

## WELCOME AND INTRODUCTIONS

2:00 PM

*The Commissioner opened the meeting and the Advisory Committee (AC) members introduced themselves. Members present: James Reinhard (DMHMRSAS), Mark Stevens (VOPA), Theo McClammy (City of Chesapeake), Karen Lawson (DMAS), Howard Cullum (The Arc of VA), David Coe (Colonial CSB), Chuck Hall (Hampton-Newport News CSB), Heidi Dix (DMHMRSAS), Monica Thornton (SVTC), Lisa Lucas Burke (Senator Louise Lucas), Bob Latimer (SEVTC parent), Chip Dodd (provider), Jennifer Fidura (VNPP), Bob Shrewsberry (SEVTC), Alice Johnson (SEVTC Family Member), Sherwin Davis (SEVTC), Jeff Lake (VDH), Mark Diorio (NVTC), Tim Capoldo (Norfolk CSB), Roxanne Garner (SEVTC Resident), Sandra Cobb (SEVTC Resident), Judy Blooms (SEVTC Family Member), Pat Bennet (PAIR), Brian Whitesell (SEVTC)*

## OVERVIEW OF COMMITTEE PURPOSE AND GUIDING PRINCIPLES

2:20 PM

*The Commissioner distributed this document and discussed the purpose of the committee as helping to guide the SEVTC closure process to ensure that all individuals receive placement in community-based residences that meet the needs of the individuals.*

*The committee held discussion about various aspects of the Guiding Principles. One AC member asked if the reference to 'equal services' meant that services would be duplicative of SEVTC or 'as close as possible' to services at SEVTC. The committee members used medical services as an example – medical services are available in the community, however they most likely will not be in walking distance to someone's home as they are at SEVTC. The emphasis is on 'equal quality' of care.*

*The committee then discussed examples of public and private oversight that already exist – the Systems Leadership Council; the Local and State Human Rights Committees. The private sector providers have had a working relationship with the Community Services Boards (CSBs) since the early 1990's and have approached services to individuals with intellectual disabilities (ID) as a shared responsibility. The CSBs and ID councils meet regularly with SEVTC staff and Mr. Shrewsberry.*

*One committee member asked about the revival of the Region V public/partnership plan that was established two to three years ago regarding downsizing of facilities for individuals with ID. A representative from the CSBs indicated that the directors are looking at this plan again to see if still fits with this initiative.*

*One committee member asked about a previous study to compare the cost of facility operations versus community services. While specific information could not be recalled by other committee members, one person mentioned that data is available that*

*compares the average cost of Intermediate Care Facilities for Individuals with Mental Retardation/Intellectual Disabilities (ICF/MR) and group homes.*

*One committee member asked about the initiative focusing on 'bed to bed' versus 'service to service' transitions of individuals. There was some discussion of Medicaid Waiver services and several committee members indicated that some terminology is unknown or confusing and that a glossary or dictionary would be helpful.*

*One committee member asked what will be planned for individuals who cannot benefit from community placement – like 24 hour crisis and intensive medical intervention. Another committee member suggested that the Guiding Principles be changed to reflect "systems of care should assure permanency through a strong network of services and providers."*

*There was discussion by the committee about the time lines of the closure initiative and the time needed to conduct person-centered assessment and planning for this to occur.*

*The retention of staff at SEVTC until closure is complete was discussed. It was felt that incentives for employees are necessary.*

*One committee member asked if there is enough case management personnel at the CSBs to get all of the details accomplished for successful transitions. The representative from Colonial CSB indicated that they have 11 individuals to transition from SEVTC and the representative from Hampton-Newport News CSB indicated they have 37 individuals to transition from SEVTC and they both assured the committee that there are adequate case managers. They further indicated that there are resource issues related to developing homes and there are some services that there may not be enough of – Occupational Therapy, Physical Therapy, Rehabilitation, and Day Support are examples. Mr. Hall from Hampton-Newport News CSB emphasized that their focus is on developing "homes" for individuals and not just "beds."*

*One committee member pointed out that there are several references in the Guiding Principles about "community settings." This should be defined further because SEVTC has 6 to 7 bed cottages on the campus and it is not desirable for "community" to mean larger environments than these.*

*There was discussion by the AC about the current lack of capacity in the community to meet the needs of individuals at SEVTC. It was emphasized that this capacity can be developed and that an enhancement of services is also needed. It was pointed out that these things need to be developed statewide, not just for and because of SEVTC.*

*The committee also discussed that providers regularly accept individuals transitioning from facilities on discharge and that the process for this occurring is in place. The next step for this initiative is to get to the 'individual' level and understand what each person needs to be successful in the community.*

*The AC discussed the need for various committee members to get exposure to current services being offered at both SEVTC and in the community. It was suggested that tours be arranged for committee members to do this.*

**PRESENTATION OF SEVTC CLOSURE PLANS  
AND COMMITTEE GUIDANCE**

**2:45 PM**

*The Commissioner provided a PowerPoint presentation on specific actions to be taken to accomplish the SEVTC closure initiative.*

- ◆ *A CSB representative suggested that one option may be to have the sale of the SEVTC property be put into a trust fund for residents.*
- ◆ *There was committee member discussion that sponsored residential can have a nurse be the provider in the home to work with individuals with higher medical needs.*

**PUBLIC COMMENT PERIOD**

**3:30 PM**

*The AC heard public comment as follows:*

- ◆ *Mrs. Sivertson offered a list of questions, asking that answers be provided at the next AC meeting. She agreed to provide the complete list of questions for inclusion in the meeting summary, but verbally shared some questions to the committee:*
  - *What is MFP?*
  - *What is the difference between ICF/MR and waiver services?*
  - *How many vacancies are in ICFs?*
  - *How many group home inspections have occurred in the last year?*
  - *What is meant by community?*
- ◆ *Ms. Gilbert gave comment about her fears that her son will be kicked out of SEVTC and that his needs will not fit with a group home. She expressed concerns about oversight of community services/providers.*
- ◆ *Mrs. Beale gave comment about SEVTC being home for her daughter. She feels like the SEVTC staff are her daughter's family and that the closure of the facility is not possible.*
- ◆ *Mr. Beale gave comment that echoed the questions asked by Mrs. Sivertson.*
- ◆ *Mr. Kupnik gave comment that he is concerned that there are only 152 days until June 30 and wanted to know who is doing the assessments and ensuring parents are involved. He has requested help to transition his daughter and has received no help. He wants to get answers.*
- ◆ *Ms. Reed gave comment about her sister and the hardship being imposed upon residents and families. She asked why there is continued investment in improvements at SEVTC if there are plans for closure (cook chill and roofs).*
- ◆ *Ms. ? gave comment that she wants to know who will help her son.*
- ◆ *Ms. Rogers gave comment about her experience as a board member for Holiday House and asked if employees in community services would be required to have experience working with children. She asked to know what the differences are in Medicaid requirements for staff working in ICFs and non-ICFs. How do these providers train staff? How many licensing personnel complete provider/service inspections?*

**ESTABLISH MONTHLY MEETING SCHEDULE**

**3:55 PM**

*Future meetings will be held on February 26, March 26, April 30, May 26, and June 25. All meetings will be held at SEVTC at from 10:00 AM to 12:00 Noon.*

*All parents at SEVTC would like notice of the meetings. Minutes will be posted on the DMHMRSAS website.*

Next Meeting: Thursday, February 26, 2009 ♦ 10:00 AM – 12:00 PM ♦ SEVTC