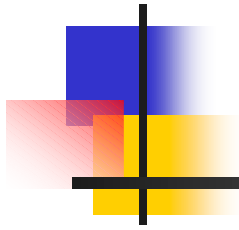


Closing Public Institutions The Clock Keeps Ticking



Subtitle:

Active Treatment, Unicorns,
QMRP's, The Need for
Institutionalization and other
mythical creatures and concepts.

Why is it?

- We live in the age of
- But some still promote congregate care setting and even institutions as service models



Google™





Gone-RIP

- Alabama

- Glenn Ireland

- **Alaska**

- Harborview

- Arizona

- Phoenix

- Tucson

- California

- Camarillo

- DeWitt

- Modesto

- Napa

- Stockton



RIP, cont.

- Colorado
 - Pueblo
- Connecticut
 - Mansfield
 - New Haven
 - Waterbury
- District of Columbia
 - Forest Haven
- Florida
 - Orlando
 - Tallahassee
- Georgia
 - Brook Run
 - River's Crossing
- Hawaii
 - Waimano



RIP, cont.

- Illinois

- Adler
- Bowen
- Dixon
- Galesburg
- Kiley
- Meyer

- Indiana

- Central State
- Fort Wayne
- Mascattatuck
- New Castle
- Northern Indiana

- Kansas

- Norton
- Winfield

- Kentucky

- Frankfort
- Outwood



RIP, cont.

- Maine
 - Pineland
- Massachusetts
 - Belchertown
 - John T. Berry
- Maryland
 - Victor Cullen
 - Great Oaks
 - Henryton
 - Highland Health



RIP, cont.

- Michigan

- Alpine
- Coldwater
- Fort Custor
- Hillcrest
- Macomb-Oakland
- Muskegon
- Newberry
- Northville
- Oakdale
- Plymouth

- Minnesota

- Fairbault
- Moose Lake
- Owatonna
- Rochester



RIP, cont.

- Missouri

- Albany
- Hannibal
- Joplin
- Kansas City
- Kirskville
- Poplar Bluff
- Rolla
- Sikeston
- Springfield

- New Hampshire

- Laconia

- New Jersey

- Edison
- Johnstone
- North Princeton



RIP, cont.

- New Mexico
 - Fort Stanton
 - Los Lunas
 - Villa Solano

North Dakota

- San Haven



RIP, cont.

- New York
 - J.N. Adam
 - Bronx
 - Craig
 - Gouverneur
 - Letchworth
 - Long Island
 - Manhattan
 - Newark
- Rome
- Sampson
- Staten Island
- Syracuse
- Valatie
- Westchester
- Wilton



RIP, cont.

- Ohio

- Broadview
- Cleveland
- Orient

- Oklahoma

- Hissom

- Oregon

- Columbia Park
- Eastern Oregon
- Fairview



RIP, cont.

- Pennsylvania

- Cresson
- Clark Summit
- Embreville
- Holidaysburg
- Laurelton
- Marcy Center
- Mayview
- Pennhurst
- Philadelphia
- Somerset
- Western



RIP, cont.

- Rhode Island
 - Dix Building
 - Ladd Center
- South Carolina
 - Clyde Street
 - Live Oak[
- South Dakota
 - Custer
- Texas
 - Fort Worth
 - Travis



RIP, cont.

- Vermont

- Brandon

- Washington

- Interlake

- West Virginia

- Colin Anderson

- Greenbrier

- Spencer

- Weston



What have we learned?

- These have all been publicly operated facilities
- Some privately operated facilities has closed, both voluntarily and involuntarily.

**Closure
must not
be the
goal!**

Closure is
about
buildings.



We have learned that All people benefit from pursuit of their dreams

- **Fixing-improving institutions cannot be an option.**
- **They are a nightmare, not a dream!**
- **Why try to do a good job doing the wrong thing?**



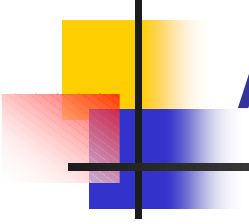
Ask yourself...

- In what other industry can you provide something people do not want, force them to buy it, charge a lot for it and act surprised when they do not like it?



Closure is the vehicle.

The goal is to let every person
pursue the American dream.



All people can experience the American Dream

- You cannot pursue the American dream when surrounded by a lot of other people 24/7



Closure is the vehicle, not the goal.

- Resistance to closure is growing stronger.
- The organized resistance does not play by the same rules as we do.
- We are selling, albeit poorly, freedom, opportunity and the promise of a better life.
- They are selling fear, lies and someone else's agenda.



Medicaid Institutional Context

- Because of Medicaid, people need to demonstrate the need for Institutionalization and Active Treatment to live in the community.
 - There is no such thing as the need for institutionalization.
 - No one has ever actually seen active treatment.
 - The number of people in state institutions continues to decline.



What have we learned?

- In 38 large scale studies in western nations, people with all levels of intellectual disability were shown to do better in the community in 35 of them!
- **Bricks and mortar-buildings-have nothing to do with helping people with intellectual disabilities to thrive, grow and live their lives.**
- **Buildings are obstacles**



Closure is the vehicle, not the goal.

- The challenge is both political and programmatic
- The decision to close an institution is political
 - It is about resistance to change
 - It is about fears
 - It is about jobs
 - It is about the economic impact on local communities
 - It has nothing to do about what is wanted by or best for people with intellectual disability



We need a much more aggressive to market the promise for community inclusion

- Must be sold on **benefit**, not price.
 - Talk about outcomes, not costs.
 - Focus on how people live and deemphasize how much it costs to support them.
 - Once you get into the argument of price, then people with significant disabilities who may cost more to support, loose.
 - It is about the cohort cost, not individual cost.



Talk about it differently

- Not about deinstitutionalization
 - ... but about **developing community capacity** for **all** people
- Show inequity of resources between those in institutions and those at home with families
 - Same people, different support
 - Incentives in the wrong place



We need to **market** our agenda.

- It is honest and proud.
- It is counterintuitive.
- It needs to be sold on benefit, not price.
- It is pro-family, pro-community, pro-individual freedom.
- The ICFMR program is anti-family, anti-community, big-government and anti-freedom.



We need to do a better job in the community...

- Growing community based leadership
- Developing infrastructure
- Fighting apathy
- Educating the public(s)
- Fighting dis-information
- Acknowledging the problems we have
- Working with the health care community
- Fixing what's broken
- Speaking with one voice



It is not automatic

- We need to build infrastructure.
- We need to change the existing system of services and supports.
- As long as institutions exist, state government turns to them first... to fix buildings, to give staff salary increases, to replace funds lost due to decertification.



Reminder

- **A waiting list is not a support or a service.**
- **To fully implement the community imperative we cannot stand by while so many struggle in desperate situations with inadequate supports.**

The Community Imperative



(Circa 1979)

The Time Has Come

http://thechp.syr.edu/community_imperative.html



If not us, then who?



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