reasonable involves a balancing test:

Whether a requested accommodation is reasonable or not is a highly fact-specific inquiry and requires *balancing the needs of the parties*. An accommodation is reasonable if it is both efficacious and proportional to the costs to implement it. An accommodation is unreasonable if it imposes undue financial or administrative burdens or requires a fundamental alteration in the nature of the program.¹⁰

In this case, Reflections Recovery has consistently worked with city personnel to tailor its program to both meet the needs of its clients and to make the program efficacious and proportional to the costs to implement it. In fact, Reflections Recovery has reduced its request for a reasonable accommodation from 24 to 16 residents for this very reason.

Further, Reflections Recovery’s request does not require a fundamental alteration in the nature of the city’s zoning program. As you are aware, under the Lindon City Code, residential treatment facilities are permitted in residential zones.¹¹ Reflections Recovery purchased an existing residential residence that does not detract from the character of the neighborhood and is working to minimize the impact of its presence on the neighborhood.

2. Necessary

After considering whether the accommodation is reasonable, the next consideration is whether the accommodation is necessary. “The requested accommodation must be “necessary,” meaning that, without the accommodation, the plaintiff will be denied an equal opportunity to obtain the housing of her choice.”¹² In other words, “the statute requires accommodations that are necessary (or indispensable or essential) to achieving the objective of equal housing opportunities between those with disabilities and those without.”¹³

⁷ *Id.* at 784 (internal citations omitted).

⁸ *Id.*

⁹ *Id.* at 783 (internal citations omitted); *see also* 42 U.S.C. § 3604(f)(3)(B).

¹⁰ *Id.* at 784 (internal citations omitted).

¹¹ Lindon City Code 17.70.040(1).

¹² *Wisconsin Cmty. Servs., Inc. v. City of Milwaukee*, 465 F.3d 737, 749 (7th Cir. 2006).

¹³ *Cinnamon Hills Youth Crisis Ctr., Inc. v. Saint George City*, 685 F.3d 917, 923 (10th Cir. 2012).

The *Cinnamon Hills* court explained the concept of necessity as follows:

Of course, in some sense all reasonable accommodations treat the disabled not just equally but preferentially. Think of the blind woman who obtains an exemption from a “no pets” policy for her seeing eye dog, or the paraplegic granted special permission to live on a first floor apartment because he cannot climb the stairs. But without an accommodation, those individuals cannot take advantage of the opportunity (available to those without disabilities) to live in those housing facilities. And they cannot because of conditions created by their disabilities. These examples show that under the FHA it is sometimes necessary to dispense with formal equality of treatment in order to advance a more substantial equality of opportunity. And that is precisely the point of the reasonable accommodation mandate: to require changes in otherwise neutral policies that preclude the disabled from obtaining the same opportunities that those without disabilities automatically enjoy.

But while the FHA requires accommodations necessary to ensure the disabled receive the same housing opportunities as everybody else, it does not require more or better opportunities. The law requires accommodations overcoming barriers, imposed by the disability, that prevent the disabled from obtaining a housing opportunity others can access. But when there is no comparable housing opportunity for non-disabled people, the failure to create an opportunity for disabled people cannot be called necessary to achieve equality of opportunity in any sense. So, for example, a city need not allow the construction of a group home for the disabled in a commercial area where nobody, disabled or otherwise, is allowed to live.¹⁴

In this case, the city is not reviewing a request to allow disabled individuals to live in a motel (as in the *Cinnamon Hills* case) or in a commercial area. Reflections Recovery is simply seeking a reasonable accommodation to house disabled individuals in a residential area. Non-disabled people are permitted to live in the residential neighborhood at issue. And, under the Lindon City Code, they are allowed to live with large numbers of their family members, conceivably up to 16 of them, without interference from the city or its zoning laws. Granting Reflections Recovery a reasonable accommodation for 16 residents simply extends these opportunities to the disabled individuals who, because of their disability, would not otherwise be able to live in a residential neighborhood. This is particularly true where there are few or no similar residences already in the city.

Further, by refusing to permit residential facilities reasonable accommodations for a number of residents necessary to allow the facilities to be financial viable, municipalities effectively prevent disabled individuals from living in a residential setting – in violation of federal law.

In a recent Utah case, *Lewis v. Draper City*, Lewis applied for a reasonable accommodation from the statutory limit of eight residents in a residential treatment center in Draper to twenty-four residents. Lewis presented evidence that, among other things, twenty-four residents were necessary for his facility to be financially viable. Despite this evidence, the city summarily denied the application. Lewis filed suit and the District Court of Utah held that, “[i]f an applicant for an accommodation from a maximum-occupant limitation shows that an increased number of

¹⁴ *Id.* (internal citations omitted).

residents is necessary for a facility for disabled residents to be financially successful, the requested accommodation is necessary.”¹⁵ The court ultimately held that Draper City “violated the Federal Fair Housing Act by failing to provide a reasonable accommodation for the twenty-four residents.”¹⁶

Without financial viability, a residential treatment facility will, of course, not exist. Thus, some consideration of a facility’s financial viability will be important in determining whether an accommodation is necessary. Sixteen residents are necessary to make Reflections Recovery Center financially viable.

3. Affords a Handicapped Person the Equal Opportunity to Use and Enjoy a Dwelling.

The final consideration is whether the proposed accommodation affords a disabled person the equal opportunity to use and enjoy a dwelling. In this context, “equal opportunity” means the opportunity to choose to live in a residential neighborhood.”¹⁷ Specifically, “[t]he FHAA prohibits local governments from applying land use regulations in a manner that will give disabled people less opportunity to live in certain neighborhoods than people without disabilities.”¹⁸

The *Oconomowoc* court noted that “[o]ften, a community-based residential facility provides the only means by which disabled persons can live in a residential neighborhood, either because they need more supportive services, for financial reasons, or both. When a zoning authority refuses to reasonably accommodate these small group living facilities, it denies disabled persons an equal opportunity to live in the community of their choice.”¹⁹

This analysis is similar to that conducted under the “necessity” inquiry. Disabled individuals, such as Reflections Recovery’s future clients, are entitled to live in a residential neighborhood and, because they need more supportive services, a residential treatment facility is the only way they can do so. It is up to you to apply the law correctly and to allow disabled individuals the equal opportunity to live in Lindon.

Very truly yours,

DURHAM JONES & PINEGAR, P.C.

/s/ Stephen Quesenberry
Stephen Quesenberry

SQ:ja

¹⁵ *Lewis v. Draper City*, 2:09-CV-589 TC, 2010 WL 3791404 (D. Utah Sept. 22, 2010).

¹⁶ *Id.*

¹⁷ *Oconomowoc Residential Programs v. City of Milwaukee*, 300 F.3d 775, 784 (7th Cir. 2002).

¹⁸ *Id.* (internal citation omitted).

¹⁹ *Id.*

OCT 27 2014

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Attention: Lindon City Planning Commission

10/27/14

There seems to be some inaccurate information being presented concerning group size. There is a difference between group therapy size (number of individuals in a group session) vs therapeutic community group size (number of individuals living in the group home). Below is a comparison of local group homes that are similar in size, purpose and accommodations.

Treatment Centers in Utah of similar size and purpose.

Ascend Recovery - 6595 N 600 W, American Fork, Utah	16 beds
Alpine Recovery Lodge - 1018 E Oakhill Dr., Alpine, Utah	16 beds
Chateau Recovery - 375 Rainbow Ln., Midway, Utah	16 beds
Cirque Lodge Sundance – RR3 Box A-10, Sundance, Utah	16 beds
The Haven - 974 E South Temple, Salt Lake City, Utah	18 beds
The Journey - 8072 S Highland Dr., Cottonwood Heights, Utah	16 beds
Maple Mountain Recovery - 727 E 1100 S, Mapleton, Utah	16 beds
The Pines Recovery - 425 Mountain Ln, Heber, Utah	18 beds
Recovery Ways Mt View - 4883 Box Elder St., Murray, UT 84107	22 beds
Renaissance Ranch - 2829 W 13800 S, Riverton, Utah	20 beds
Turning Point - 10658 S Dimple Dell Road, Sandy Utah	16 beds
Vista at Dimple Dell Canyon - 10209 Dimple Dell Road, Sandy Utah	16 beds
Wasatch Recovery - 8420 Wasatch Blvd, Cottonwood Heights, Utah	16 beds
Willow Tree Recovery - 145 S 1300 W, Pleasant Grove, Utah	16 beds
Other facilities of larger size	
Steps Recovery Center – 984 S 930 W, Payson, Utah	39 beds
Cirque Lodge Studio – 777 N Palisade Dr. Orem Utah	50 beds
New Roads Treatment - 1530 S 500 W., Provo, Utah	40+beds
Recovery Ways- 5288 S Allendale Dr., Murray , Utah	30 beds

3. Applicant Comment on Character Attacks

29 October 2014

Lindon City
100 North State Street
Lindon, Utah 84042

Dear Lindon City Council, Lindon City Planning Committee, and Mayor:

This letter is in response to the October 27, 2014 letter submitted on behalf of "The concerned citizens of Lindon". Mr. Wentz and Mr. Cox respectfully acknowledge the residents right to voice their questions and concerns surrounding the application under review with Lindon City. What is objectionable involves the spreading of half-truths, misinformation and specifically, bringing into question their personal moral and ethical integrity, in both the referenced letter and their Facebook page *lindonneighbors* in an attempt to influence public opinion and the views of the Planning Commission, City Council and Mayor.

Although Mr. Wentz and Mr. Cox feel no need to justify their actions, they would like to clarify several items for the record;

a) Statement - misrepresented professional readiness

Facts - Lindon City, Utah State and the Division of Licensing are completely aware of the situation regarding Reflections Recovery Center. All procedures have been, and will continue to be, followed through this process.

b) Statement - ignorance/disregard to ADA and life and safety requirements

Facts - proper verification and implementation of city, state and federal codes, has been from the beginning and continues to be an ongoing process with proper experts and officials to verify compliance.

c) Statement - did not and have made no attempt to arrange neighborhood meeting

Facts - discussions with parties involved with meetings for like situations found them to be of no benefit to anyone involved due to; some resident's inability to attend, an overall lack of order, likelihood of escalating tempers and the absence of common courtesy. Instead, in a proactive approach, Reflections Recovery Center mailed or delivered informational packets to interested parties detailing all aspects regarding the proposed application which could be read and discussed at their convenience. This information was provided to answer many questions and inform as to the nature, scope and direction of the facility. Please see the attached sample information packet.

d) Statement - Mr. Cox has experience as an aide

Facts - Mr. Cox is certified, in good standing, and licensed with the State of Utah Department of Professional Licensing and holds a national license as a Substance Abuse Professional. Past experience includes Program Director of Steps Recovery Center, 8 years licensed Substance Abuse Counselor, served on the Board of Directors for the Association of Utah Substance Abuse Professionals and served as President Elect for the Association of Utah Substance Abuse Professionals.

Community Development
Lindon City

OCT 31 2014

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Mr. Wentz and Mr. Cox have conducted themselves in a professional and ethical manner and it is their hope that all parties involved will be honest with their actions and statements, focus on the facts, follow the law and be respectful of all parties involved and their differing perspectives.

Sincerely,
Reflections Recovery Center



Dear Lindon resident,

We would like to introduce ourselves and provide you with some information regarding a proposed facility moving into Lindon.

We are Reflections Recovery Center. We are an up-scale residential treatment facility specializing in drug and alcohol abuse disorders.

It seems every time you turn on the television, listen to the radio or visit over lunch, there is a reminder of a life in turmoil due to drugs or alcohol. This crippling disease knows no boundaries. It does not discriminate against age, gender, color, nationality, religion or socio-economic status. These are our kids, fellow worker, neighbors, loved ones, sports heroes, our leaders and even the people we depend on to watch over us.

It's impossible to deny the incredible heartache and loss society is forced to endure due to the widespread substance and alcohol abuse prevalent today. It seems we all know or love someone who has been touched by this crippling disease. No one sets out to become an addict, the problem is it promises everything, lures you in, and before you know it, you can't find a way out.

Fortunately there is hope. "Substance use disorders and mental health illness are chronic diseases. However, prevention works, treatment is effective, and people *RECOVER.*" *Utah Division of Substance Abuse and Mental Health, 2013 Annual Report*

Reflections Recovery Center is part of the answer. We invite you to please look through the information; see who we are, what we do, the Clients we serve and the many ways we will benefit the community through our presence.

If you would like more information or would like to share your comments, we can be reached at ReflectionsRecoveryUtah@gmail.com.

We thank you for your time and look forward to a drug free future.

Sincerely,
Reflections Recovery Center



Reflections Recovery Center is a residential treatment facility, located in Lindon Utah. Specializing in substance use disorders and mental health treatment, Reflections provides services focused on recovery, healing, individual growth and re-entry into mainstream society. Reflections therapy approach centers on the client as a whole, not only the substance abuse. Treatments promote knowledge and good health in all disciplines; mental, emotional, physical, social and spiritual. Top clinicians in the industry, using the best techniques and technology available, help residents overcome disorders involving substance and alcohol abuse, smoking cessation, stress management, depression, attention disorders and anxiety while developing a solid foundation necessary to embrace a clean, sober and productive life.

Reflections clientele will be 18 and over, mixed gender with no history of sexual offence or violence, who are seeking recovery and ready to change their lives. Residents will primarily be high school graduates or above, employed in professional careers and coming from medium to high income families. This is a very motivated, predictable and safe segment of the market. Client base will include Utah and surrounding states with the majority coming from local areas and northern Utah.

Reflections Recovery Center is a closed campus, non-smoking, healing and learning center where residents receive the training and tools needed to regain control of their lives. The up-scale residential facility is monitored 24 hours a day by staff fully certified through the State of Utah. The healing and nurturing aspects of a home-like environment allows residents to gain trust in themselves and their ability to cope with life's challenges. Each resident has ample space for personal contemplation while rebuilding the skills of interacting with society. The facility functions as an extended family where residents have responsibilities to themselves and to the other members of the household. Re-learning to place trust in others while accepting the responsibility of others trusting in them, is a vital element of returning to society.

Reflections Recovery Center helps return hope, dignity and value to the lives and loved ones of those hijacked by the deception of substance use. Knowledge and compassion promote open honest growth and trust between Clients, Providers and the Community.



Key questions regarding Facility, Residents and Operations

Who is Reflections?

Reflections Recovery Center is an up-scale residential treatment facility specializing in substance use disorders and mental health. The facility is a closed campus, non-smoking, healing and learning center where residents receive the training and tools needed to regain control of their lives and develop a solid foundation necessary to embrace a clean and sober life. Reflections Recovery utilizes the best techniques, technology, and clinicians in the industry. Our evidence-based treatments and recovery-oriented systems empower residents to return to healthy productive lifestyles.

The facility operates on a totally voluntary admittance with mixed gender, males on one side and females on the other. The center is to house 20 to 24 full-time Clients/Residents, with a central security/operations area and 24/7 oversight of the Clients.

Reflections Recovery Center's goal is to return hope, dignity and value to the lives, and loved ones, of those hijacked by the deception of substance use.

Why is it needed?

The 2013 Annual Report from *dsamh.utah.gov* reports the public substance abuse treatment system is currently serving only 16% of the current need. This means 76,403 Utah adults are in need of, but not receiving, substance abuse treatment services.

1 in 10 Americans suffer from drug and/or alcohol addiction. Prescription drug abuse in the U.S. has reached epidemic proportions. Utah has the eighth highest drug overdose mortality rate in the United States. Since 2000, the number of deaths due to overdose of pain medication has risen more than 400 percent. One in ten 12th-graders report having misused a prescription pain medication.

The statistics are staggering. Possibly the most chilling fact is these numbers do not take into account the heartache and turmoil experienced by the loved ones and family members of all those persons affected. Reflections Recovery wants to help end the pain and suffering and alleviate the negative stigma associated with Substance Use Disorders.

What is the facility?

Structure - Reflections Recovery Center is a beautiful and spacious home, nestled on 1.3 acres. With over 8800 square feet of living area, including 9 bedrooms consisting of two wings for separate male and female accommodations, 6½ bathrooms and plenty of room which allows residents the comfort and personal space needed for successful therapy and recovery.

Fencing - Six foot high full privacy fencing will be installed around three sides of the property; each side yard and the back yard, in accordance with Lindon City regulations and code.

Landscaping - Reflections will keep the property manicured and maintained to the upmost standard.

Lighting - Reflections will provide adequate illumination for safety and all lighting will be kept shielded to prevent glare onto neighboring properties.

Signage - There will be no signage. Residents will be allowed privacy and respect during this healing and recovery process.

Staffing - Those working at Reflections Recovery Center will exceed the State's requirements for a residential facility. Competent staff will be on the premises 24/7 to provide supervision and direction.

Licensing - Reflections Recovery Center will be subject to Lindon City, Utah County, Utah State and U.S. Federal licensing requirements. This will include the appropriate number of licensed professional staff as well as standard policies and operational practices.

Who are the residents?

Today's abuser has become more suburban, more white, from more successful careers and has more disposable income. They are Doctors, Lawyers, Upper Management, School Principals, Peace Officers, Moms and Dads. These are people seen in the community as leaders and role models. Pride and personal standards keep them from entering the "normal" facility while their checkbook limits them from the super high end facilities. Many times the only solution they can see is to continue down the dead end road they have been traveling. Reflections will fill the needs of these clients. The facility, staff, program and overall image will allow them to start down the road of recovery while still maintaining their dignity and personal standards.

The typical resident will be over eighteen (18) years of age, of mixed gender, have a primary diagnosis of a drug and/or alcohol addiction, who are actively seeking help and recovery. The main focus will be on the professional segment, 20 to 40 years old, of middle to upper middle class. This segment is highly self-motivated to regain control of their lives, generally of a higher caliber, very predictable and extremely safe.

Are there admittance guidelines into the program?

All residents are given a thorough evaluation by a State Licensed Clinician prior to acceptance. The clients overall health, mental and emotional status as well as required level of care, are established during this assessment.

Reflections will not grant admittance to anyone with a history of violent crimes or sexually oriented offences. Reflections will accept those with minor legal issues, on an individual basis and circumstance, as long as that person is seriously motivated to receive treatment and not simply avoiding legal consequences. Those who are in need of moderate to severe detoxification will only be admitted after hospitalization and medical clearance.

Court ordered residents - Those looking to solely avoid legal consequences will not be admitted. Those who are internally motivated and seeking change, regardless of legal requirements, will be interviewed and a clinical decision whether to admit them will be determined on an individual basis.

Mental state of residents - All potential clients will undergo a therapeutic assessment. Those requiring detoxification will be referred to an appropriate facility until they are medically cleared for residential treatment. Reflections will not admit a client with a primary diagnosis other than substance abuse. Many residents may have a mild to moderate secondary diagnosis or co-morbidity. Those with sever dual diagnosis will be referred to a higher level of care and appropriate facilities.

Discharged residents - Prior to discharge, residents must first meet with clinical staff to evaluate their condition and future plans. Family members will be called to pick up the resident. If family members are not available, staff will transport the resident to their destination or to the appropriate mass transit location.

How long will residents stay at the Center?

Reflections offers 30 day, 60 day and 90 day programs. Each resident is clinically assessed to determine which program is appropriate for them. Residents usually elect to stay additional time because they are pleased with the progress they are making and want to continue the learning and personal growth. The average stay at similar programs is 60 days.

What allowed freedoms do residents have?

Reflections Recovery Center is a closed campus where residents are restricted to Reflections property at all times. Residents are prohibited from initiating conversation or contact with anyone outside the Reflections family. All residents are provided a Resident Handbook upon acceptance into the facility and required to comply with all guidelines.

Residents are monitored and supervised 24 hour per day, seven days per week. A "Therapeutic Pass" may be granted based on the level of progress the individual has accomplished and must be approved by their clinical professional. Passes are typically restricted to activities such as doctor appointments, church

attendance, or time with family. The resident must be accompanied by family, facility staff, ecclesiastical leader or someone approved by clinical staff.

What is the typical daily schedule for the residents?

Residents will participate in a rigorous daily schedule. Waking as a group and starting the day with a Therapeutic Community meeting where goals are set and spiritual thoughts are shared.

Residents attend the gym for physical fitness training and return for breakfast by 8:30 am. After breakfast everyone prepares for the day and must be in group therapy by 10:00. After a break for lunch, residents return to group at 1:00. A short break separates the afternoon group which starts at 3:00. Dinner is at 5:00, followed by a 12 step support meeting from 7:30 to 9:00. Wrap up the day, prepare for tomorrow, and lights out by 10:30. Residents spend most of their day in groups that consist of psycho-education, behavior processing, spirituality and relapse prevention. Remaining time is devoted to homework, self-study and individual personal assessment.

Weekends are similarly scheduled with group activities added for social support and time allotted on Sundays for worship and family.

What safety precautions are followed?

Fire - Lindon City code requires a monitored fire panel installed in the residence. The Fire Department will regularly review the property for safety and code compliance.

Security measures - Reflections Recovery Center will be governed by State licensing requirements. There will be supervision 24/7 along with cameras monitoring the residents, facility and grounds at all times.

Reflections is located within 0.7 mile of the Lindon City Police Department and Lindon City Fire Department. Although security measures are in place, it's important to remember all residents enter Reflections by their own choice, diligently working to regain their lives.

Are Residents tested?

Residents admitted to the facility shall be highly motivated to achieve successful treatment. They will be subject to regular and frequent drug testing. Failure to conform to a drug and alcohol free environment will result in immediate discharge from the facility. Reflections Recovery Center maintains a zero tolerance policy.

Are visitors allowed at the Center?

Residents are allowed visitors after a two week observation period. This allows the resident to fully emerge into the recovery process and gives staff an opportunity to assess all of the behaviors and acclimation into the group.

Visits are only allowed on Sunday afternoon and are supervised by competent staff. Thursday night is family education and process night where some family members attend to gain knowledge and support their loved ones.

Will the Center change the feel of the neighborhood?

Reflections Recovery Center will look, act and feel just like any other residence in the neighborhood.

The facility functions just as an extended family. Each resident has responsibilities to themselves and to the other members of the household. Taking full advantage of the healing and nurturing aspects of a comforting, relaxed home-like environment allows residents to gain trust in themselves and their ability to cope with life's challenges. Every aspect of daily life at Reflections revolves around the "Family" concept. Re-learning to place trust in others while accepting the responsibility of others trusting in them, is a vital element of returning to society.

Outdoor activities will be limited to normal "backyard family activities", chores maintaining the lawn or grounds, and personal quiet contemplation. There will be no loud concerts or events on the property. Activities will be limited to a 10:00 pm curfew on weekdays, 11:00 pm on weekends and should not disturb neighboring properties.

A study conducted by Diana Antos Arens, Ph. D. looked at attitudes of the neighbors towards 5 separate residential group homes. She found a stark contrast between attitudes prior to opening and 2-3 years after opening. Prior to opening, neighbors classified themselves as 36% negative and 22% positive towards the facility. 2-3 years later the same neighbors rated themselves as 2% negative and 68% positive. When asked "Do you think the people living at the community residence are good neighbors?" 80% agreed and not one disagreed. When asked "Would you advise a friend to support a residence in their community?" 68% responded yes, 31% didn't know and only 1% said no. Surprisingly, 13% of respondents were completely unaware of the residential facility being in their close neighborhood proximity.

Dr. Arens conclusion; In the sample neighborhoods surveyed, the strong opposition to community residences was not a predictor of the subsequent widespread acceptance. After experience with a community residence in their "backyards," the overwhelming majority of respondents were able to say that the group home residents were good neighbors; they had no problems; and the homes did not have a negative impact on their property values.

What about vehicles and parking at Reflections?

Vehicles - There will not be a noticeable difference with the number of vehicles at the facility. Residents are not allowed private vehicles at Reflections.

Parking - Parking is based on city requirements with visitor, staff and ADA parking behind the structure and privacy fence out of view.

How will traffic affect the neighborhood?

There will not be a noticeable increase in daily traffic from the Center. Reflections Recovery will in essence mimic the other households in the neighborhood with the normal trips to work, picking up groceries and running the necessary errands.

As residents are not permitted personal vehicles at the Center, Reflections will transport residents to and from extracurricular activities; outings to the local gym, outdoor hikes, matinee movies, etc., just like others in the neighborhood driving to school or soccer practice.

Access to Reflections will come from the main traffic corridors State Street and 200 S / 2000 N. Traffic along 200 East will travel less than 300 feet to reach the property, keeping neighborhood traffic to an absolute minimum.

All visitor, staff and handicapped ADA parking will be provided off-street behind the building and full privacy fencing.

How will Reflections benefit our Community?

Reflections Recovery Center places enormous emphasis on being involved in community outreach programs, service organizations, drug and alcohol prevention education and suicide prevention awareness. This not only benefits the community but also instills pride, a sense of belonging and accomplishment within the Center and its residents. Early awareness and prevention are the best solutions for this growing problem.

What will be the impact to City resources?

Pleasant Grove and Orem Police Departments report there are minimal visits to facilities which are very close in purpose to Reflections Recovery Center. Our clients are there because they want to be, not because they have to be.

How will property values be affected?

Numerous studies show there is no evidence to suggest that property values have been negatively affected by residential treatment centers.

How will crime rates be affected?

Studies show that there is no correlation between crime and the presence of substance treatment centers. Other types of businesses such as convenience stores and pawnshops tend to have more crime associated with them.

Reflections Recovery Center is happy to answer any questions or provide additional information. Please feel free to contact us at
ReflectionsRecoveryUtah@gmail.com



To Whom It May Concern:

I am writing this letter in support of Dave Cox and his group in their efforts to open a residential substance abuse treatment facility here in Lindon.

I am the owner and operator of Steps Recovery Center(s) located in Payson, St George, and South Ogden. (Opening Dec. 2014) I am usually on the other side of the isle in the "not in my backyard" debate regarding these types of facilities and their effect (or lack thereof) on a neighborhood. Going thru the process of getting the various cities' approval, I have been to many town hall meetings. Concerned residents of these communities have asked me if I would want one of these in my neighborhood and my answer remains the same. Yes.

On a personal note, I met Dave Cox 8+ years ago when I admitted my daughter into a facility in SLC where he was starting his career as a substance abuse counselor. I convinced him to leave there and join Steps Recovery Center in 2010, and we parted ways earlier this year. I know Dave to be a man of integrity and can attest first hand of his love toward those he treats with the disease of addiction.

As a 15-year resident of Lindon, I stand ready to welcome them into our community and I hope that other Lindon residents will do the same.

With Gratitude,

A handwritten signature in black ink, appearing to read "Mike Jorgensen", with a long horizontal flourish extending to the right.

Mike Jorgensen
55 S 400 E
Lindon, UT 84042

Sept 1, 2014

To whom it may concern:

I am Bishop Kyle Cook and I live in Payson Utah. I have been asked to write about my experiences having a Drug Rehabilitation Center in my neighborhood and close to my home. I will admit it has been a positive experience unlike I thought it would be when they first moved in. I have come to know many of the staff as well as the clients that attend. I find they keep the neighborhood up with an attractive building and no problems with the participants that come and go.

Because of my calling as Bishop, I have made it a practice to visit the STEPS program most every week to talk with the clients and give them some encouragement on their way through a difficult program. I have often thought to myself, those who we need to worry about are those who are not working on their addiction but are in our neighborhoods trying to continue their problematic life-style.

I appreciate the opportunity I have had to affiliate with the STEPS program and have not found it to be a problem to have the program in my neighborhood.

Sincerely:

Kyle Cook

9/7/14

I was asked to write a letter telling how having the Steps recovery center in our neighborhood has affected us as a community or as a family. To begin with as a family it has been a miracle to have the program so close because we have been able to see first-hand how great this program is and how it can save lives. As a community I do not think it has affected us at all I know some of the neighbors had voiced the opinion that it was going to cause the neighborhood to have more problems with crime because people automatically assume that anyone in the program will be out breaking into people's homes causing problems. However I know first-hand that it has not had any negative effect crime has not been up and people have made comments how it has not affected our neighborhood the way some assumed it would have. I am very happy that this great program has found a home in our community it saves lives and I would be happy to tell anyone that.

Thank you

Rebecca Wood
Payson Utah, 84651

My Healing House is Now YOUR Healing House!

On March 9th 2001 my oldest son Shayne died due to a drug overdose. He was just 19 years old. I knew he smoked too much pot but I had no idea he was addicted to pain pills which is what killed him. His father carried intense guilt over our sons death because he too was an addict (alcohol and pain pills). It was just 18 months after burying my son that I buried his father. He died of an alcohol and drug overdose. He was only 41 years old!

After losing two of the most important people in my life to addiction I made a commitment to myself and to my community to somehow assist in the understanding and the healing of all addiction!

I decided to turn my home into a teaching and healing facility. I began teaching classes to ignite self-empowerment, self-awareness and self-healing.

I am a nationally certified Reiki Master Teacher, a certified Minister of Light, and I have been a holistic healing practitioner for 25 years, I promise you that my house has been blessed with the power of light and love! Its sole purpose is to bring healing with compassion to all who are willing to take their life back from addiction.

In 2014 the time came to pass on the torch of healing light to a bigger picture. My house now belongs to "Reflections Recovery Center" for the purpose of being a safe residential haven for recovery.

If you or a loved one suffer with addiction I invite you and wish to inspire you to take advantage of the Divine Power and healing energy that has been held and maintained here in this facility since 2001. It is Divine Energy blessed with Divine Love and filled with Divine Light!

Be well. Be happy. You deserve it!

Lisa Ross RMT

4. Additional Citizen Comments

Mark Robinson Submission



Jordan Cullimore <jcullimore.lindon@gmail.com>

Concerned Citizen

3 messages

Mark Robinson <markrob25@gmail.com>

Tue, Oct 28, 2014 at 12:16 AM

To: jacerson@lindoncity.org, rpowell@lindoncity.org, clundberg@lindoncity.org, jhoyt@lindoncity.org, rkallas@lindoncity.org, scall@lindoncity.org, hvanwagenen@lindoncity.org, mbean@lindoncity.org, vbroderick@lindoncity.org, askinner@lindoncity.org, bwily@lindoncity.org, mmarchbanks@lindoncity.org, acowie@lindoncity.org, jcullimore@lindoncity.org
Cc: mmcdonald@lindoncity.org, randerson@lindoncity.org

My name is Mark Robinson. My wife and I along with our 4 sons currently rent 144 S 300 E and am in the process of hopefully purchasing the property from my parents. My parents (who have a 2nd property in Lindon), my brother (who also owns two properties in Lindon), my 2 sisters, my 6 nieces and 5 nephews all live in Lindon. We enjoy the parks, the schools, the amenities and the residential country feel of the City.

As a potential home buyer within the city limits we looked at all of these things along with the zoning regulations and our potential proximity to commercial property and zoning. I am sure others considering relocating to Lindon will do similar research. I can tell you as a potential buyer, that having a property with the appearance of commercial parking and construction characteristics from the front or back, absolutely weighs negatively on my family's consideration of the property and will on others in the future.

It is sad that my family has already sold our home in Delaware. We have spent 10's of thousands of dollars to relocate to Lindon to be near family and even took an over \$40,000 loss on our DE home in anticipation of living on a residential street with residential neighbors.

We found this property and I gave up a promising career trajectory and became a permanent telecommuter as a sacrifice to live in a better city near more family and not be in a city next to businesses. My office is now over our garage and faces our back yard. There is a great view of our garden, chickens and a loving residential community of new friends. However, if this is approved my backyard will look directly at a commercial parking lot and building with commercial grade construction requirements. Allowing a business to enter our community with preferential treatment and entitlements is not supportive of what our community wants or legal when interpreting the laws of equality per the brief sent to you by our communities legal representation. I would like to also be treated in my housing fairly.

Please do not allow a business to change the nature of yours and my friends and families view, neighborhood and community feel. Your decision on this commercial institution will create a standard by which the next business will be able to force their way into our community and further change where you and I live.

This kind of decision, to approve the Reflections Center and other businesses in residential communities will permanently effect the remaining development you are expecting over the next 16 years when you plan to be at 100% capacity (2030), it will effect the decisions of future developers, it will effect the decisions of future buyers and will effect the decisions of current voters.

If you approve this due to not having current legal limitations in place, what will stop additional applicants from opening 1 more a year until you are at 100% capacity in 2030? If that occurs, you will have 1 'residential' business open on an average of almost every square HALF mile by 2030 (16 businesses across 8.5 miles square). This will no longer be a residential community. Currently over 20% of the almost 6000 acres is already zoned commercial. Please do not expand into the residential parts of what I hope to be our home.

Thank you,

Mark A Robinson
144 S 300 E
Lindon, UT 84042

Paul Russell Submission



Jordan Cullimore <jcullimore.lindon@gmail.com>

Concern # 7 re: Reflections Recovery center

Paul Russell <paulrusselldesigns@gmail.com>

Mon, Oct 27, 2014 at 10:22 PM

To: Val Killian <killianval@gmail.com>

Cc: "jacerson@lindoncity.org" <jacerson@lindoncity.org>, "rpowell@lindoncity.org" <rpowell@lindoncity.org>, clundberg@lindoncity.org, jhoyt@lindoncity.org, mbean@lindoncity.org, vbroderick@lindoncity.org, askinner@lindoncity.org, bwily@lindoncity.org, mmarchbanks@lindoncity.org, mmcdonald@lindoncity.org, randerson@lindoncity.org, "rkallas@lindoncity.org" <rkallas@lindoncity.org>, "scall@lindoncity.org" <scall@lindoncity.org>, Hugh Van Wagenen <hvanwagenen@lindoncity.org>, acowie@lindoncity.org, jcullimore@lindoncity.org

Lindon City Leaders,

I echo the sentiments expressed by the combined city neighbors. Please consider these open letter points in your decision. I am very concerned about the impact this business will have on my neighborhood and on our city. I likewise ask that you deny the application for the Reflections Recovery Center. I would welcome this business in an appropriately zoned area of the city (not residential).

Paul Russell
94 S. 200 E.

[Quoted text hidden]

--

[801.785.9379](tel:801.785.9379) h

Spencer Jones Submission



Jordan Cullimore <jcullimore.lindon@gmail.com>

From: Spencer V. Jones [mailto:JonesSV@ldschurch.org]
Sent: Thursday, October 09, 2014 12:08 PM
To: acowie@lindoncity.org
Subject: Reflections Recover Center

Dear Adam.

We live at 337 E. 60 N. Lindon and are opposed to this business intruding into our family friendly neighborhood. We are joining with others to hire a lawyer to fight this intrusion. Would you want a business in your neighborhood?

Please consider our feelings,

Spencer & Joyce Jones

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Concerned Citizens of Lindon Submission

To: The Mayor, Planning Commission , City Council and City Staff

We the concerned citizens of Lindon, understand you are meeting in a closed work session this Tuesday at 6pm. The purpose of this meeting is to discuss Reflections Recovery Center's application. This open letter outlines our concerns. We also hope our attorneys brief will be useful in helping you **stand** by Lindon City's current Zoning ordinance. Please include these items in your discussion.

