

From ADAPT

MASS. ANNOUNCES MORE COMMUNITY LIVING OPTIONS FOR PEOPLE WITH DEVELOPMENTAL DISABILITIES "Community First" Agenda includes closure of four developmental centers over four years

BOSTON - As part of its "Community First" Agenda and commitment to offering community-based living opportunities for people with intellectual disabilities, the Executive Office of Health and Human Services and the Department of Mental Retardation (DMR) announced today plans to close four of the state's six institutions over the next four years. Current residents will transition to community settings or one of the two remaining facilities, based on each individual's needs, abilities and wishes.

Reconfiguring DMR's facilities system will improve community integration and quality of life for people with disabilities. As plans move forward, DMR will engage residents, their family members and guardians in a thorough, person-centered planning process to ensure each individual's smooth transition to a new community-based setting or another facility with the appropriate mix of services and supports.

The newly re-established Governor's Commission on Mental Retardation, which includes family members, professionals and clinicians, will also play a key advisory role as the state moves forward in its transition planning to ensure that the rights of people served by the Department are fully protected.

"This expansion will create real choice for many people with developmental disabilities for whom the community has never been an option-all while providing equal or better care for the residents in a community setting," said Health and Human Services Secretary Dr. JudyAnn Bigby. "As we have seen many times, individuals previously living in facilities have benefited from a community setting with the services and supports they need to live in dignity and independence."

New England currently has seven institutions for individuals with intellectual disabilities, with six in Massachusetts. Currently, approximately 900 individuals live in the Commonwealth's institutions, while more than 32,000 receive community-based services and supports.

DMR anticipates that approximately 316 individuals will transition to community-based settings over the next four years.

"This exciting transformation offers new opportunities for people currently residing in developmental centers and secure more community capacity for others in the future," said Assistant Secretary for Disability Policy and Programs Dr. Jean McGuire. "A crucial part of the proposal is the assurance that families and

guardians who wish for their loved one to remain in an institutional setting will continue to have that choice."

Elin Howe, Commissioner of the Department of Mental Retardation, added, "We look forward to working in partnership with individuals, families, guardians, employees, unions, private sector providers and advocacy organizations to further develop quality supports and services for individuals with intellectual disabilities as we move forward to successfully implement this plan."

"As a longtime supporter of deinstitutionalization, I am encouraged to see the administration making these strides to increase community based care," said State Senator Frederick E. Berry. "I thank Secretary Bigby and Commissioner Howe for their leadership on this proposal. I also extend my sincere appreciation to the staff at these facilities, many of whom have provided tireless care to individuals for decades. I look forward to working with the administration to ensure that new job opportunities will be available to facility and support staff."

"The Patrick Administration is moving in the right direction," said State Representative Tom Sannicandro, an active member of the Joint Committee on Children, Families and Persons with Disabilities. "People of all abilities deserve the same opportunities that each of us receives. This significant expansion of community-based services and programs will give the men and women who live at Fernald and our other state institutions a better life, while still offering families a similar option if they choose."

"This decision is a tremendous step forward in the state's 'Community First' agenda," said Leo Sarkissian, Executive Director of The Arc of Massachusetts. "For those now in institutions, they will have the opportunity for the same supports and services in the community. This initiative also strengthens the foundation of community options and supports for thousands of people and allows Massachusetts to move forward in disability policy."

Association of Developmental Disabilities Providers (ADDP) Executive Director Gary Blumenthal, whose brother lived in an institution from the age of nine to the age of 38, added, "I understand the anxiety that many families may feel in moving their loved ones into a community setting, because my family went through it personally. My family and so many others have found that living in the community offers so many benefits for people with disabilities, including opportunities for them to contribute fully to their communities."

Facilities identified for closure include the Fernald Developmental Center in Waltham; Glavin Regional Center in Shrewsbury; Monson Developmental Center in Palmer; and Templeton Developmental Center in Baldwinville. The Wrentham Developmental Center and the Hogan Regional Center in Hathorne will remain operational.

In addition to advancing the Governor's "Community First" agenda, this plan will also provide the Commonwealth with an investment of up to \$45 million to support the placement of individuals from the four DMR facilities into the community. DMR is partnering with the state's Division of Capital Asset Management and other state agencies to develop new community-based housing for DMR consumers. The state will also work collaboratively with local community leaders to develop plans for property reuse.

