

# Invest in Community Services

The 2009 Washington Legislature passed HB 1244 directing the Governor's Office of Financial Management (OFM) to conduct a study of the feasibility of closure of state institutions. The study conducted for the Residential Habilitation Centers for people with developmental disabilities was conducted by Davis Deshaies.

## Recommendations from the Feasibility Study for the Closure of State Institutional Facilities:

- No later than 2013, Washington can reduce 250 beds from the RHC's by closing Frances Haddon Morgan Center and 13 cottages on other RHC campuses;
- As part of the reduction of 250 beds, Washington should immediately place children currently living at the RHC's into state-operated children's intensive care homes;
- No later than 2019, Washington can close all but a few RHC beds and convert Lakeland, Fircrest, and Yakima Valley into three small community support centers which provide emergency crisis support and ambulatory care/clinical outreach services;
- Washington should expand its community supported living network to include a "zero-reject" state-operated residential option which focuses on people with complex health needs or who present significant community risks; and
- The community supported living provider network requires substantial refinancing and increased capacity in order to support people leaving the RHC's in an equal or better fashion.

Community Residential providers have a history of being able to increase capacity and serve people with developmental disabilities moving from institutional and other settings. Between 1989 and 1992, over 700 people with developmental disabilities moved into supported living settings as part of a downsizing and capacity expansion effort. During that period, over 200 people moved from RHC's while approximately 500 others moved from community-based IMR-D's, Nursing Facilities, and family homes. Supported Living providers have shown the ability and willingness to meet the needs of serving additional people in the community.

The report clearly affirms that in order for community placements to be successful, Washington must strengthen the community direct care staff capacity by increasing direct care reimbursement rates to providers. *"In almost all instances, people and their families shared experiences of losing dedicated direct care service staff due to inadequate compensation. A review of community residential provider compensation practices revealed that Washington direct care workers are compensated at the 35<sup>th</sup> percentile of market valued competitive wages. Nationally, state reimbursement rate schedules generally set targets between the 50<sup>th</sup> and 75<sup>th</sup> percentiles of U.S. Bureau of Labor Statistics wages."*

**We must invest in this vital safety net for people with developmental disabilities served in the community, as well as for people moving out of the RHC's.**