Since all of you live in Lindon our concerns should be your concerns. Our conditions for denial are supported in our attorneys brief. They are listed below:

- 1. There are no comparable housing opportunities for groups of unrelated, nondisabled persons in the R1-20 zone and, therefore, the Commission has no duty to accommodate.***
- 2. To accommodate would grant Reflections Recovery Center preferential treatment, not equal treatment.***
- 3. There is no need to consider individual financial viability as a matter of law.***
- 4. Further, the Fair Housing Act does not encompass therapy, but only housing.***
- 5. Also, like all other housing opportunities for more than 4 unrelated persons, regardless of disabilities, Reflections Recovery Center will fundamentally alter the residential character of the neighborhood by injecting an institutional use into a quiet residential neighborhood. It will increase traffic patterns, population densities and parking***
- 6. The expected 30-60 day stays will introduce an enormous culture of transiency into a long standing traditional single family neighborhood in a manner that is not consistent with the residential character of the neighborhood.***

We now address our last concern, which is one of TRUST. The applicant has already misrepresented their professional readiness and have also shown a complete ignorance/disregard as to the requirements and professional expertise required to provide the ADA and LIFE & SAFTEY requirements needed for their application and their customers safety. How can we, those who may become their neighbors, trust they will do what they say they will do and do it professionally and in a neighborly way . Adam Cowie in a letter dated 29 August 2014 suggested that Reflections meet with their neighbors before the Planning Commission meeting held on 23 September 2014. **They did not and have made no attempt to arrange such a neighborhood meeting.** It appears their actions have already spoken.

For these reasons, we respectfully request the Planning Commission deny the application because Reflections Recovery Center cannot meet its burden to obtain accommodation from the current, non discriminatory, Lindon zoning ordinances.

sincerely

The concerned citizens of Lindon, 27 October 2014

5. City Engineer's Opinion on Traffic and Parking



Jordan Cullimore <jcullimore.lindon@gmail.com>

Reflections Recovery Center - Effect on Traffic

Mark Christensen <MLC@jub.com>

Wed, Nov 5, 2014 at 5:42 PM

To: Jordan Cullimore <jcullimore@lindoncity.org>

Jordan,

This email is in response to your request that we provide our opinion as to the effect of traffic associated with the proposed Reflections Recovery Center on surrounding roadways.

We understand that it is proposed at 145 South 200 East in Lindon, that the site plan shows parking spaces for 17 vehicles, designated as nine for staff, six for guests, and two for ADA/van parking. We also understand that there will typically be four to six employees at a time at the facility, with a minimum of two at all times. We understand that patients in the facility will not have vehicles.

Lindon's 200 East Street is a designated minor collector street on the Lindon Street Master Plan Map. We estimate that 1,000 or more vehicles per day travel on it, probably with 100 to 200 trips during the peak hour. It has capacity to carry several times that many vehicles.

We do not know how frequently support services will make trips to the facility, and we do not know how frequently guests will come to the facility. However, if we assumed 6 trip ends per day for support services and guests, and 14 trip ends by employees, that would total 20 trip ends, or 40 trips generated by the facility (counting one trip coming and one trip going for each trip end), with most of them occurring at times other than peak hours. If the site were occupied as a home by a large family with 3 or 4 drivers, it could easily generate 10 or 12 trip ends per day, or 20 to 24 trips. That would be about 16 or 20 fewer trips than what the Reflections Recovery Center might generate.

The net effect of the Reflections Recovery Center is probably 16 or 20 trips per day. This would only represent around 2% of the trips on 200 East, and would have no effect on 200 East Street's ability to meet the traffic demand.

With off-street parking for 17 vehicles, we would expect that there would be little need for vehicles associated with the site to park on the street – certainly no more than if the site were occupied by a large family as a home.

While the facility will likely result in more trips than a home occupied by a family, the additional trips will be spread throughout the day, and we believe that the trips would not constitute a nuisance in the neighborhood. In our opinion the site will have a negligible effect on traffic conditions in the area, with no impact needing mitigation.

Mark L. Christensen, P.E.

Project Manager

Additional Documents
Before Sept. 23, 2014
Planning Commission
Meeting

Additional Documents

1. Lindon City Letter to Applicants
2. Applicable City Code

Applicant Materials

1. Introduction & Key Questions
2. Responses to Staff Questions
3. Pictures
4. Lindon City Code with Comments
5. Evidence for Number of Clients
6. Evidence of Residential Nature
7. Conclusion
8. Safety Plan
9. Blueprints of Existing Home
10. Remodel Details
11. State Licensing Requirements
12. Reports and Studies Provided by Applicant
13. Former Property Uses

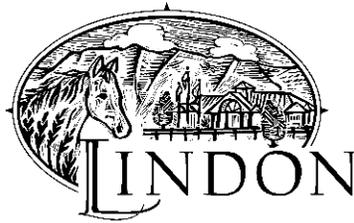
Citizen Written Comment Submittals

1. Submission from Renee Condie
2. Submission from Val Killian

Additional Documents

1. City Letter to Applicants

Lindon City
100 North State Street
Lindon, UT 84042-1808



TEL 801-785-5043
FAX 801-785-4510
www.lindoncity.org

August 29, 2014

DMDR, LLC
Ron Wentz
12117 Field Downs Drive
Riverton, UT 84065

Re: Appeal of Lindon City Business License for Reflections Recovery Center

Mr. Wentz,

This letter is being provided in response to your appeal of a business license denial for Reflections Recovery Center proposed to be located at 145 South 200 East, Lindon, Utah. On July 29, 2014 you submitted a Lindon City business license on behalf of DMDR, LLC. Upon receipt and evaluation of your business license materials Lindon City determined that your business would be classified by Lindon City Code (LCC) as a transitional/treatment group home which is regulated by LCC 17.70.080. The structure in which you propose to operate your business is located in the Single Family Residential (R1-20) zone. Transitional/treatment group homes are not permitted in the R1-20 zone, and therefore the business license application was denied on August 21, 2014. We received your appeal of the denial on August 25, 2014.

Your appeal application indicates that your proposed clients will fall within the definition of those who are disabled and protected under the federal American with Disabilities Act (ADA) and Fair Housing Amendments Act. Your appeal states that Lindon City Code does not follow these laws.

As you have stated that your clients are protected under the ADA the City is able to more accurately classify the proposed facility as a Group Home for Persons with Disabilities as regulated in LCC 17.70.040. The City is willing to make a reasonable accommodation of your facility provided that you are able to first, establish a need to operate with the number of clients you propose (18 to 22 clients, with 6 to 7 staff) by submitting specific evidence that the number of residents requested is necessary to reasonably facilitate treatment of those with disabilities in a residential environment, and second, that the high number of residents you are requesting is reasonable in that they will not alter the residential nature of the use.

LCC 17.70.040 currently limits these types of facilities to no more than four (4) unrelated individuals. All single-family households in Lindon City are also subject to this same limit of housing no more than four unrelated individuals. You have the burden to show why it is necessary for the City to make exceptions to this standard and that such an accommodation will not unreasonably alter the nature of the use and the underlying purposes of the City's residential

zoning by allowing such a high number of unrelated individuals to live together in the proposed facility.

Group Homes for Persons with Disabilities as regulated by LCC 17.70.040 are permitted uses within residential zones and require a site plan review and approval by the Lindon City Planning Commission. If you meet your burden of showing that your request is both necessary and reasonable, the City will of course follow the law in making a reasonable accommodation for the proposed use, and as such may be making exceptions to some portions of the ordinance. Therefore, the City Council will be the final land use authority for this item after receiving a recommendation from the Planning Commission (LCC 17.08.090). If the site plan application is approved by the City Council, then the City will be able to issue your business license application administratively. If approval is granted, a building permit for the proposed remodeling of the home must be submitted and approved prior to any construction.

I have included a Land Use Application which you will need to complete and sign in order to move forward with the site plan approval process. The application should be turned in at the Community Development office at the Lindon City Center. A fee for a *Miscellaneous Application* of \$150.00 is required upon submittal. You are also responsible for any engineering review fees incurred by the City, which will be billed to you upon completion of the site plan reviews. I have also included a copy of LCC 17.70.040 and LCC 17.70.050 with a line drawn through sections that you do not need to respond to. We believe all other sections of the ordinance are applicable. It may be beneficial for the Planning Commission and City Council if you respond in writing how your proposal will meet each ordinance requirement and/or why an exception to the ordinance is being requested and why it should be reasonably accommodated.

Once we receive your completed application materials the item will be scheduled for a Planning Commission meeting and then forwarded to the next available City Council meeting. Both groups typically meet twice per month. Please be aware that notices of the meeting will be sent to surrounding properties per our ordinance standards. As such, it may be beneficial for you to discuss details of your proposal and answer questions with neighbors prior to the Planning Commission and City Council meetings.

If you have questions on this letter or the approval process as outlined, please feel free to contact me at 801-785-5043 or by email at acowie@lindoncity.org.

Sincerely,



Adam Cowie
Lindon City Administrator

Attachments:

Lindon City Code Sections 17.70.020, 17.70.040, 17.70.050
Lindon City Land Use Application

Cc:

Lindon Mayor & City Council
Brian Haws, City Attorney
Hugh Van Wagenen, Planning Director

2. Applicable City Code

Lindon City Code

Section 17.70.020 General Definitions

1. For the purposes of this section, certain terms and words are defined and are used in this title in that defined context. Any words in this title not defined in this chapter shall be as defined in Webster's Collegiate Dictionary.
2. As used in this section, the following words shall be defined as follows:
 - Elderly: Elderly shall mean a person who is 60 years or older.
 - Group Home: When not used in specific context in relations to a particular type of facility, group home shall include a residential facility for elderly persons, a group home for persons with a disability, a juvenile group home, a transitional/treatment group home, or a transitional victim home.
 - Resident: Resident shall mean persons receiving the benefit of services and facilities provided by a group home, excluding staff and care providers.

Section 17.70.040 Group Home for Persons with Disabilities

1. Group homes for persons with a disability shall be a permitted use in all residential zones, and requires site plan approval by the Planning Commission.
2. Disabled or Disability under this section shall mean, with respect to a person, a person who has a physical or mental impairment which substantially limits one or more of that person's major life activities or has a history of having such impairment. Disabled or Disability does not mean an impairment or limitation caused by addiction and current use of a controlled substance or alcohol. Disabled or Disability also does not mean an impairment or limitation resulting from or related to kleptomania, pyromania, or any sexually related addiction or disorder, including but not limit to, sex and pornography addictions, transvestism, transexualism, pedophilia, exhibitionism, voyeurism, gender identity disorders (those not resulting from physical impairments), or any other sexual behavior disorder.
3. Each group home for persons with a disability is subject to state licensing procedures and must provide the city proof of a valid license issued by the Utah State Division of Licensing and compliance with Department of Human Services standards.
4. The group home shall conform to all applicable building, fire, health and safety codes and requirements for facilities of this type and for the zoning in which they are constructed.
5. The structure shall be capable of use as a group home for persons with a disability, which includes being fully handicap accessible, without structural or landscaping alterations that would change the residential character of the structure. A site plan must be submitted showing any alteration of the structure or landscaping. Any alterations must be approved by the Planning Commission before a permit is issued.
6. Occupancy of the structure shall be such that each resident is provided adequate personal space. A residential facility shall ensure that each bedroom space in the facility has a floor area, exclusive of closet space, of at least 74 square feet for initial occupant and an additional 50 square feet for each other occupant of this space, but in no case shall the group home have any more than four (4) residents at any given time.
- ~~7. No group home for persons with a disability shall be established or maintained within three fourths of a mile (3,960 feet) of another group home for the elderly, a group home for persons with a disability, a juvenile group home, a transitional/treatment group home, or a transitional victim home as measured in a straight line between the closest property line of the proposed group home and the closest property line of the existing group homes identified above. No group home that has residents with disabilities related to any form of substance abuse or that have a history of past violence, sexual aggression or any offense involving a weapon or which resulted in serious bodily injury to another person shall be established within 500 feet of a licensed daycare, or public or private school as measured in a straight line between the closest property lines of the propose group home and the school/daycare lot.~~
8. The facility shall provide one off-street parking space for each sleeping room, plus adequate parking for visitors and staff. In no case shall the facility have less than three off-street parking spaces.
9. The facility shall have six foot site obscuring fencing along the side and back yards that is constructed in a manner consistent with the residential character of the neighborhood. Such fencing shall be constructed and maintained in accordance with the Lindon City Code. The Planning Commission shall approve the style and design of any fencing before a permit is issued. A chain link fence with slats shall not be considered site obscuring for the purposes of this section.
10. No portion of the facility's front and side yard setbacks shall be used to provide parking spaces as required by this section without prior approval of the Planning Commission. Any use of the yard as parking space shall not change the residential character of the property.
11. The group home operator shall provide the city proof of adequate insurance for the program's vehicles, hazard insurance on the home, and liability insurance to cover residents and third party individuals.
12. The group home operator shall provide proof that each of the residents admitted to the facility falls within the definition of disability as set forth in this section and that the disability substantially limits the resident in a major life function.
13. The facility shall provide training or treatment programs for residents with disabilities which are in compliance with department of Human Services standards, as set forth in the Utah Administrative Code.
14. Any group home for person with disability that have a history of past violence, sexual aggression or any offense involving a weapon or which resulted in serious bodily injury to another person, which is constructed within 1000 feet of a school or licensed daycare, as measured in a straight line between the closest property lines of the proposed group home and the

school lot, shall provide in accordance with rules established by the Department of Human Services under Title 62A, Chapter 2, Licensure of Programs and Facilities;

- a. 24-hour supervision for residents; and
 - b. 24-hour security measures.
15. The facility shall not accept any resident that would pose a direct threat to the health and safety of others in the facility or community or who in the past has posed a threat to the health and safety of others or whose tenancy would likely create a risk of substantial physical damage to others. The owner or operator of the facility shall conduct an individualized assessment of each person desiring to become a resident of the facility to determine if such person would constitute a threat prior to allowing occupancy of the facility by such a person. The assessment shall be conducted by a licensed psychologist, social worker or other licensed individual qualified to perform such assessments. Assessments shall include, but not be limited to, consideration of such things as past criminal histories and/or violent acts of the individual, the amounts of time that have lapsed since such acts, and treatments the individual has received. Evaluations of individuals who have committed acts of sexual aggression or criminal sex acts shall also include psycho-sexual evaluations by a licensed psychiatrist or an individual holding a PhD in psychology. No individual determined to pose a risk for commission of sexual offenses, or being classified as having predatory tendencies may be accepted as a resident.
16. Prior to the initial occupancy of a group home for person with disabilities and at least quarterly thereafter, the owner or operator of the group home for persons with disabilities shall certify, in a sworn affidavit, that individualized assessments have been performed on each resident and that each resident meets the requirements of this section. Upon request, the owner or operator of the group home for persons with disabilities shall provide documentation and records to verify compliance with this section.
17. The facility shall comply with all applicable state and federal laws, including laws related to access.
18. To ensure the safety of the residents and surrounding community, the facility operators shall develop a safety plan demonstrating adequate supervision and control of the residents. The safety plan shall be reviewed by law enforcement officials and shall be approved by the Planning Commission.

Section 17.70.050 Procedure for Approval and Annual Renewal of Permit for a Group Home for Persons With Disabilities

1. At least ten (10) days before the Planning Commission hears the application for a group home for persons with disabilities, the city shall provide written notification, either in person or by first class mail, to all citizens living within or owning property within 750 feet of the proposed site of the group home as measured in a straight line between the closest property lines of the proposed group home and the neighboring lots.
2. Upon review of an application for a new group home for persons with disabilities and upon determination of compliance with all of the above requirements, the application may be approved. However, where in the opinion of the Planning Commission, the information provided by the applicant is insufficient for the group home for persons with disabilities is not in compliance with the requirements of section 17.70, the application may be denied. The city shall provide written notice of approval for the proposed group to all citizens living within or owning property within 750 feet of the proposed site of the group home as measured in a straight line between the closest property lines of the proposed group home and the neighboring lots. If the application is denied, the city shall provide the applicant written notice of the decision to deny the application. This notice of approval or denial shall be in addition to the notice required in paragraph 1 and shall be provided either in person or by first class mail within 5 days of the decision.
3. ~~Upon receipt of approval of the Planning Commission, the operator of the group home for persons with a disability shall be eligible to secure an annual permit from the city. Said permit shall be valid for one calendar year and shall be renewed annually subject to:~~
 - ~~a. The receipt of a renewal application that shall include the information and certifications required under Section 17.70 above and a certification that none of the resident pose a threat as of the date of renewal; and~~
 - ~~b. at least ten (10) days before the Planning Commission hears the renewal application, the city shall provide written notification, either in person or by first class mail, to all citizens living within or owning property within 300 feet of the site of the group home.~~
 - ~~c. A finding by the Planning Commission that during the preceding year the group home had been operated in compliance with the terms of section 17.70 and any other conditions of approval.~~
4. A permit to operate a group home for persons with a disability shall be;
 - a. nontransferable and shall terminate if the structure is devoted to a use other than a group home for persons with disabilities or the structure fails to comply with all building, safety, health and zoning requirements of Lindon City.
 - b. Shall terminate if at any time it is demonstrated to the Planning Commission that;
 - i. The structure fails to comply with the requirements of section 17.70; or
 - ii. The program has failed to operate in accordance with the requirements of section 17.70.

Applicant Materials

1. Introduction & Key Questions



Introduction & Key Questions



Reflections Recovery Center is a residential treatment facility, located in Lindon Utah. Specializing in substance use disorders and mental health treatment, Reflections provides services focused on recovery, healing, individual growth and re-entry into mainstream society. Reflections therapy approach centers on the client as a whole, not only the substance abuse. Treatments promote knowledge and good health in all disciplines; mental, emotional, physical, social and spiritual. Top clinicians in the industry, using the best techniques and technology available, help residents overcome disorders involving substance and alcohol abuse, smoking cessation, stress management, depression, attention disorders and anxiety while developing a solid foundation necessary to embrace a clean, sober and productive life.

Reflections clientele will be 18 and over, mixed gender with no history of sexual offence or violence, who are seeking recovery and ready to change their lives. Residents will primarily be high school graduates or above, employed in professional careers and coming from medium to high income families. This is a very motivated, predictable and safe segment of the market. Client base will include Utah and surrounding states with the majority coming from local areas and northern Utah.

Reflections Recovery Center is a closed campus, non-smoking, healing and learning center where residents receive the training and tools needed to regain control of their lives. The up-scale residential facility is monitored 24 hours a day by staff fully certified through the State of Utah. The healing and nurturing aspects of a home-like environment allows residents to gain trust in themselves and their ability to cope with life's challenges. Each resident has ample space for personal contemplation while rebuilding the skills of interacting with society. The facility functions as an extended family where residents have responsibilities to themselves and to the other members of the household. Re-learning to place trust in others while accepting the responsibility of others trusting in them, is a vital element of returning to society.

Reflections Recovery Center helps return hope, dignity and value to the lives and loved ones of those hijacked by the deception of substance use. Knowledge and compassion promote open honest growth and trust between Clients, Providers and the Community.



Key questions regarding Facility, Residents and Operations

Who is Reflections?

Reflections Recovery Center is an up-scale residential treatment facility specializing in substance use disorders and mental health. The facility is a closed campus, non-smoking, healing and learning center where residents receive the training and tools needed to regain control of their lives and develop a solid foundation necessary to embrace a clean and sober life. Reflections Recovery utilizes the best techniques, technology, and clinicians in the industry. Our evidence-based treatments and recovery-oriented systems empower residents to return to healthy productive lifestyles.

The facility operates on a totally voluntary admittance with mixed gender, males on one side and females on the other. The center is to house 20 to 24 full-time Clients/Residents, with a central security/operations area and 24/7 oversight of the Clients.

Reflections Recovery Center's goal is to return hope, dignity and value to the lives, and loved ones, of those hijacked by the deception of substance use.

Why is it needed?

The 2013 Annual Report from *dsamh.utah.gov* reports the public substance abuse treatment system is currently serving only 16% of the current need. This means 76,403 Utah adults are in need of, but not receiving, substance abuse treatment services.

1 in 10 Americans suffer from drug and/or alcohol addiction. Prescription drug abuse in the U.S. has reached epidemic proportions. Utah has the eighth highest drug overdose mortality rate in the United States. Since 2000, the number of deaths due to overdose of pain medication has risen more than 400 percent. One in ten 12th-graders report having misused a prescription pain medication.

The statistics are staggering. Possibly the most chilling fact is these numbers do not take into account the heartache and turmoil experienced by the loved ones and family members of all those persons affected. Reflections Recovery wants to help end the pain and suffering and alleviate the negative stigma associated with Substance Use Disorders.

What is the facility?

Structure - Reflections Recovery Center is a beautiful and spacious home, nestled on 1.3 acres. With over 8800 square feet of living area, including 9 bedrooms consisting of two wings for separate male and female accommodations, 6½ bathrooms and plenty of room which allows residents the comfort and personal space needed for successful therapy and recovery.

Fencing - Six foot high full privacy fencing will be installed around three sides of the property; each side yard and the back yard, in accordance with Lindon City regulations and code.

Landscaping - Reflections will keep the property manicured and maintained to the upmost standard.

Lighting - Reflections will provide adequate illumination for safety and all lighting will be kept shielded to prevent glare onto neighboring properties.

Signage - There will be no signage. Residents will be allowed privacy and respect during this healing and recovery process.

Staffing - Those working at Reflections Recovery Center will exceed the State's requirements for a residential facility. Competent staff will be on the premises 24/7 to provide supervision and direction.

Licensing - Reflections Recovery Center will be subject to Lindon City, Utah County, Utah State and U.S. Federal licensing requirements. This will include the appropriate number of licensed professional staff as well as standard policies and operational practices.

Who are the residents?

Today's abuser has become more suburban, more white, from more successful careers and has more disposable income. They are Doctors, Lawyers, Upper Management, School Principals, Peace Officers, Moms and Dads. These are people seen in the community as leaders and role models. Pride and personal standards keep them from entering the "normal" facility while their checkbook limits them from the super high end facilities. Many times the only solution they can see is to continue down the dead end road they have been traveling. Reflections will fill the needs of these clients. The facility, staff, program and overall image will allow them to start down the road of recovery while still maintaining their dignity and personal standards.

The typical resident will be over eighteen (18) years of age, of mixed gender, have a primary diagnosis of a drug and/or alcohol addiction, who are actively seeking help and recovery. The main focus will be on the professional segment, 20 to 40 years old, of middle to upper middle class. This segment is highly self-motivated to regain control of their lives, generally of a higher caliber, very predictable and extremely safe.

Are there admittance guidelines into the program?

All residents are given a thorough evaluation by a State Licensed Clinician prior to acceptance. The clients overall health, mental and emotional status as well as required level of care, are established during this assessment.

Reflections will not grant admittance to anyone with a history of violent crimes or sexually oriented offences. Reflections will accept those with minor legal issues, on an individual basis and circumstance, as long as that person is seriously motivated to receive treatment and not simply avoiding legal consequences. Those who are in need of moderate to severe detoxification will only be admitted after hospitalization and medical clearance.

Court ordered residents - Those looking to solely avoid legal consequences will not be admitted. Those who are internally motivated and seeking change, regardless of legal requirements, will be interviewed and a clinical decision whether to admit them will be determined on an individual basis.

Mental state of residents - All potential clients will undergo a therapeutic assessment. Those requiring detoxification will be referred to an appropriate facility until they are medically cleared for residential treatment. Reflections will not admit a client with a primary diagnosis other than substance abuse. Many residents may have a mild to moderate secondary diagnosis or co-morbidity. Those with sever dual diagnosis will be referred to a higher level of care and appropriate facilities.

Discharged residents - Prior to discharge, residents must first meet with clinical staff to evaluate their condition and future plans. Family members will be called to pick up the resident. If family members are not available, staff will transport the resident to their destination or to the appropriate mass transit location.

How long will residents stay at the Center?

Reflections offers 30 day, 60 day and 90 day programs. Each resident is clinically assessed to determine which program is appropriate for them. Residents usually elect to stay additional time because they are pleased with the progress they are making and want to continue the learning and personal growth. The average stay at similar programs is 60 days.

What allowed freedoms do residents have?

Reflections Recovery Center is a closed campus where residents are restricted to Reflections property at all times. Residents are prohibited from initiating conversation or contact with anyone outside the Reflections family. All residents are provided a Resident Handbook upon acceptance into the facility and required to comply with all guidelines.

Residents are monitored and supervised 24 hour per day, seven days per week. A "Therapeutic Pass" may be granted based on the level of progress the individual has accomplished and must be approved by their clinical professional. Passes are typically restricted to activities such as doctor appointments, church attendance, or time with family. The resident must be accompanied by family, facility staff, ecclesiastical leader or someone approved by clinical staff.

What is the typical daily schedule for the residents?

Residents will participate in a rigorous daily schedule. Waking as a group and starting the day with a Therapeutic Community meeting where goals are set and spiritual thoughts are shared.

Residents attend the gym for physical fitness training and return for breakfast by 8:30 am. After breakfast everyone prepares for the day and must be in group therapy by 10:00. After a break for lunch, residents return to group at 1:00. A short break separates the afternoon group which starts at 3:00. Dinner is at 5:00, followed by a 12 step support meeting from 7:30 to 9:00. Wrap up the day, prepare for tomorrow, and lights out by 10:30. Residents spend most of their day in groups that consist of psycho-education, behavior processing, spirituality and relapse prevention. Remaining time is devoted to homework, self-study and individual personal assessment.

Weekends are similarly scheduled with group activities added for social support and time allotted on Sundays for worship and family.

What safety precautions are followed?

Fire - Lindon City code requires a monitored fire panel installed in the residence. The Fire Department will regularly review the property for safety and code compliance.

Security measures - Reflections Recovery Center will be governed by State licensing requirements. There will be supervision 24/7 along with cameras monitoring the residents, facility and grounds at all times.

Reflections is located within 0.7 mile of the Lindon City Police Department and Lindon City Fire Department. Although security measures are in place, it's important to remember all residents enter Reflections by their own choice, diligently working to regain their lives.

Are Residents tested?

Residents admitted to the facility shall be highly motivated to achieve successful treatment. They will be subject to regular and frequent drug testing. Failure to conform to a drug and alcohol free environment will result in immediate discharge from the facility. Reflections Recovery Center maintains a zero tolerance policy.

Are visitors allowed at the Center?

Residents are allowed visitors after a two week observation period. This allows the resident to fully emerge into the recovery process and gives staff an opportunity to assess all of the behaviors and acclimation into the group.

Visits are only allowed on Sunday afternoon and are supervised by competent staff. Thursday night is family education and process night where some family members attend to gain knowledge and support their loved ones.

Will the Center change the feel of the neighborhood?

Reflections Recovery Center will look, act and feel just like any other residence in the neighborhood.

The facility functions just as an extended family. Each resident has responsibilities to themselves and to the other members of the household. Taking full advantage of the healing and nurturing aspects of a comforting, relaxed home-like environment allows residents to gain trust in themselves and their ability to cope with life's challenges. Every aspect of daily life at Reflections revolves around the "Family" concept. Re-learning to place trust in others while accepting the responsibility of others trusting in them, is a vital element of returning to society.

Outdoor activities will be limited to normal "backyard family activities", chores maintaining the lawn or grounds, and personal quiet contemplation. There will be no loud concerts or events on the property. Activities will be limited to a 10:00 pm curfew on weekdays, 11:00 pm on weekends and should not disturb neighboring properties.

A study conducted by Diana Antos Arens, Ph. D. looked at attitudes of the neighbors towards 5 separate residential group homes. She found a stark contrast between attitudes prior to opening and 2-3 years after opening. Prior to opening, neighbors classified themselves as 36% negative and 22% positive towards the facility. 2-3 years later the same neighbors rated themselves as 2% negative and 68% positive. When asked "Do you think the people living at the community residence are good neighbors?" 80% agreed and not one disagreed. When asked "Would you advise a friend to support a residence in their community?" 68% responded yes, 31% didn't know and only 1% said no. Surprisingly, 13% of respondents were completely unaware of the residential facility being in their close neighborhood proximity.

Dr. Arens conclusion; In the sample neighborhoods surveyed, the strong opposition to community residences was not a predictor of the subsequent widespread acceptance. After experience with a community residence in their ~backyards," the overwhelming majority of respondents were able to say that the group home residents were good neighbors; they had no problems; and the homes did not have a negative impact on their property values.

What about vehicles and parking at Reflections?

Vehicles - There will not be a noticeable difference with the number of vehicles at the facility. Residents are not allowed private vehicles at Reflections.

Parking - Parking is based on city requirements with visitor, staff and ADA parking behind the structure and privacy fence out of view.

How will traffic affect the neighborhood?

There will not be a noticeable increase in daily traffic from the Center. Reflections Recovery will in essence mimic the other households in the neighborhood with the normal trips to work, picking up groceries and running the necessary errands.

As residents are not permitted personal vehicles at the Center, Reflections will transport residents to and from extracurricular activities; outings to the local gym, outdoor hikes, matinee movies, etc., just like others in the neighborhood driving to school or soccer practice.

Access to Reflections will come from the main traffic corridors State Street and 200 S / 2000 N. Traffic along 200 East will travel less than 300 feet to reach the property, keeping neighborhood traffic to an absolute minimum.

All visitor, staff and handicapped ADA parking will be provided off-street behind the building and full privacy fencing.

How will Reflections benefit our Community?

Reflections Recovery Center places enormous emphasis on being involved in community outreach programs, service organizations, drug and alcohol prevention education and suicide prevention awareness. This not only benefits the community but also instills pride, a sense of belonging and accomplishment within the Center and its residents. Early awareness and prevention are the best solutions for this growing problem.

What will be the impact to City resources?

Pleasant Grove and Orem Police Departments report there are minimal visits to facilities which are very close in purpose to Reflections Recovery Center. Our clients are there because they want to be, not because they have to be.

How will property values be affected?

Numerous studies show there is no evidence to suggest that property values have been negatively affected by residential treatment centers.

How will crime rates be affected?

Studies show that there is no correlation between crime and the presence of substance treatment centers. Other types of businesses such as convenience stores and pawnshops tend to have more crime associated with them.

Reflections Recovery Center is happy to answer any questions, provide information or address any concerns. Please feel free to contact us at www.ReflectionsRecoveryUtah.com.

2. Responses to Staff Questions



https://mail.google.com/mail/ca/u/0/?ui=2&ik=f11ea6adfa&view=pt&search=inbox&msg=1488062ccad2e938&siml=1488062ccad2e938

Reflections Recover Center Questions

Jordan Cullimore <jcullimore@lindoncity.org>

Tue, Sep 16, 2014 at 3:33 PM

To: Ron Wentz <rwentz123@gmail.com>, Dave Cox <davercox@gmail.com>

Cc: Hugh Van Wagenen <hvanwagenen@lindoncity.org>, Adam Cowie <acowie@lindoncity.org>, Brian Haws <bhaws@centralutahlaw.com>

Ron & Dave,

We're currently in the process of reviewing your application. Could you please specifically address the following items:

1. Provide calculations showing that the proposal satisfies the area requirements identified in 17.70.040(6) of the ordinance. Specifically, show that each bedroom in the facility has a floor area, exclusive of closet space, of at least 74 square feet for the initial occupant and an additional 50 square feet for each additional occupant in the room.
2. What is the current status of your State Division of Licensing application? Please provide any documentation you currently have.
3. Provide financial statements describing the feasibility of the operation at different occupancy levels. Identify the fewest number of occupants you could serve while still maintaining financial viability.
4. Has the State Fire Marshal inspected the home for Fire Code compliance? Please provide documentation.
5. The site plan indicates that the parking lot surface will be compacted gravel, but the Code requires that parking lots be paved with asphalt, concrete, or other binder pavement. Please explain how you intend to address storm water run-off from the lot.
6. Will you need a dumpster? The plans identify trash cans, but the size of the containers is not identified and two typical residential trash cans does not seem sufficient for the number of occupants requested.
7. Will additional lighting be installed in the parking lot area, or elsewhere?
8. The application states several times that "surveys (or studies) show..." Could you please provide citations to, or even copies of, the studies that are being referenced?

Call or write if you have questions, or if you need clarification on any of the items.

Thanks,

Jordan Cullimore
Associate Planner
Lindon City Planning & Zoning
801-785-7687
jcullimore@lindoncity.org

Reflections Recovery Center
Answers to questions dated 16 Sept 2014.

1. Bedroom square footage

1.	235.39 sq ft	4.20 residents
2.	398.08 sq ft	7.48 residents
3.	212.78 sq ft	3.78 residents
4.	250.50 sq ft	4.53 residents
5.	230.25 sq ft	4.13 residents
6.	235.00 sq ft	4.22 residents
7.	255.81 sq ft	4.64 residents
Tot	1817.81 sq ft	30 residents

2. State Division of Licensing application cannot be submitted until after obtaining Lindon City business license, completing all remodeling, furnishing residence and ready for business. See attached Application and Licensing Process information.

3. As business financial statements are of a highly confidential nature, and as per our conversation Sept 17th, this information has been delivered to our counsel who will deliver them to the Lindon City Attorney.

4. We have contacted the State Fire Marshall regarding fire code compliance. Chief Coy D Porter's office has instructed us local codes have the jurisdiction. Lindon City Fire Inspectors office has been contacted to arrange an initial inspection.

5. Site plan parking was included to meet Lindon City code. As no residents are allowed private vehicles at facility, parking will only be used by staff and occasional visitors. We intend to concrete the front half of the parking to maintain the aesthetics of the site. The parking behind the back fence we choose to gravel to try and keep the residential look to the site. This parking is overflow, added only to meet code and will seldom be used. If required to solid surface the area we certainly will do so although our hope is to keep the residential look. As for storm water, the minimal concrete we intended to add should not impact the water flow. If the gravel overflow parking will work there should be no need for any adjustment. If required, we can drain to the rear of the parcel with a small

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capture basin or direct to the front road, whichever is preferred. We hope to avoid the capture basin as they tend to attract mosquitos and children.

6. We prefer to use city trash removal to maintain the residential nature. We feel four to five waste cans and recycle cans will be more than ample. If the city prefers the use of dumpsters we will gladly comply. Our hope is to avoid the commercial dumpster truck and its backup beeper.

7. As in the situations above, we prefer to avoid the commercial look of light poles. We would like to provide low voltage lighting along the fence to blend in with the residential nature and prevent light from bothering the neighborhood. Additional higher watt lights could be installed at the corners for emergency situations. Lights already installed on the house will be sufficient for any backyard activities. Again, we are open to whatever the city requires.

8. Copies of several studies showing the minimal impact a residential facility has on a neighborhood are attached.

If additional information is required or we can be of assistance, please let us know.

Thank you,
Ron Wentz
Reflections Recovery Center

3. Pictures



Pictures







4. Lindon City Code withComments



Lindon City Code with Comments

Lindon City Code

Section 17.70.020 General Definitions

1. For the purposes of this section, certain terms and words are defined and are used in this title in that defined context. Any words in this title not defined in this chapter shall be as defined in Webster's Collegiate Dictionary.
2. As used in this section, the following words shall be defined as follows:
Elderly: Elderly shall mean a person who is 60 years or older.
Group Home: When not used in specific context in relations to a particular type of facility, group home shall include a residential facility for elderly persons, a group home for persons with a disability, a juvenile group home, a transitional/treatment group home, or a transitional victim home.
Resident: Resident shall mean persons receiving the benefit of services and facilities provided by a group home, excluding staff and care providers.

