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**VOR Weekly E-Mail Update**

**October 17, 2008**  
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## **1. About Psychiatric Technicians**

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"Psychiatric Technicians" are referenced throughout this update. According to the California Association of Psychiatric Technicians (CAPT), "Psych Techs are your licensed, professional mental-health nursing staff."

CAPT is the professional association for the 17,000 state-licensed Psychiatric Technicians who work in California's programs for the mentally ill and developmentally disabled. These include facilities run by the state, city or county government, hospital districts and private providers.

CAPT is also the labor union elected to represent the 7,000 state government employees in Psychiatric Technician Bargaining Unit 18, including 5,000 licensed Psych Techs and 2,000 unlicensed caregivers.

Presently, California, Colorado, Kansas and Arkansas are the only states requiring full regulation and licensure of Psychiatric Technicians, but as the following article indicates, the National Association of Psychiatric Technicians (NAPT) and CAPT are working to increase the number of states requiring licensed direct care staff.

**Psychiatric Technicians continue campaign for quality care**

**Outreach (CAPT Newsletter)**

## **October/November 2008 (in press)**

"Around the country, employees with little or no training and oversight are caring for people with severe mental illnesses and developmental disabilities. For the sake of these consumers and their loved ones, this situation must change."

Senior Psychiatric Technician Tony Myers, who currently serves as both state president for the California Association of Psychiatric Technicians and national president for the American Association of Psychiatric Technicians (which offers a voluntary certification program for Psych Techs in states that don't license), recently wrote to state governors and nursing boards in 46 states calling for licensure of Psychiatric Technicians and allied staff.

California, Colorado, Kansas and Arkansas are the only states requiring full regulation and licensure of Psychiatric Technicians at this time. But, as Myers wrote to those states that don't, they "regulate and license those who cook food, cut hair and sell homes -- shouldn't we also have at least the same oversight for those who provide care for our states' most vulnerable men, women and children?"

"I get frequent news reports from all over the country about unregulated, untrained staff being the source of individuals' death, injury, and abuse," said Myers. "We as a nation should be looking at ways to increase services, training, professionalism and accountability, and those of us who are licensed need to be asking states why they're not requiring more of their care providers, wherever they work. That's why we took the issue directly to state governors."

Licensed Psych Techs are unique because they are trained, not only in standard nursing procedures, but also specifically in assisting people with developmental disabilities and mental illnesses. Their in-depth education and official regulation hold them to the highest possible standards in medical and therapeutic care.

The letter-writing campaign is just part of a continuing effort to promote licensure and visibility of Psychiatric Technicians throughout the nation. For instance, California Psych Techs recently received kudos from individuals, families and Congress members from the 50 states during this summer's VOR Washington Initiative, where CAPT members advocated for increased client services and care standards, including licensed care providers.

"We continue to get the word out there: Licensed staff means quality care," said Brad Whitehead, Psych Tech and Lanterman Chapter president, who has traveled to Washington in recent years as part of the Initiative. "We must be the voice for our clients and for our profession."

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## **2. Advocates Jim and Ann Grivich: Family continues fight for community home safety**

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**Background:** The Grivich's story involving their advocacy and legal battle to maintain Lanterman Developmental Center as Bobby's, Jim's brother, home was featured in the LA Times and reprinted in VOR's Weekly E-Mail Update. See, <http://www.latimes.com/news/local/la-me-lanterman6mar06,0,2633207,full.story> and <http://vor.net/march72008.htm>.

### **Family continues fight for community home safety**

**Posted on the CAPT website**

**[www.psychtechs.net](http://www.psychtechs.net)**

**August 25, 2008**

Just because a community home is licensed doesn't mean it's safe.

That's the lesson Jim and Ann Grivich learned when they visited a prospective home for Jim's brother Bobby, a Lanterman Developmental Center resident for more than three decades. Outreach covered their fight to keep Bobby at Lanterman Developmental Center (LDC) in 2007.

They believed Bobby would be safer at his developmental center because what they found at the licensed community home was shocking -- literally. An exposed electrical panel dangled wires; major electrical work was in progress, featuring an unlicensed electrician; Bobby's proposed exitless bedroom was illegally constructed; another illegally constructed bedroom in the garage would be where nighttime staff would sleep, far away from emergency needs, to name just a few items.

