# SENATE BILL REPORT SB 5889

#### As of March 18, 2017

**Title**: An act relating to the consolidation of residential habilitation centers and expansion of home and community-based services for individuals with developmental disabilities.

**Brief Description**: Concerning the consolidation of residential habilitation centers and expansion of home and community-based services for individuals with developmental disabilities.

Sponsors: Senators Rossi, Brown, Braun, Rivers and Sheldon.

## **Brief History:**

**Committee Activity**: Ways & Means: 3/15/17.

## **Brief Summary of Bill**

- Directs the Department of Social and Health Services (DSHS) to close Fircrest School by December 31, 2022.
- Requires DSHS to complete an appraisal of Charitable, Educational, Penal, and Reform Institutions (CEP&RI) land on the Firerest campus by June 30, 2018.
- Requires DSHS to submit a report outlining options for transferring the CEP&RI land from the Department of Natural Resources to DSHS by October 1, 2018.
- Requires that the net proceeds from the use, or sale, of excess property on the Fircrest campus must be placed in the Developmental Disabilities Community Trust Account.

#### SENATE COMMITTEE ON WAYS & MEANS

Staff: James Kettel (786-7459)

**Background**: The Developmental Disabilities Administration (DDA) within the Department of Social and Health Services (DSHS) provides support and services to persons with developmental disabilities. Services include case management, needs assessments, support in activities of daily living, employment, and rehabilitative therapies. The DSHS also

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provides medical, dental, and pharmaceutical services to persons with developmental disabilities. Services may be provided in three different service settings: in the client's own home; in a community residential home; or in a Residential Habilitation Center (RHC).

RHCs serve individuals who have exceptional care and treatment needs due to their developmental disabilities by providing residential care designed to develop individual capacities to their optimum. RHCs may be certified as an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/ID) and/or as a nursing facility. The state operates four RHCs which are established in statute to provide services and housing for persons with developmental disabilities: Rainier School in Buckley; Lakeland Village in Medical Lake; Fircrest School in Shoreline; and Yakima Valley School (YVS) in Selah. The Francis Haddon Morgan RHC was closed on December 31, 2011. Beginning in 2012, no person under the age of 16 may be admitted to an RHC.

Residential programs provide support for persons living in community living situations. These include non-facility based living situations such as supported living and state-operated living alternatives (SOLAs) which are operated by the DDA with state employees providing instruction and support to clients.

Fircrest School provides both nursing facility care and ICF/ID care to about 200 people with developmental disabilities. The average resident of Fircrest School is over 50 years of age.

**Summary of Bill**: DSHS is directed to close Fircrest School by December 31, 2022. Residents may be placed into SOLA, supported living, nursing facilities, or other RHCs.

Each RHC resident's habilitation plan must include a plan for discharge to the community. The discharge plan must be developed using a person-centered approach to identify services the resident needs to succeed in the community, including using family-to-family mentoring; placing residents on the appropriate home and community-based waiver to ensure access to services; providing residents and their families the opportunity to visit community living settings; offering residents a right to return to an RHC in the first year following their move; addressing additional services needed in the community such as medical and transportation services; and monitoring residents who leave RHCs, including the use of unannounced visits.

DSHS is directed to complete an appraisal of the CEP&RI land on the Fircrest campus by June 30, 2018. DSHS must submit a report to the Governor and relevant committees of the Legislature outlining options for transferring the CEP&RI land from the Department of Natural Resources to DSHS by October 1, 2018.

Revenue generated from the use, or sale, of Fircrest properties must be deposited into the Dan Thompson Memorial Developmental Disabilities Community Trust Account. Monies from the account must be spent on family support and employment services, and residential programs supporting people with developmental disabilities.