Section 17.70.040 Group Home for Persons with Disabilities

1. Group homes for persons with a disability shall be a permitted use in all residential zones, and requires site plan approval by the Planning Commission.
Site plan and full blueprints have been delivered to Planning Commission for review.
2. Disabled or Disability under this section shall mean, with respect to a person, a person who has a physical or mental impairment which substantially limits one or more of that person's major life activities or has a history of having such impairment. Disabled or Disability does not mean an impairment or limitation caused by addiction and current use of a controlled substance or alcohol. Disabled or Disability also does not mean an impairment or limitation resulting from or related to kleptomania, pyromania, or any sexually related addiction or disorder, including but not limit to, sex and pornography addictions, transvestism, transsexualism, pedophilia, exhibitionism, voyeurism, gender identity disorders (those not resulting from physical impairments), or any other sexual behavior disorder.
Disability under Federal Guidelines does mean an impairment or limitation caused by addiction. Reflections Recovery clients suffer from substance use disorders and qualify under the Americans with Disabilities Act. Upon acceptance into the program, there is a zero tolerance for continued use of a controlled substance or alcohol.
3. Each group home for persons with a disability is subject to state licensing procedures and must provide the city proof of a valid license issued by the Utah State Division of Licensing and compliance with Department of Human Services standards.
Reflections Recovery Center has passed pre-certification standards through Utah State Division of Licensing and Department of Human Services standards. State licenses will be issued upon final inspection.
4. The group home shall conform to all applicable building, fire, health and safety codes and requirements for facilities of this type and for the zoning in which they are constructed.
Reflections Recovery will conform to all applicable building, fire, health and safety code requirements for Lindon City, Utah County and the State of Utah. Plans have been submitted to Lindon City detailing minor renovation to the structure. Applicable permits and inspections will be followed for any alterations.

5. The structure shall be capable of use as a group home for persons with a disability, which includes being fully handicap accessible, without structural or landscaping alterations that would change the residential character of the structure. A site plan must be submitted showing any alteration of the structure or landscaping. Any alterations must be approved by the Planning Commission before a permit is issued.

Site plan and building blueprints covering all modifications allowing for full handicap accessibility have been submitted to Lindon Planning Commission. All changes will be made within the facility itself. No structural or landscape alterations will be made affecting the residential character of the site or structure.

6. Occupancy of the structure shall be such that each resident is provided adequate personal space. A residential facility shall ensure that each bedroom space in the facility has a floor area, exclusive of closet space, of at least 74 square feet for initial occupant and an additional 50 square feet for each other occupant of this space, but in no case shall the group home have any more than four (4) residents at any given time.

The facility consists of 8800 square feet including 9 bedrooms and 6½ bathrooms allowing ample personal space for all clients exceeding city and state minimum standards. Reflections Recovery Center is requesting a variance on the maximum number of residents allowed at the facility. Evidence shows the ideal number of clients within the therapeutic group to be between 20 and 24 clients. We have provided expert opinions from many professionals explaining the dynamics of the Substance Use Therapy model.

Hazelden, a part of the Hazelden Betty Ford Foundation, is one of the largest and most respected private not-for-profit alcohol and drug addiction treatment and research centers in the world. They have found using the model of 24 clients per group provides a more through recovery process allowing clients a quicker and more thoroughly equipped return to a productive lifestyle.

Utah State Licensing Division has done a preliminary inspection of the facility and determined it meets all state criteria for licensing of up to 27 individuals. We are asking Lindon City for a variance of city code allowing 24 clients.

~~7. No group home for persons with a disability shall be established or maintained within three fourths of a mile (3,960 feet) of another group home for the elderly, a group home for persons with a disability, a juvenile group home, a transitional/treatment group home, or a transitional victim home as measured in a straight line between the closest property line of the proposed group home and the closest property line of the existing group homes identified above. No group home that has residents with disabilities related to any form of substance abuse or that have a history of past violence, sexual aggression or any offense involving a weapon or which resulted in serious bodily injury to another person shall be established within 500 feet of a licensed daycare, or public or private school as measured in a straight line between the closest property lines of the propose group home and the school/daycare lot.~~

8. The facility shall provide one off-street parking space for each sleeping room, plus adequate parking for visitors and staff. In no case shall the facility have less than three off-street parking spaces.

All off-street parking will be located at the rear of the facility behind the privacy fencing. As per city code, parking will consist of 17 stalls including an ADA Handicap site. Residents will not have personal vehicles at the facility.

9. The facility shall have six foot site obscuring fencing along the side and back yards that is constructed in a manner consistent with the residential character of the neighborhood. Such fencing shall be constructed and maintained in accordance with the Lindon City Code. The Planning Commission shall approve the style and design of any fencing before a permit is issued. A chain link fence with slats shall not be considered site obscuring for the purposes of this section.

Side and back yards will be fenced using six foot full privacy vinyl fencing. Dual ten foot full privacy swing gates will be installed at driveway access.

10. No portion of the facility's front and side yard setbacks shall be used to provide parking spaces as required by this section without prior approval of the Planning Commission. Any use of the yard as parking space shall not change the residential character of the property.

Front and side setbacks will not be used for parking. All parking will be at rear of facility obscured from street view with privacy fencing so as not to change the residential character of the property.

11. The group home operator shall provide the city proof of adequate insurance for the program's vehicles, hazard insurance on the home, and liability insurance to cover residents and third party individuals.

Reflections Recovery will provide proof of all required vehicle, hazard and liability insurance coverage policies.

12. The group home operator shall provide proof that each of the residents admitted to the facility falls within the definition of disability as set forth in this section and that the disability substantially limits the resident in a major life function.

Reflection Recovery Center's Policies and Procedures Manual mandates all incoming clients receive a complete and thorough screening to determine eligibility for admittance into the program under the Federal Americans with Disabilities Act and to establish the appropriate level of care required for each individual.

13. The facility shall provide training or treatment programs for residents with disabilities which are in compliance with department of Human Services standards, as set forth in the Utah Administrative Code.

Reflections utilizes evidence based, best practices treatment procedures as per Department of Human Services and industry standards.

14. Any group home for person with disability that have a history of past violence, sexual aggression or any offense involving a weapon or which resulted in serious bodily injury to another person, which is constructed within 1000 feet of a school or licensed daycare, as measured in a straight line between the closest property lines of the proposed group home and the school lot, shall provide in accordance with rules established by the Department of Human Services under Title 62A, Chapter 2, Licensure of Programs and Facilities;

- a. 24-hour supervision for residents; and
- b. 24-hour security measures.

Reflections Recovery Center will not admit persons with a history of sexual offence or violence. The Center is constantly supervised by fully trained staff and monitored 24 hours with on-site camera systems.

15. The facility shall not accept any resident that would pose a direct threat to the health and safety of others in the facility or community or who in the past has posed a threat to the health and safety of others or whose tenancy would likely create a risk of substantial physical damage to others. The owner or operator of the facility shall conduct an individualized assessment of each person desiring to become a resident of the facility to determine if such person would constitute a threat prior to allowing occupancy of the facility by such a person. The assessment shall be conducted by a licensed psychologist, social worker or other licensed individual qualified to perform such assessments. Assessments shall include, but not be limited to, consideration of such things as past criminal histories and/or violent acts of the individual, the amounts of time that have lapsed since such acts, and treatments the individual has received. Evaluations of individuals who have committed acts of sexual aggression or criminal sex acts shall also include psycho-sexual evaluations by a licensed psychiatrist or an individual holding a PhD in psychology. No individual determined to pose a risk for commission of sexual offenses, or being classified as having predatory tendencies may be accepted as a resident.

Potential clients with a history of sexual offence or violence will not be admitted into the program. These individuals will be referred to an appropriate alternate facility.

16. Prior to the initial occupancy of a group home for person with disabilities and at least quarterly thereafter, the owner or operator of the group home for persons with disabilities shall certify, in a sworn affidavit, that individualized assessments have been performed on each resident and that each resident meets the requirements of this section. Upon request, the owner or operator of the group home for persons with disabilities shall provide documentation and records to verify compliance with this section.

All residents are thoroughly screened prior to acceptance into the program. Records and documentation are maintained on each client according to Lindon City, Utah State and Federal Government requirements.

17. The facility shall comply with all applicable state and federal laws, including laws related to access.

The facility will comply with all applicable city, county, state and federal laws.

18. To ensure the safety of the residents and surrounding community, the facility operators shall develop a safety plan demonstrating adequate supervision and control of the residents. The safety plan shall be reviewed by law enforcement officials and shall be approved by the Planning Commission.

Reflections Recovery Center is a closed campus, non-smoking, healing and learning center. Clients are admitted on a total voluntary basis where they are monitored and supervised 24 hours a day, seven days a week and are limited to Reflections campus grounds. Policies and procedures have been established following state recommendations for emergency situations. A complete safety plan has been reviewed by Lindon City Police Department and a copy has been provided to the Planning Commission.

Section 17.70.050 Procedure for Approval and Annual Renewal of Permit for a Group Home for Persons With Disabilities

1. At least ten (10) days before the Planning Commission hears the application for a group home for persons with disabilities, the city shall provide written notification, either in person or by first class mail, to all citizens living within or owning property within 750 feet of the proposed site of the group home as measured in a straight line between the closest property liens of the proposed group home and the neighboring lots.

2. Upon review of an application for a new group home for persons with disabilities and upon determination of compliance with all of the above requirements, the application may be approved. However, where in the opinion of the Planning Commission, the information provided by the applicant is insufficient for the group home for persons with disabilities is not in compliance with the requirements of section 17.70, the application may be denied. The city shall provide written notice of approval for the proposed group to all citizens living within or owning property within 750 feet of the proposed site of the group home as measured in a straight line between the closest property lines of the proposed group home and the neighboring lots. If the application is denied, the city shall provide the applicant written notice of the decision to deny the application. This notice of approval or denial shall be in addition to the notice required in paragraph 1 and shall be provided either in person or by first class mail within 5 days of the decision.

~~3. Upon receipt of approval of the Planning Commission, the operator of the group home for persons with a disability shall be eligible to secure an annual permit from the city. Said permit shall be valid for one calendar year and shall be renewed annually subject to;~~

~~— a. The receipt of a renewal application that shall include the information and certifications required under Section 17.70~~

~~above and a certification that none of the resident pose a threat as of the date of renewal; and~~

~~— b. at least ten (10) days before the Planning Commission hears the renewal application, the city shall provide written notification, either in person or by first class mail, to all citizens living within or owning property within 300 feet of the site of the group home.~~

~~— c. A finding by the Planning Commission that during the preceding year the group home had been operated in compliance with the terms of section 17.70 and any other conditions of approval.~~

4. A permit to operate a group home for persons with a disability shall be;

a. nontransferable and shall terminate if the structure is devoted to a use other than a group home for persons with disabilities or the structure fails to comply with all building, safety, health and zoning requirements of Lindon City.

b. Shall terminate if at any time it is demonstrated to the Planning Commission that;

i. The structure fails to comply with the requirements of section 17.70; or

ii. The program has failed to operate in accordance with the requirements of section 17.70.

5. Evidence for Number of Clients



**Evidence Number of
Clients is Necessary to
Facilitate Treatment**



Evidence that number of residents requested is necessary to reasonably facilitate treatment of those with disabilities in a residential environment

1. Utah State Licensing Division has made a preliminary inspection of the facility and determined it meets all state criteria for licensing of up to twenty-seven (27) individuals.
2. Due to the level of care required, Utah State Licensing required staff criteria and other financial dictators, accommodation of twenty-four (24) residents is necessary for the facility to be financially viable. In a recent Utah case, *Lewis v. Draper City*, the court found without financial viability, a residential treatment facility will, of course, not exist. Thus, some consideration of a facility's viability will be important in determining whether an accommodation is necessary.
3. Attached expert opinions stating the ideal number of clients for therapeutic benefit in group settings is 20 to 24 residents.
4. World's leading treatment and research facility, Hazelden, recommends and uses groups of 24 residents in their therapeutic model.
5. National Survey of Substance Abuse Treatment Services shows median number of residents at residential treatment facilities to be 18 to 25.

JTC Advanced Practice, LLC



JeanAnne Johnson Talbert, DHA, APRN-BC
270 S 1060 W Lindon, UT
801-669-3425 (c) 801-877-4362 (f)

Dear Lindon City,

I am writing this letter in support of Reflections Recovery Center which hopes to open its doors soon and begin benefiting so many people in our community in need of substance abuse treatment. I understand there is some opposition to the number of clients receiving treatment at one time in the facility. I ask that you reconsider this as numerous studies have shown that larger rehabilitation facilities offer more opportunities for clients to exchange positive support, better treatment outcomes and longer abstinence rates.

The Oxford house model of community based recovery has shown that individuals recovering from addictions should be surrounded by a community in which they feel they belong and are able to obtain sobriety goals. In fact, successful treatment has often been related to fellowship with similar peers and abstinent specific social support networks. These networks can add needed structure and discipline to the lives of people with substance use disorders who often enter treatment with their lives in chaos.

While no single treatment approach is effective for all persons with substance use disorders, group therapy offers the experience of closeness, sharing of painful experiences, communication of feelings and helping other who are struggling with control over substance abuse. The Substance Abuse and Mental Health Services Administration (SAMHSA), the agency within the U.S. Department of Health and Human Services provides treatment centers, providers and the general public with Treatment Improvement Protocols (TIPs) that highlight the advantages of group therapy. Multiple other studies supporting group therapy can also be provided by myself if you would like.

September is National Recovery Month, which celebrates people in recovery, emphasizes the contributions of treatment and promotes the message that recovery is possible. Reflections Recovery Center is looking forward to contributing to our community and providing a much needed service. I currently work for three different residential treatment centers, all having at least 20 clients. I have found that 20- 24 clients together is optimal for the different relationships to form and be successful. I highly recommend that Reflections is granted the ability to serve up to 24 clients. Please don't hesitate to contact me if you have further questions or need further information. Thank you very much.

Sincerely,

JeanAnne Johnson Talbert, DHA, APRN-BC, FNP, CARN-AP

Jason Webb LCSW, ASUDC

To: Whom It May Concern
Re: Number of Residential Beds

5/30/14

My name is Jason Webb LCSW, ASUDC. I am the Clinical Director of Steps Recovery Center. I have been working in the substance abuse field now for 16 years. I have been asked by Dave Cox to write my opinion about having 18 beds in a facility verses smaller numbers like 8.

The first facility I worked in we had 40 beds. The next facility we had 24. This facility I am in now we have 34. I also have experience with as few as 6 clients in a facility. I am in favor of bigger groups.

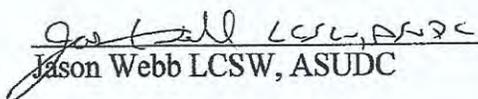
In a residential facility I depend so much upon the "older" clients to help out with the "newer" clients. Some clients enter the facility and have bad attitudes. They often times have an "us vs them" mentality and don't want to listen to the clinical team right away. The "older" clients get called to be mentors and show the "newer" clients around. They help answer their questions and settle their concerns. With people constantly coming and going this becomes a vital part of therapy.

With the natural rotation of people through a residential program, it forces the client to take on different roles while in treatment. As they get "older" in the program they lose their heroes that they once looked up to and the gantlet falls on them to take and become the mentors/heroes for the "new" clients. It is a wonderful transition to watch them make and helps prepare them for life.

In group settings, we rely on the strength of the group which includes the wisdom and experience of the many. With few clients, often times groups are quieter and clients allow the therapist to do all the talking. In big groups, it just takes one or two to get the whole group involved and participating. Most are clients are great manipulators and can manipulate one or two but as that number gets bigger it becomes incredibly difficult to manipulate the entire group especially since the group members have been there and done that.

Studies show that people forced into treatment have the same success rate as those who enter voluntarily. Part of the answer to how that can be is found in clients hearing other people's stories and relating and wishing to change themselves. It gives them hope. The more stories they hear, the more they can relate. If I had a small number of clients and everyone had stayed for a while and passed off their autobiographies, then a "new" person wouldn't hear another's autobiography before sharing his own and would be less honest and open with his story. Whereas if I have a "new" client hear several honest autobiographies then he too is more willing to share.

I can go on and on about the benefits I see from having a bigger group than smaller one. If you have any questions feel free to call me at 801-400-9526.


Jason Webb LCSW, ASUDC

September 4, 2014

To whom it may concern:

I have been asked to supply an opinion about the ideal group size for a residential treatment center. I think several things should be pointed out at the beginning of this letter. The first is that I have no financial interest in a company seeking to put a residential treatment center in the city of Lindon. I have been asked by this company to render an opinion only. I am not employed by the company nor am I being compensated for this letter. I am, however, very interested in effective and compassionate treatment of those who suffer from addictions. It is for that reason that I am writing this letter.

In an NIH-funded study of residential community-based homes, Jason et al. found that individuals recovering from addictions should be surrounded by a community in which they feel they belong and are able to obtain sobriety goals. They found having more residents allows members to learn from each other and increases opportunities for diversity. Additionally, residents of larger Houses exhibited fewer criminal and aggressive behaviors as measured by the Global Appraisal of Individual Needs-Quick Screen than residents of smaller Houses.

In the National Survey of Substance Abuse Treatment Services (N-SSATS): 2012 Data on Substance Abuse Treatment Facilities, the median number of residents at residential treatment facilities was 18 to 25. The nationally-renowned treatment facility, Hazelden, which has one of the largest campuses in the world, breaks their residents down into pods of 24.

Residents of communities who are faced with the possibility of a drug and alcohol treatment facility in their neighborhoods often fall victim to the N.I.M.B.Y. syndrome. Not in my backyard is a syndrome where residents, and sometimes even community leaders, begin to believe hype which is not based on real evidence. Community leaders invoke maximum non-related persons occupancy laws which were definitely not intended for residential-based group homes and treatment centers in the first place.

I urge the community leaders of Lindon to be open-minded on this subject. Because disability law will likely force the community to allow treatment centers in their neighborhoods, the only influence community leaders and elected officials will have will be to limit the number of clients who can receive these services. Limiting the number of clients has not been shown to benefit or protect the community in any way. It will, however, negatively affect the quality of treatment that a recovering addict or alcoholic receives. Ultimately, this could negatively affect the surrounding community. Please consider these facts.

Sincerely,

Terry Sellers, MD
Director of Substance Abuse Services
Provo Canyon Behavioral Hospital

6. Evidence of Residential Nature



**Evidence Number of
Clients Will Not Alter
Residential Nature**



Evidence the number of residents requested is reasonable in that they will not alter the residential nature of the use

1. Twenty-four (24) related, non-disabled individuals would be permitted to live in the very residence at issue without any need for a reasonable accommodation as per Lindon City code.
2. Zoning in close proximity, across the street from the residence, is currently CG (General Commercial).
3. We can see no reasonable basis for the limit of four (4) residents in a home for the disabled who need to live together due to the nature of their disability and required recovery therapy and in order to live in a residential neighborhood.
4. Attached statistics and "first hand" accounts from individuals who have experienced like programs within their neighborhood.
5. Extensive research and consideration has been taken in the selection and planning of the facility to ensure minimal disruption and little or no impact regarding traffic, parking, neighborhood characteristics and city resources.



Examples why Reflections will not alter Residential Nature excerpts from Introduction & Key Questions

What is the facility?

Structure - Reflections Recovery Center is a beautiful and spacious home, nestled on 1.3 acres. With over 8800 square feet of living area, including 9 bedrooms consisting of two wings for separate male and female accommodations, 6½ bathrooms and plenty of room which allows residents the comfort and personal space needed for successful therapy and recovery.

Fencing - Six foot high full privacy fencing will be installed around three sides of the property; each side yard and the back yard, in accordance with Lindon City regulations and code.

Landscaping - Reflections will keep the property manicured and maintained to the upmost standard.

Lighting - Reflections will provide adequate illumination for safety and all lighting will be kept shielded to prevent glare onto neighboring properties.

Signage - There will be no signage. Residents will be allowed privacy and respect during this healing and recovery process.

Staffing - Those working at Reflections Recovery Center will exceed the State's requirements for a residential facility. Competent staff will be on the premises 24/7 to provide supervision and direction.

Licensing - Reflections Recovery Center will be subject to Lindon City, Utah County, Utah State and U.S. Federal licensing requirements. This will include the appropriate number of licensed professional staff as well as standard policies and operational practices.

What is the typical daily schedule for the residents?

Residents will participate in a rigorous daily schedule. Waking as a group and starting the day with a Therapeutic Community meeting where goals are set and spiritual thoughts are shared.

Residents attend the gym for physical fitness training and return for breakfast by 8:30 am. After breakfast everyone prepares for the day and must be in group therapy by 10:00. After a break for lunch, residents return to group at 1:00. A short break separates the afternoon group which starts

at 3:00. Dinner is at 5:00, followed by a 12 step support meeting from 7:30 to 9:00. Wrap up the day, prepare for tomorrow, and lights out by 10:30. Residents spend most of their day in groups that consist of psycho-education, behavior processing, spirituality and relapse prevention. Remaining time is devoted to homework, self-study and individual personal assessment.

Weekends are similarly scheduled with group activities added for social support and time allotted on Sundays for worship and family.

Are visitors allowed at the Center?

Residents are allowed visitors after a two week observation period. This allows the resident to fully emerge into the recovery process and gives staff an opportunity to assess all of the behaviors and acclimation into the group.

Visits are only allowed on Sunday afternoon and are supervised by competent staff. Thursday night is family education and process night where some family members attend to gain knowledge and support their loved ones.

Will the Center change the feel of the neighborhood?

Reflections Recovery Center will look, act and feel just like any other residence in the neighborhood.

The facility functions just as an extended family. Each resident has responsibilities to themselves and to the other members of the household. Taking full advantage of the healing and nurturing aspects of a comforting, relaxed home-like environment allows residents to gain trust in themselves and their ability to cope with life's challenges. Every aspect of daily life at Reflections revolves around the "Family" concept. Re-learning to place trust in others while accepting the responsibility of others trusting in them, is a vital element of returning to society.

Outdoor activities will be limited to normal "backyard family activities", chores maintaining the lawn or grounds, and personal quiet contemplation. There will be no loud concerts or events on the property. Activities will be limited to a 10:00 pm curfew on weekdays, 11:00 pm on weekends and should not disturb neighboring properties.

A study conducted by Diana Antos Arens, Ph. D. looked at attitudes of the neighbors towards 5 separate residential group homes. She found a stark contrast between attitudes prior to opening and 2-3 years after opening. Prior to opening, neighbors classified themselves as 36% negative and 22% positive towards the facility. 2-3 years later the same neighbors rated themselves as 2% negative and 68% positive. When asked "Do you think the people living at the community residence are good neighbors?" 80% agreed and not one disagreed. When asked "Would you advise a friend to support a residence in their community?" 68% responded yes, 31% didn't

know and only 1% said no. Surprisingly, 13% of respondents were completely unaware of the residential facility being in their close neighborhood proximity.

Dr. Arens conclusion; In the sample neighborhoods surveyed, the strong opposition to community residences was not a predictor of the subsequent widespread acceptance. After experience with a community residence in their "backyards," the overwhelming majority of respondents were able to say that the group home residents were good neighbors; they had no problems; and the homes did not have a negative impact on their property values.

*** See accompanying article excerpts from
*Community Mental Health Journal***

What about vehicles and parking at Reflections?

Vehicles - There will not be a noticeable difference with the number of vehicles at the facility. Residents are not allowed private vehicles at Reflections.

Parking - Parking is based on city requirements with visitor, staff and ADA parking behind the structure and privacy fence out of view.

How will traffic affect the neighborhood?

There will not be a noticeable increase in daily traffic from the Center. Reflections Recovery will in essence mimic the other households in the neighborhood with the normal trips to work, picking up groceries and running the necessary errands.

As residents are not permitted personal vehicles at the Center, Reflections will transport residents to and from extracurricular activities; outings to the local gym, outdoor hikes, matinee movies, etc., just like others in the neighborhood driving to school or soccer practice.

Access to Reflections will come from the main traffic corridors State Street and 200 S / 2000 N. Traffic along 200 East will travel less than 300 feet to reach the property, keeping neighborhood traffic to an absolute minimum.

All visitor, staff and handicapped ADA parking will be provided off-street behind the building and full privacy fencing.

How will Reflections benefit our Community?

Reflections Recovery Center places enormous emphasis on being involved in community outreach programs, service organizations, drug and alcohol prevention education and suicide prevention awareness. This not only benefits the community but also instills pride, a sense of belonging and accomplishment within the Center and its residents. Early awareness and prevention are the best solutions for this growing problem.

Community Mental Health Journal
What Do the Neighbors Think Now?
Diana Antos Arens, Ph.D.

ABSTRACT: Interviews with 75 neighbors of community residences for adults assessed perceptions of impact in five suburban communities. The Not in My Backyard (NIMBY) attitude articulated during program development changed to one of acceptance over time. After a few years experience, the overwhelming majority agreed that the community residences are good neighbors; they have had no problems; and the residences had no adverse effect on property values.

INTRODUCTION

Since the inception of community residence programs for adults, more often than not, communities have voiced strong opposition to their development. Each of the community residences included in the sample was opened 2-5 years prior to the time of survey. As required by Law, before opening the residences, the agency notified appropriate municipalities of its intention and provided a description of the proposed program.

Neighborhood Awareness of the Community Residence

Of the total respondents, a substantial minority (38%) had attended the public information meetings which were held 2-3 years ago. In addition, a number had received various invitations extended by the agency to attend open house parties and neighborhood advisory committee meetings. Given the public attention, agency outreach efforts and the close proximity of respondents to the residence, it was expected that everyone would be aware of the program. The survey showed that 40% of the respondents had met people from the residence over the years (37% met staff; 44% met residents) and 33% had visited the home. A minority of respondents (28%) had attended the neighborhood advisory meetings, but when asked if they would be interested in attending in the future, many (66%) replied affirmatively. More than one year has passed since the survey was conducted, however, and attendance is sparse, with only 3-5 neighbors at any one meeting. Surprisingly, despite outreach efforts and close geographic proximity to the program site, 13% of the respondents were completely unaware of the community residence located nearby. These respondents were relative newcomers to the area and thus not in residence during the time the program was developed and widely publicized.

Impressions and Attitudes

Respondents were asked to describe their attitudes when they first heard about the group home, as 'strongly positive,' 'positive,' 'neutral,' 'negative' or 'strongly negative.' They were also asked to describe their present attitude using the same categories. Over one-third of the respondents said they held negative or strongly negative attitudes toward the community residence initially (20% and 16% respectively). A striking turnaround was evident, however, since only 2% of the respondents expressed current negative attitudes. Examination of the positive end of the attitude scale, shows 68% currently holding positive attitudes, which is a substantial increase (46%) over those who held positive attitudes initially (22%). In discussing current attitudes, many stated that they had no problems with the community residence, it was

What Do the Neighbors Think Now?

Page 2

quiet, the people were nice and no bother to anyone. One respondent commented that ~nothing like I thought it would be." Several respondents said they thought the program was great, and others took the opportunity to comment on other neighbors noting, ~they've (the community residence) been good neighbors, better than some of the other neighbors around here." Respondents who held negative attitudes initially were much more likely (46%) to have attended the public information meetings than others.

Despite their initial negative attitudes, both respondents' reported more favorable current attitudes, and attributed the change to having met the residents. One respondent commented: ~I've met the residents; they're nice people. The neighborhood meetings are good." When asked, ~Do you think people living at the community residence are good neighbors?," the response was overwhelmingly positive: no one disagreed; 80% agreed (30% strongly agreed); and the remainder had no opinion. Virtually all the respondents reported that they never had a problem with any of the residents.

When asked if they would advise a friend to support development of a community residence in their neighborhood, a majority of the respondents (68%) said 'yes'; a substantial minority (31%) said they Didn't know' or it depends'; and only one person said ~no.' When asked why they would give this advice, people responded, in order of frequency, that they had no problems with the group home, they would support a good program; they would need to find out how the program was run, and this could happen to anyone. No significant differences were found between men and women or among the community residence neighborhoods.

Property Values

None of the 75 respondents in the five neighborhoods studied was able to identify a problem selling homes in their neighborhoods because of the community residence. Moreover, more than one in ten of the neighbors in close geographical proximity were completely unaware of the community residence. This evidence of anonymity supports the claim of service providers that community residences blend into the neighborhood like any other home. At the same time it also illustrates that often potential homeowners simply do not know whether or not a community residence is in an area when they are house hunting.

Data analysis of 163 sales transactions for a sample of 7 communities reached the same conclusion. The study found no increase in the number of resales in neighborhoods in which group homes were located; sale prices were similar or greater than those in control areas; and no adverse effect upon the sale price of homes could be attributed to proximity to the residence.

Community Acceptance

In the sample neighborhoods surveyed, the strong opposition to community residences was not a predictor of the subsequent widespread acceptance. After experience with a community residence in their ~backyards," the overwhelming majority of respondents were able to say that the group home residents were good neighbors; they had no problems; and the homes did not have a negative impact on their property values.



DAVE COX <davercox@gmail.com>

Letter you requested

1 message

Kyle Cook <cookfamilymail@gmail.com>

Mon, Sep 1, 2014 at 7:18 AM

To: "davercox@gmail.com" <davercox@gmail.com>

To whom it may concern:

I am Bishop Kyle Cook and I live in Payson Utah. I have been ask to write about my experiences having a Drug Rehabilitation Center in my neighborhood and close to my home. I will admit it has been a positive experience unlike I thought it would be when they first moved in. I have come to know many of the staff as well as the clients that attend. I find they keep the neighborhood up with an attractive building and no problems with the participants that come and go.

Because of my calling as Bishop, I have made it a practice to visit the STEPS program most every week to talk with the clients and give them some encouragement on their way through a difficult program. I have often thought to myself, those who we need to worry about are those who are not working on their addiction but are in our neighborhoods trying to continue their problematic life-style.

I appreciate the opportunity I have had to affiliate with the STEPS program and have not found it to be a problem to have the program in my neighborhood.

Sincerely:
Kyle Cook

Sent from my iPad



To Whom It May Concern:

I am writing this letter in support of Dave Cox and his group in their efforts to open a residential substance abuse treatment facility here in Lindon.

I am the owner and operator of Steps Recovery Center(s) located in Payson, St George, and South Ogden. (Opening Dec. 2014) I am usually on the other side of the isle in the "not in my backyard" debate regarding these types of facilities and their effect (or lack thereof) on a neighborhood. Going thru the process of getting the various cities' approval, I have been to many town hall meetings. Concerned residents of these communities have asked me if I would want one of these in my neighborhood and my answer remains the same. Yes.

On a personal note, I met Dave Cox 8+ years ago when I admitted my daughter into a facility in SLC where he was starting his career as a substance abuse counselor. I convinced him to leave there and join Steps Recovery Center in 2010, and we parted ways earlier this year. I know Dave to be a man of integrity and can attest first hand of his love toward those he treats with the disease of addiction.

As a 15-year resident of Lindon, I stand ready to welcome them into our community and I hope that other Lindon residents will do the same.

With Gratitude,

A handwritten signature in blue ink, appearing to read "Mike Jorgensen", with a long horizontal flourish extending to the right.

Mike Jorgensen
55 S 400 E
Lindon, UT 84042



R W <boatskidive@gmail.com>

Fwd: Fw: Having Steps in our neighborhood.

1 message

DAVE COX <davercox@gmail.com>
To: Ron Wentz <boatskidive@gmail.com>

Sun, Sep 7, 2014 at 6:09 PM

----- Forwarded message -----

From: **Becca Wood** <becca_wood71@yahoo.com>
Date: Sun, Sep 7, 2014 at 5:42 PM
Subject: Fw: Having Steps in our neighborhood.
To: "davercox@gmail.com" <davercox@gmail.com>

On Sunday, September 7, 2014 2:13 PM, Becca Wood <becca_wood71@yahoo.com> wrote:

Dave-

I was asked to write a letter telling how having the Steps recovery center in our neighborhood has effected us as a community or as a family.

To begin with as a family it has been a miracle to have the program so close because we have been able to see first hand how great this program is and how it can save lives. As a community I do not think it has effected us at all I know some of the neighbors had voiced the opinion that it was going to cause the neighborhood to have more problems with crime because people automatically assume that anyone in the program will be out breaking into peoples homes causing problems. However I know first hand that it has not had any negative effect crime has not been up and people have made comments how it has not effected our neighborhood the way some assumed it would have. I am very happy that this great program has found a home in our community it saves lives and I would be happy to tell anyone that.

Thank you
Rebecca Wood
becca_wood71@yahoo.com
815 South 880 West
Payson Utah, 84651
801-380-3628



Healing House

Mon, Sep 8, 2014 at 1:01 PM

My Healing House is Now YOUR Healing House!

On March 9th 2001 my oldest son Shayne died due to a drug overdose. He was just 19 years old. I knew he smoked too much pot but I had no idea he was addicted to pain pills which is what killed him. His father carried intense guilt over our sons death because he too was an addict (alcohol and pain pills). It was just 18 months after burying my son that I buried his father. He died of an alcohol and drug overdose. He was only 41 years old!

After losing two of the most important people in my life to addiction I made a commitment to myself and to my community to somehow assist in the understanding and the healing of all addiction!

I decided to turn my home into a teaching and healing facility. I began teaching classes to ignite self empowerment, self awareness and self healing.

I am a nationally certified Reiki Master Teacher, a certified Minister of Light, and I have been a holistic healing practitioner for 25 years, I promise you that my house has been blessed with the power of light and love! Its sole purpose is to bring healing with compassion to all who are willing to take their life back from addiction.

In 2014 the time came to pass on the torch of healing light to a bigger picture. My house now belongs to "Reflections Recovery Center" for the purpose of being a safe residential haven for recovery.

If you or a loved one suffer with addiction I invite you and wish to inspire you to take advantage of the Divine Power and healing energy that has been held and maintained here in this facility since 2001. It is Divine Energy blessed with Divine Love and filled with Divine Light!

Be well. Be happy. You deserve it!
Rev Lisa Ross StarLuv RMT

7. Conclusion



Conclusion



Conclusion

Legality of residential treatment facility

- Americans with Disabilities Act
- Fair Housing Amendments Act

Need for residential treatment facilities

- Numerous statistics on current drug and alcohol abuse

Evidence that number of residents requested is necessary to reasonably facilitate treatment of those with disabilities in a residential environment

- Utah State Licensing Division has made a preliminary inspection of the facility and determined it meets all state criteria for licensing of up to twenty-seven (27) individuals.

- Accommodation of twenty-four (24) residents is necessary for the facility to be financially viable.

- Attached expert opinions stating the ideal number of clients for therapeutic benefit in group settings is 20 to 24 residents.

- World's leading treatment and research facility, Hazelden, recommends and uses groups of 24 residents in their therapeutic model.

- National Survey of Substance Abuse Treatment Services shows median number of residents at residential treatment facilities to be 18 to 25.

Evidence the high number of residents requested is reasonable in that they will not alter the residential nature of the use

- Twenty-four (24) related, non-disabled individuals would be permitted to live in the very residence at issue without any need for a reasonable accommodation as per Lindon City code.

- Zoning in close proximity, across the street from the residence, is currently CG (General Commercial).

- We can see no reasonable basis for the limit of four (4) residents in a home for the disabled who need to live together due to the nature of their disability and required recovery therapy and in order to live in a residential neighborhood.

- Attached statistics and "first hand" accounts from individuals who have experienced like programs within their neighborhood.

- Extensive research and consideration has been taken in the selection and planning of the facility to ensure minimal disruption and little or no impact regarding traffic, parking, neighborhood characteristics and city resources.

