

Coming next week: H.R. 1255 ACTION ALERT: August is almost here. Request a meeting with your U.S. Representative in his/her district office TODAY! Ask him/her to COSPONSOR H.R. 1255. See, <http://vor.net/AUGUSTINITIATIVE.htm> and <http://vor.net/HR1255positions.htm> for details, or contact Tamie at Tamie327@hotmail.com.

Have you signed the VOR Choice Petition yet? More than 2,650 individuals from across the country have. Join them, sign the online petition, and show strong and growing support for CHOICE. Visit, <http://www.vor.net> and click on the Petition link on the home page.

VOR Weekly E-Mail Update
July 24, 2009

=====
STATE NEWS

1. **NEBRASKA:** Beatrice Center to tries to get license limitation lifted
2. **NEBRASKA:** State spends \$2.6 million on medically fragile, so far
3. **VIRGINIA:** Proposal could mean downsizing for CVTC

VOR and YOU

4. **VOR:** 26 years and counting

Coming Up: H.R. 1255 Action Alert and Massachusetts State Report from the VOR State Report Forum in Washington, D.C.: Mass News, plus a lesson in effective grassroots advocacy

=====
STATE NEWS

1. NEBRASKA: Beatrice Center to tries to get license limitation lifted

Beatrice Center to tries to get license limitation lifted
Martha Stoddard
OMAHA WORLD-HERALD
July 20, 2009

LINCOLN - State officials plan to seek approval for the Beatrice State Developmental Center to once again care for people with serious health complications.

But the people ordered out of the center in February likely will not be moving back, a legislative oversight committee was told Monday.

Jodi Fenner, interim developmental disabilities director for the Nebraska Department of Health and Human Services, said she expects those people will be settled into new homes in the community before the change occurs.

Fenner said it could take several months for the center to get its license limitation lifted - too long for the transferred residents to continue living in hospitals and nursing homes.

Forty-seven medically fragile residents were transferred out of the troubled state institution by order of Nebraska's chief medical officer. **[Editor's note: Eight former residents that were transferred have since died]**

The order followed the death of four residents in January, including three who lived on the same floor and were considered medically fragile. A state investigation into one death, that of 18-year-old Olivia Manes, concluded that staff had failed to provide her with appropriate emergency care.

2. NEBRASKA: State spends \$2.6 million on medically fragile, so far

State spends \$2.6 million on medically fragile, so far
By Nancy Hicks/Lee Enterprises
Thursday, Jul 23, 2009

The state has spent more than \$2.6 million caring for the Beatrice State Developmental Center residents moved to hospitals in February.

Of that, \$2.34 million has gone to hospitals and physicians, according to a report provided to state senators.

But those costs should end within a few months as the last of the people still in hospitals move to new homes.

In February, the state moved 47 people determined to be medically fragile to hospitals and nursing homes after the state's chief medical officer decided BSDC staff could not adequately handle medical emergencies.

The moves were one of the most public signs of the state's attempts to address problems at BSDC. Nebraska has been under federal pressure for eight years to improve care at the Beatrice facility, especially health care.

Since the February move, 17 clients have moved on to homes and services in local communities, three have moved back to BSDC, seven are in nursing homes, and eight have died.

Twelve people remain at hospitals in the state.

The Beatrice center, which serves primarily adults with serious developmental disabilities, may be able to begin caring for medically fragile residents by January.

First, the center must hire several permanent doctors.

Jodi Fenner, interim director of the state's Division of Developmental Disabilities, says she hopes no one is left in a hospital by January.

"I don't think it is in anyone's best interest to remain in a hospital environment for that long," she said in a telephone interview this week.

The hospital staff have done a very good job on a temporary basis, but hospitals are not equipped to care for people with serious cognitive impairment on a long-term basis, she said.

"Guardians feel the same way," she said. "They are working very diligently to find appropriate places for their loved ones to live and work."

Six of the 12 people still hospitalized should move soon.

Four are expected to move into new group homes that will have medical services and are being built in the Omaha area, Fenner said.

Two, no longer deemed medically fragile, are expected to move back to BSDC.

Services provided by hospitals and physician groups for the 47 residents moved in February hit \$2,341,913 by the end of June.

Contracts with local organizations to provide day activities for residents in hospitals and some in nursing homes have cost \$230,470 so far.

The state also paid \$92,314 in travel and meal costs for BSDC staff who helped residents adjust to hospitals and nursing homes.

It's difficult to compare the hospitalization costs with those at BSDC, but estimates of average costs for care at BSDC range from \$400 (Department of Justice advocate estimate) to \$600 (HHS estimate) per day.

3. VIRGINIA: Proposal could mean downsizing for CVTC

By Ray Reed
News & Advance
July 15, 2009

Central Virginia Training Center would be downsized to 300 residents and send people who become ill to a Lynchburg hospital's emergency room if a proposal from state officials in Richmond is carried out.