DMR leadership and staff will bring to this process extensive knowledge and experience gained from more than 30 years of community transitions, including the closures the Belchertown State School in 1992; the Dever Developmental Center in 2002; and the J.T. Berry Campus of the Hogan Regional Center. Consumer, advocate, and family responses to transition surveys have been overwhelmingly positive, reporting high satisfaction even when not initially supportive of community services.

As the facility consolidation plan moves forward, the state intends to retain skilled and talented state employees and will work hard to mitigate the impact on DMR employees. DMR will also work with other state agencies and providers to identify employment opportunities for DMR staff as needed.

Finally, the important issue of campus and facility re-use will be guided by local planning processes that will be set up under the auspices of the state's Division of Capital Asset Management and the Department of Housing and Community Development. A facility re-use group is already in place for the Fernald Center.

DMR Community Services Expansion and Facilities Restructuring Plan

Consistent with Massachusetts' "Community First" long-term care policy, the successful appeal of the Ricci case, and the Governor's recently launched Olmstead Plan, the Executive Office of Health and Human Services and the Department of Mental Retardation (DMR) are announcing a major expansion of DMR

community living services and plans to close four of its existing six institutions over the next four years.

The plan will create real choice for many people with developmental disabilities for whom community living has never been an option, while also assuring an enduring institutional placement choice for those currently living in the developmental centers. Most importantly, the plan will adhere to the central Ricci case requirement that people be provided with equal or better care.

Currently, there are approximately 900 people living in the state's six developmental centers; Massachusetts has six of the seven remaining institutions in New England. Connecticut has the other.

Plan Summary

The restructuring plan anticipates a broad array of client support and program development efforts including:

- * Significant expansion of community services for people with mental retardation who current live in developmental centers;
- * Closure of four of six existing facilities, beginning with Fernald in FY10; closure of Monson, Templeton and Glavin occur the end of FY13;
- * Provision of individual service planning and placement choices for residents and their families/guardians that permits placement in a state operated or vendor operated community residences, placement in Wrentham Developmental Center or, on a limited basis, into Hogan;
- * Assurance of long-term institutional placement at Wrentham Developmental Center for those residents who choose to remain in an institutional setting. Wrentham was strategically selected to remain open over the long-term, because it is best situated to accommodate additional residents;
- * Deferral of future planning regarding the Hogan Development Center until after completion of the current four-year plan;
- * Development of new state and vendor operated community settings in areas proximate to the existing centers;
- * Anticipated overall reduction of approximately 50% of the

institutionalized population by the end of FY13 as a result of over 300 expected community placements, transfers to Wrentham Developmental Center and Hogan Regional Center;

- * Projected investment of over \$40M to support the placement of individuals from the four DMR facilities into the community; a reduction of current institutional spending by approximately 50%; and

- * Facilitation of new economic and strategic local development options through collaborative facility re-use planning.

Plan Development and Oversight Mechanisms

The Plan will have an ongoing collaborative development process as well as several oversight mechanisms to assure diverse input and transparency. These efforts will include:

- * Immediate establishment of departmental and facility level planning groups involving consumers, family members, Center employees, advocacy and provider groups, as well other interested stakeholders;

- * Plan review and advisory meetings with the newly re-established Governor's Commission on Mental Retardation; and

- * Ongoing review of DMR program planning and practices by the Statewide Advisory Council.

Facility & Campus Re-use Planning

EOHHS, DMR and other agencies are committed to assuring the successful and collaborative planning of campus re-use. This will occur through the establishment of local Facility Re-use Planning Committees, led jointly by the Department of Housing and Community Development and the Division of Capital Asset Management, and including representation from DMR, legislators, local communities, and other appropriate stakeholders.

Workforce Strategies

The 1,596 direct care, operations, clinical and management staff at all of the Centers are critical to the ongoing quality of care and support residents receive and will be crucial partners in the transition process. Plans to support workers through this process include:

- * Facility staff involvement in all phases of Center and departmental plan development and implementation;

* Creation of new job opportunities as downsizing occurs, through community residence development and placement options at other developmental centers, elsewhere in the Department, and across EOHHS and other state agencies;

* Provision of re-training and other job development and placement support;

* Development of appropriate incentives to assure adequate quality staffing throughout the closure process; and

* Commitment by the Department to minimizing the impact of facility reconfiguration through close collaboration with unions and other facility staff.

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