Safety of residents and facility

- Safety plan filed with law enforcement, fire department and planning department

Safety of community

- 24 hour supervision and monitoring of residents

- City and state licensing codes

- Residents admitted on voluntary basis

8. Safety Plan



Safety Plan

R501-2-11. Emergency Plans.

A. RRC's plan of action for disaster and casualties include the following:

1. Designation of authority and staff assignments (see Disaster Plan),
2. Plan for evacuation of the center are posted as required by the fire marshal in each room and primary area of occupancy.
3. Transportation will be provided by RRC staff when necessitated and relocation of clients when necessary will take place at the directive of either the Administrator On-call or local authorities.
4. Supervision of clients after evacuation or relocation will continue to take place by RRC staff members unless otherwise directed by local authority.

B. The program shall educate clients on how to respond to fire warnings and other instructions for life safety including evacuation.

C. In the event of a medical emergency, dial 9-1-1, keeping client safety first and foremost. Manager on call and Medical Director to be notified once client is stabilized or emergency personnel have arrived.

Emergency Plans Procedure:

Disaster and Emergency manuals will be placed within each area of primary use for reference during emergency and/or disaster occurrence. Once the situation is stabilized, an incident report should be completed and given to the Clinical Director for further evaluation and quality improvement.

RRCs medical care is designed to allow access to specialized and emergency care as expeditiously as possible. The Medical Director is to be informed whenever outside medical care is sought and becomes a part of the RRC treatment program.

Disaster Plan

Reflections Recovery Center (RRC) administration recognizes the need to plan for all types of disaster—natural and manmade. Using a Hazard Vulnerability Analysis (HVA), this Disaster Plan was developed to safeguard the health and safety of patients in treatment at RRC. The following disasters were identified according to probability and severity in an effort to prepare for the naturally occurring and manmade disasters: fire, severe weather, earthquake, extreme temperatures, severe power outage, tornado, flood, and terrorist attack or other manmade emergencies.

RRC staff has been defined to fulfill basic functions during the response and recovery phases of a disaster. For emergency evacuation, RRC staff should follow the Emergency Plan. For an extended emergency or disaster where evacuation is not necessary, RRC staff should follow this procedure: An emergency will be announced throughout the facility, giving instructions to evacuate to a specific safe-haven.

1. Staff will follow procedure designated for the Emergency Plan with the final safe-destination to be announced at the safe-haven area.
2. Once all staff and patients are present and roll-call is completed, RRC staff will carry out the following functions:

Chief Executive Officer

1. Coordinate with the Clinical Director and other on-site staff
2. Coordinate with the media
3. Coordinate with other organizations for special needs, such as transportation, medical needs, long- term housing, and other issues.

Program Director

1. Notify CEO, Safety Officer, and Medical Director and coordinate decision making process
2. Coordinate with regulatory and other local and state agencies, such as the Department of Licensing, and Utah Health Department.
3. Supervise efforts of the Clinical Director, Safety Officer, and on-site staff.

Clinical Director

1. Assess immediate medical needs and coordinate with emergency services
2. Assess immediate psychological needs and coordinate with emergency services.
3. Supervise therapist and psych tech staff in 1st Aid efforts and emergency contacts.

Therapists, Counselors

1. Supervise any crisis response with patients
2. Call patient's emergency contacts.
3. Evaluate any special clinical needs and report to the Clinical Director

Psych Techs

1. Help evacuate building and supervise patients
2. Assist Safety Officer in gathering materials to meet basic needs; such as food, water, and 1st Aid materials and blankets.

Safety Officer

1. Assess and manage utility systems
2. Inventory critical need items such as food, water, blankets, and medical supplies.
3. Assess building integrity.

Full mock disaster events be held at least once a year, with interaction and coordination with local EMS agencies participating. A review of this exercise is critical, to evaluate the effectiveness of the plan. Results of the mock event will be analyzed by the safety committee and recommendations will be given to the governing board for review.

R501-2-12. Safety.

Safety Policy:

- A. Fire drills shall be conducted at least quarterly and documented. Notation of inadequate response shall be documented and resolution sought.
- B. RRC shall provide access to an operable 24-hour telephone service. Telephone numbers for emergency assistance, i.e., 911 and poison control, shall be posted.
- C. RRC shall have an adequately supplied first aid kit in the facility such as recommended by the American Red Cross.

Life Safety Code

RRC's designee will assess compliance with the Life Safety Code. This entails completing the electronic Statement of Conditions (E-SOC), maintaining a current E-SOC, and managing the resolution of deficiencies. When RRC identifies Life Safety Code deficiencies that cannot be immediately corrected or during periods of construction, the organization does the following: Inspects and tests temporary systems monthly. The completion date of the tests is documented. *The organization determines when these inspections and tests are needed.*

Fire Watch

RRC will notify the fire department (or other emergency response group) and initiate a fire watch when a fire alarm or sprinkler system is out of service more than 4 hours in a 24-hour period in an occupied building. Notification and fire watch times are documented in the Environment of Care/ Disaster Manual.

Utility Emergency

In the event of prolonged time with no utilities, staff and patients shall use the emergency water located at the facility for drinking and culinary needs. They should also use the emergency food storage at the facility.

Utility disruption – In the event that any utility systems are shut down (water, power, gas), staff will access the main control valves for the utilities and shut them down for safety reasons. Administration will be notified and a staff member will be designated to contact the utility company and city, report the disruption, and be a contact person for information and action, if needed. All patients and staff will be gathered to the group room to discuss the situation. Depending on the nature and length of the disruption, plans will be made to either accommodate the needs of the patients during the disruption, or evacuate the premises to a more secure site.

R501-2-13. Transportation.

Transportation Policy:

A. In each program or staff vehicle used to transport clients, there shall be emergency information which includes at a minimum: the name, address and phone number of the program and an emergency telephone number.

B. The program shall have means, or make arrangement for, transportation in case of emergency.

D. Drivers of vehicles shall have a valid driver's license and follow safety requirements of the State of Utah.

E. Each vehicle shall be equipped with an adequately supplied first aid kit such as recommended by American Red Cross.

Transportation & Procedure:

Employees' job requirement may include transporting clients as necessary to and from medical appointments, meetings, therapeutic activities, or other offsite outings defined as client activities. When transporting, employees or volunteers will be expected to comply with the following requirements at all times:

1. Drive cautiously, obeying speed limits and other state laws and regulations.
2. Use only designated company vehicles to transport clients except in extreme emergency situations. Personal vehicles will be allowed for transporting only with facility administration and/or supervisor approval and with proof of insurance coverage.
3. Company vehicles are not to be used for personal errands or to transport persons other than company staff, clients, parents, or other clients.
4. Headlights are to be turned "on" at all times when the vehicle is in motion.

5. Staff and clients are not allowed to eat or smoke within any company vehicles. Drinking of clear liquids only is to be allowed. Alcoholic beverages may not be consumed or transported within company vehicles at any time.
6. The number of passengers must not exceed the number of functioning seat-belts and all passengers are to be asked to wear seat belts at all times when traveling in company vehicles.
7. Only approved drivers with a valid driver's license with no major or capitol motor vehicle violations and no more than one "at fault" accident of any type within the last two years and no pending "failures to appear" will be allowed to transport clients or other clients. Employees are required to notify the facility management of any changes in the status of their license or DMV record accordingly. DMV records will be furnished by all new employees and verified prior to driver approval and annually thereafter.
8. Drivers are to follow RRC policy and procedure for access and use of Company vehicles
9. Drivers should be knowledgeable about the clients they are transporting, the potential transportation issues involved for those clients, and be capable of addressing crisis situations that may arise.
10. Drivers and accompanying staff are to observe the basic "Behavior Management" guidelines as outlined in the Employee Handbook at all times when transporting clients.
11. In the event of an emergency situation during transport, drivers shall stop the vehicle, assess the physical condition of all passengers, administer first aid if needed and seek medical assistance, notify the appropriate law enforcement authorities, and notify the facility administration (clinical and administrator on-call). Keep all clients inside the vehicle unless doing so would further endanger their safety or would complicate the administration of first aid to injuries of those at risk.
12. Staff are advised not to make any statement(s) assuming responsibility for the accident. Sign affidavits and reports, but do not fill out any descriptions of the occurrence until having been informed by RRC's legal representatives of your responsibility and rights.

Utah Public Code

R501-19-1. Authority.

Pursuant to Section 62A-2-101 et seq., the Office of Licensing, Reflections Recovery Center (RRC) has met all necessitated requirements and is licensed as a residential treatment program. Operations of RRC will be in accordance with the following rules.

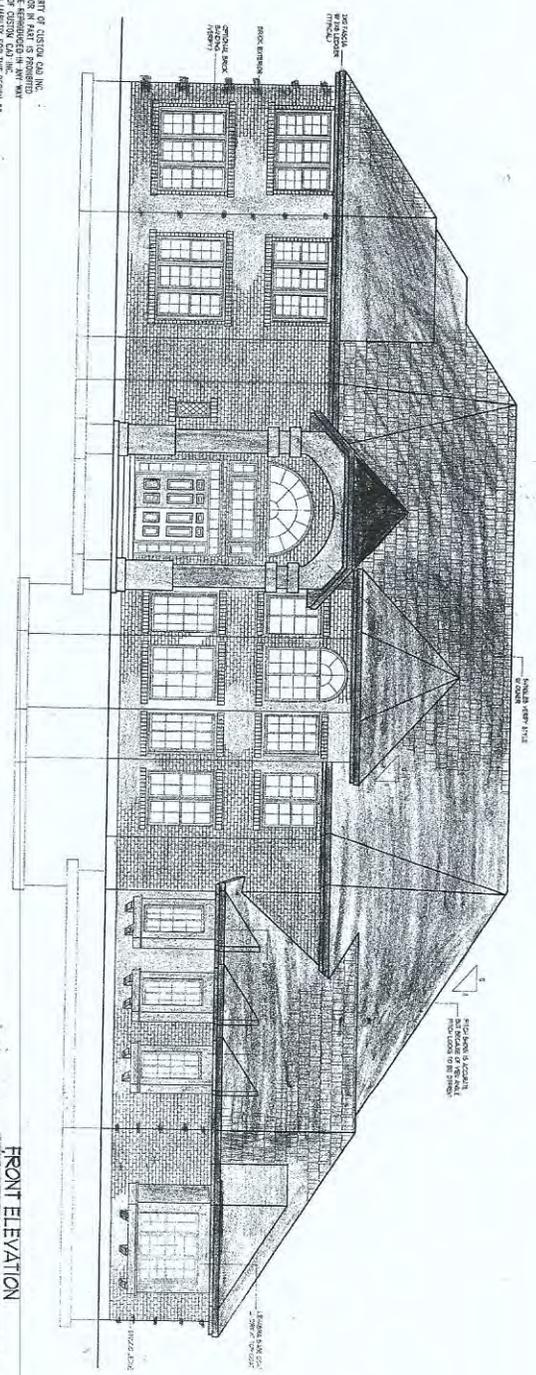
R501-19-2. Purpose.

9. Blueprints of Existing Home

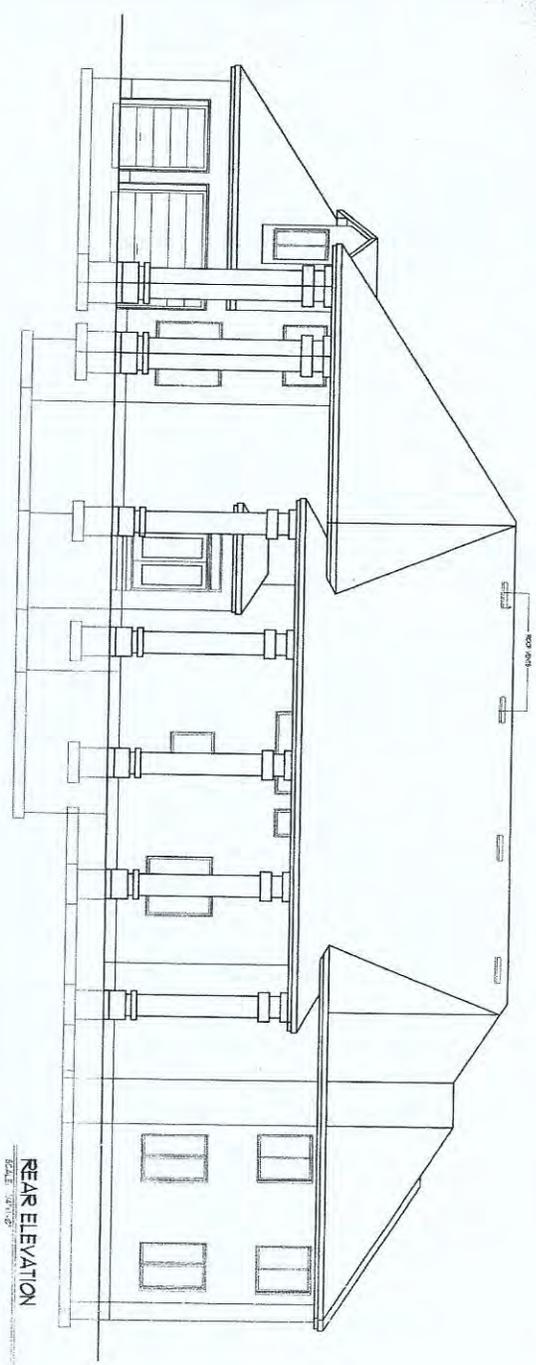


Blueprints

THE SOLE PROPERTY OF CUSTOM CAD INC.
 IS HEREBY GRANTED TO THE ARCHITECT
 IN PERMISSION OF CUSTOM CAD INC. THE
 ARCHITECT IS NOT TO BE HELD RESPONSIBLE
 FOR ANY CONSTRUCTION AND SITE CONDITIONS
 OF THE ABOVE CONSTRUCTION.



FRONT ELEVATION
 SCALE: 1/8" = 1'-0"



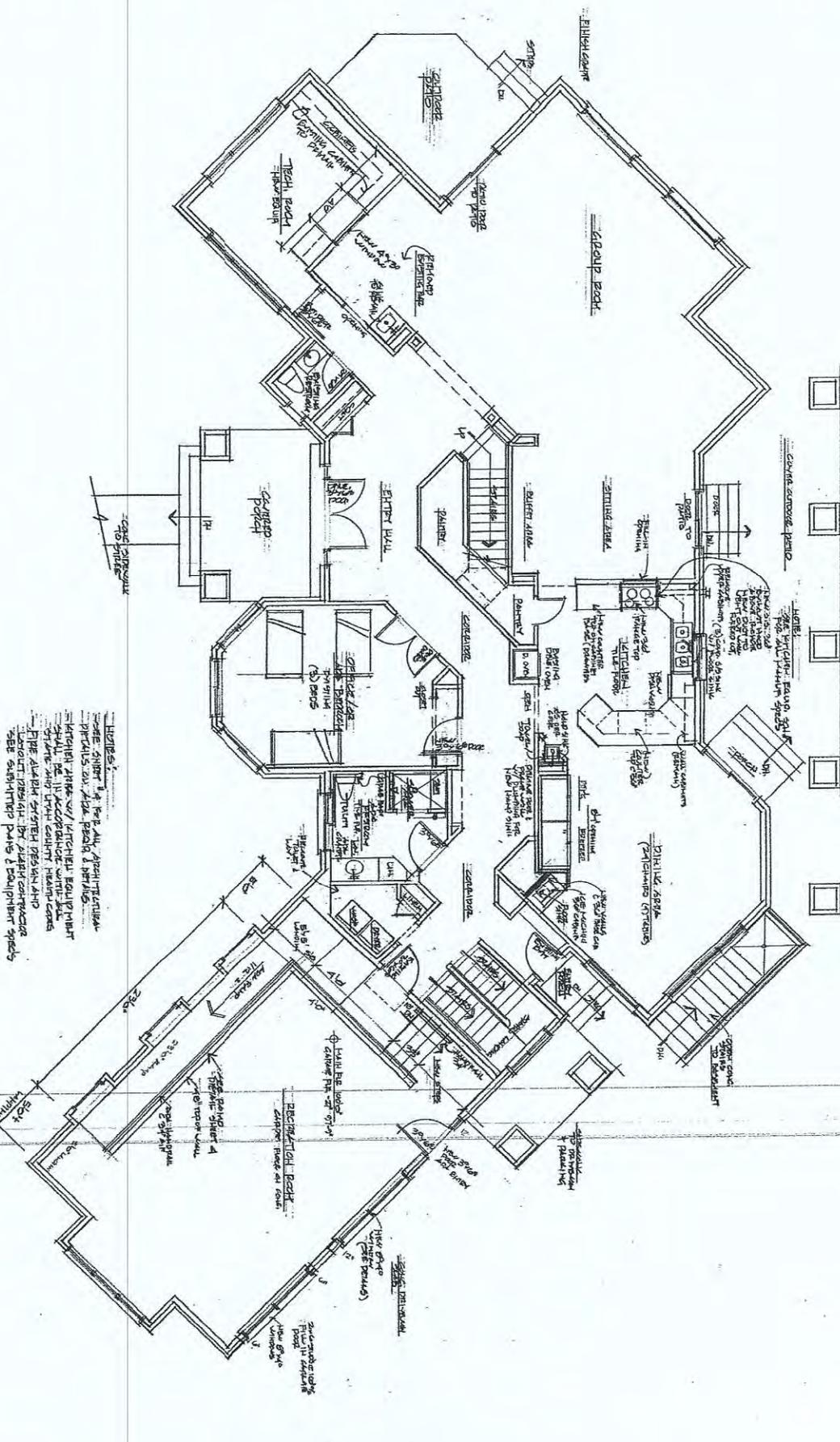
REAR ELEVATION
 SCALE: 1/8" = 1'-0"

A-1

CUSTOM CAD
 ARCHITECTURE
 MICHAEL ZAGORSKY
 ARCHITECT
 1000 W. 10TH ST.
 SUITE 100
 DENVER, CO 80202
 (303) 733-8000

NEW RESIDENCE FOR
 MR & MRS WA

**NEW REMODELING PLAN
MAIN FLOOR PLAN**



NOTES:
 - SEE SHEET 2 OF THE NEW ARCHITECTURAL
 DETAILS ON THE FLOOR & WALLS.
 - MATCHED WITH W/ KITCHEN EQUIPMENT
 SHALL BE IN ACCORDANCE WITH LOCAL
 CODES AND CITY CODES.
 - FIVE ALUMINUM STAIRS (35" x 48") AND
 STAIR TREADS BY ALUMINUM CONTRACTOR
 SEE ARCHITECTURE PARTS & EQUIPMENT SCHEDULES

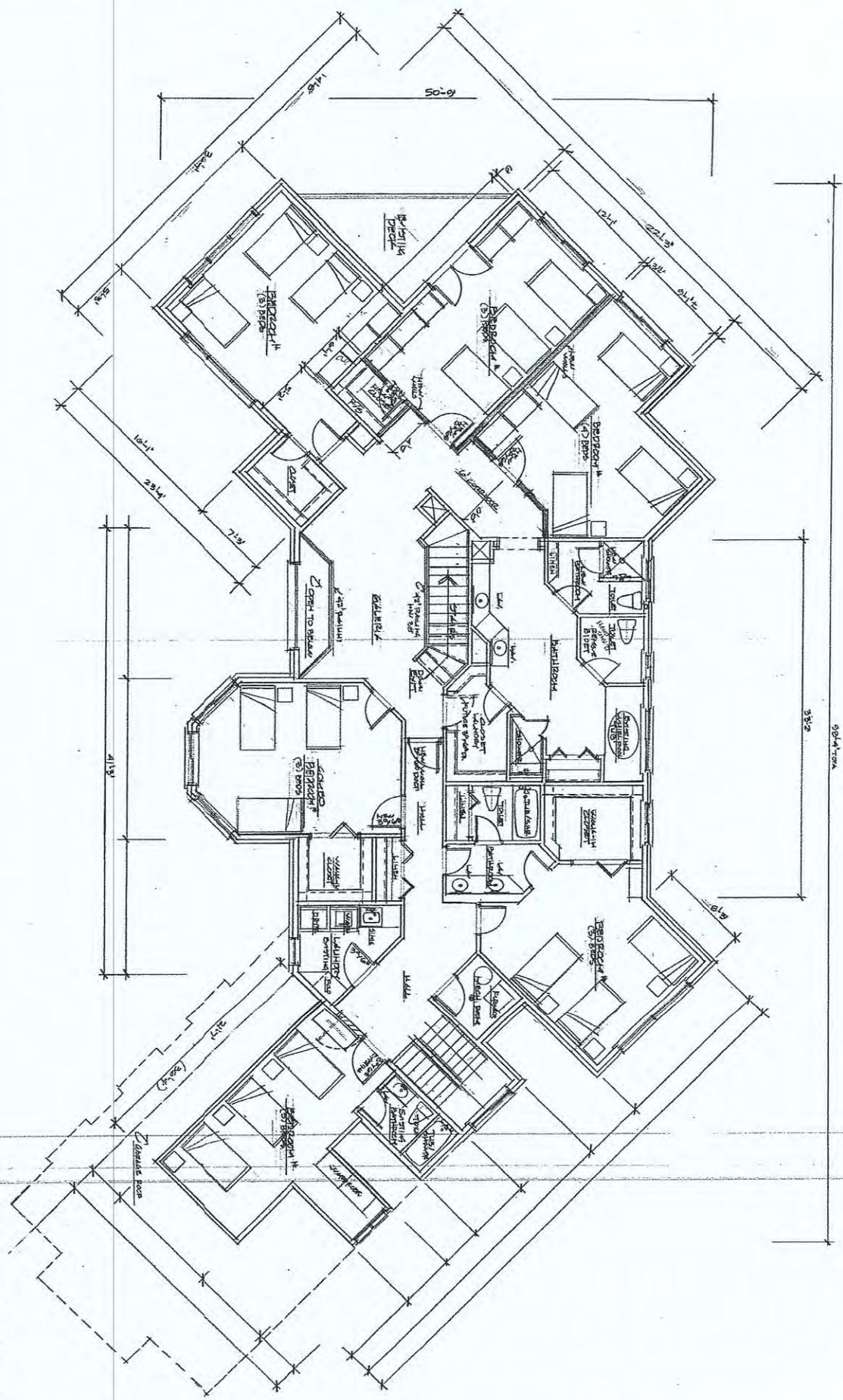
SOULIER PORTKEL VAIN FLOOR 1
 21020 30'x11'
 21020 30'x11'
 21020 30'x11'
 21020 30'x11'
 21020 30'x11'
 21020 30'x11'

REFLECTIONS RECOVERY CENTER
 14500 14500

**MAIN FLOOR PLAN
 REMODELING PLAN**

SCALE: 1/4" = 1'-0"
 DRAWN BY: J. P. [unreadable]
 DATE: AUG 15, 2014

NEW REMODELING PLAN
 UPPER FLOOR PLAN
 1/4" = 1'-0"



COULVE ROYAL UPPER FLOOR
 3,552 SQ. FT.
 TOTAL FLOOR 19'

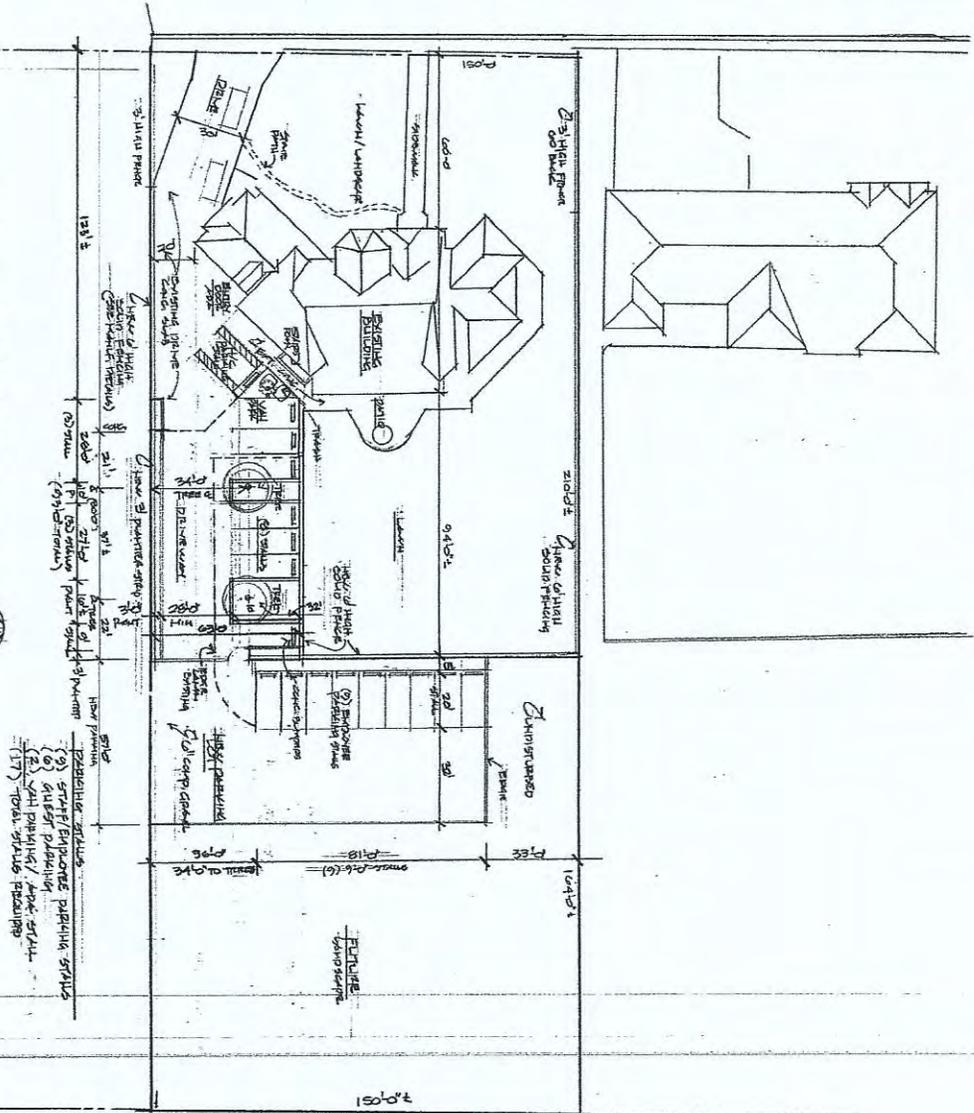
2
 SHEET 12

PROPOSED REMODELING PLAN FOR:
 REFLECTIONS RECOVERY CENTER
 145 SOUTH 300 EAST
 UTAH, DEPT

UPPER FLOOR PLAN
 REMODELING PLAN

SCALE: 1/4" = 1'-0"
 DRAWN BY: CPBOK, S. LOTT
 DATE: AUG. 13, 2014

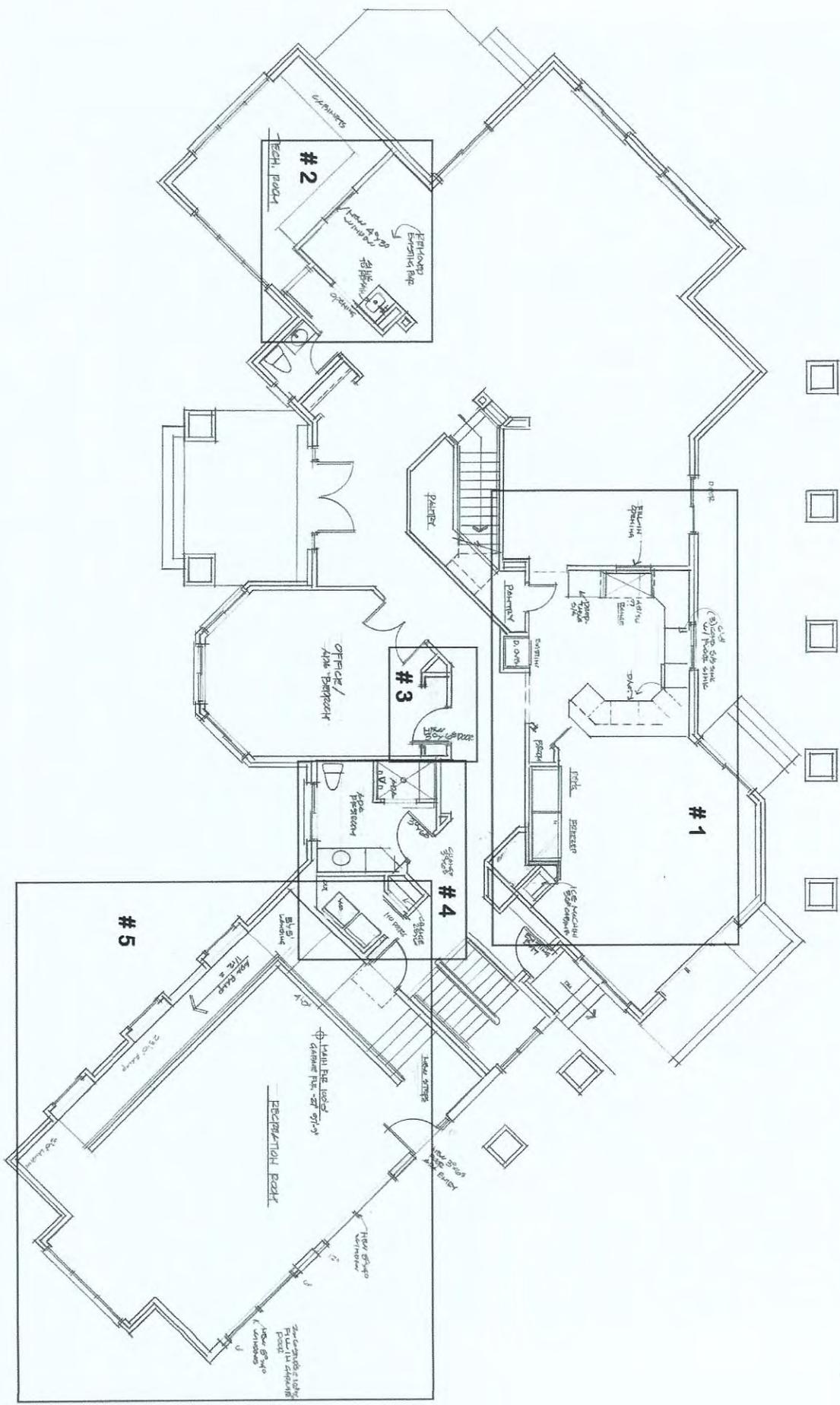
SITE PLAN
SCALE: 1"=20'-0"



10. Remodel Details



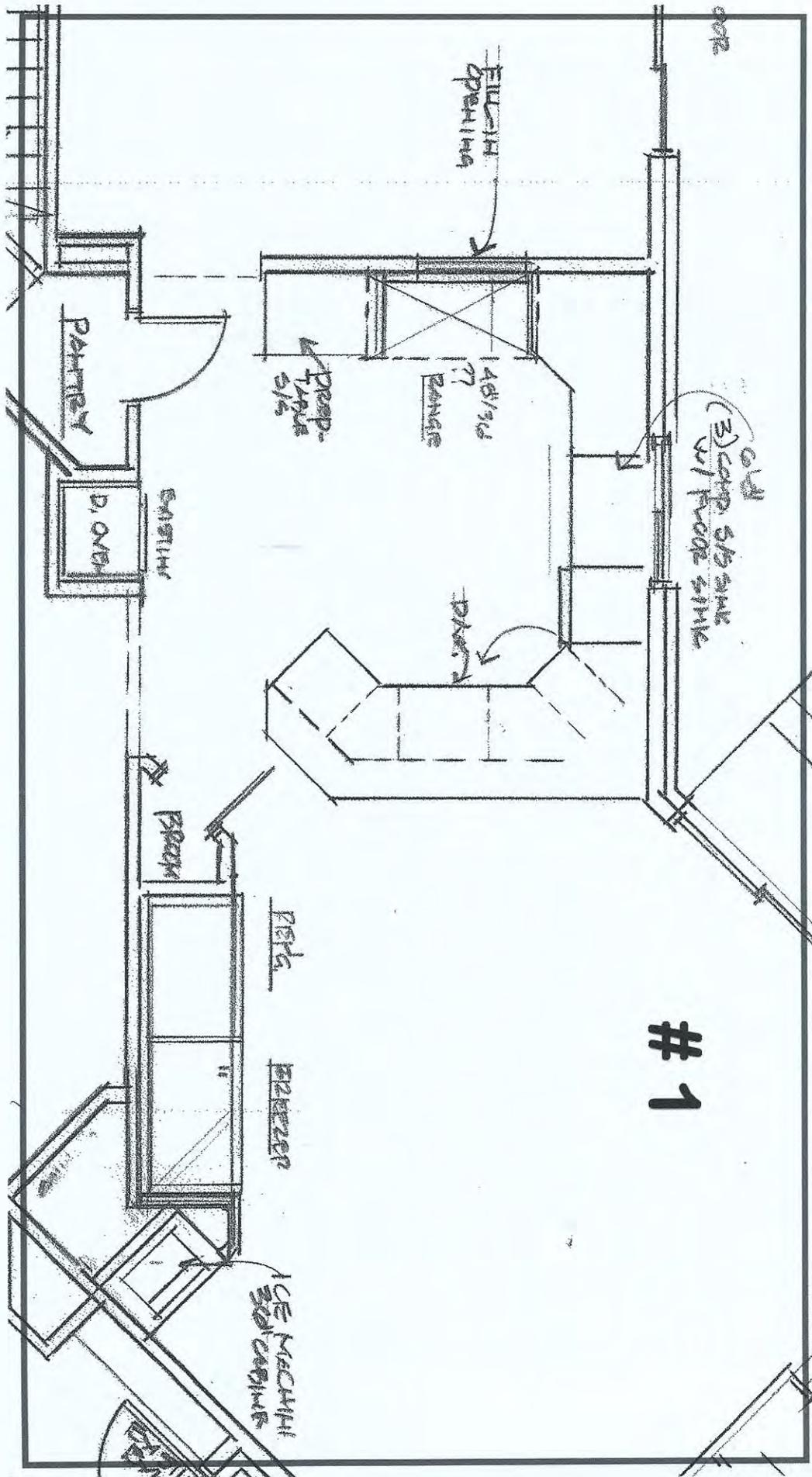
Remodel Details



NEW REMODELING PLAN,
 MAIN FLOOR PLAN
 SCALE: 1/8" = 1'-0"



