

Future of the Developmental Centers Task Force
By Terry DeBell
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For the last several months, every Sacramento legislative hearing that involved the Department of Developmental Services was marked by the very strong call to “Close the Developmental Centers” (DCs). This call came from community activists, from lobbyists, from consumers, from service providers, and from some legislators. Outside of the committee hearings, rallies have been held calling for closure of the DCs. Several organizations representing community services are working to find a legislative sponsor to close the DCs.

Although DC families are well aware that the continued placement of individuals in the Centers has been controversial and difficult for some time, the recent abuse incidents at DCs and the financial situation of the state has brought about the most intense pressure to close DCs seen in recent decades. Now, the California Legislature has essentially demanded that some plan be developed to address their future.

Diana Dooley is the Secretary of the California Health & Human Services Agency, which is responsible for the Department of Developmental Services and other Departments such as Rehabilitation, Aging, Social Services, Managed Health Care and others that are important to individuals with disabilities. Secretary Dooley has responded to the clamor to close the DCs by convening a *Future of the Developmental Centers Task Force*.

The 21 Task Force members are consumers, consumer advocates, regional centers, community service providers, organized labor, DC families, DC staff, a DC resident, members of the Legislature and the Department of Developmental Services staff. The public meetings have also been attended by other DC families who have contributed to the discussion with their testimony.

The Task Force has met twice in public meetings and twice in closed meetings with other meetings to be scheduled before the mid-November deadline. The charge is to work to “... *develop a plan to assure quality, effective and efficient delivery of integrated services to meet the special needs of current residents living in the developmental centers ... (to) consider the fiscal implications of DC operations ... the availability of alternative and community resources; a timeline for future closures; and any statutory and regulatory changes that may be needed to ensure the best care possible for this special population.*”

Lanterman DC is not directly part of this discussion as it is currently under a legislatively-approved Closure Plan.

Surprisingly, the Task Force so far has not precisely discussed closing Developmental Centers. The agenda has been designed to focus instead on the current DC residents, what are their needs and those of others like them in the community who may or may not be receiving appropriate services; what services are available; what services need to be developed. The residents have been classed into 3 groups, with some overlap – 1. enduring and complex medical needs, 2. challenging behaviors, and 3. involvement in the criminal justice system. There is strong agreement among most Task Force members on some very important points: - although there are some very effective models of community care, there are not sufficient models or numbers of community services to care for all of the current DC residents at this time - appropriate medical and dental and mental health services are necessary for successful community transition, which includes medication management, and coordination of services through a primary care physician - there is a need for a safety net, a place where individuals whose needs are not being met can be admitted with the assurance that they will receive what they need (there is some agreement that this should be state-operated) - there are no ‘quick fixes’ to most problems - models in other states including specialized Resource Centers should be considered - nothing can be done without the legislature agreeing to fund these necessary programs and others for current DC residents.

The Task Force report and recommendations will be submitted to the Legislature in November. You can follow the work of the [Task Force at the Health and Human Services website](#).