All this in a home where Bobby was supposed to stay that very night, and where another client was scheduled to be placed that same day.

## **NEW LANGUAGE**

Jim and Ann Grivich had seen more than enough. They found out that the Department of Developmental Services doesn't require a licensed building inspector to inspect a community care home or facility before they issue a license, unlike Lanterman, which is inspected on a regular basis.

However, after many meetings, they convinced the department to change their general licensing requirements to say, "Suspected environmental hazards to clients...of community care facilities should be inspected by the agency having jurisdiction, i.e., the local building inspector, or county environmental health and sanitation agency."

They place emphasis on the word "suspected." Since the department doesn't require a building inspection before they issue a license, it falls to conservators to conduct their own inspections and, if they "suspect" a hazard, to call the appropriate agency (fire, building or health) to conduct an official inspection.

The Griviches also were able to get significant new licensing requirements implemented regarding alterations to existing buildings or new facilities: "When local building regulations/laws require a permit or building inspection, the licensee is required to follow those laws and requirements." If there is any evidence of alterations, the conservator should demand to see the permit and inspection reports.

## **RECOMMENDATIONS**

Psych Techs, clients and conservators, and anyone involved in community placements should be aware of this new language, and should act if there are concerns about a home's construction and licensure.

"The conservator should absolutely refuse -- in the name of safety -- any overnight visits or placement activities until the safety issues and concerns are resolved," said Jim Grivich.

The California Association of Psychiatric Technicians (CAPT) encourages and defends members who speak out regarding client safety.

"We take a pledge to protect individuals 'against humiliation, insult or injury,'" said SPT Tony Myers, CAPT state president. "If something seems wrong and we don't speak up for our clients, we're not doing our jobs."

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### **3. Psych Techs join clients, families in congressional advocacy efforts**

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**Posted on the CAPT website**

**[www.psychtechs.net](http://www.psychtechs.net)**

**August 25, 2008**

Three CAPT members took the concerns of Psych Techs, clients and their families straight to members of Congress during VOR's June Washington Initiative.

SPT Brad Leggs, CAPT secretary-treasurer and Napa Chapter president, PT Brad Whitehead, Lanterman Chapter president, and PT Eddie Collaso, Metro Chapter president, walked the halls of the U.S. Capitol with nearly 80 other participants from 22 states, all calling for Congress to support H.R. 3995.

Introduced by Rep. Barney Frank (D-MA) and sponsored by VOR (Voice of the Retarded), H.R. 3995 would require that, before federally financed class action lawsuits against Medicaid-certified and funded Intermediate Care Facilities for Persons with Mental Retardation (ICFs/MR) can proceed, residents and their legal representatives must receive notice of the proposed class action and be given an opportunity to opt out of it.

Under current law, there's no requirement that legal guardians or residents must be notified of a class action lawsuit, and they don't have the right to opt out. Thus many residents of ICFs/MR are swept into these lawsuits and transferred from ICF/MR settings against their or their guardians' wishes, resulting in the shrinking or outright closure of these facilities.

"Clients and their families and guardians should be the ones determining what's wanted, not lawyers who have never met them or have never even set foot on the grounds of a state facility," said Whitehead. "We care for and work with these people each day. They need to be heard and respected."

Event participants convinced several more congresspeople to add their names to the growing list of H.R. 3995 cosponsors.

During the event, Leggs, Whitehead and Collaso also educated congressional members, their staff, and event participants about the Psychiatric Technician profession, emphasizing the need for more

states to embrace formal licensure and to ensure the highest level of care and services for individuals.

## **VOR STANDS FOR CHOICE**

VOR is the only national organization advocating for clients and families' full range of residential options and services, whether it's in the home, community residences, congregate or large facilities.

For two decades, the organization has served as a watchdog, opposing efforts to eliminate any options -- including developmental centers and hospitals -- for people with developmental disabilities, medically fragile conditions and challenging behaviors. VOR acts when legal actions in any state or on the federal level threaten residential choice or guardianship issues, or raise other precedent-setting concerns.

CAPT is a longtime supporter of VOR and its vital efforts to assist families and their loved ones in our care.

For more information on VOR or to get involved in its activities, visit [www.vor.net](http://www.vor.net).