SQUARE FOOTAGE: MAIN FLOOR



1

FILL-IN
OPENING

(3) OLD S/S SINK
S/I FLOOR SINK

48 1/2"
RANGE

DRAIN-
TYPE
S/S

PARKING

D. OVEN

EXISTING

REFG

REFG

FREEZER

ICE MACHINE

2

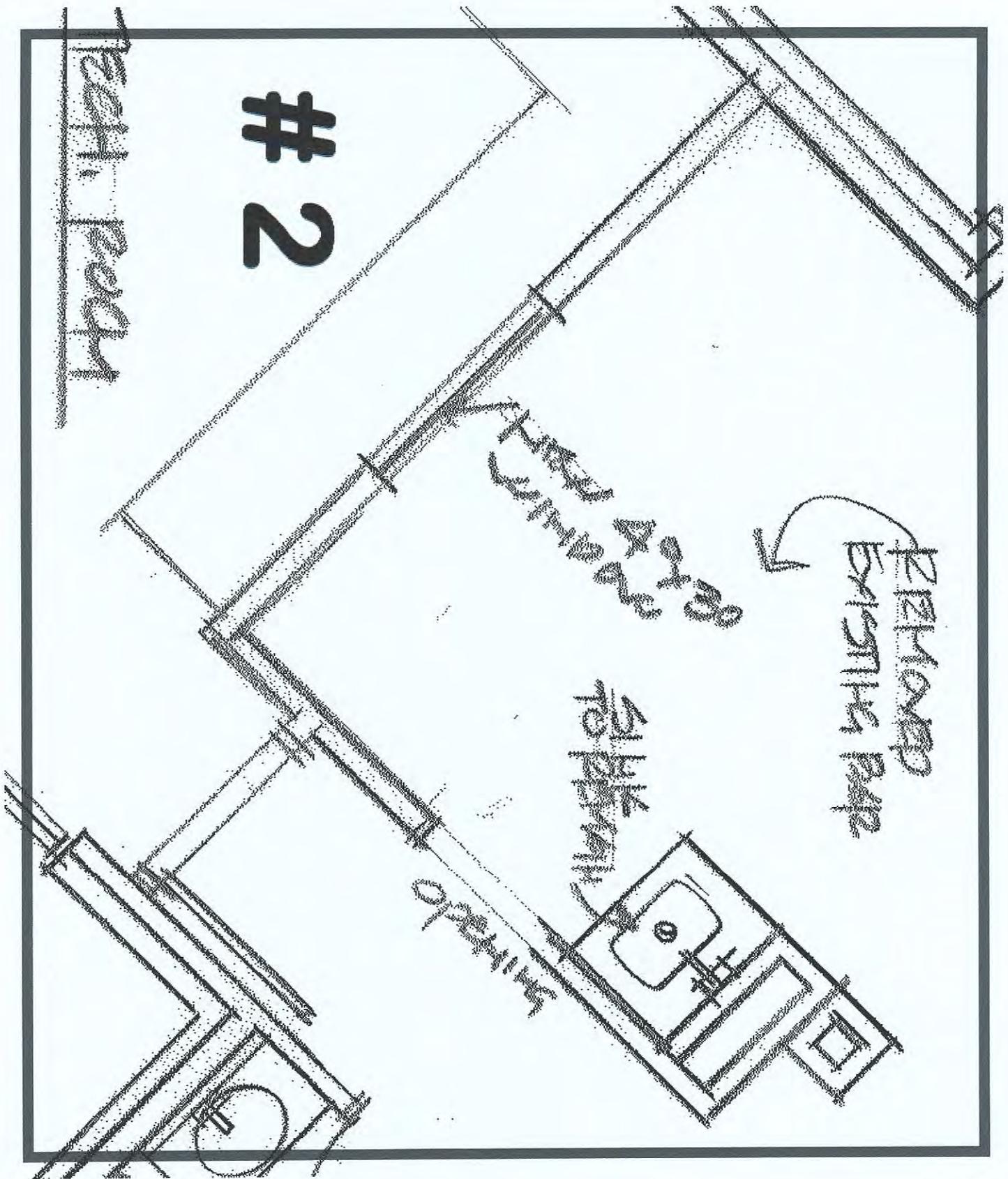
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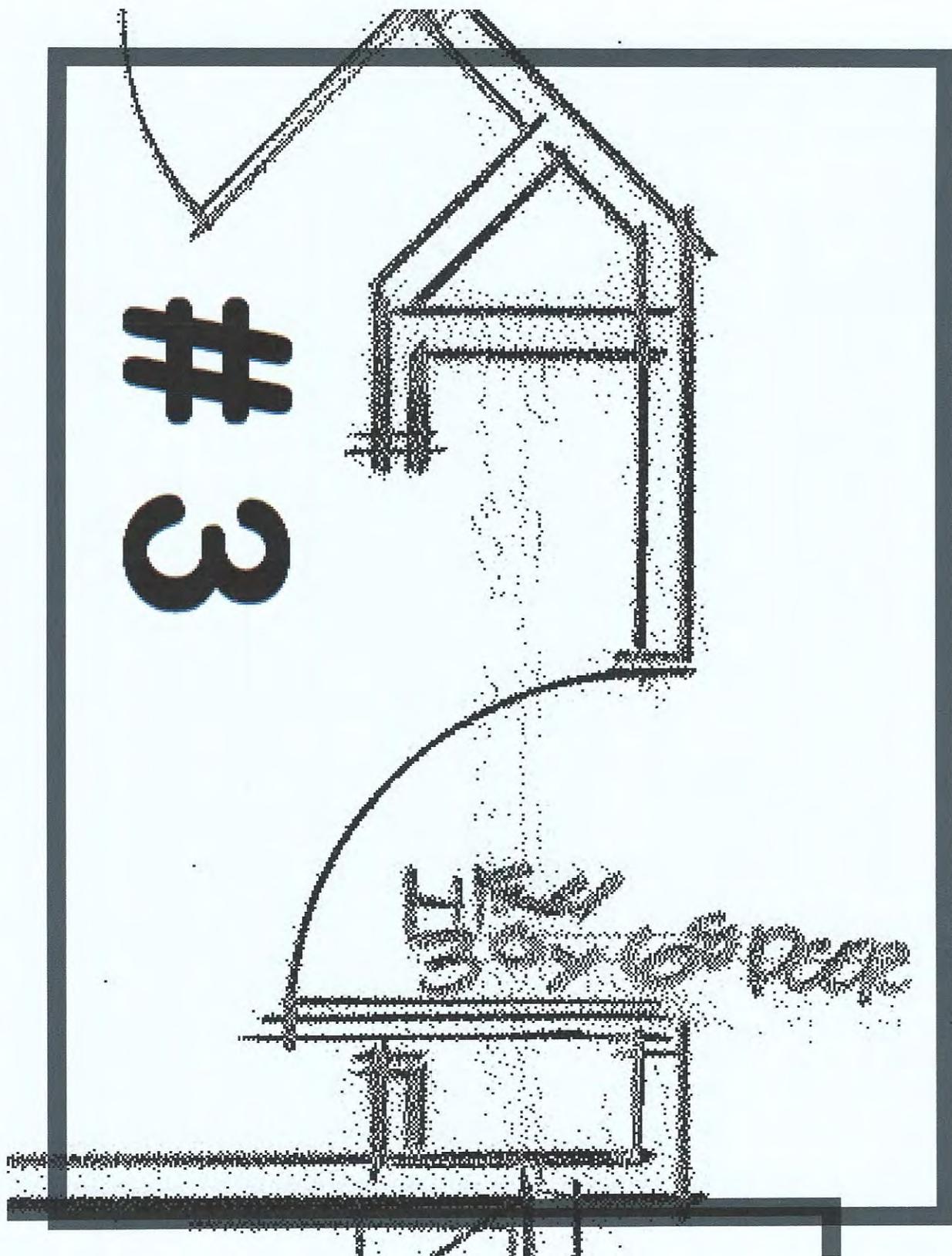
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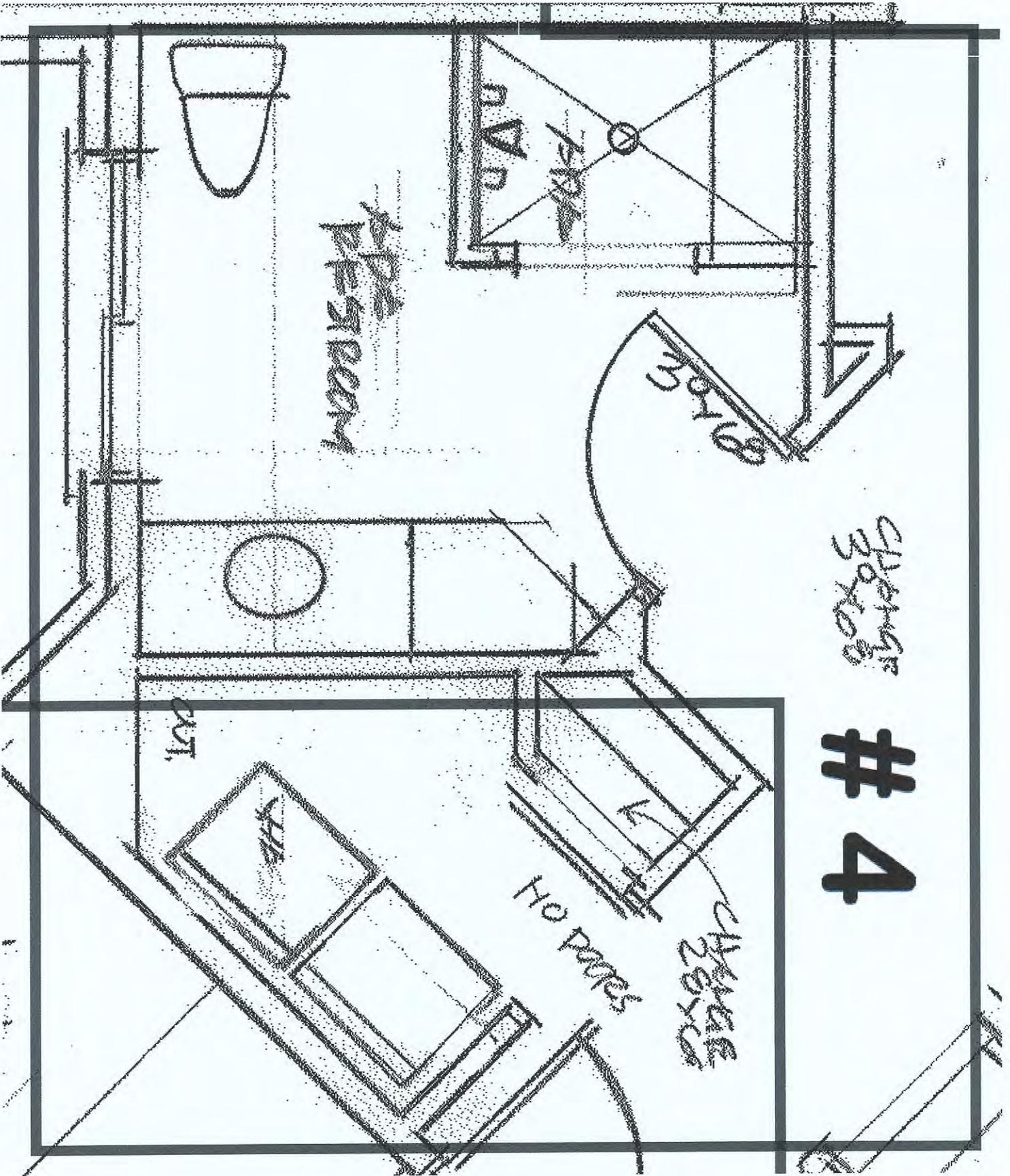
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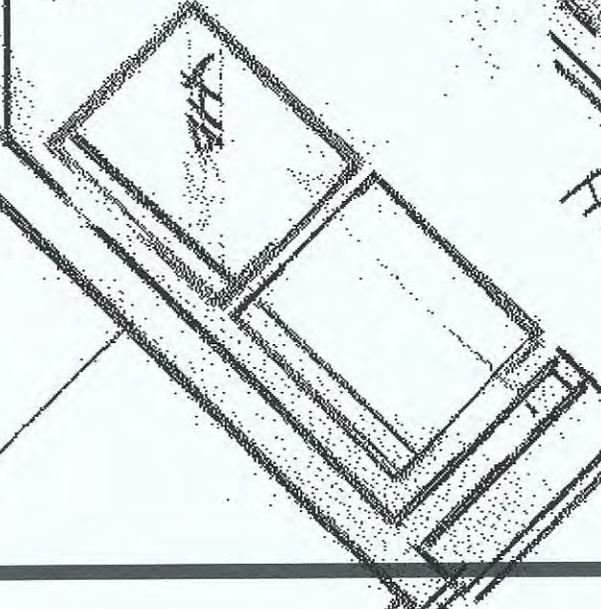
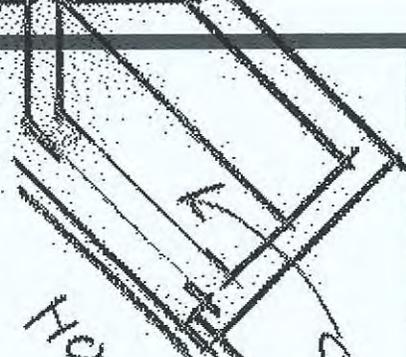
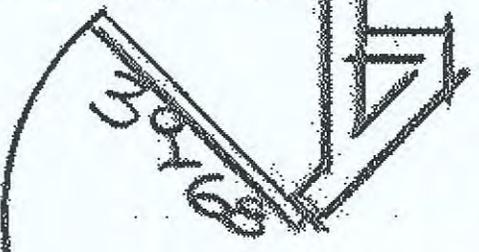
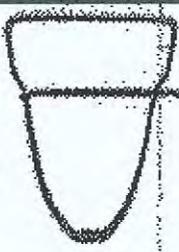
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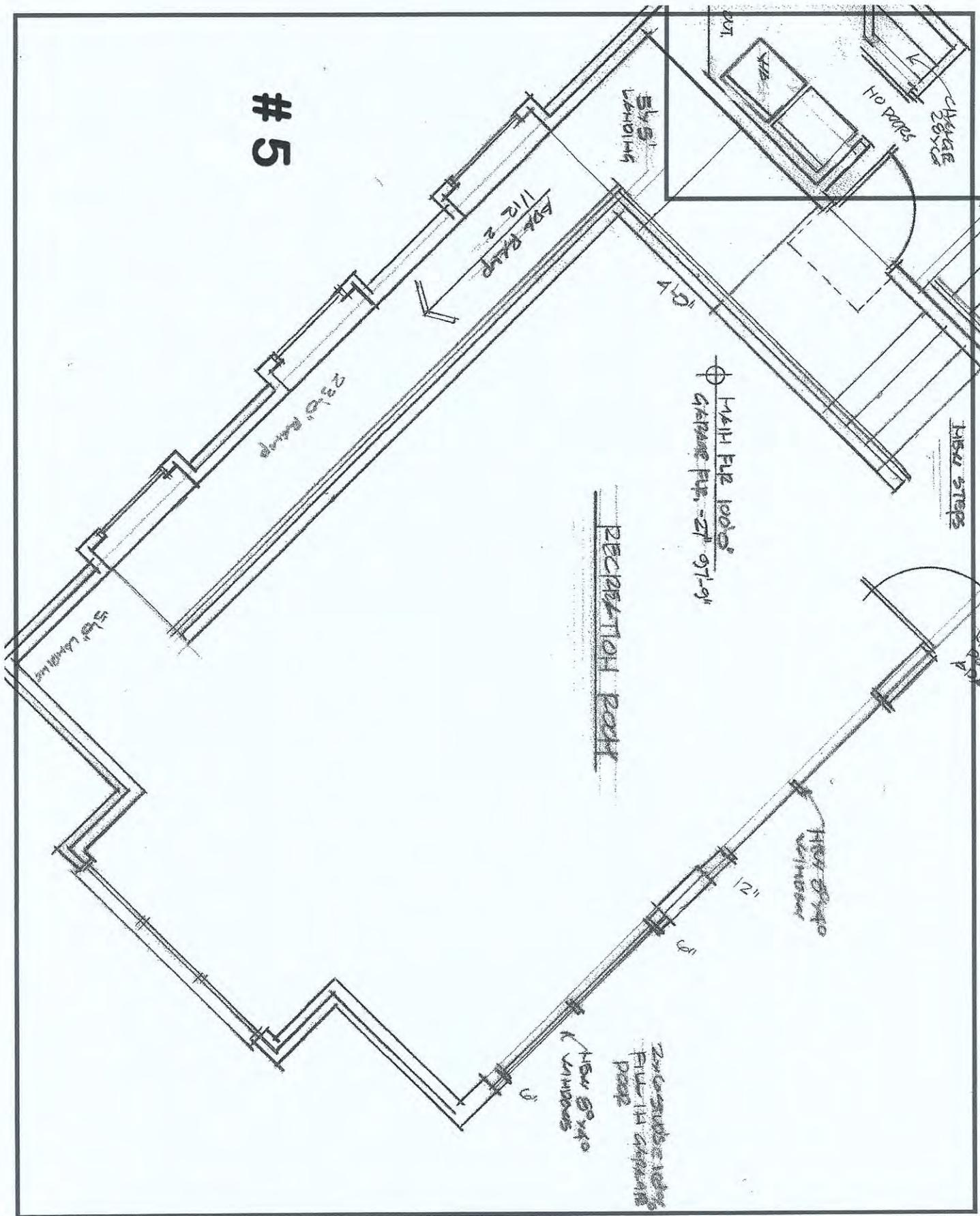
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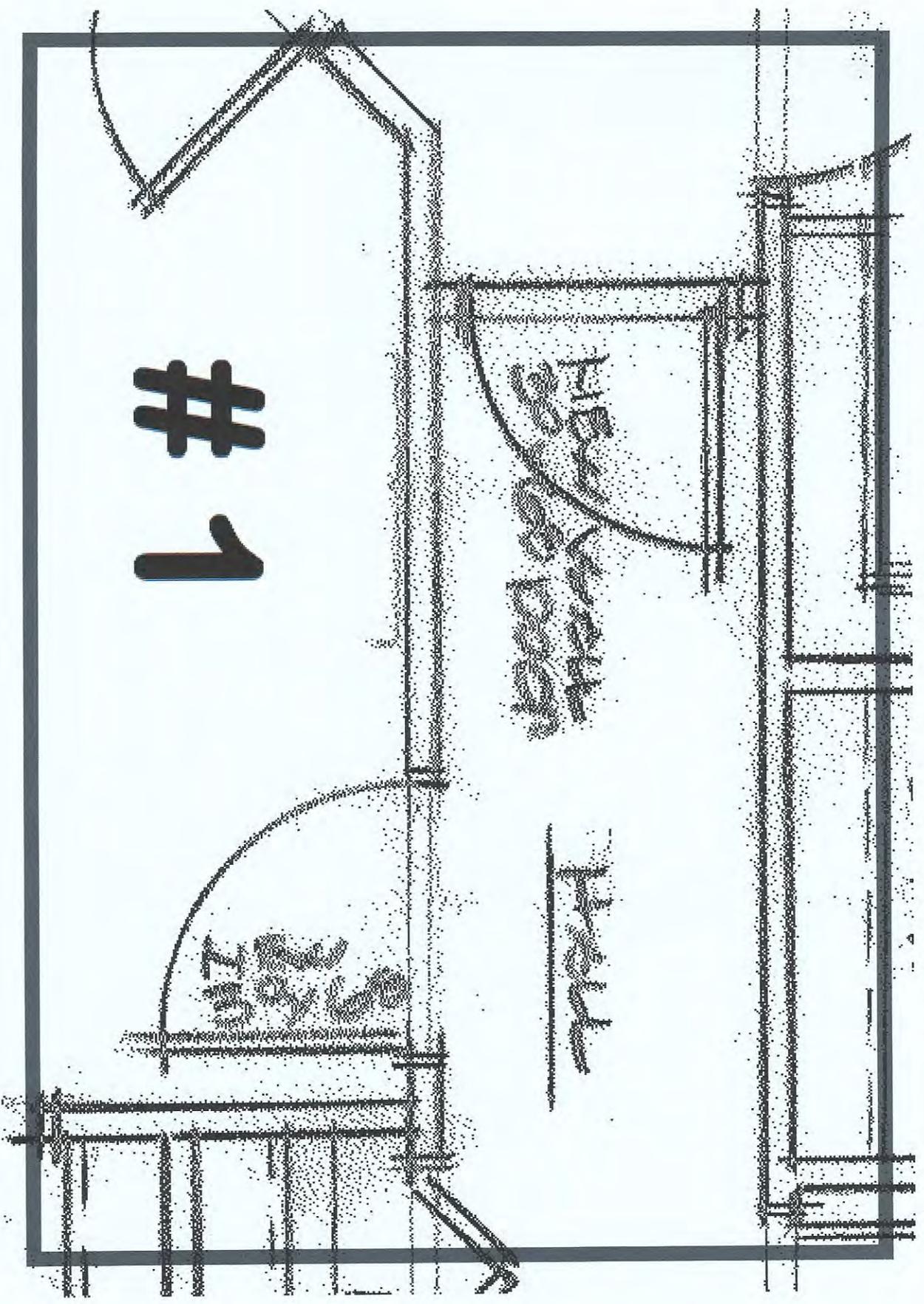
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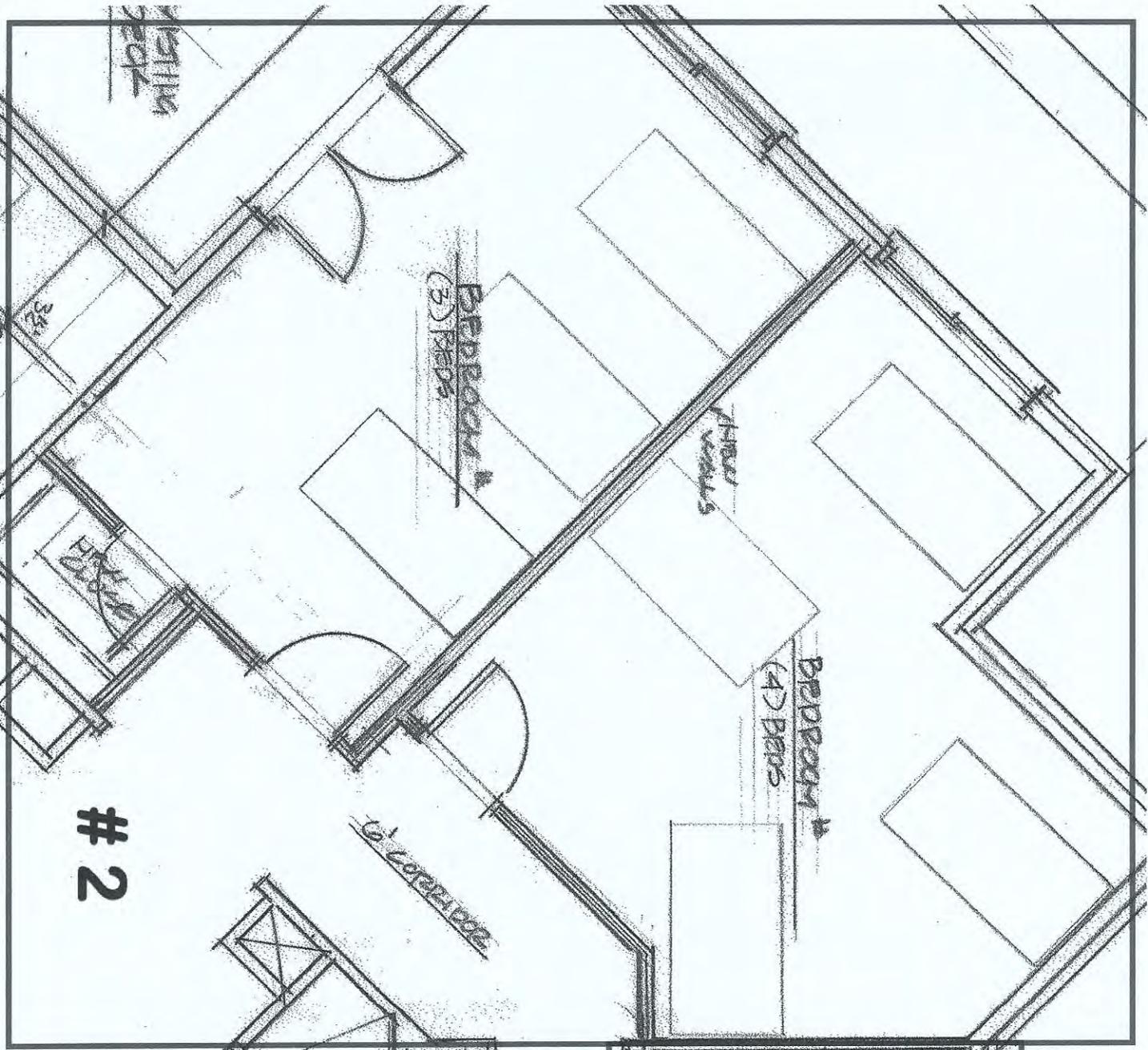


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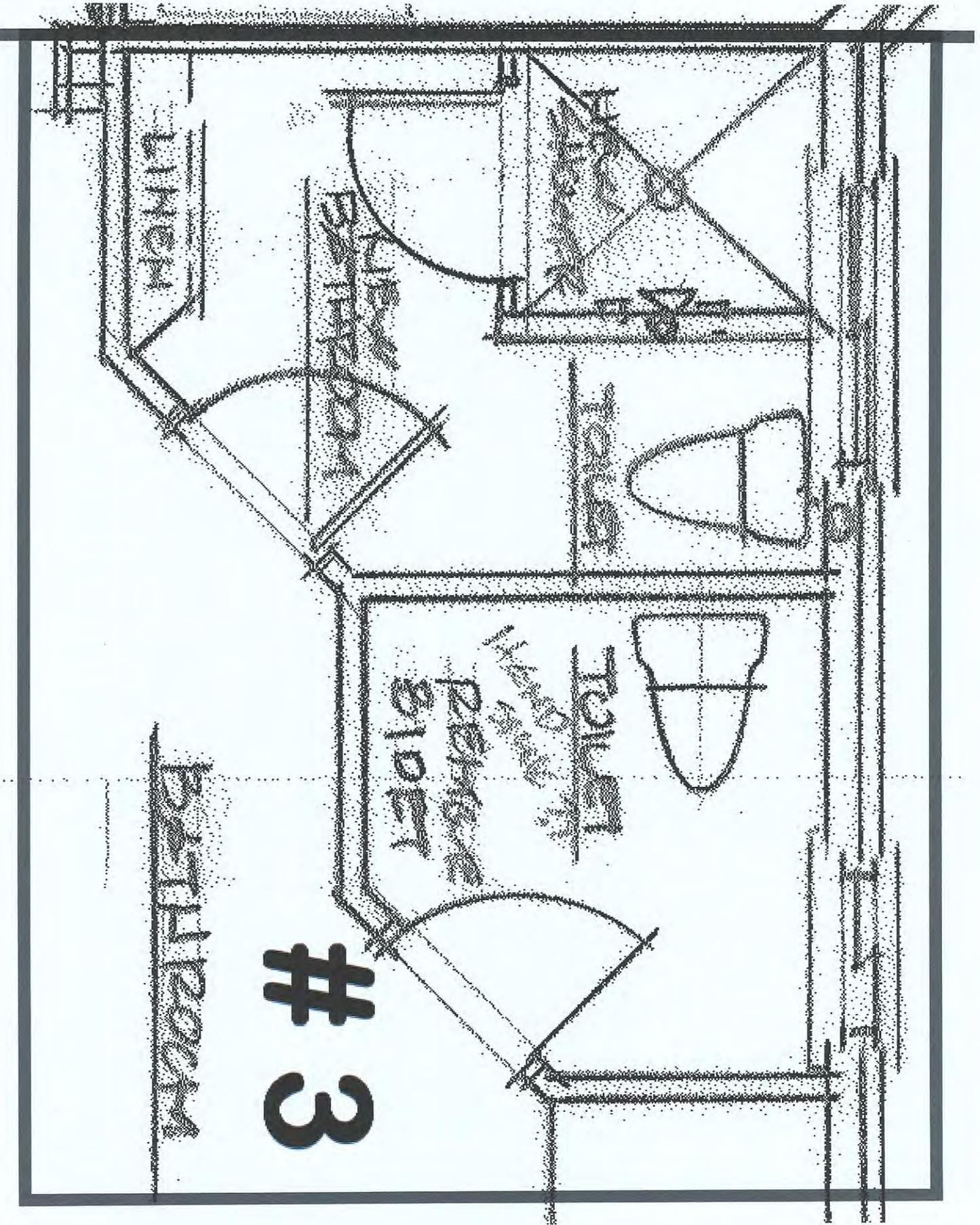


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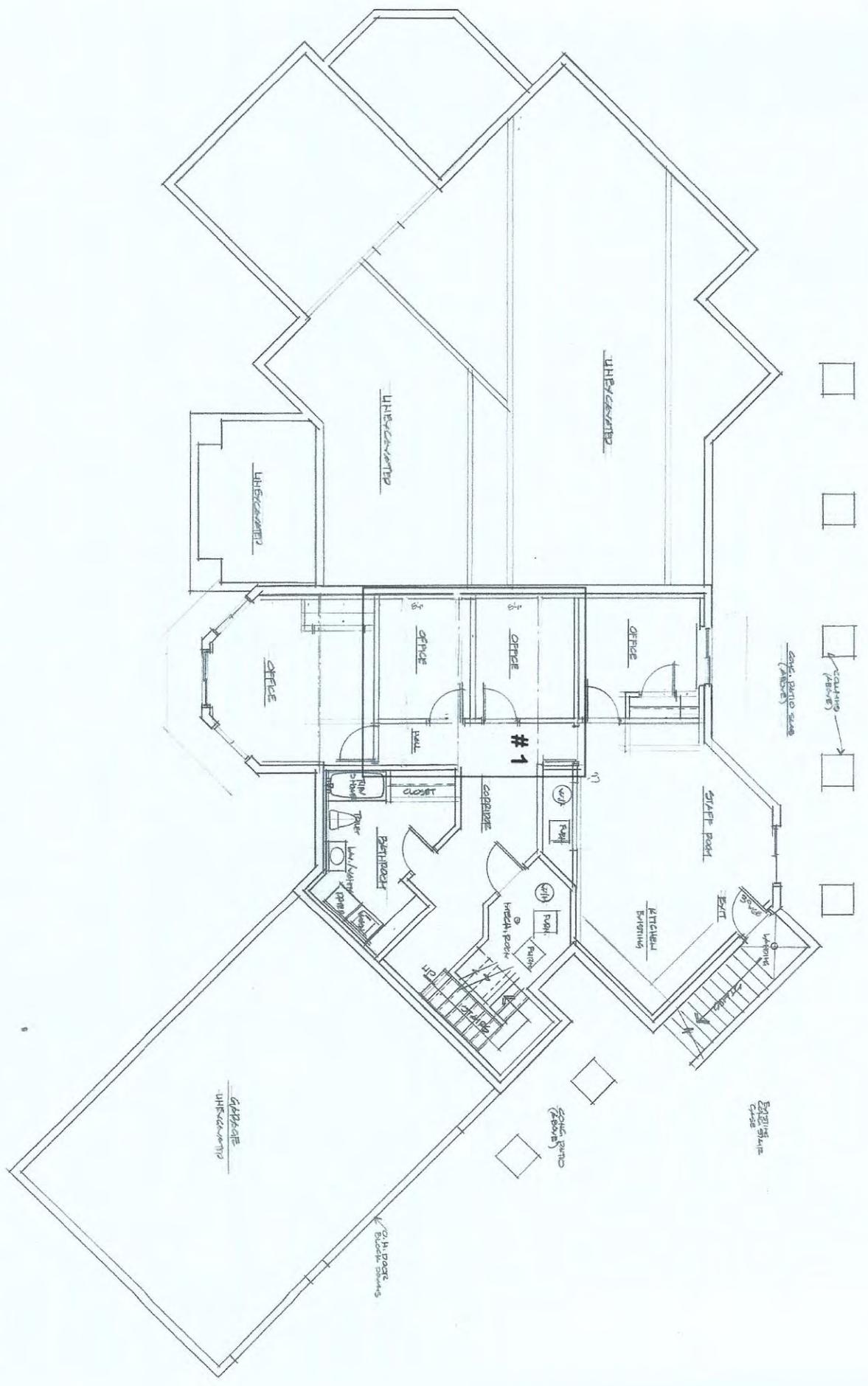
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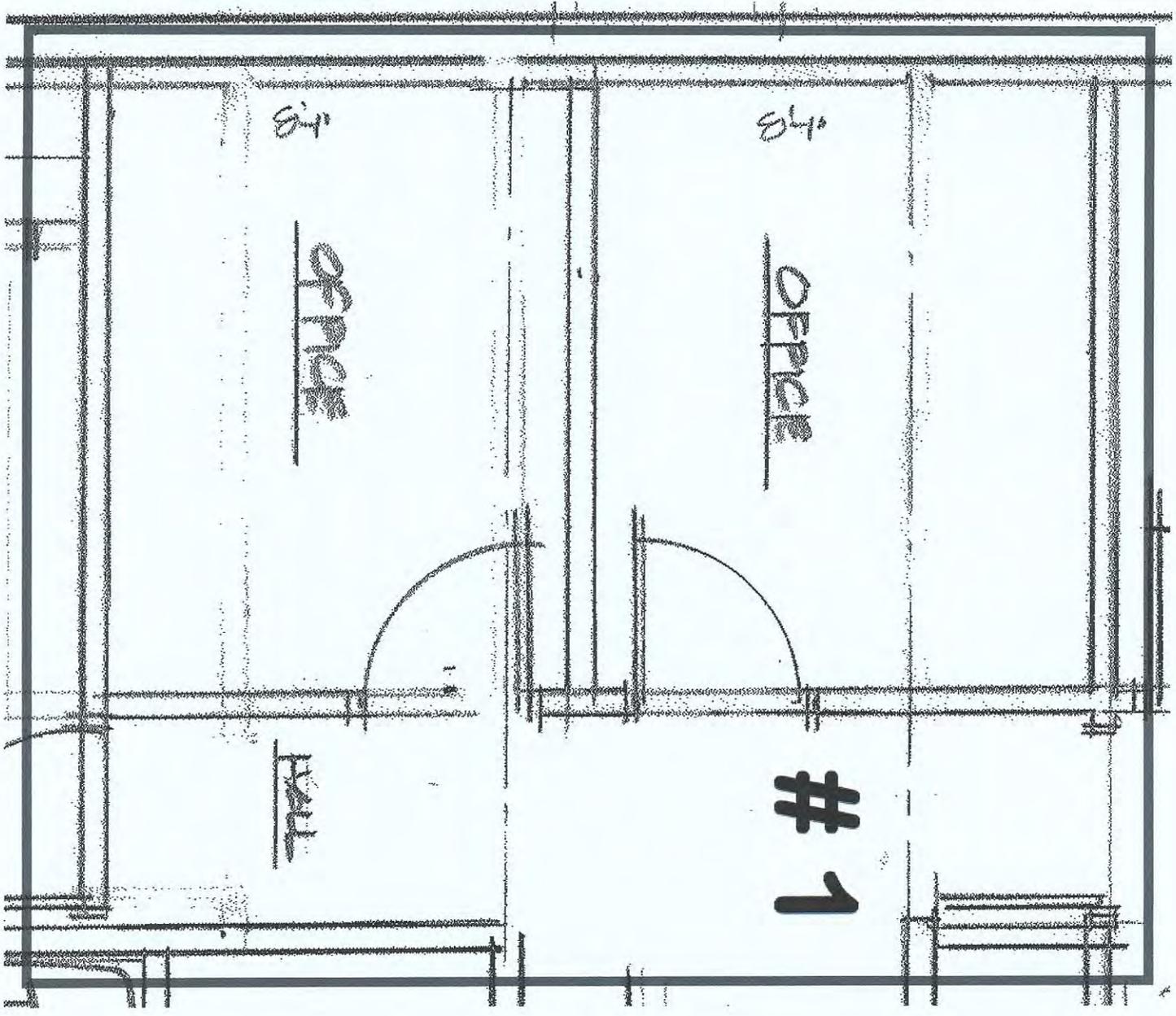


NEW REMODELING PLAN:
LOWER / BASEMENT FLOOR PLAN
SCALE: 1/4" = 1'-0"



SQUARE FOOTAGE: LOWER FLOOR





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OFFICE

OFFICE

HALL

1

11. State Licensing Requirements

Licensing Process for
Day Treatment, Intermediate Secure Care, Outdoor Youth programs, Outpatient Treatment, Residential Support, Residential Treatment, Social Detoxification, and Therapeutic Schools

1. Submit application, fee, and an electronic copy of your Policy and Procedure manual to the Office of licensing. Office management will assign a licensor. The Policy and Procedure Manual must address the specifics of how the program will comply with the Core Rules (R501-2) and with the Categorical Rules for the applicable category of service to be provided. The manual must be reviewed and approved by the assigned licensor. Be sure to include program statement of purpose; description for services to be provided; description of clients to be served.
2. Submit Office of Licensing Background Screening Application forms on all employees 18 years or older who will have direct access to clients (Adult only Substance Abuse programs are exempt from this). An Office of Licensing background screen must be completed annually.
3. Prepare the following documents:
 - Business license / zoning approval
 - Fire Inspection Clearance (not required for Outdoor Youth Program)
 - Health Inspection Clearance (not required for Outpatient Treatment or Outdoor Youth Program)
 - Evidence of Insurance (General Liability with fire, Professional Liability, Vehicle, and Worker's Compensation)
 - Evidence of Business Registration with the Department of Commerce
 - Sole Proprietorship = Registration
 - Partnership = Partnership Agreement
 - Limited Partnership = Certificate of Limited Partnership
 - Corporation = Articles of Incorporation
 - Limited Liability Company = Articles of Organization
 - List of members of the program's Governing Body
 - Organization Chart
 - School Accreditation Certificate for programs serving clients under age 18 (not required for Outpatient Treatment or Social Detoxification).
 - Completed Youth Education Coordinating Form for programs serving clients under age 18 (not required for Outpatient Treatment or Social Detoxification).
 - For Residential Treatment - evidence of notification provided to the Governing Body of the local government having jurisdiction, in accordance with 62A-2-108.2(3)
 - Any other licenses/inspections required by the city, county or other state agency
4. Licensor will contact you to complete a site inspection.