Officials also said they want to "find an alternative use" for much of the CVTC property, which 25 years ago housed 3,500 people on its 350-acre campus in Madison Heights.

The proposals seek to cut operating and maintenance costs while at the same time upgrade some buildings with sprinklers, generators and other features to keep residents safe, said officials with the Department of Behavioral Health and Developmental Services.

"CVTC's building usage is inefficient," agency officials said during a June meeting in Madison Heights, where the new proposals were presented to parents whose children live at the center.

The plans are the latest in a stream of proposed changes over the past four years for CVTC as state officials confront how to balance the needs of developmentally disabled residents with soaring costs of fixing or replacing outdated buildings as state funds grow tighter.

Residents' families found the proposals disturbing because they seem to be coming fast, said Martha Bryant, vice chairman of the CVTC parents' group.

"In five years they plan to close 30 buildings and decrease the census below 300 residents," Bryant said. "There are many unanswered questions about what is going to happen."

One proposed change reduces the training center's population of developmentally disabled people, which stood at 442 in June, by almost one-third within five years.

Another proposal would involve sick residents who now are treated in an acute-care center, which is a hospital-like facility on the training center's grounds.

An experimental transition to fewer acute-care beds started this week under the proposal from the Behavioral Health department, which before July 1 was called the Department of Mental Health, Mental Retardation and Substance Abuse Services.

Bryant said parents worry disabled residents could be forced to live in community-based group homes. "Hundreds of families choose CVTC" to be their relatives' homes "and they are trying to force us out," she said.

She also said an illness outbreak at the center could send a dozen or more disabled residents to a hospital that would already be crowded during a cold-weather flu season.

"From a parental health care provision, you worry about access to care and wonder, 'Are we going to overuse their emergency room?'" said Bryant, who is a nurse.

Centra Health, which runs Lynchburg's two hospitals, is studying the CVTC plans' impact on Centra's operations and expects to complete an analysis in 60 days, said David Adams, senior vice president.

Del. Shannon Valentine, D-Lynchburg, said her discussions with DBHDS officials indicated they plan to close the acute-care center "but not the services."

CVTC will continue to have a physician providing 24-hour, on-site coverage and will keep open a medical, skilled-care unit, Valentine said.

"The intention is to provide the same level of care while trying to reduce costs, especially given that many of the beds in the acute care center are not being used."

During the summer, the acute-care center typically has four or five sick patients, but that number has risen to 12 or 15 in the winter, Bryant said. The DBHDS proposal would send those patients either to a skilled-care unit with nurses at CVTC, or else to a Centra emergency room, she said.

Bryant said that state Sen. Steve Newman, D-Lynchburg, told the parents' group he would propose a budget amendment in next year's General Assembly to ensure that a physician is present 24 hours a day at CVTC.

Allocations to CVTC have been an issue in the past several General Assembly sessions. This year, Gov. Timothy M. Kaine and legislators switched part of a \$43 million allocation that earlier had been earmarked for CVTC to new group homes, taking \$10 million from the original amount.

The General Assembly diverted another \$8 million to a state training center in Chesapeake, leaving \$23.5 million for CVTC.

The changes are part of a nationwide movement to house disabled people in communities instead of institutions. Virginia has been slower than most states in following that trend, a University of Colorado study shows.

This year, the DBHDS has proposed spending \$11 million to upgrade three buildings at CVTC and add generators at other buildings. One of those changes would move residents into buildings with smaller rooms, affording more privacy.

That leaves about \$12 million still not budgeted. Meghan McGuire, spokeswoman for DBHDS, said the department hopes to assign funds to specific projects this year.

"All of the \$24.5 million will be spent on the CVTC campus," McGuire said.

"An analysis is being done to determine the extent and cost of renovations for a fourth and fifth building.

"We are moving quickly through the normal design and review process to address the issues in these older buildings and plan to have funds budgeted by this fall," McGuire said.

Valentine said those analyses need to move forward.

"Every delay means that we are not installing sprinklers, providing generators and making the necessary renovations," she said. "The complete funding is critical if we are to dress the buildings in which our residents live."

VOR and YOU

4. VOR: 26 years and counting

Sharing the excitement of VOR's accomplishments over the past 26 years is exciting and we would welcome an opportunity to speak at one of your events or meetings. Please contact Julie Huso at husoj@sio.midco.net or at 605-370-4652. We look forward to hearing from you!!

Editor: Tamie Hopp, VOR Director of Govt Affairs & Advocacy

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 check or credit card

VOR (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 (for referrals or credit card payments)

Name

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

City St Zip

Phone Fax

E-Mail

Family/Professional Organization Affiliation (if applicable)

If paying by credit card, please provide the following information:

Amount to charge to card: \$ _____

Card Type: ____ Mastercard ____ Visa

Card Number: _____

Expiration Date: _____

Cardholder's Signature: _____

=====