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### **4. A message from Maxine Richey, VOR's newest California Board Member**

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#### **Meet Maxine Richey:**

Maxine Richey was elected by VOR's membership to serve her first term on VOR's Board, beginning July 1, 2008. She is also a member of VOR's Legislative Committee (second term) and a member of VOR's Finance Committee (first term). In addition to her volunteer leadership on VOR's behalf, Ms. Richey is the Director of Advocacy, Legislation, Outreach and Education (ALOE) for the Sacramento

Association for the Retarded (SAR), a long time VOR affiliate. In her capacity as SAR's Director of ALOE, she wrote the following article which is a nice introduction to Maxine's skills and perspective, as well as her motivation for being involved: Her daughter, Rebecca.

**"Choice Quote" from  
Maxine's article:**

"Like many viewpoints, [one size fits all] is a feeling, a belief, an opinion, not necessarily rooted in what is objective, factual or real. It may work for some people and not for others. It is an overarching philosophical thread that winds its way through and across professional mindsets, legislative decision-making and service outcomes.

"It is this one size fits all mentality that frustrates and confuses many families and unites SAR in our mission to pursue our loved ones' Constitutional Rights and their rights as citizens of California under the Lanterman Act. SAR emphatically rejects this belief; we support and advocate for a broad spectrum of services and supports based on individual needs. We will not sacrifice our children's well-being in order to join the bandwagon."

**About SAR**

SAR is a longtime VOR affiliate, sharing VOR's "choice" perspective. Here's what the SAR website says: "SAR is a nonprofit organization formed almost sixty years ago by a group of parents who sought services for their family members with mental retardation. As very few services and supports existed in those years, the union of SAR families brought vitality and strength in numbers can-do attitude to our community. Over the years, SAR has created and developed many worthwhile programs and services for the benefit of families in the Sacramento area. Today, SAR provides advocacy, education, future planning and conservatorship services, workshops, seminars and protection services. SAR is available for individual advocacy services to families experiencing difficulty with an aspect of the system of supports. SAR also provides systemic advocacy on issues impacting groups of individuals with mental retardation on a local, regional or national basis."

SAR's President is Jacob Richey, M.A. (Maxine's son). Jacob and Maxine participated in VOR's June 2008 Initiative and Jacob had this to say, "In June, Maxine Richey and I shared the distinct honor of

partnering with a national organization, VOR in Washington, D.C. for their annual conference and initiative. Like VOR, SAR believes in a continuum of services for persons with mental retardation. We enjoyed the pleasure of joining them at the Capitol and in speaking to various representatives there towards a goal of securing co-sponsorship if a bill that affects the lives of our population. For me, it was a life-changing experience. It meant a lot to me for the legislators to hear what we had to say and to see that they really listened to our message. For more information, visit <http://www.sacramentoar.org>.

## **OUR FORGOTTEN CHILDREN - The severely disabled among us**

**By Maxine Richey**

**Director of Advocacy, Legislation, Outreach and Education SARReport, Spring 2008**

What's it all about - VOR, SAR, MR, DD, etc.?

It would take almost writing a book or producing an instructional video, or who knows what and for how long, to explain the meanings behind and around the acronyms listed above. In my memory I see a flash of Alphabet Soup from my childhood. How I enjoyed scooping out the tiny noodles in letter-shapes! What fun it was to separate out the words I could make from the many letters!

During a long illness requiring complete bed rest, reading books and practicing budding writing skills provided blessed diversion for my six year old self! I am convinced that such adversity helped develop my nature verbal gifts that came much easier to me than later university classes like Chemistry or Calculus, which demanded a great deal more effort on my part. The combination of innate ability and seizing opportunities opened many more doors for me and my family, providing career choices which otherwise would never have been.

What happens to those among us who are unable to change their destiny?

What about our community of children who have MR/DD? What about those of our children who will never have an opportunity to realize their dreams, fulfill their potentials or care for themselves? What about our children who have severe disabilities including adverse behaviors: those who require 24/7 one-on-one (or greater) assistance? What about our children whose severe disabilities include being medically fragile, requiring perpetual nursing care? What do we do when legislation and budget cuts affect our loved ones? What becomes of our children as they age, we age, and the world changes? Do we forget them?