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Lindon City

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COMPLIANCE REQUIREMENTS R501-19	Y E S	N O	N / A	CONT RACT	COMMENTS
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<p>3. Children and Youth</p> <ul style="list-style-type: none"> a. a licensed physician, or consulting licensed physician, b. a licensed psychologist, or consulting licensed psychologist, and c. a licensed mental health therapist, or consulting licensed mental health therapist, to provide a minimum of one hour of service to the program per week per consumer enrolled. d. A licensed medical practitioner, by written agreement, is available to provide, as needed, a minimum of one hour of service per week for every two consumers enrolled. e. Other staff trained to work with emotionally and behaviorally disturbed, or conduct disordered children and youth are under the supervision of a licensed clinical professional. f. A minimum of two staff on duty and, a staff ratio of no less than one staff to every four consumers exists at all times, except nighttime sleeping hours when staff ratios may be reduced. g. A mixed gender population has at least one male and one female staff on duty at all times. <p>4. Services for People with Disabilities programs have a staff person responsible for program supervision and operation of the facility. Staff person is adequately trained to provide the services and treatment stated in the consumer plan.</p>				* * * * * * * *	
<p>R501-19-6. Direct Service. Treatment plans are reviewed and signed by the clinical supervisor, or other qualified individuals for DSPD services. Plans are reviewed and signed as noted in the treatment plan.</p>				*	
<p>R501-19-7. Physical Facilities. A. Program provides written documentation of compliance with the following items as applicable:</p> <ul style="list-style-type: none"> 1. local zoning ordinances, 2. local business license requirements, 3. local building codes, 4. local fire safety regulations, 5. local health codes, and 6. local approval from the appropriate government agency for new program services or increased consumer capacity. 					
<p>B. Building and Grounds</p> <ul style="list-style-type: none"> 1. Program ensures that the appearance and cleanliness of the building and grounds are maintained. 2. Program takes reasonable measures to ensure a safe physical environment for consumers and staff. 					
<p>R501-19-8. Physical Environment. A. Live-in staff have separate living space with a private bathroom.</p>					
<p>B. Program has space to serve as an administrative office for records, secretarial work and bookkeeping.</p>					
<p>C. Indoor space for free and informal activities of consumers is available.</p>					
<p>D. provision is made for consumer privacy.</p>					
<p>E. Space is provided for private and group counseling sessions.</p>					

COMPLIANCE REQUIREMENTS R501-19	Y E S	N O	N / A	CONT RACT	COMMENTS
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<p>F. Sleeping Space</p> <ol style="list-style-type: none"> 1. No more than four persons, or two for DSPD programs, are housed in a single bedroom. 2. A minimum of 60 square feet per consumer is provided in a multiple occupant bedroom. Storage space is not counted. 3. A minimum of 80 square feet per individual is provided in a single occupant bedroom. Storage space is not counted. 4. Sleeping areas have a source of natural light, and are ventilated by mechanical means or equipped with a screened window that opens. 5. Each bed, none of which are portable, is solidly constructed, and is provided with clean linens after each consumer stay and at least weekly. 6. Sleeping quarters serving male and female residents is structurally separated. 7. Consumers are allowed to decorate and personalize bedrooms with respect for other residents and property. 					
<p>G. Bathrooms</p> <ol style="list-style-type: none"> 1. Program has separate bathrooms for males and females. These are maintained in good operating order and in a clean and safe condition. 2. Bathrooms accommodate consumers with physical disabilities as required. 3. Bathrooms are properly equipped with toilet paper, towels, soap, and other items required for personal hygiene. 4. Bathrooms are ventilated by mechanical means or equipped with a screened window that opens. 5. Bathrooms meet a minimum ratio of one toilet, one lavatory, and one tub or shower for each six residents. 6. There are toilets and baths or showers that allow for individual privacy. 7. There are mirrors secured to the walls at convenient heights. 8. Bathrooms are located to allow access without disturbing other residents during sleeping hours. 					
<p>H. Furniture and equipment is of sufficient quantity, variety, and quality to meet program and consumer needs.</p>					
<p>I. All furniture and equipment is of sufficient quantity, variety, and quality to meet program and consumer needs.</p>					
<p>J. If program permits individuals to do their own laundry they provide equipment and supplies for washing, drying, and ironing.</p>					
<p>K. If program provides for common laundry of linens and clothing, they provide containers for soiled laundry separate from storage for clean linens and clothing.</p>					
<p>L. Laundry appliances are maintained in a clean and safe condition.</p>					
<p>R501-19-9. Food Service.</p>					
<p>A. One staff is responsible for food service. If this person is not a professionally qualified dietitian, regularly scheduled consultation with a professionally qualified dietitian is obtained. Meals are served from dietitian-approved menus.</p>					
<p>B. Staff responsible for food service maintain a current list of consumers with special nutritional needs and record in the consumer's service record information relating to special nutritional needs and provide for nutrition counseling where indicated.</p>					
<p>C. Program establishes and posts kitchen rules and privileges according to consumer needs.</p>					
<p>D. Consumers present in the facility for four or more consecutive hours are provided nutritious food.</p>					
<p>E. meals may be prepared at the facility or catered.</p>					
<p>F. Kitchens have clean, operational equipment for the preparation, storage, serving, and clean up of all meals.</p>					
<p>G. Adequate dining space is provided for consumers. Dining space is maintained in a clean and safe condition.</p>					
<p>H. If meals are prepared by consumers there is a written policy to include the following:</p>					

COMPLIANCE REQUIREMENTS R501-19	Y E S	N O	N / A	CONT RACT	COMMENTS
1. rules of kitchen privileges, menu planning and procedures, 2. nutritional and sanitation requirements, and 3. schedule of responsibilities.					
R501-19-10. Medication.					
A. Program has locked storage for medications.					
B. Program has locked storage for hazardous chemicals and materials, according to the direction of the local fire authorities.					
C. Prescriptive medication is provided as prescribed by a qualified person, according to the Medical Practices Act.					
D. Program has designated qualified staff, who is responsible to: 1. administer medication, 2. supervise self-medication, 3. record medication, including time and dosage, according to prescription, and 4. record effects of medication.					
R501-19-11. Specialized Services for Substance Abuse.					
A. Program does not admit anyone who is currently experiencing convulsions, in shock, delirium tremens, in a coma, or unconscious.					
B. At a minimum the program documents that direct service staff complete standard first aid and CPR training within six months of being hired. Training is updated as required by the certifying agency.					
C. Before admission, consumers are tested for Tuberculosis. Both consumers and staff are tested annually or as directed by local health authority.					
R501-19-12. Specialized Services for Programs Serving Children and Youth.					
A. Provisions are available for adolescents to continue their education with a curriculum approved by the State Office of Education.					
B. If program provides their own school it is recognized by an educational accreditation organization, i.e., State Board of Education or the National School Accreditation Board.					
C. Individual, group, couple, and family counseling sessions or other appropriate treatment, including skills development, is conducted at least weekly, or more often if defined by the treatment plan. The consumer's record documents the time and date of the service provided with signature of the counselor.					
D. An accurate record is kept of all funds deposited and withdrawn with the residential facility for use by a consumer. Consumer purchases of over \$20.00 per item, are substantiated by receipts signed by consumer and appropriate staff.					
R501-19-13. Specialized Services for Division of Services for People with Disabilities.					
A. Rules governing the daily operation and activities of the facility are available to all consumers and visitors, and applies to family members, consumers, and staff that come into the facility.					
B. Program has policy specifying the amount of time family or friends may stay as overnight guests.					
C. All consumers have an individual plan that addresses appropriate day treatment.					
D. A monthly schedule of activities is shared with the consumer and available on request. Schedules are filed and maintained for review.					
E. Record of income, earned, unearned, and consumer service fees, is maintained by the provider.					
F. Facility is located where school, church, recreation, and other community facilities are available.					
G. An accurate record is kept of all funds deposited with the facility for use by a consumer. The record contains a list of deposits and withdrawals. Consumer purchases of over \$20.00 per item, is substantiated by receipts signed by consumer and professional staff. A record is kept of consumer petty cash funds.					
H. Program, in conjunction, with parent or guardian and DSPD support coordinator, applies for unearned income benefits for which a consumer is entitled.					

12. Reports, Studies Provided by Applicant

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California Research Bureau
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Riverside, CA 92501
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Residential Care Facilities in the Neighborhood: Federal, State, and Local Requirements

By Lisa K. Foster, M.S.W., M.P.A.

*Prepared at the Request of
Senator Charles S. Poochigian*

DECEMBER 2002

CRB-02-018

C A L I F O R N I A R E S E A R C H

Community Development
Bureau
London City

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Executive Summary

During the past decade, local governments have expressed ongoing concerns about the impact of federal and state laws on land use decisions affecting residential care facilities (including group homes). It is widely accepted that persons with physical and mental disabilities, and other special needs, deserve to live in the community – in contrast to an institution – and that facilities located in residential neighborhoods allow them to participate in, and become a part of, that community. However, local governments face concern from homeowners that these residential facilities will have a negative impact on their neighborhoods.

The right of individuals with special needs to live in the community versus the right of neighbors to preserve the integrity of their neighborhood results in the longstanding conflict between federal, state, and local government requirements that affect land use regulation. This report identifies these requirements and their impact on the placement of residential care facilities in communities.

DIFFERENT POSITIONS

Community members generally agree that persons with disabilities and other special needs deserve to live in a community setting like a residential care or treatment facility instead of being isolated and institutionalized. But, it is a common reaction to feel uneasy, concerned, or fearful when a facility moves in next door or down the street.

Advocates and facility licensees point out that care and treatment facilities have to be put in *someone's* neighborhood. They argue that neighbors' fear is largely unfounded; they point to examples of facilities peacefully coexisting with neighbors and studies that conclude that residential care facilities do not have a negative affect on neighborhood safety and property values. In addition, advocates find that neighbors are often uninformed about the facility program and residents, which leads to misconceptions.

However, communities do experience problems with facilities. Seventy-two cities responding to a 1999 League of California Cities survey had received one or more complaints ranging from increased traffic, noise, and other neighborhood disturbances – to code violations – to criminal activities such as assaults and burglaries. The majority of complaints involved facilities that serve youth, individuals with mental illness, and individuals with alcohol or drug addictions. 15,045 licensed facilities with 235,724 residents

BACKGROUND

1 complaint per 212 facilities mainly generated from facilities poorly managed & low-income neighborhoods

In 1977, the Lanterman Developmental Disabilities Act established the right of Californians with developmental and physical disabilities to receive treatment and live in “the least restrictive environment.” This means that, instead of being institutionalized, persons with special needs are entitled to live in normal residential surroundings where they can experience maximum independence and participate in community life while

LOCAL REQUIREMENTS AND RESPONSIBILITIES

Cities and counties have authority to adopt local land use and related regulations, such as zoning and permit requirements. Unlike small facilities, large residential care facilities (those with seven or more residents) are subject to local land use regulations and other restrictions such as special permit requirements (for example, having to obtain a local health department permit for central food service). Local governments may impose notification and public hearing requirements. However, the requirements must not apply exclusively to residential care facilities, and local governments must follow state-mandated procedural requirements such as holding hearings for zoning decisions.

Local government entities are required to make reasonable accommodations for programs serving individuals with disabilities. In some instances, accommodation may include exceptions to zoning ordinances for large facilities with seven or more residents.

Public safety is a major issue related to residential care facilities in the community. Service providers contend that the safety issue is often used as a smokescreen by neighbors and local governments for taking discriminatory actions that are based on fear. However, some neighbors have experienced problems that impact neighborhood safety (such as assaults, threats and other actions by facility residents as described in the League of California Cities survey). When public safety issues occur, federal and state laws do not pre-empt local authority or responsibility to deal with it. Local rules that are enacted and enforced to provide for the community's safety are not prohibited under federal or state law as long as they are applied to all community members and groups.

“Elected officials and neighbors have a duty to welcome group homes and other community residences, and to educate themselves and their colleagues about the need for such housing options, and the requirements of the FHA and the ADA, just as providers and residents have a duty to be good neighbors and to respond to breaches of that duty with corrective action.”

League of California Cities, 2002

PUBLIC POLICY ISSUES

The overarching public policy issue continues to be that of balancing the rights of individuals with special needs to live and participate in the community with the rights of the communities and individuals to protect the welfare of their families and neighborhoods. This issue sometimes plays out as a conflict between state (and federal) requirements to protect individuals from discrimination and local governments' right and responsibility to exercise control over its communities.

The League of California Cities and a coalition of advocates for community care residents suggest that three issues need to be addressed to reconcile residential care facilities and community concerns. The first is a comprehensive plan to be used as a tool to address community needs while integrating residential care facilities into neighborhoods. The second is uniform standards and universal licensing of facilities for children and youth to protect residents and the community. The third issue is adequate and affordable housing for residential care facilities.

A related policy issue is an equitable distribution of facilities among communities. Neighborhoods with densely clustered facilities do not provide a “normal” community

distributed to group homes and alcohol and drug facilities. (See Appendix D for a description of bills related to facility siting.)

PROPOSITION 36 – SUBSTANCE ABUSE AND CRIME PREVENTION ACT

The Substance Abuse and Crime Prevention Act (SACPA) brought new attention to the siting issue. Effective January 2001, non-violent adult offenders charged with simple drug possession or drug use offenses complete treatment in the community instead of a jail or prison term.³⁰ Prior to its passage, local governments expressed concern about the proliferation of new recovery or treatment facilities that would be established to meet the demand created by the new act. In addition, fears were heightened because the residents would be convicted drug offenders.

The Department of Alcohol and Drug Abuse Prevention reports that the treatment capacity across the state has expanded significantly as a result of SACPA (including a 17% increase in licensed residential programs).³¹ Much of the increase in community treatment/recovery beds is from expanding facilities that are already established in neighborhoods, not from new facilities. And, the “new” drug offender population generally consists of the same persons who have previously been in established facilities – they are just entering treatment programs via a new mechanism.

The Department reports that cooperation among state and local government entities in implementing SACPA has been positive. However, some communities are experiencing conflicts between neighbors and facilities. For example, some neighbors oppose expanding facilities, and advocates point to long waiting lists for treatment that result from this opposition.³²

COMPLICATED ISSUES, NO EASY RESOLUTIONS

In conclusion, there are no easy resolutions to the complicated ongoing issues around siting residential care facilities in the community. Some goals conflict, like local control and federal/state protections. In addition some “quality” issues are hard to legislate. For example, what are the best strategies for making marginal licensed facilities (those that generate the greatest number of concerns and complaints) into quality facilities and good neighbors? A related issue concerns both quality and capacity. Should marginal facilities be tolerated in areas where there are not enough quality facilities to meet the demand? Resolutions that address and balance the needs of neighbors, the needs of residents needing services, and the needs of local government are difficult to identify and achieve.

**Review of Literature Discussing Crime Patterns
and Substance Abuse Treatment Programs**

Summary

Studies cited show that there is not a correlation between crime and the presence of substance abuse treatment centers. Other types of businesses such as convenience stores, pawnshops and beer establishments¹ tend to have more crime associated with them.

Steps Taken to Research Topic

The following steps were done in the research of this topic:

Contacted:

- American Association for the Treatment of Opioid Dependence (AATOD);
- National Criminal Justice Reference Service (NCJRS);
- National Institutes of Health/National Institute on Drug Abuse (NIH/NIDA);
- UCLA Integrated Substance Abuse Programs;
- Substance Abuse and Mental Health Services Administration (SAMHSA), and
- Other researchers publishing in this field.

Researched publications at:

- National Institutes of Health/National Library of Medicine (NLM), including PubMed and MEDLINE;
- Google, and
- Reviewed bibliographies of published studies to identify additional relevant studies.

Opening Comments

The relationship between crime and substance abuse treatment centers is a hard topic to study since it requires a quantitative methodology and a technology for precisely mapping crime incidents. An example of the difficulty of this work is the RAND retraction of its September 2011 study of crime and medical marijuana dispensaries in the Los Angeles area.² It is also an infrequently studied topic since other drug and crime related topics are more generally studied such as prevalence of specific drug use and before and after crime patterns by persons receiving substance abuse treatment.

¹ "Beer establishments" is the term used in the research literature.

² See RAND retraction of 8-10-2011 retrieved on 8-16-2012 from <http://www.rand.org/news/press/2014/10/24.html>

The authors of the articles mentioned below tend to have both a publication history of studying crime locations in general and a developed expertise in the mathematics and technology of geo-spatial mapping. The result is that while there are infrequent studies of the topic, the studies that are done are authoritative and reliable. The most frequently studied programs are methadone treatment centers which are ambulatory outpatient programs.³

The research results do not support the belief that substance abuse treatment centers are associated with higher crime rates or neighborhood risk. The major factor affecting crime rates is general socio-economic conditions.⁴ There are higher crime rates around some specific locations. These include pawnshops and convenience stores where money is obtainable, bars where alcohol and persons meet, and preferred crime locations like areas around subway stations. Because methadone treatment centers have been located in lower socio-economic locations, the centers have become publically associated with the higher crime rates in such areas even though the centers are not a source of the crime.

Moreover, these studies usually use methadone treatment programs. A residential detoxification program is substantively different from a methadone program. Detoxification treatment programs are not associated with money or alcohol, have staff that monitor local surroundings, have clients whose criminal behavior, if they had any, has declined because they are in treatment, and typically provide medications that impact the addiction so that persons attending the treatment center have lower motivation to undertake illegal activities while receiving treatment there.

In general there is a substantial body of literature that shows that persons attending treatment programs commit fewer crime. These persons may have previously committed crimes, however, while attending treatment they are not found to be a crime-prone population.^{5,6}

Despite the data showing a lack of relationship, there is widespread perception that “drug treatment” programs are accompanied by higher crime rates.⁷ The following material briefly

³ One reason there is more information about methadone clinics is because there are many methadone clinics. According to data from the Substance Abuse and Mental Health Services Administration (SAMHSA) there were 1,137 methadone maintenance programs on March 31, 2010. See retrieved on 8-16-2012 from <http://www.samhsa.gov/data/DASIS/2k10nssats/NSSATS2010Tb12.3.htm>

⁴ For example, Andresen concluded that “In particular, high unemployment (social disorganization theory) and the presence of young populations (routine activity theory) are the strongest predictors of criminal activity.” See Andresen, M. A. (2006). *A spatial analysis of crime in Vancouver, British Columbia: A synthesis of social disorganization and routine activity*, *Canadian Geographer*, Vol. 50, Issue 4: pp. 487–502. Retrieved on 8-16-2012 from <http://onlinelibrary.wiley.com/doi/10.1111/j.1541-0064.2006.00159.x/abstract> Can be purchased from journal.

⁵ Justice Policy Institute (2008 January), *Substance Abuse Treatment and Public Safety* Washington, D.C. Retrieved on 8-16-2012 from <http://www.justicepolicy.org/research/1949>

⁶ See, for example, retrieved on 8-16-2012 from <http://international.drugabuse.gov/educational-opportunities/certificate-programs/methadone-research-web-guide/part-b/question-4-does-m>

comments on the articles in the bibliography. For readers that wish more information, the bibliography is annotated containing abstracts and other text from the article.

Comments on Articles Found

July 2012 work on medical marijuana dispensaries by UCLA

Funded by the National Institute on Drug Abuse (NIDA), the 2012 University of California at Los Angeles (UCLA) study of crime around medical marijuana dispensaries found “Consistent with previous work, variables measuring routine activities at the ecological level were related to crime. There were no observed cross-sectional associations between the density of medical marijuana dispensaries and either violent or property crime rates in this study.” In other words, the usual factors causing crime were found and the presence of a medical marijuana dispensing program was unrelated to crime.

2012 analysis by T&M Protection Resources

An unpublished report from the T&M Protection Resources studied crime incidents and the local impact associated with two residential substance abuse detoxification programs, one in Florida and one in New Jersey. No impact on local neighborhoods was found.

2012 article by Boyd et. al.

Funded by the Robert Wood Johnson Foundation, the work directly addresses crime and methadone treatment programs. Considered an authoritative study, it was been the subject of newspaper articles website postings.⁸ The study collected data on methadone treatment centers (MTCs) in Baltimore and crime patterns around MTCs were compared with crime patterns around 13 convenience stores, 12 residential points and 10 general medical hospitals. A precise GPS mapping methodology was used and the frequency of crimes within a set of 25 meter circles from these sites was measured.

Boyd simply lays out the possible relationships between crime and treatment centers.

“Three possible relationships could exist, and plausible theories support each relationship. MTCs could decrease neighborhood crime by treating opiate users who live nearby, thereby decreasing their risk of criminal behavior. MTCs could increase crime if they attract untreated or partially treated users into the neighborhood, thereby increasing the local density of people likely to commit crimes. Finally, MTCs could have no crime impact if neighborhood crime relates largely to other factors.”

⁸ For example, see Baltimore Sun story of May 4, 2012. Retrieved on 8-16-2012 from http://articles.baltimoresun.com/2012-05-04/news/bs-ed-methadone-20120504_1_methadone-clinics-fewer-crimes-fbi-uniform-crime-reports

After analyzing the Baltimore data, Boyd reported “There was no significant change in crime counts with increasing distance from MTCs or hospitals as indicated by non-significant values for parameter estimates of crime slopes. In contrast, there was a significant decrease in crime counts with increasing distance from convenience stores during both daytime and night-time.” In other words, crime decreased the farther the distance from the convenience store indicating that crime originated around convenience stores. In contrast, crime did not decrease around methadone treatment clinics, residential areas, or hospitals as distance from them increased, indicating they were not centers of crime. Boyd and her colleagues concluded that “Overall, our data show that MTCs are not a geographic focus of crime, thus providing both strong evidence to alleviate neighborhood concerns about the establishment and operation of MTCs and quantitative information to combat the stigma of methadone substitution treatment.”

2011 Taniguchi and Salvatore

This 2011 work in Philadelphia also directly studied the relationship between crime and treatment centers and found no connection between treatment programs and crime. They found that controlling for the socio-economic status (SES) of the area removed much of the assumed correlation of treatment centers and crime. Their residual statistical effects were hard to interpret since after the effect of SES was controlled for there was still a positive residual association between crime and treatment centers in high SES areas but a negative residual association in lower SES areas.

The opening of their conclusion states, “Drug and alcohol treatment facilities are widely thought to have negative impacts on the community in which they are located. That is, it is assumed that these facilities bring crime to the areas surrounding their location. The empirical basis for this assertion is tenuous at best. This analysis has not found a definitive relationship between treatment centers and crime.”

2011 study of Montreal and Vancouver

This 2011 Canadian study is reported on in separate articles by Ally and Lasnier. It found that there were no negative impacts on local neighborhoods.

2011 Salem Patch

This is a newspaper story about a zoning board hearing in Peabody, Massachusetts. Comments by police officers and the facts cited about calls for police services are similar to those made in the T&M Protection Resources study. The lead paragraph in the article states: “In the wake of a decision to appeal the methadone clinic decision, Salem Police Chief Paul Tucker and Peabody Police Chief Robert Champagne said methadone clinics don't risk public safety.”

It is probably the case that a review of newspaper accounts of zoning board hearings about substance abuse treatment centers would yield additional comments from local law enforcement officers.⁹

2007 Philadelphia work of McCord and Lassiter

McCord and Lassiter concluded that crime incidence was a two-factor process. First, the large background variable with a pervasive impact was the amount of “social disorganization” in an area and then, second, there were opportunity points such as bars, pawnshops and subway stations where more drug-related arrests took place. In McCord and Lassiter’s perspective, the general characteristics of the local region have a dominant effect on the incidence of crime in the region.

McCord and Lassiter studied ten specific places where crime occurred. The results in the following table show that crimes around inpatient residential substance abuse treatment centers were the lowest of the ten types of places studied.

Table 1: Places in Philadelphia where Crime Occurred and how Frequently Crimes Occurred in Relation to Distance from the Location, 2007.

Facility	Number of Crimes	0-400 ft	400-800 ft	800-1200 ft	1200-1600 ft
Pawnshop	30	7.19	4.71	3.32	2.26
Beer establishment	146	6.77	3.36	2.35	1.67
Halfway house	41	5.22	6.09	4.08	4.10
Cheque-cashing store	96	4.92	3.67	2.79	2.17
Subway station	49	4.58	2.47	1.86	1.48
Drug-treatment centres (outpatient)	20	3.61	4.72	4.93	3.21
Drug-treatment centres (combined)	34	2.77	3.59	4.13	3.15
Homeless shelter	39	2.51	2.83	2.92	2.31
State liquor store	53	2.50	1.89	1.82	1.88
Drug-treatment centres (residential)	14	1.32	1.74	2.63	2.26

Source: Table 2 McCord et. al. (2007), *Microspatial Analysis of Drug Markets...*

Note: For each facility, the table shows the number of that facility in Philadelphia, as well as the location quotient values for four concentric buffers expanding from the facility at 400 ft intervals. Values greater than 1 indicate a greater density of drug arrests than would be expected from a uniform distribution across the city. Values of 2, for example, indicate that the density of drug arrests is twice the uniform city rate. Drug treatment centres, both residential and outpatient, were combined in the ZIP model analysis. All three location quotient values (residential, outpatient, and combined) are shown here.

⁹ While not as extensive as the comments by Massachusetts police, a similar comment that “Calgary police say that methadone clinics within the city do not influence crime rates either up or down” can be found at, retrieved on 8-16-2012 from http://www.heroin-detox.org/calgary_methadone.htm

Crime around outpatient substance abuse centers was lower than crimes at five other sites: pawnshops, beer establishments, halfway houses, cheque-cashing stores, and subway stations.

The logic used by McCord and Lassiter is similar to the logic used in the 2012 Boyd *et. al.* study. This logic is at the heart of the conclusion that treatment centers are not a source of crime. The general problem is how to study crime at a particular location within a high crime area. The methodology to solve this question relies on precise measurements of the location of each crime occurring near the particular location. For example, 25 meters away, 25 to 50 meters away, 75 to 100 meters away etc.

The theoretical reasoning is that if crime rates are high next to the location and drop off as distance from the location increases, then the location is a crime center. If crime rates remain constant or increase as distance from the location increases, then location is not a crime center. The precise measurement of crime around a location is way of controlling for the fact that all locations may be in or near areas with high crime rates.

The necessity for this measurement also indicates why such studies are infrequent. Easier to do studies of crime using data from zip codes, census tracts, or even block- level data are not precise enough.

In the Table above, the data for the top five places: pawnshops, beer establishments, halfway houses, cheque-cashing stores, and subway stations; shows that crime drops off the farther you go from one of these five location types indicating the location itself is a crime center. In contrast, crime increases the farther you go from an outpatient substance abuse center indicating the center is not a source of the crime.

As shown in the table, a residential treatment program had the lowest crime rates of any of the locations studied.

Below is an annotated bibliography of relevant studies found. The articles are presented in order of publication with the most recent ones appearing first. Summary or illustrative information is quoted from each article so readers have the article's major conclusions in the authors' own words.

**Annotated Bibliography relating to Crime around
Substance Abuse Treatment Centers**

Kepple, N. J., & Freisthler, B. (2012, July), *Exploring the ecological association between crime and medical marijuana dispensaries*. Journal of Studies on Alcohol and Drugs, 73(4), 523-530. Abstract Retrieved on 8-16-2012 from [http://www.jsad.com/jsad/article/Exploring the Ecological Association Between Crime and Medical Marijuana Di/4705.html](http://www.jsad.com/jsad/article/Exploring%20the%20Ecological%20Association%20Between%20Crime%20and%20Medical%20Marijuana%20Di/4705.html). Can be purchased from journal.

“Methods: An ecological, cross-sectional design was used to explore the spatial relationship between density of medical marijuana dispensaries and two types of crime rates (violent crime and property crime) in 95 census tracts in Sacramento, CA, during 2009. Spatial error regression methods were used to determine associations between crime rates and density of medical marijuana dispensaries, controlling for neighborhood characteristics associated with routine activities.

Results: Violent and property crime rates were positively associated with percentage of commercially zoned areas, percentage of one-person households, and unemployment rate. Higher violent crime rates were associated with concentrated disadvantage. Property crime rates were positively associated with the percentage of population 15–24 years of age. Density of medical marijuana dispensaries was not associated with violent or property crime rates.

Conclusions: Consistent with previous work, variables measuring routine activities at the ecological level were related to crime. There were no observed cross-sectional associations between the density of medical marijuana dispensaries and either violent or property crime rates in this study.”

T&M Protection Resources, (2012, February 10), *Public Safety Impact Assessment*, A Report prepared for Cuddy & Feder LLP, 230 Park Avenue, Suite 440, New York, NY 10169. Not available on the internet.

T&M Protection Resources studied crime incidents and the local impact associated with two residential substance abuse detoxification programs, one in Florida and one in New Jersey, and reviewed records of local agencies through conducting interviews with local officials and studying local records.

For example, the local records studied included:

- A sampling of internal incident reports from both the Lake Worth and Stirling facilities;

- An Event Summary of calls for service to the Palm Beach County Sheriff's Office for the 3 year time frame beginning on September 1, 2008 and ending August 31, 2011, that gives the incident location as the Lake Worth Sunrise facility (3185 Boutwell Rd.);
- Twenty-five (25) police reports prepared by the Palm Beach County Sheriff's Office as generated by the above calls for service;
- A summary of the total number of calls for service to the Palm Beach County Fire Rescue for the 3 year time frame beginning on September 1, 2008 and ending August 31, 2011, that gives the incident location as the Lake Worth Sunrise facility (3185 Boutwell Rd.);
- A summary of the calls for service to the Long Hill Township Police Department for the time frame beginning on September 1, 2009 and ending November 15, 2011, that gives the incident location as the Stirling facility (1272 Long Hill Rd.);
- Seventy-six (76) police general complaint reports prepared by the Longhill Township Police Department as generated by the above calls for service;
- A summary of the calls for service to the White Plains emergency response agencies that gives the incident location as the former Nathan Miller Nursing Home site located at 37 DeKalb Avenue, and
- Letters from neighboring community members

T&M Protection Resources concluded:

“None of the public safety officials interviewed by T&M identified Sunrise [the detoxification center studied] as a drain on municipal resources that would diminish the capabilities of their agencies to provide necessary services to other locations within the community.

The statements by each public safety official interviewed indicating that the existing Sunrise facilities are not a source of crime or disorderly behavior in the communities in which they exist or a drain on municipal resources are supported by the calls for service data and available police reports we reviewed and analyzed.

The neighbors interviewed and the letters reviewed by T&M provided an image of Sunrise Detox Centers as good, quiet neighbors. One neighboring couple in Stirling (adjoining property) told us they considered Sunrise to be “great neighbors” and that other than staff coming and going, they don't see or hear anyone from the facility. Another neighbor in Stirling indicated that the Sunrise facility is self-contained and has not impacted negatively on community public safety. This neighbor offered he would “rather have them (Sunrise) as a neighbor

than a school.” These statements are strong evidence that the Sunrise facility is not a source of crime or disorderly behavior. “

Boyd, S. et. al. (2012), *Use of a ‘microecological technique’ to study crime incidents around methadone maintenance treatment centers*, *Addiction*, Article first published online: 30 APR 2012. Also published in Vol. 107, Issue 9, pp. 1632–1638, September 2012. Abstract available at, retrieved on 8-15-2012 from, <http://onlinelibrary.wiley.com/doi/10.1111/j.1360-0443.2012.03872.x/abstract> Can be purchased from journal.

“Aims Concern about crime is a significant barrier to the establishment of methadone treatment centers (MTCs). Methadone maintenance reduces crime among those treated, but the relationship between MTCs and neighborhood crime is unknown. We evaluated crime around MTCs.

Setting Baltimore City, MD, USA.

Participants We evaluated crime around 13 MTCs and three types of control locations: 13 convenience stores (stores), 13 residential points and 10 general medical hospitals.

Measures We collected reports of Part 1 crimes from 1 January 1999 to 31 December 2001 from the Baltimore City Police Department.

Design Crimes and residential point locations were mapped electronically by street address (geocoded), and MTCs, hospitals and stores were mapped by visiting the sites with a global positioning satellite (GPS) locator. Concentric circular ‘buffers’ were drawn at 25-m intervals up to 300m around each site. We used Poisson regression to assess the relationship between crime counts (incidents per unit area) and distance from the site.

Findings There was no significant geographic relationship between crime counts and MTCs or hospitals. A significant negative relationship ... existed around stores in the daytime (7 am–7 pm), indicating higher crime counts closer to the stores. We found a significant positive relationship around residential points during daytime ... and at night ... indicating higher crime counts further away.

Conclusions Methadone treatment centers, in contrast to convenience stores, are not associated geographically with crime.”

Taniguchi T., & Salvatore, C. (2011, May), *Exploring the relationship between drug and alcohol treatment facilities and violent and property crime: A socioeconomic contingent relationship*. *Security Journal* advance online publication, 2 May 2011; doi: 10.1057/sj.2011.8. Abstract available at, retrieved on 8-15-2012 from <http://www.palgrave-journals.com/sj/journal/v25/n2/abs/sj20118a.html> Can be purchased from journal.

“Siting of drug and alcohol treatment facilities is often met with negative reactions because of the assumption that these facilities increase crime by attracting drug users (and possibly dealers) to an area. This assumption, however, rests on weak empirical footings that have not been subjected to strong empirical analyses. Using census block groups from Philadelphia, PA, it was found that the criminogenic impact of treatment facilities in and near a neighborhood on its violent and property crime rates may be contingent on the socioeconomic status (SES) of the neighborhood.

Paying attention to both the density and proximity of facilities in and around neighborhoods, results showed that the criminogenic impact of treatment facilities depended largely on neighborhood SES. Under some conditions more treatment facilities nearby was associated with lower crime. Reasons why the presumed criminogenic impact of treatment facilities appears only under some conditions were suggested.” Taniguchi and Salvatore also have an informative three-page bibliography.

Zorabedian, J. (2011, January 1), *Area Police Chiefs — Meth Clinics Don't Increase Crime Salem Patch*, Retrieved on 8-16-2012 from <http://saalem.patch.com/articles/area-police-chiefs-meth-clinics-dont-up-crime>

“Salem Police Chief Paul Tucker and Peabody Police Chief Robert Champagne said methadone clinics don't risk public safety...Salem Chief of Police Paul Tucker said Monday there is no evidence that methadone clinics increase crime, despite objections by some members of the community to the contrary... Beyond that, Tucker said he is aware of no evidence of increased crime surrounding clinic operations in nearby communities.

A survey of police departments that interact with methadone clinics in Lynn and Chelsea showed "a few minor police related issues, but most said there were no problems associated with the clinic operations," according to Tucker's letter.

Tucker told Salem Patch there is no appreciable threat to children from patients at methadone clinics.

"I don't have any information about kids being grabbed or approached," Tucker said. "In limited research, we didn't see any of that."

A record of police calls to a clinic operated by CSAC in Chelsea, and two methadone clinics operated in Lynn by other outfits, appears to back up the contention that the clinics don't increase crime.”

Ally M.A, et. al. (2011, May-June), *The impact of opening a heroin-assisted treatment clinic on the surrounding neighborhood*, Can J Public Health, 102(3):183-7. Abstract available at, retrieved on 8-15-2012 from <http://www.ncbi.nlm.nih.gov/pubmed/21717665> Can be purchased from journal.

Lasnier, B. et. al. (2010), *A heroin prescription trial: Case studies from Montreal and Vancouver on crime and disorder in the surrounding neighbourhoods*. The International Journal of Drug Policy, 21(1), 28-35. Abstract available at, retrieved on 8-15-2012 from [http://www.ijdp.org/article/S0955-3959\(09\)00063-2/abstract](http://www.ijdp.org/article/S0955-3959(09)00063-2/abstract) Can be purchased from journal.

“This study evaluates whether the instauration of a heroin prescription trial ('NAOMI') generated an impact on the occurrence of crime and disorder in surrounding areas. The clinical trial was initiated in Vancouver and Montreal in 2005, with the aim of assessing the benefits of heroin-assisted treatment (HAT) in Canada. While experiences from other jurisdictions where HAT trials have been implemented clearly demonstrate substantial crime reduction effects for trial participants, there is overall concern that HAT clinics - similar to other interventions aiming at problematic street drug users - may induce a 'honeypot' effect, leading to increases in crime and/or disorder problems in the vicinity of interventions. It has been argued that HAT clinics will attract undesirable behaviour associated with cultures of street drug use and thereby produce negative impacts on the community.

This study examined the incidence of crime and disorder in the Vancouver and Montreal sites before and during the NAOMI trial (2002-2006), using police calls for service and arrest data.

Data were analysed by autoregression analyses. The analysis suggested that most indicators remained stable during the pre- and implementation phase of the NAOMI trial in both sites.

While the attribution of observed crime and disorder trends to the specific clinical interventions in Montreal and Vancouver is difficult and many extrinsic factors may play a role, this study has not generated any clear evidence from institutional police data to suggest increases or decreases in community-based problems associated with HAT programs in Canada.

McCord, E. and Ratcliffe, J. (2007), *A Micro-Spatial Analysis of the Demographic and Criminogenic Environment of Drug Markets in Philadelphia*, The Australian And New Zealand Journal of Criminology, Vol. 40, No. 1 pp. 43–63. Abstract available at, retrieved on 8-15-2012 from, <http://anj.sagepub.com/content/40/1/43.abstract> Can be purchased from journal.

“One of the different features of this study was the combination of social demographic and opportunity-related facilities to predict the location and size of drug markets. When explored at the city level, the social disorganisation variables appeared to respond more in the manner expected from theory. Yet we know from the location quotient analysis that there is clustering around opportunity-related, criminogenic locations. The spatial lag variable reinforces the notion from the location quotient analysis that drug arrests cluster in Philadelphia. The significance and high z value for this variable indicates that areas with high numbers of drug arrests are likely to be surrounded by other high drug arrest areas. The most likely explanation is that not all opportunity facilities within a category are as bad as each other.

When aggregated to the city level, facilities such as beer establishments, pawnshops, and subway stations show evidence of drug arrest clustering. In reality, it is likely that there are good and bad liquor establishments, good and bad pawnshops, and subway stations that are located in areas unlikely to have drug markets. When concurrently analysed within the ZIP regression model, the influence of criminogenic locations (except beer establishments) is overshadowed by the greater consistency of demographic variables as predictors of drug market arrests across the city. The strength and importance of social disorganisation as the driving mechanism for the development of drug markets has been reinforced by this study.”

Boyd, S. et. al. (2007, Summer), *Use of a “Microecologic Technique” to Study Crime Around Substance Abuse Treatment Centers*, *Social Science Computer Review*, Vol. 25 No. 2. pp. 163–173. Abstract available at, retrieved on 8-15-2012 from, <http://ssc.sagepub.com/content/25/2/163.abstract?rss=1> Can be purchased from journal.

This is a methodological article and describes the general techniques later used in the Boyd *et. al.* 2012 article. This 2007 document does not contain research findings resulting from an application of the geocoding methodology.

“Whether substance abuse treatment centers affect neighborhood crime is hotly debated. Empirical evidence on this issue is lacking because of the difficulty of distinguishing the crime effect of treatment centers in high-crime areas, the inability to make before-and-after comparisons for clinics founded before computerized crime data, and the need for appropriate control sites. The authors present an innovative method (without an actual data analysis) to overcome these challenges. Clinic addresses and crime data are geocoded by street address. Crimes are counted within concentric-circular, 25-meter “buffers” around the clinics. Regression analyses are used to calculate the “crime slope” β among the buffers. A negative β indicates more crimes closer to the site. A similar process is used to evaluate crimes around control sites: convenience stores, hospitals, and residential points. This innovative technique provides valid empirical evidence on crime around substance abuse treatment centers.”

2003 PricewaterhouseCoopers report for City of Oshawa, Canada

There are multiple newspaper accounts that in 2003 PricewaterhouseCooper did a report for the City of Oshawa studying crime around 11 methadone treatment clinics in Ontario and “found they had no impact on the surrounding crime rate. Unknown to neighbours, many Ontario pharmacies already dispense vast quantities of methadone but don't offer the counselling services that might mitigate its effects.” See new article retrieved on 8-16-2012 from <http://www.theglobeandmail.com/news/toronto/whats-wrong-with-a-new-methadone-clinic-on-a-quiet-toronto-street/article585418/>

A copy of the report is difficult to obtain since it is not on the City of Oshawa and PricewaterhouseCooper websites.

A Representative Sample of the 50+ Studies on the Impacts of Group Homes and Halfway Houses

Over 50 scientific studies have been conducted to determine if the presence of a group home or halfway house has any effect on property values, neighborhood turnover, or neighborhood safety. No matter which methodology has been used, every study has concluded that group homes not clustered on the same block have no effect on property values, even for the houses next door, nor on the marketability of nearby homes, neighborhood safety, neighborhood character, parking, traffic, public utilities, nor municipal services. The following studies constitute a representative sample. Few studies have been conducted recently simply because this issue has been studied so exhaustively and the findings have been so consistent that they generate no negative impacts.

D. Lauber, *Impacts on the Surrounding Neighborhood of Group Homes for Persons With Developmental Disabilities*, (Governor's Planning Council on Developmental Disabilities, Springfield, Illinois, Sept. 1986) (found no effect on property values or turnover due to any of 14 group homes for up to eight residents; also found crime rate among group home residents to be, at most, 16 percent of that for the general population).

Christopher Wagner and Christine Mitchell, *Non-Effect of Group Homes on Neighboring Residential Property Values in Franklin County* (Metropolitan Human Services Commission, Columbus, Ohio, Aug. 1979) (halfway house for persons with mental illness; group homes for neglected, unruly male wards of the county, 12-18 years old).

Eric Knowles and Ronald Baba, *The Social Impact of Group Homes: a study of small residential service programs in first residential areas* (Green Bay, Wisconsin Plan Commission June 1973) (disadvantaged children from urban areas, teenage boys and girls under court commitment, infants and children with severe medical problems requiring nursing care, convicts in work release or study release programs).

Minnesota Developmental Disabilities Program, *Analysis of Minnesota Property Values of Community Intermediate Care Facilities for Mentally Retarded (ICF-MRs)* (Dept. of Energy, Planning and Development 1982) (no difference in property values and turnover rates in 14 neighborhoods with group homes during the two years before and after homes opened, as compared to 14 comparable control neighborhoods without group homes).

Dirk Wiener, Ronald Anderson, and John Nietupski, *Impact of Community-Based Residential Facilities for Mentally Retarded Adults on Surrounding Property Values Using Realtor Analysis Methods*, 17

Education and Training of the Mentally Retarded 278 (Dec. 1982) (used realtors' "comparable market analysis" method to examine neighborhoods surrounding eight group homes in two medium-sized Iowa communities; found property values in six subject neighborhoods comparable to those in control areas; found property values higher in two subject neighborhoods than in control areas).

Montgomery County Board of Mental Retardation and Developmental Disabilities, *Property Sales Study of the Impact of Group Homes in Montgomery County* (1981) (property appraiser from Magin Realty Company examined neighborhoods surrounding seven group homes; found no difference in property values and turnover rates between group home neighborhoods and control neighborhoods without any group homes).

Martin Lindauer, Pauline Tung, and Frank O'Donnell, *Effect of Community Residences for the Mentally Retarded on Real-Estate Values in the Neighborhoods in Which They are Located* (State University College at Brockport, N.Y. 1980) (examined neighborhoods around seven group homes opened between 1967 and 1980 and two control neighborhoods; found no effect on prices; found a selling wave just before group homes opened, but no decline in selling prices and no difficulty in selling houses; selling wave ended after homes opened; no decline in property values or increase in turnover after homes opened).

L. Dolan and J. Wolpert, *Long Term Neighborhood Property Impacts of Group Homes for Mentally Retarded People*, (Woodrow Wilson School Discussion Paper Series, Princeton University, Nov. 1982) (examined long-term effects on neighborhoods surrounding 32 group homes for five years after the

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homes were opened and found same results as in Wolpert, *infra*).

Julian Wolpert, *Group Homes for the Mentally Retarded: An Investigation of Neighborhood Property Impacts* (New York State Office of Mental Retardation and Developmental Disabilities Aug. 31, 1978) (most thorough study of all; covered 1570 transactions in neighborhoods of ten New York municipalities surrounding 42 group homes; compared neighborhoods surrounding group homes and comparable control neighborhoods without any group homes; found no effect on property values; proximity to group home had no effect on turnover or sales price; no effect on property value or turnover of houses adjacent to group homes).

Burleigh Gardner and Albert Robles, *The Neighbors and the Small Group Homes for the Handicapped: A Survey* (Illinois Association for Retarded Citizens Sept. 1979) (real estate brokers and neighbors of existing group homes for the retarded, reported that group homes had no effect on property values or ability to sell a house; unlike all the other studies noted here, this is based solely on opinions of real estate agents and neighbors; because no objective statistical research was undertaken, this study is of limited value).

Zack Cauklins, John Noak and Bobby Wilkerson, *Impact of Residential Care Facilities in Decatur* (Macon County Community Mental Health Board Dec. 9, 1976) (examined neighborhoods surrounding one group home and four intermediate care facilities for 60 to 117 persons with mental disabilities; members of Decatur Board of Realtors report no effect on housing values or turnover).

Suffolk Community Council, Inc., *Impact of Community Residences Upon Neighborhood Property Values* (July 1984) (compared sales 18 months before and after group homes opened in seven neighborhoods and comparable control neighborhoods without group homes; found no difference in property values or turnover between group home and control neighborhoods).

Metropolitan Human Services Commission, *Group Homes and Property Values: A Second Look* (Aug. 1980) (Columbus, Ohio) (halfway house for persons

with mental illness; group homes for neglected, unruly male wards of the county, 12–18 years old).

Tom Goodale and Sherry Wickware, *Group Homes and Property Values in Residential Areas*, 19 Plan Canada 154–163 (June 1979) (group homes for children, prison pre-parolees).

City of Lansing Planning Department, *Influence of Halfway Houses and Foster Care Facilities Upon Property Values* (Lansing, Mich. Oct. 1976) (No adverse impacts on property values due to halfway houses and group homes for adult ex-offenders, youth offenders, alcoholics).

Michael Dear and S. Martin Taylor, *Not on Our Street*, 133–144 (1982) (group homes for persons with mental illness have no effect on property values or turnover).

John Boeckh, Michael Dear, and S. Martin Taylor, *Property Values and Mental Health Facilities in Metropolitan Toronto*, 24 The Canadian Geographer 270 (Fall 1980) (residential mental health facilities have no effect on the volume of sales activities or property values; distance from the facility and type of facility had no significant effect on price).

Michael Dear, *Impact of Mental Health Facilities on Property Values*, 13 Community Mental Health Journal 150 (1977) (persons with mental illness; found indeterminate impact on property values).

Stuart Breslow, *The Effect of Siting Group Homes on the Surrounding Environs* (1976) (unpublished) (although data limitations render his results inconclusive, the author suggests that communities can absorb a “limited” number of group homes without measurable effects on property values).

P. Magin, *Market Study of Homes in the Area Surrounding 9525 Sheehan Road in Washington Township, Ohio* (May 1975) (available from County Prosecutors Office, Dayton, Ohio). (found no adverse effects on property values.) ■

Compiled by Daniel Lauber, AICP, Planner/Attorney

Planning/Communications

7215 Oak Avenue ☞ River Forest, IL 60305 ☎ 708/366-5200
<http://planningcommunications.com>



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Counteracting 'Not in My Backyard': The Positive Effects of Greater Occupancy within Mutual-help Recovery Homes

Leonard A. Jason, David R. Groh, Megan Durocher, Josefina Alvarez, Darrin M. Aase, and Joseph R. Ferrari
DePaul University

Abstract

Group homes sometimes face significant neighborhood opposition, and municipalities frequently use maximum occupancy laws to close down these homes. This study examined how the number of residents in Oxford House recovery homes impacted residents' outcomes. Larger homes (i.e., 8 or more residents) may reduce the cost per person and offer more opportunities to exchange positive social support, thus, it was predicted that larger Oxford Houses would exhibit improved outcomes compared to smaller homes. Regression analyses using data from 643 residents from 154 U.S. Oxford Houses indicated that larger House size predicted less criminal and aggressive behavior; additionally, length of abstinence was a partial mediator in these relationships. These findings have been used in court cases to argue against closing down larger Oxford Houses. 125 words

Keywords

Oxford Houses; group homes; 'Not in My Backyard'; substance abuse recovery

Group Homes and 'NIMBY'

Since the 1960's, many institutional settings have been replaced with community-based programs for persons with mental illnesses, developmental disabilities, and substance abuse disorders (Michelson & Tepperman, 2003). An example of a community-based, mutual-aid recovery home for individuals dealing with substance abuse problems is Oxford House (OH; Jason, Ferrari, Davis, & Olson, 2006a). Oxford House has grown since 1975 to over 1,200 homes across the U.S., 30 in Canada, and eight in Australia. All homes are single-sex (i.e., men or women-only), and some women Houses allow residents' minor children. Individuals are typically referred to Oxford Houses by treatment facilities or through word of mouth, and new residents are admitted based on an 80% House vote. Regarding the operation and maintenance of Oxford Houses, no professional staff is involved, enabling residents to create their own rules for communal governance (Oxford House, 2002). Residents are held accountable to abstain from substance use or disruptive behavior; find and maintain a job; complete chores; and pay for rent, food, and utilities. Failure to comply with these rules along with any disruptive/criminal behavior or substance use is grounds for expulsion, and all rules are enforced by the house residents; as long as rules are followed, residents are allowed to stay indefinitely. In addition, residents are required to hold house positions (e.g., president or treasurer) elected for six-month intervals by 80% majority vote. A randomized study found that at two-year follow up, the Oxford House participants had lower substance use (31% vs. 65%, respectively), higher monthly income (\$989 vs. \$440), and lower

Address correspondence to the first author Leonard A. Jason at the Center for Community Research, 990 W. Fullerton Ave, Suite 3100, DePaul University, Chicago, IL, USA, 60614. Phone: 773-325-2018. Fax: 773-325-4923. ljason@depaul.edu.

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incarceration rates (3% vs. 9%) compared to usual-aftercare participants (Jason, Olson, Ferrari, & Lo Sasso, 2006b).

There are numerous theoretical reasons why group homes such as Oxford Houses should be located in residential areas (Seymour, no date). For example, group homes in residential communities may allow for community integration, an active ingredient in the treatment of substance abuse and many other disorders. Group homes might also serve to educate the community about stigmatized populations (e.g., people with substance abuse problems, developmental disabilities, or mental illnesses). Finally, group homes can be a deterrent to crime because residents are generally required to maintain positive behaviors (e.g., sobriety) and are often vigilant. The Oxford House national organization dictates that new Houses be established in safe, low crime, economically stable neighborhoods with minimal opportunities for relapse (Oxford House, 2002). Regardless of geographic location, Oxford Houses are typically situated in low-drug, low-crime communities in which residents have access to resources and amenities that enable autonomy and substance-free lifestyles (Ferrari, Jason, Blake, Davis, & Olson; 2006a; Ferrari, Groh, Jason, & Olson, 2007).

Nonetheless, group homes in residential areas sometimes face significant opposition (Zippay, 1997), with neighbors' concerns relating to property values, traffic, noise, inappropriate behavior (Cook, 1997), and safety (Schwartz & Rabinovitz, 2001; Solomon & Davis, 1984). This phenomenon is commonly referred to as the 'Not in My Backyard' syndrome (NIMBY; e.g., Dear, 1992; Kim, 2000; Low, 1993). Oxford Houses are certainly not immune to NIMBY; for instance, a North Carolina Oxford House was protested and vandalized by neighbors before it opened. In addition to neighborhood opposition, municipalities employ several techniques to legally regulate, restrict, or even close down group homes (Gathe, 1997). To start out with, cities sometimes decline to provide the required license to prevent the opening of a recovery home. Other regulatory tactics involve density limitations, which may include the Fair Housing Act and Landlord-Tenant Laws (e.g., group homes cannot remove substance-using or disruptive residents without a court order), prohibiting more than one recovery home within a certain radius, and maximum occupancy rules, the focus of the current investigation (i.e., too many unrelated people living in the same dwelling).

Despite the resistance faced by these homes, group homes actually have very little impact on their surrounding neighborhoods and generally blend into the community (Cook, 1997). Community members frequently expect to have more problems with group homes than really occur (Cook; McConkey et al., 1993), and residential facilities do not tend to negatively affect public safety (Center for Community Corrections, 2002). In fact, contrary to popular fears, literature reviews suggest that these settings may actually increase property values in their neighborhoods (Aamodt & Chiglinksy, 1989; Center for Community Corrections). Similar patterns have been demonstrated for Oxford House recovery homes. Local communities reported Oxford House residents blended well into the neighborhood and made good neighbors (Jason, Roberts, & Olson, 2005). The majority of Oxford House neighbors interviewed had either gained resources, friendships, or a greater sense of security following contact with the Oxford House residents. Furthermore, no evidence of property devaluation was found for neighborhoods containing Oxford Houses; community members who knew of the Oxford House actually saw an increase in property value over an average of 3 years.

Several studies investigated factors that influence the reception of group homes in residential areas. The Center for Community Corrections (2002) interviewed community members and found that neighbor acceptance of community justice facilities and halfway homes was enhanced by an engaged public, a well-run program with access to substance

abuse treatment and job development, community input and continuing involvement, discernible contributions to the community, and a careful assessment of the community prior to entry. Additionally, the more a facility resembles the neighborhood in which it resides and the more autonomous the facility residents, the more likely residents will integrate into the community (Makas, 1993). Further, research indicates that closer proximity (Gale, Ng, & Rosenblood, 1988) and increased contact (Butterfield, 1983) between community members and group home residents has a positive effect on the reception of the homes. Jason and colleagues (2005) revealed that residents who lived adjacent to an Oxford House, as opposed to a block away, had significantly more positive attitudes towards the need to provide a supportive community environment for those in recovery, allow substance abusers in a residential community, and the willingness to have a self-run home on their block.

In attempt to reduce the amount and level of concern related to Oxford Houses and other group homes, educational efforts might be developed such as documenting the effects of group homes on property values, having facility residents maintain friendly rapport with neighbors, and residents becoming more familiar with their surroundings in order to address neighbors' fears (Cook, 1997). For example, staff at a residential facility implemented educational measures to inform the neighborhood about the opening of the home (Schwartz & Rabinovitz, 2001). Significant interactions were found between neighbors visiting these facilities and decreases in dissatisfaction. Finally, it has been suggested that researchers should focus on developing ways that the public can become more familiar with halfway houses and other group homes (Center for Community Corrections, 2002).

Group Home Size

In order to implement educational efforts, this research study focused on one NIMBY threat to group homes: house size. While very little research exists on this topic, one study (Segal & Darwin, 1996) found that within sheltered care facilities for individuals with mental illness, although home size did not relate to levels of management, larger homes were less restrictive in their rules and procedures. Larger homes also spent more on program activities for their residents, and their residents were more involved in facility-based activities. It is possible that these greater occupancy facilities were able to provide more of an opportunity for residents to develop a sense of community. However, this type of sheltered care facility is fairly different from Oxford House recovery homes.

It is suggested that a sufficient number of residents in each home might be a necessary component in the effectiveness of Oxford House through the mechanism of social support. Individuals recovering from addictions should be surrounded by a community in which they feel they belong and are able to obtain sobriety goals (Jason & Kobayashi, 1995). Oxford House residents rated "fellowship with similar peers" the most important aspect of living in an Oxford House (Jason, Ferrari, Dvorchak, Groessl, & Malloy, 1997). The Oxford House experience also provides residents with abstinent-specific social support networks consisting of other residents in recovery (Flynn, Alvarez, Jason, Olson, Ferrari, & Davis, 2006). Individuals who spent more time in an Oxford House had a greater sense of community with others in recovery, less support for substance use (Davis & Jason, 2005), and more support for abstinence (Majer, Jason, Ferrari, Venable, & Olson, 2002). Oxford Houses with more residents might have greater opportunities for members to provide and receive these vital social resources. It is believed that larger Houses will promote recovery through their ability to promote larger (Zywiak, Longabaugh, & Wirtz, 2002), more supportive social networks (MacDonald, 1987) that include sober others in recovery (Hawkins & Fraser, 1987; Zywiak et al.), constructs linked to sober living.

In addition to increased levels of social support, there are other hypothesized benefits to larger Oxford Houses. For instance, rent may be lower in larger homes because residents can

split the costs. Additionally, having more residents allows members to learn from each other and increases opportunities for diversity. In this study, we examined the effects of House size on criminal and aggressive behaviors among Oxford House residents, two areas of significant concern to communities containing group homes (Cook; Schwartz & Rabinovitz, 2001; Solomon & Davis, 1984). Oxford House has been found to promote positive outcomes regarding both criminal activity (Jason et al., 2006b; Jason, Davis, Ferrari, & Anderson, 2007a; Jason, Olson, Ferrari, Majer, Alvarez, & Stout, 2007b) and self-regulation (Jason et al., 2007b), which relates to aggression. Therefore, it was hypothesized in the present study that residents of larger Houses (with 8 or more members) would exhibit fewer criminal and aggressive behaviors as measured by the *Global Appraisal of Individual Needs-Quick Screen* than residents of smaller Houses.

Method

Procedure

Data included in the present study were from the baseline data collection (completed between December 2001 and April 2002) of a community evaluation of residents living in one of 213 U.S. Oxford Houses (see Jason et al., 2007a for details). Participants from this Institutional Review Board-approved study were recruited and surveyed using two strategies. The majority of participants ($n = 797$) were recruited through an announcement published in the monthly Oxford House newsletter that provided contact information for the study. We then contacted Oxford Houses via letters to House Presidents, conducted follow-up phone calls to the Houses, and where possible, members of the research team arranged to visit Houses. Of the 189 Oxford Houses that were approached, 169 (89.4%) had at least one individual who agreed to participate in the study, and the average number of individuals per House choosing to participate in the study was 4.7. For the second method, 100 individuals were randomly selected to fill out the baseline questionnaires at an annual Oxford House Convention attended by 300. Analyses revealed no difference in demographic or outcome variables between the two recruitment groups.

In each case, the nature, purpose, and goals of the study were explained to the potential participants. As part of the consent process, staff members explained that participation was entirely voluntary and that withdrawal from the study was possible at any time. Fifteen dollar payments were made to participants following the survey. These data were gathered by research staff who primarily administered questionnaires in person to the participants. Some data were collected by telephone, which was often the case for those who had left Oxford House. No significant differences were found based on data collection method.

In addition, an environmental survey (assessing House size) was mailed to the House Presidents of all 213 Oxford Houses. No identifiable information about any House resident was requested, and confidentially was maintained for all data. Most often the survey was completed by the House President (60.2%) or another House officer (31.6%), such as the Secretary or Treasurer. The survey then was returned by mail, and a small package of coffee was subsequently sent to the House for participation. Pilot testing indicated that it would take less than 20 minutes to complete and mail the survey, which were collected over a four month period.

Participants

For this investigation, we only included participants from the 154 Houses for which we had data on House size, representing 72.3% of Houses in the larger study. On average, Houses had about 7 total members ($M = 7.1$, $SD = 2.0$, $Median = 7$), and Houses in this study ranged in size from 3–18 residents. Regarding geographic region within the U.S., 27.7% of Houses

were located in the West, 18.4% were in the Midwest and Texas, 28.3% were in the Northeast, and 25.7% were in the Southeast.

This present baseline sample consisted of 643 Oxford House residents, including 227 females (35.3%) and 416 males (64.7%). The sample was ethnically diverse, with 62.5% European American, 29.2% African American, 3.9% Hispanic/Latino, and 4.4% others. At baseline, the average age of the sample was 38.3 ($SD = 9.2$), and the average education level was 12.7 years ($SD = 2.0$). Regarding marital status, 50.4% were single or never married, 45.4% were divorced/widowed/separated, and 4.2% were married. With respect to employment, 67.4% reported being employed full-time, 14.2% part-time, 13.3% unemployed, and 5.1% retired or disabled, and the average monthly income of the sample was \$965 ($SD = 840$). The average participant had stayed in an Oxford House for 1.0 years ($SD = 1.4$). The mean length of sobriety was 1.7 years ($SD = 2.4$) for alcohol and 1.9 years ($SD = 3.2$) for illicit drugs. Regarding recent substance use, participants on average consumed alcohol on 2.3 days ($SD = 9.1$) and drugs on 5.1 days ($SD = 18.3$) in the past 90 days. Concerning legal status, 30% of participants were currently on probation, and 14% claimed that their entry into OH was prompted by the law. Regarding lifetime data, the average participant was charged with a crime 9.9 times ($SD = 14.0$) and were incarcerated a total of 15.9 months ($SD = 36.8$).

Measures

Baseline demographic information (e.g., gender, race, substance disorder typology) was obtained from items on the 5th Edition of the *Addiction Severity Index-lite* (*ASI*; McLellan et al., 1992). The *ASI* assesses common problems related to substance abuse: medical status, drug use, alcohol use, illegal activity, family relations, and psychiatric condition. The *ASI* has been used in a number of alcohol and drug use studies over the past 15 years and has been shown to have excellent predictive and concurrent validity (McLellan et al.).

The *Form-90* (Miller & Del Boca, 1994) was administered to obtain a continuous record of alcohol and drug consumption and intensity within a 90-day time span. This measure gathers information related to employment, health care utilization, incarceration, and alcohol and other drug use over a 90-day retrospective (which provides a reliable time frame for abstinence assessment; Miller & Del Boca).

The number of residents per Oxford House was determined using a brief version of a reliable environmental audit developed and utilized by Ferrari and colleagues (Ferrari et al., 2006a; Ferrari, Jason, Davis, Olson, & Alvarez, 2004; Ferrari, Jason, Sasser, Davis, & Olson, 2006b) for use with group recovery settings. This survey requested responses to forced choice and frequency items in a number of domains, including information about the House setting such as the percentage of residents in recovery from alcohol, drugs, and poly-substances, along with the number of inhabitants within a House. Other sections of this audit gathered information on the interior and immediate exterior House characteristics, amenities found within a 2-block radius of the House, and characteristics of the surrounding neighborhood.

The *Global Appraisal of Individual Needs-Quick Screen* (*GAIN-QS*; Dennis & Titus, 2000) is a self-report, clinical screening tool examining whether or not a psychological or substance abuse symptom has occurred in the past 12 months similar to the DMV-IV Axis I criteria. While the *GAIN-QS* is not a diagnostic tool, it has been utilized within clinical screening contexts to identify problem areas and psychological symptoms that warrant further explanation. For the purposes of this study, 2 indices from the *GAIN-QS* were used as the outcome variables measuring aggressive and criminal behaviors: *Conduct Disorder/*

Aggression Index (6 items; *Cronbach's alpha* = .78, *Mean Score* = 1.34) and *General Crime Index* (4 items; *Cronbach's alpha* = .69; *Mean Score* = .29).

Results

House Size and GAIN-QS Subscores

The average House size in this study was about 7 members ($M = 7.1$, *median* = 7), and because a pending court case attempted to make it illegal for Oxford Houses to house 8 or more residents, we decided to compare 7 or fewer members in a House (i.e., smaller Houses) with 8 or more residents of an Oxford House (i.e., larger Houses). *Regression analyses*¹ determined that this dichotomized House size variable significantly predicted the *GAIN-QS* subscales of *Conduct Disorder/Aggression*, $\beta = -.10$, $t(632) = -2.52$, $p = .01$, and *General Crime Index*, $\beta = -.10$, $t(634) = -2.44$, $p = .02$. House size accounted for 0.8% of the variance in *General Crime Index* scores and 1.9% of the variance in *Conduct Disorder/Aggression* scores. Larger Houses had fewer problems related to conduct disorder/aggression, and criminal activity. Smaller Houses had a *General Crime Index* mean score of 0.34 and a *Conduct Disorder/Aggression Index* mean score of 1.43, whereas the respective scores for larger Houses were 0.21 and 1.16 (lower scores indicate fewer problem symptoms in each area).

House Size and Demographic Analyses

Next, *one-way ANOVA* and *chi-square* analyses were run to determine whether large and small Houses (7 or less vs. 8 or more) differed on demographic variables. Results indicated that the groups only differed on one key demographic variable: larger House residents had been abstinent from drugs and alcohol longer than individual from smaller Houses, $F(1,637) = 4.42$, $p = .04$. Residents in smaller Houses had 298.1 ($SD = 458.6$) cumulative days of abstinence on average, compared to 379.5 ($SD = 476.5$) days for residents of larger Houses. This indicates that individual living in larger Houses maintained abstinence for about 81 days longer. Since larger Houses had significantly longer lengths of cumulative abstinence, we ran correlations to determine if this variable also related to the *GAIN-QS* subscale scores. Among participants for whom we have House size data, cumulative days sober did significantly and negatively correlate with the *GAIN-QS* subscales of *Conduct Disorder/Aggression*, $r(633) = -.26$, $p = .000$, and *General Crime Index*, $r(631) = -.30$, $p = .000$.

Mediational Analyses

We next examined whether the variables in the House size and *GAIN-QS* subscore regression analyses were only significant because individuals in larger Houses had been sober for longer periods of time. In order to evaluate this possibility, we utilized Baron & Kenny's (1986) framework for testing of mediation. In Baron & Kenny's model, the influence of variable A (the initial variable) on variable B (the outcome) may be explained by a third variable known as variable C (the process variable). Complete mediation occurs when variable A no longer affects B after C has been controlled. Partial mediation occurs when the path from variables A to B (the total effect) is diminished in total size but still different from zero after the mediating variable is controlled. The mediational model is a causal one; therefore, the mediator is presumed to bring about the outcome and not vice versa.

¹Although participants were nested within Oxford Houses, we decided not to focus on Hierarchical Linear Modeling results because we wanted to test for mediation, which can be done using regression but not HLM. However, we did run HLM analyses and found that House size (as a level 2 group variable) significantly predicted individually-assessed level 1 *General Crime Index* scores ($t[144] = -2.18$, $p = .03$) but not level 1 *Conduct Disorder/Aggression* scores ($t[144] = -1.17$, $p = .25$).

We used Baron & Kenney's (1986) framework to determine whether cumulative days sober mediated the relationship between House size and *Conduct Disorder/Aggression* (A = House size [7 or less vs. 8 or more], B = cumulative days sober, and C = *Conduct Disorder/Aggression*). As demonstrated earlier with linear regression analyses, House size significantly predicted *Conduct Disorder/Aggression*. House size also significantly predicted cumulative days sober (A→B; $\beta = .08$, $t[637] = 2.10$, $p = .04$; $r^2 = .007$), and cumulative days sober predicted *Conduct Disorder/Aggression* (B→C; $\beta = -.30$, $t[630] = -7.86$, $p = .000$; $r^2 = .089$). Finally, when both House size and cumulative days sober were put in the model predicting *Conduct Disorder/Aggression* (A and B→C), House size maintained significance, but less than earlier (House size: $\beta = -.08$, $t[628] = -2.11$, $p = .04$; cumulative days sober: $\beta = -.29$, $t[628] = -7.69$, $p = .000$; $r^2 = .096$). Therefore, House size is related to *Conduct Disorder/Aggression*, and cumulative abstinence is a partial mediator in this association. These two variables (i.e., House size and cumulative abstinence) explained almost 10% of the variance in *Conduct Disorder/Aggression* scores.

We again employed Baron & Kenney's (1986) framework to determine whether cumulative days sober mediated the relation between House size and *General Crime Index* (A = House size [7 or less vs. 8 or more], B = cumulative days sober, and C = *General Crime Index*). As reported earlier, House Size was a significant predictor of *General Crime Index*, and House Size significantly predicted cumulative days sober. Regarding new analyses, cumulative days sober predicted *General Crime Index* (B→C; $\beta = -.26$, $t[631] = -6.77$, $p = .000$; $r^2 = .068$). Finally, with both House size and cumulative days sober as predictors of *General Crime Index* (A and B→C), House size retained significance but less so than before (House Size: $\beta = -.08$, $t[630] = -2.04$, $p = .04$; cumulative days sober: $\beta = -.25$, $t[630] = -6.60$, $p = .000$; $r^2 = .074$). Thus, House size is related to *General Crime Index* scores, and cumulative sobriety is a partial mediator in this relationship. These two variables (i.e., House size and cumulative abstinence) explained more than 7% of the variance in *General Crime Index* scores.