As families of children with MR/DD the answer to that question is, of course, we never forget them. They are our brothers, daughters, sisters, sons, family. We love them, they are a part of our being. No matter how disabled, loving and caring are bundled into the equation. We are human beings, our children our human beings, they are American citizens and serve, and I'll say it, are entitled, to life above all else.

I write this article as a professional, yes, but more importantly, because Rebecca is my only daughter and she and I have experienced the best and worst of times together. Rebecca is now forty years old and has developmental disabilities including profound mental retardation, autism and counter-productive behaviors including OCD.

Every day is a challenge - Rebecca's story is a long one and I welcome sharing that story with you. We will do this together over the time I am your "SARepporter" because I believe it is particularly important for families to communicate and become aware of the philosophical changes which have been part of the MR/DD landscape for at least twenty years.

The most popular viewpoint in 2008 appears to be "one size fits all," that each individual with MR/DD must not be isolated, must be part of the community, out in the community, employed in the community or even in business for themselves: i.e., upward and onward, no matter what the degree of need or care required; no matter what the extent of cognitive or physical capacity. This belief, perhaps a minority opinion when first proposed, has gained greater strength in recent years and continues to infiltrate legislation, publications and organizational culture.

Are you, as a member of the SAR community, in accord with this prevailing perspective, this philosophical determination? Does it coincide with your loved one's situation or needs to survive in this life? Does it accurately speak for you and your child/sibling/family member?

Like many viewpoints, it is a feeling, a belief, an opinion, not necessarily rooted in what is objective, factual or real. It may work for some people and not for others. It is an overarching philosophical thread that winds its way through and across professional mindsets, legislative decision-making and service outcomes.

It is this one size fits all mentality that frustrates and confuses many families and unites SAR in our mission to pursue our loved ones' Constitutional Rights and their rights as citizens of California under the Lanterman Act. SAR emphatically rejects this belief; we support and advocate for a broad spectrum of services and supports based on individual needs. We will not sacrifice our children's well-being in order to join the bandwagon.

There is much to be learned from the prevailing philosophy, "one size fits all." There are many, many parts, some difficult to understand, some not. My intent is not to bombard and overload you all at once; rather, I will be introducing, over time, the "political-type" issues that eventually become hot-ticket items and transform into laws that impact our loved-ones' way of life and well-being. There are several such issues on the stove right now, as well as the economic and budget situations which influence those issues.

Members, friends, families, dear loved ones, if there is one mantra our SAR Community must internalize it is that no agency, no organization, no government, and no professional, no matter how well-meaning, will ever love your child as you do. But you already know that, don't you?

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**Tamie Hopp**

**REFERRAL/MEMBERSHIP/CONTRIBUTION  
FORM**

**THREE EASY WAYS TO SUPPORT VOR**

**REFER, CONTRIBUTE OR JOIN**

**THANK YOU FOR YOUR SUPPORT!**

TO JOIN OR CONTRIBUTE: \$25 per individual, \$150 per family organization, or \$200 per provider/professional organization. Extra donations are welcome!

You may pay by credit card or check.

TO REFER SOMEONE TO VOR: Use the form below, including the additional sections for referrals.

Mail the completed form (if joining or contributing) with payment to:

Voice of the Retarded

836 S. Arlington Heights Rd., #351

Elk Grove Village, IL 60007

847-253-0675 fax (for referrals or credit card payments)

[Tamie327@hotmail.com](mailto:Tamie327@hotmail.com) (for referrals or credit card payments)

FOR REFERRALS: \_\_\_\_ The contact information provided is for someone I think would consider membership with VOR.

FOR REFERRALS: \_\_\_\_\_ You may use my name in any correspondence with this individual. My name is \_\_\_\_\_.

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Name

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Address (if paying by credit card, use billing address). All forms must include complete address including zip code)

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City St Zip

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Phone Fax

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E-Mail

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Family/Professional Organization Affiliation (if applicable)

VOR accepts Master Card and Visa. If paying by credit card, please provide the following information:

Amount to charge to card:

\_\_\_\$1,000 \_\_\_\$500 \_\_\_\$250 \_\_\_\$150 \_\_\_\$50 \_\_\_\$25 \$\_\_\_\_\_ Other  
amount

\_\_\_\_\_ Mastercard

\_\_\_\_\_ Visa

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_