Discussion

The objective of the present investigation was to examine how the number of residents in an Oxford House impacted outcomes related to aggression and crime among residents. Regression analyses supported our hypotheses that larger House size (i.e., 8 or more residents) would predict less criminal and aggressive behavior. However, an unexpected result was that length of abstinence was a significant mediator in these relationships. House size lost a fair amount of significance when the mediator of cumulative days sober was entered into the models predicting *GAIN* subscale scores, and the addition of cumulative sobriety to the models greatly increased the amount of variance explained. Cumulative sobriety partially explained the relationships between House size and *General Crime Index* and House size and *Conduct Disorder/Aggression*. Thus, greater House size leads to greater cumulative abstinence, which in turn leads to less criminal activity and aggression; however, House size does have some independent impact of its own on these outcomes. It is clear that having more residents in a House is beneficial to residents' recovery from alcohol and drug abuse.

These findings have important policy implications regarding the future of recovery homes. It is argued that local governments allow Oxford Houses immunity from maximum occupancy regulations due to the great need in many communities for these settings. It is very difficult for individuals lacking stable living environments to maintain a sober lifestyle following residential treatment (Milby, Schumacher, Wallace, Feedman, & Vuchinich, 1996). As the cost of housing continues to rise, many individuals leaving inpatient facilities are unable to find affordable housing. Without Oxford House or other recovery home options, former

addicts frequently have no choice but to return to their old negative environments and fall back into their pre-treatment habits, which frequently include antisocial activities such as substance use and criminal activity. Regardless of how successful a client has been in treatment, this progress can be reversed through residence in an environment that promotes crime and drug use (Polcin, Galloway, Taylor & Benowitz-Fredericks, 2004). As demonstrated in this study, a sufficient number of House residents is a factor in the ability of Oxford House to promote these outcomes that benefit local communities.

Furthermore, it is suggested that maximum occupancy regulations that apply to recovery homes are often based on false beliefs and fears. Neighbors often oppose recovery homes because they fear increased crime and violence (Cook, 1997; Schwartz & Rabinovitz, 2001; Solomon & Davis, 1984; Zippay, 1997), and in order to appease these residents, cities frequently use maximum occupancy laws to close the group homes (Gathe, 1997). This pattern is quite ironic given that the Houses being closed (i.e., larger homes) should actually give neighbors less reason for concern. It seems obvious that laws based on these misconceptions should be eliminated. Overall, Oxford Houses have positive (not negative) effects on local communities (Jason et al., 2005), and residents of larger Houses appear to be highly desirable community members (i.e., who engage in less criminal and aggressive behaviors).

This investigation provides one more step in the movement to improve the reception of Oxford Houses and other group homes in local communities. While second-order change alters the systems that cause the problems (Dalton, Elias, & Wanderman, 2001), 'Not in My Backyard' typically serves to inhibit this type of change. Changing the attitudes of mental health professionals, community members, and policy makers may break down the barriers to second-order change (Olson et al., 2002). Educational efforts along with successes in the court room may promote a more positive social climate and set legal precedents. Finally, researchers have argued that social scientists should explore ways that the public can become more familiar with residential facilities (Center for Community Corrections, 2002). We hope that these efforts and the efforts of other researchers, individuals in recovery, treatment providers, lawyers, and political activists are successful in reducing the opposition to group homes in residential areas.

Concerning limitations, our findings might not apply to other group homes or residential facilities, which can vary greatly in focus, procedures, setting, and size. For instance, a "large" Oxford House setting (i.e., greater than 7 members) might be very small in comparison to other residential settings, which may accommodate several dozen residents. It is actually possible in these cases that somewhat smaller settings are more effective. In addition, we were typically not able to collect data from all members within a House; thus, some Houses have more representation than others in this sample. Future studies in this area should acquire information from all members of a House if possible. Furthermore, data analyzed in this study were self-report; therefore, it may have been useful to obtain House size estimates using data from other sources such as Oxford House Inc., the national body that oversees Oxford Houses. Also, alcohol and drug use had little variability within this sample because all participants were recruited from Oxford Houses instead of treatment or detoxification centers (suggesting a later stage in recovery), and because residents caught using can be evicted. Perhaps future research assessing occupancy levels of recovery homes should consider a sample with more variability with regards to substance use. A final limitation is our use of regression analyses as opposed to Hierarchical Linear Modeling due to the tested nature of the data; however, we wanted to test the mediational model, which can be done using regression but not HLM. Nonetheless, future researchers assessing group home size may want to seriously consider the use of HLM.

In order to improve the reception of Oxford Houses in local communities and counteract the NIMBY syndrome, the Oxford House Research Team has provided expert testimony in court cases, sent information to legislators, disseminated research findings with policy implications, collaborated with community partners and state-level agencies, and worked with the media to change the image of recovery homes (see Jason, Davis, Ferrari, & Bishop, 2001). In particular, the DePaul University research team has been involved in several court cases over past several years on the behalf of Oxford Houses. Most recently, municipalities located in Kansas, Iowa, and North Carolina have attempted to close down Oxford Houses or similar recovery homes due to too many unrelated individuals living in one dwelling. Findings from the present study were used in these court cases, and at the present time, the Oxford House organization has won every court case.

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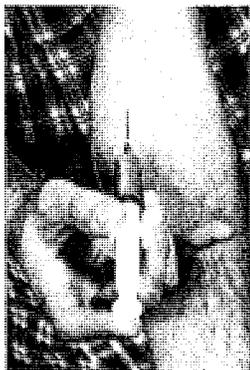
Former Property Uses

Heroin Users Are Older, Whiter, More Suburban Than in the Past: Study

/BY JOIN TOGETHER STAFF

May 29th, 2014

/



Heroin users are much more likely to be older, whiter and suburban compared with 50 years ago, a new study concludes. They are almost evenly split between men and women, [The Washington Post](#) reports. Fifty years ago, 83 percent of those seeking treatment for heroin use were men.

In 2010, three-quarters of people who used heroin did so after abusing prescription opioids, the researchers wrote in [JAMA Psychiatry](#). In the 1960s, more than 80 percent of people seeking treatment said heroin was the first opioid they had used. The findings come from a survey of patients in 150 treatment programs around the nation.

The study found 90 percent of people seeking treatment for heroin use in 2010 were white, compared with just over 40 percent in the 1960s. The average age increased from 16.5 years old 50 years ago, to 22.9 years old in 2010.

Among those who said they started with an opioid painkiller and switched to heroin, 98 percent said they preferred the high heroin gave them, and 94 percent said heroin was cheaper and easier to get.

“In the past, heroin was a drug that introduced people to narcotics,” lead researcher Theodore J. Cicero, PhD, of Washington University School of Medicine in St. Louis said in [a news release](#). “But what we’re seeing now is that most people using heroin begin with prescription painkillers such as OxyContin, Percocet or Vicodin, and only switch to heroin when their prescription drug habits get too expensive.”

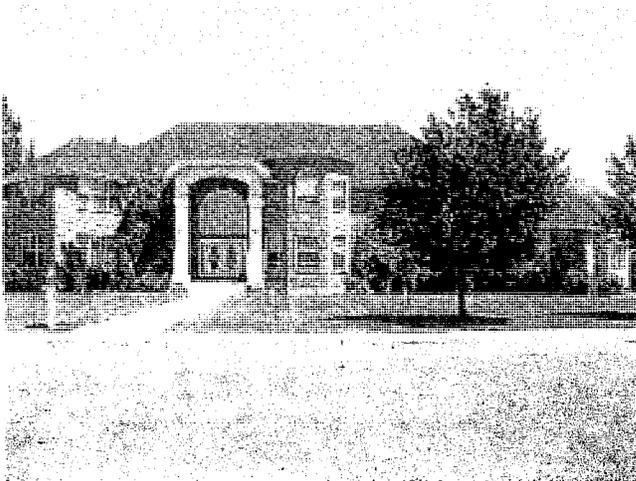
OxyContin was reformulated in 2010 to make it more difficult to crush or dissolve, leading some people to switch from abusing the drug to heroin, Cicero said. “If you make abuse-deterrent formulations of these drugs and make it harder to get high, these people aren’t just going to stop using drugs,” he noted. “As we made it more difficult to use one drug, people simply migrated to another. Policymakers weren’t ready for that, and we certainly didn’t anticipate a shift to heroin.”

Community Development
Lindon City

SEP 18 2014

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Camelot Vacation Home



Healing Light Reiki Center is also available to rent as your own private "Camelot Vacation Home".
Perfect for:

- Family Vacations
- Teachers Needing Workshop Facilities
- Corporate Meetings
- Girls Getaway
- Couples Getaway

Bring your friends and family for a fun filled vacation in Utah Valley. We sleep 22 people in a spacious 6,000 sq. ft. home sitting on 1.3 acres. We offer beautiful, fully furnished, private home accommodations.

- \$450 per night. (plus sales tax)
- 2 night minimum stay.
- \$150 non-refundable cleaning fee.
- \$69 non-refundable property damage insurance fee. (in lieu of large deposit)

We are in the perfect location to easily access year around activities! To see more photos and all the amenities that Camelot offers, and to reserve your vacation dates please log onto <http://www.homeaway.com/vacation-rental/p3484116>

For a listing of "Things To Do and See" in Utah Valley please click on <http://www.utahvalley.com/things-to-do/default.aspx>

Retreats and Girls Getaways

Community Development
Lindon City

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Directions - From I-15 take freeway exit #273. Turn East and drive 1.3 miles to State Street. Turn left, driving north .06 mile to 2000 North (lighted intersection). Turn right and drive 1 block. Take first left. "**Healing Light Home**" is first house on the right. (Large pinkish brick home with chandelier window.)



Private Sessions - If you would like to experience a private Reiki treatment with Lisa please call or text her 801-360-6909 to reserve your appointment time. Treatment fee is \$80 and could include Crystal Therapy, Aromatherapy, Massage Therapy, Sound Therapy, Cord Cutting, Spiritual Channeling, Life Coaching, Guided Visualization, Aura Clearing, and Chakra Balancing. Each treatment is unique and based upon the personal needs of the client.



Continuing Support For Reiki Students

Students of *Healing Light Reiki Center* are appreciated and supported. I offer to my students continuing support on their "Reiki Journey" by making Reiki easy to learn and easy to access. This is why I created a "Reiki Refresher" opportunity. After you certify in Reiki VIII training through *Healing Light Reiki Center*, you will be able to come back and refresh your knowledge and skills by reviewing the Reiki VIII training for half price! **You pay only \$175!**

Reviewing a Reiki Class Has Many Benefits:

- *You are given the opportunity to brush up on your Reiki skills.*
- *Repetition is a great learning tool.*
- *You hear new thoughts and ideas about Reiki, and possible new ways of using Reiki.*
- *You meet new friends and get to hang out with like minded people.*
- *You are given another Attunement.....which is empowering and a good way to "boost" your Reiki energy!*
- *You enter into a powerful healing space for 2 full days soaking up the high frequency of Reiki energy which gives you the opportunity to heal, relax, and rejuvenate your mind-body-soul!*

Lisa's Gratitude Gift To You – After your first refresher you can attend Reiki VIII **FREE FREE FREE** as many times as you would like to! Reiki Refreshers are a fun way to connect with like minded people. Repetition is a great learning tool and each class is unique.

Location - Drum Healing Workshop is held in Lisa's "**Healing Light Home**" *specifically* built to create a fun and nurturing learning environment for students. The address is 145 South 200 East, Lindon Utah, 84042.



Directions - From I-15 take freeway exit #273. Turn East and drive 1.3 miles to State Street. Turn left, driving north .06 mile to 2000 North (lighted intersection). Turn right and drive 1 block. Take first left. "**Healing Light Home**" is first house on the right. (Large pinkish brick home with chandelier window.)

Register Now for Drum Healing

Are You A Reiki Practitioner? If so, please inform us on your registration form to insure you receive the student manual written specifically for Reiki Practitioners!



Private Sessions - If you are interested in experiencing a personal 90 minute Drum Healing Session with Lisa, please call or text her at 801-360-6909 to reserve your appointment time. Treatment fee is \$80 and could include Reiki, Drumming, Crystal Therapy, Aromatherapy, Massage Therapy, Cord Cutting, Spiritual Channeling, Guided Visualization, and Life Coaching. Each treatment is unique and is based on the personal needs of the client.

Hotel Accommodations – 2 very nice hotels just 2.2 miles southwest of Healing Light Reiki Training.

give yourself and others a powerful Reiki healing treatment! **If you are already a Reiki practitioner, this course will most certainly enhance your previous Reiki training & add to your Reiki tool box!**

Continuing Education Credits available for Massage Therapists and Nurses.

Class size is limited to 10 students with the intention of getting all questions answered and allowing necessary time for practice of all techniques taught.

Tuition - \$350

Reiki Refresher Tuition – \$175 (for previous students of Healing Light Reiki Center who want to review)

Deposit - \$150 will reserve your space and the remaining balance is due by the 1st day of class, or you may prefer to pay the full balance when you register. Deposits are non refundable and may be transferred to future classes within 1 year. Sign up now to reserve your space.

Class times - Check-In starts at 8:45am. Class begins promptly at 9:00am. We are complete by 6:00pm.

Lunch - A one-hour lunch break is given at approximately 12:30pm. We have many nearby fast-food options, nice restaurants and natural health food stores within 10 minutes driving distance. Or bring your own sack lunch and simply relax during the break.

Dress – Casual and comfy, and please bring a water bottle. Also, wear warm socks! The classroom wood floor tends to get cold.

Location – Reiki I/II training is held in Lisa's "**Healing Light Home**" specifically built to create a fun and nurturing learning environment for students. The address is 145 South 200 East, Lindon Utah, 84042. See exact directions below.



the beat of your drum can literally break up dense, stuck energy that is clogging your energy pathway. Drumming directly into each chakra can cleanse and energize your chakra anatomy. The health benefits are numerous because your chakras relate to all aspects of your life physically, emotionally, mentally, and spiritually.

Drumming as Experienced by Lisa

- As a Holistic Healing Facilitator I utilize Drumming in every single treatment I give!
- I have personally witnessed the power of the drum to relax tense, high stressed individuals.
- I have seen the emotionally wounded finally release their pain and feel many times lighter.
- I have observed the hand drum's amazing and consistent ability to create states of euphoria that my clients refer to as "comatose" and they LOVE it!
- I have drummed many tired, sick, and exhausted individuals, who exclaim afterwards "I feel like a new person!" They leave with renewed energy and a refreshed outlook on life.
- I have seen Drumming instantly relieve cravings and ease addictions to substance abuse.
- I drummed a person who was in the middle of a horrible anxiety attack and watched her completely calm down within 3 minutes!
- Drumming promotes play energy, I find that workaholics and people who suffer with depression are inspired to create more fun in their lives.

Register Now for Drum Healing

Join Us May 3rd for a POWERFUL, FUN, HEALING Day of Drumming!

Pre-requisite – *NONE!* Moms, Dads, Kids, Friends, Husbands & Wives, Professionals and Non-Professionals are all invited to learn how to heal with the amazing hand drum!

Tuition – \$225 includes your own drum with student manual and lots of hands on experience! This is a wonderful opportunity to expand your spiritual wisdom and power!

Deposit - \$100 must be paid in advance to get your drum ordered. The remaining balance is due by the 1st day of class or you may choose to pay the full tuition at time of registration. Deposits are non refundable and may be transferred to future classes within 1 year. *Notice will be posted here when May 3rd Class reaches full capacity.*

Tuition for Drum Healing Refresher - 50% off regular tuition price for all students of Healing Light Reiki Center to come back and review this Drum Healing Course! (Does NOT include a second drum.....so be sure to bring your drum from previous class)

Class Times – Check-in starts at 9:15am. Class begins promptly at 9:30am. We drum till 5:30pm!
Fun stuff!

Lunch – A one-hour break is given at approximately 12:30pm. We have many nearby fast-food options, nice restaurants, and natural health food stores within 10 minutes driving time. Or bring your own sack lunch and simply *relax* during the break.

Dress – Casual and comfy. Please bring a water bottle. Wear warm socks! Classroom wood floor can get chilly.

Citizen Written Submittals

1. Renee Condie Submission

Sept. 2014

We the undersigned wish to register our opposition to Reflections Recovery Center (RRC) at 145 South 200 East Lindon, Utah, because of the numerous Lindon City Code violations: (the following are all found under Section 17.70.040 of Lindon City code)

1. Code -#6 reads: "...in no case shall the group home have any more than four **(4)** residents at any given time." RRC has requested a **22** beds facility, a **550%** increase over what is legally acceptable by code.

They may argue that they need more people for a therapeutic group discussion but when UVRMC was asked what the optimal number of patients for their drug rehab groups are, they said 5 to 10 people.

2. Code #7 reads: "No group home...shall be established or maintained within $\frac{3}{4}$ of a mile of another group home." There is already one group home, within three fourths of a mile of that proposed facility, located at 365 East 400 North, in Lindon. There is also a second home within $1\frac{1}{4}$ miles, located at 791 North 400 West.

3. Code #7 reads: "NO group home that has residents with disabilities related to any form of substance abuse... shall be established within 500 feet of a licensed daycare, or public or private school." Timpanogos Academy is approx. 495 ft away from this proposed facility. If this proposal is against city code, why do we need to grant an exception for our city laws? We ask you to stick to the code that applies to everyone instead of making exceptions for a limited few!

4. Code #18 reads: "...the facility operators shall develop a safety plan demonstrating adequate supervision and control of residents." According to our knowledge no person will be living in the home full time to supervise the residents but there will be continuous shifts, of usually 2 people, throughout the day. Two people do not seem sufficient for the 22 residents involved.

5. Residential Character of the neighborhood will not be maintained - In the pamphlet sent to us by RRC page 7, it reads; "RRC will look, act and feel like any other residence in the neighborhood." How can this possibly be if they propose 17+ parking stalls at the facility? It will look like a business, act like a business and feel like a business. Maybe they need to find a larger area for their facility

We acknowledge the need and benefit of substance abuse facilities to help those with addiction recovery problems, but we are suggesting that the proposed location at 145 S. 220 E will not work because of the many code violations. The excessive number of residents and the proximity to schools in the area suggest that another location would serve the needs of the community better. Thank you for your time!

Residential Care Facilities
in the Neighborhood:
Federal, State, and Local Requirements
By Lisa K. Foster, M.S.W., M.P.A.

California Research Bureau
900 N Street Suite 300
Sacramento CA
Dec.2002

“Community members generally agree that persons with disabilities and other special needs deserve to live in a community setting like a residential care or treatment facility instead of being isolated and institutionalized. But, it is a common reaction to feel uneasy, concerned, or fearful when a facility moves in next door or down the street.

Advocates and facility licensees point out that care and treatment facilities have to be put in someone’s neighborhood. They argue that neighbors’ fear is largely unfounded; they point to examples of facilities peacefully coexisting with neighbors and studies that conclude that residential care facilities do not have a negative affect on neighborhood safety and property values. In addition, advocates find that neighbors are often uninformed about the facility program and residents, which leads to misconceptions.

However, communities do experience problems with facilities. Seventy-two cities responding to a 1999 League of California Cities survey had received one or more complaints ranging from increased traffic, noise, and other neighborhood disturbances – to code violations – to criminal activities such as assaults and burglaries. The majority of complaints involved facilities that serve youth, individuals with mental illness, and individuals with alcohol or drug addictions.”

2. Val Killian Submission

Concept Analysis of Reflection Recovery Center.

- Residential Build out vs. Commercial Build out.
- IRC pg. 15 Defines Residence as A.1 or A.2 occupancy
- ~~then~~ occupancy of a typical Residence is Not more than (3) 2 Non related people living in the same home. (Planning Definition)
- With Non related people (more than 2) the structure becomes I-1 occupancy. (Commercial)
- Commercial Codes re: Life Safety are Federally enforced.
 - building would be required to be fire sprinkled
 - Any building over 1 story and larger than 500 sq ft requires Elevator Access to All levels.
 - All Restrooms/Bathing Rooms must meet ADA Standards.
 - Kitchen must meet commercial standards hood w/ Fire suppression, 3 compartment sink w/ separate hand wash sink
 - Ramps from all doors off main floor
 - Stairs that meet all commercial codes. Exterior, No winding stairs etc.
 - All doors to every room must meet ADA Standards
 - Plans must be prepared by a licensed Professional.
 - 2 Approved Exits from 2nd level & basement.

Community Development
Lindon City

SEP 18 2014

RECEIVED

Val

Item 5: Conditional Use Permit — Planet Power Toys, 165 South State Street

Lynn Clingo of Planet Power Toys, LLC requests approval of a conditional use permit to operate as a licensed dealer for sales and service of automobiles, boats, RVs, adult and youth ATVs and UTVs, scooters, dirt bikes and motorcycles at 165 South State Street in the General Commercial (CG-A) zone. 14-045-1.

<p>Applicant: Lynn Clingo Presenting Staff: Jordan Cullimore</p> <p>Zone: General Commercial (CG-A)</p> <p>Parcel ID: 14:070:0260 & 14:070:0262 Parcel Address: 165 South State Street</p> <p>Type of Decision: Administrative Council Action Required: No</p>	<p><u>SUMMARY OF KEY ISSUES</u></p> <ol style="list-style-type: none">1. Whether to approve the applicant's request for a conditional use permit to operate vehicle dealership.2. Whether to impose reasonable conditions to mitigate potential detrimental impacts. <p><u>MOTION</u></p> <p>I move to (<i>approve, deny, continue</i>) the applicant's request for a conditional use permit to operate a vehicle dealership located at 165 South State Street in the General Commercial (CG-A) zone with the following conditions, if any:</p> <ol style="list-style-type: none">1.2.3.
---	---

FINDINGS OF FACT

1. The applicant's uses are classified in Lindon City's Standard Land Use Table as the following:
 - a. Motorcycles, Personal ATV, Personal Water Craft, & Snowmobile, Sales & Service (Conditionally Permitted Use)
 - b. Used Cars/Trucks – Used Vehicle Sales Lots (Permitted Use)
 - c. Marine Craft & Accessories (Conditionally Permitted Use)
2. The applicant has applied for a Conditional Use Permit to conduct uses a. and c. above.

ANALYSIS

Applicable laws and standards of review

- State Code defines a conditional use as "a land use that, because of its unique characteristics or potential impact on the municipality, surrounding neighbors, or adjacent land uses, may not be compatible in some areas or may be compatible only if certain conditions are required that mitigate or eliminate the detrimental impacts."
- Section 10-9a-507 of the State Code requires municipalities to grant a conditional use permit "if reasonable conditions are proposed, or can be imposed, to mitigate the reasonably anticipated detrimental effects of the proposed use in accordance with applicable standards." Once granted, a conditional use permit runs with the land.
- State Code further provides that a conditional use permit application may be denied only if "the reasonably anticipated detrimental effects of a proposed conditional use cannot be substantially mitigated by the proposal or the imposition of reasonable conditions to achieve compliance with applicable standards." Utah Code § 10-9a-507.

- Additionally, the Lindon City Code provides that a conditional use may be denied when:
 - "[U]nder circumstances of the particular case, the proposed use will be detrimental to the health, safety, or general welfare of persons residing or working in the vicinity, or injurious to property or improvements in the vicinity, and there is no practical means available to the applicant to effectively mitigate such detrimental effects;" or,
 - "[T]he applicant cannot or does not give the Planning Commission reasonable assurance that conditions imposed incident to issuance of a conditional use permit will be complied with."

MOTION

I move to (*approve, deny, continue*) the applicant's request for a conditional use permit to operate a vehicle dealership located at 165 South State Street in the General Commercial (CG-A) zone with the following conditions, if any:

- 1.
- 2.
- 3.

ATTACHMENTS

1. Aerial photo of the site
2. Photographs of the site
3. Business Proposal
4. Proposed Site Plan
5. Floor Plan













Attachment 3



1342 W. 200 S., LINDON, UTAH 84020 – 801-796-8000

October 29, 2014

To Whom It May Concern:

Planet Power Toys has been in operation in since 2006, the last five years in Lindon as a licensed dealer for sales and service of Automobiles, Boats, Adult and Youth ATV's and UTV's as well as Scooters, Dirt Bikes and Motorcycles.

It is our desire to continue this business at our new location: 165 S. State Street, Lindon, Ut. 84042

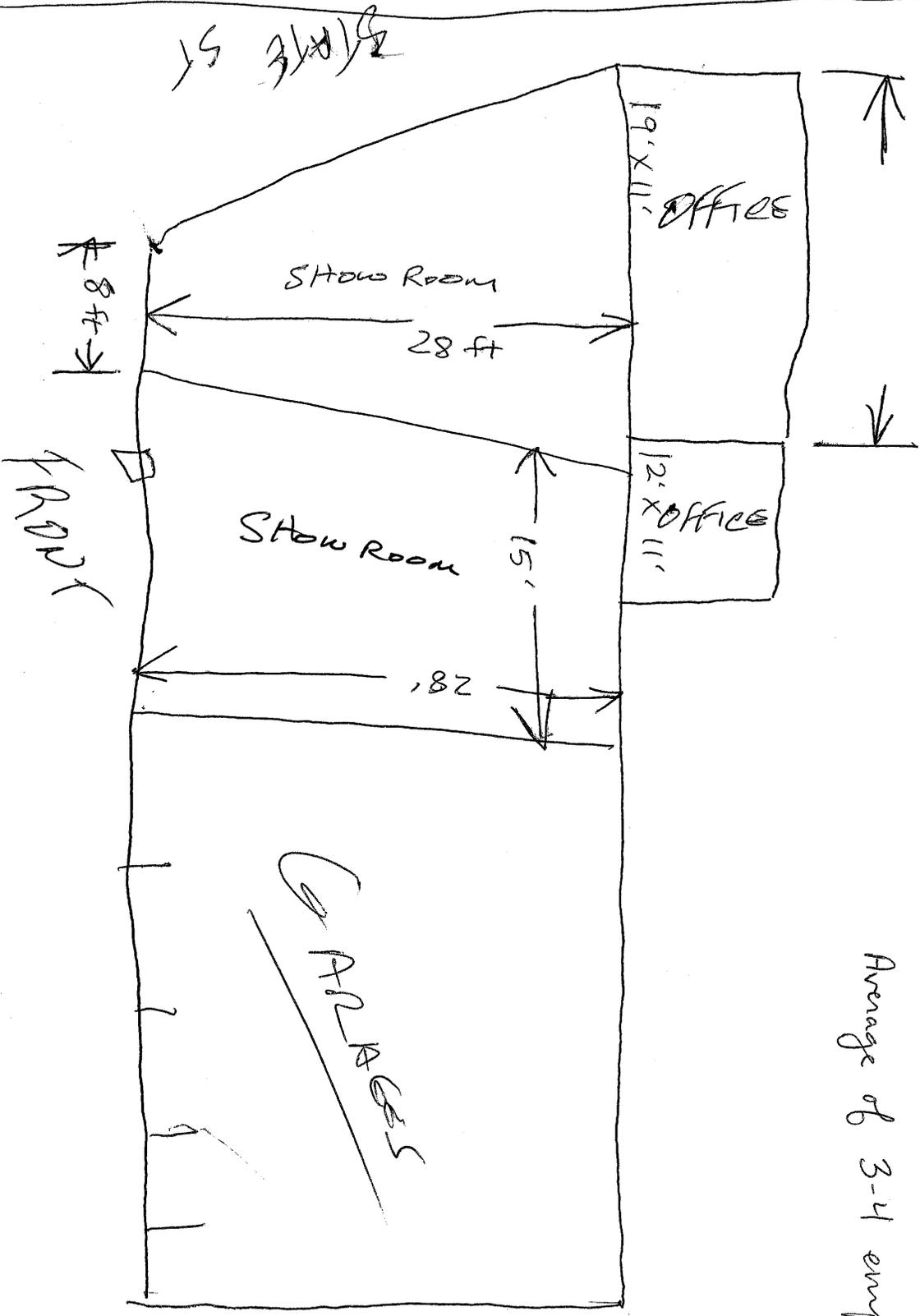
We have four fulltime employees, sales, service and office.

Regards,

A handwritten signature in black ink, appearing to read "Lynn Clingo". The signature is fluid and cursive, written over a white background.

Lynn Clingo





PLANET POWER Toy
 165 S. STATE
 LINCOLN

Average of 3-4 employees.

Item 6: New Business (Planning Commissioner Reports)

Item 1 – Subject _____
Discussion

Item 2 – Subject _____
Discussion

Item 3 – Subject _____
Discussion

Item 7: Planning Director Report

Adjourn

APPLICATION NAME	APPLICATION DATE	APPLICANT INFORMATION	PLANNING COMM.	CITY COUNCIL
			DATE	DATE
Ordinance changes: LCC 17.38 'Bonds for Completion of Improvements to Real Property'	January 2014	City Initiated	Mar. 11	TBD
<i>City initiated ordinance changes needed to bring code into compliance with current practices and State laws.</i>				
Zone Change: Old Town Square	Feb 1, 2012	Scott Larsen	Feb. 14, continued	Pending
<i>Request for approval of a zone change for two parcels located at 873 West Center Street from R1-20 (Residential Low) to LI (Light Industrial).</i>				
Property Line Adjustment: LBA Rentals	Mar 12, 2012	Lois Bown-Atheling	N/A	N/A
<i>Request for approval of a property line adjustment to clean up existing parcels lines for five parcels in the CG zone at 162 & 140 South Main Street. This project is in conjunction with the Castle Park project.</i>				
Ordinance changes: LCC 17.32, 17.58, 17.66.020 'Subdivisions'	Nov. 2012	City Initiated	Nov. 13, Dec. 11, Jan. 8, Jan. 22	TBD
<i>City initiated ordinance changes needed to bring code into compliance with current practices and State laws.</i>				
Site Plan: Lindon Senior Apartments	Sept. 2013	Matt Gneiting	TBD	TBD
<i>Request for site plan approval for senior housing apartments on State & Main</i>				
Amended Site Plan: Wasatch Ornamental Iron	June 2014	Melvin Radmall	N/A	N/A
<i>Request for staff approval of a 16x18 machine cover in the LI zone located at 310 North Geneva Road.</i>				
Reasonable Accommodation: Reflections Recovery	Sept. 2014	Ron Wentz	TBD	TBD
<i>Request for a reasonable accommodation from four to sixteen individuals for group living facilities for disabled persons. 145 S 200 E</i>				
Miscellaneous: UIS Detention Basin Upgrade	Sept. 2014	MS Properties	N/A	N/A
<i>Request for staff approval of an upgrade to a detention basin at 433 N 1030 W.</i>				
Property Line Adjustment	Oct. 2014	Steven Merrill	N/A	N/A
<i>Request for a property line adjustment at 455 E 500 N. Staff approved.</i>				
General Plan Map Amendment: Colmena Group	Oct. 2014	Bryan Stevenson	Oct. 28	Nov. 5
<i>Request for a General Plan Map Change from General Commercial to Light Industrial at ~600 South Geneva Road</i>				
Zone Map Amendment: Colmena Group	Oct. 2014	Bryan Stevenson	Oct. 28	Nov. 5
<i>Request for a Zone Map Change from General Commercial A8 to Light Industrial at ~600 South Geneva Road.</i>				
Conditional Use Permit: Planet Power Toys	Oct. 2014	Lynn A. Clingo	Nov. 11	N/A
<i>Request to operate a personal recreational vehicle dealership in the General Commercial Zone at 165 South State. ATVs, Boats, RVs, Used Cars</i>				
NOTE: This Project Tracking List is for reference purposes only. All application review dates are subject to change.				
PC / CC Approved Projects - Working through final staff & engineering reviews (site plans have not been finalized - or plat has not recorded yet):				
Stableridge Plat D	Tim Clyde – R2 Project		Old Station Square Lots 11 & 12	
AM Bank – Site Plan	Joyner Business Park, Lot 9 Site Plan		Olsen Industrial Park Sub, Plat A (Sunroc)	
Lindon Gateway II	Freeway Business Park II		Lindon Harbor Industrial Park II	
West Meadows Industrial Sub (Williamson Subdivision Plat A)	Keetch Estates Plat A		Highlands @ Bald Mountain Phased Sub	
Craig Olsen Site Plan	Avalon Senior Living Site Plan		Lakeside Business Park Plat A	
LCD Business Center	Sonic Plastics Site Plan		Green Valley Subdivision	
Long Orchard Subdivision	Noah's Life Site Plan		Noah's Life Subdivision	
Interstate Gratings Site Plan				
Bishop Corner Plat B				

Board of Adjustment		
Applicant	Application Date	Meeting Date
Black Scot Development	10.13.14	11.12.14

Annual Reviews				
APPLICATION NAME	APPLICATION DATE	APPLICANT INFORMATION	PLANNING COMM.	CITY COUNCIL
			DATE	DATE
Annual review - Lindon Care Center 680 North State Street (File # 05.0383.8) administrator@lindoncare.com	Existing use.	Lindon Care Center Manager: Christine Christensen 801-372-1970.	March 2015 Last Reviewed: 3/14	N/A
<i>Annual review of care center to ensure conformance with City Code. Care center is a pre-existing use in the CG zone.</i>				
Annual review of CUP - Housing Authority of Utah County - Group home. 365 E. 400 N. (File # 03.0213.1) lsmith@housinguc.org	Existing CUP	Housing Auth. Of Utah County Director: Lynell Smith 801-373-8333.	March 2015 Last Reviewed: 3/14	N/A
<i>Annual review of CUP to ensure conformance with City Code. Group home at entrance to Hollow Park was permitted for up to 3 disabled persons.</i>				
Heritage Youth Services - Timpview Residential Treatment Center. 200 N. Anderson Ln. (File # 05.0345) info@heritageyouth.com info@birdseyertc.com	Existing CUP	HYS: Corbin Linde, Lynn Loftin 801-798-8949 or 798-9077	March 2015 Last Reviewed: 3/14	N/A
<i>Annual review required by PC to ensure CUP conditions are being met. Juvenile group home is permitted for up to 12 youth (16 for Timp RTC) not over the age of 18.</i>				

Grant Applications	
Pending	Awarded
Bikes Belong - Trail construction grant. Requested amount: \$10,000 o Status: NOT SELECTED FOR 2010. WILL RE-APPLY IN 2014. Land and Water – Trail construction grant. Requested amount: \$200,000 o Status: NOT SELECTED. RE-APPLY IN 2014. Hazard Mitigation Grant / MAG Disaster Relief Funds- (pipe main ditch) FEMA Hazard Mitigation Grant – (pipe Main Ditch)	MAG Bicycle Master Plan Study Awarded funds to hire consultant to develop bicycle master plan to increase safety and ridership throughout the city. Utah Heritage Foundation — Lindon Senior Center Awarded 2013 Heritage Award in the Category of Adaptive Use Project. EDCUtah 2014 — Awarded matching grant to attend ICSC Intermountain States Idea Exchange 2014. CDBG 2014 Grant – Senior Center Computer Lab (\$19,000)

Planning Dept - Projects and Committees			
On-going activities (2014 yearly totals)	Misc. projects	UDOT / MAG projects	Committees
Building permits Issued: 188 New residential units: 49	2010-15 General Plan implementation (zoning, Ag land inventory, etc.)	700 North CDA	Utah Lake Commission Technical Committee: Bi-Monthly
New business licenses:62	Lindon Hollow Creek-Corps of Eng., ditch relocation	Lindon Bicycle Master Plan	MAG Technical Advisory Committee: Monthly
Land Use Applications: 43	Lindon Heritage Trail Phase 3		Lindon Historic Preservation Commission: Bimonthly
Drug-free zone maps: 21	Gateway RDA improvements		North Utah County Transit Study Committee Monthly