**Appropriation**: None.

**Fiscal Note**: Not requested.

## Creates Committee/Commission/Task Force that includes Legislative members: No.

**Effective Date**: Ninety days after adjournment of session in which bill is passed.

**Staff Summary of Public Testimony**: PRO: People have a right to live in the community. Fircrest should be downsized and closed. Money from the Fircrest land should be placed into a trust and utilized for additional services for individuals with developmental disabilities. People who live in a community have more personal freedom and are able to make their own choices. The expectations for what people with developmental disabilities can be achieved is much different than when RHCs were established. Many people do not even realize that RHCs still exist. RHCs are like a 1954 Cadillac. In their day, RHCs were considered the best, but now they are too expensive and unneeded. The expectation should be that individuals with developmental disabilities will live in community settings. The Americans with Disabilities Act and the Individuals with Disabilities Education Act have made major changes, and it is no longer a huge burden if a family has a child with a disability. We need to continue moving in the direction of placing people into community settings. Many people with severe disabilities are living in the community and they are doing fine. Individuals with developmental disabilities living in the community have more interaction with other people. They have part time jobs, friends, and a better chance of visiting with family members. The state has successfully downsized the RHCs, from a high of about 4000 clients in the 1960's to about 700 clients today. People with the most significant disabilities actually live with their families, not in institutions or other residential settings. Families are the main care provider and support the people with the most significant disabilities. A broad array of services to meet the needs of clients is very important, including the availability of employment services and community access services. Washington is 47th in the nation in terms of the number of clients living in institutions, which is a shame. The RHCs are an optional Medicaid service. It may not be possible to serve clients in the more expensive settings if there are major changes to Medicaid. Parents and children expect to have choices and life opportunities that are not limited. People have a right to privacy, which can be difficult to find in an RHC.

CON: Deinstitutionalization cannot work unless services are provided in the community. Three percent of the population have the title of severe and profound disability. Many of these individuals are non-verbal, non-ambulatory, and require total assistance with every aspect of care in their day. They rely on staff who can know if there is a problem just by looking at them. Worker turnover in the RHCs is minimal. Worker turnover in community settings is high. The job is tough and workers do not receive enough pay. Individuals who live at the RHCs are people. They are not things to be moved from place to place. They are not just a dollar sign. It is frustrating to come to the Legislature year after year to talk about these issues. This is not the right move. The community settings must be stabilized. The Olmstead door swings both ways. It is critical that community capacity is available. If there is sufficient community capacity, then the institutions will close because of lack of demand. We cannot let the experience with Northern State Hospital or the Frances Haddon Morgan Center happen again. Closing an RHC would weaken the safety net. DSHS is not able to show if downsizing the RHCs saves money. People died when Fircrest and Frances Haddon Morgan Center were downsized. The Fircrest property is not just a valuable piece of property. It is a home for many people. DSHS has not acted on requests for rentals of unused property on campus. Some property has been deeded over to the public health lab. Other parts of the property are used as a dog park. Some people left the Frances Haddon

Morgan Center and they were placed into Fircrest, and these people have not ever been placed into community settings. Other states are pointed to as success stories, but there are still problems. Placements cannot occur in urban centers, because the placements are too expensive. There cannot be a general assumption that closing an RHC will save money. By the time an individual is placed at Fircrest for crisis stabilization, there is usually a need for one-on-one, or two-on-one services. Discharge planning is against federal law. There should not be a competition for funding between community services and the RHCs. People have misperceptions of Fircrest based on the memory of institutions from many years ago. The federal government pays half the cost of services provided at Fircrest.

OTHER: Please consider a set aside for affordable housing for individuals with developmental disabilities. There has to be a zero-reject option for placements, and the best option is SOLA. Addressing the vendor rate for community residential providers would help with community placement. Support in the community needs to be available when parents can no longer care for their adult children. A continuum-of-care is important, and RHCs are a part of the continuum-of-care. RHCs provide a safe location for some individuals. There are safety risks if the RHCs are downsized. DSHS should be required to update the plan from 2003 to show how people will transition from Fircrest, and how employees will continue to work in SOLAs. A housing set-aside in the housing trust fund is important to control the cost of rent. Please adopt a consistent policy related to developmental disabilities.

**Persons Testifying**: PRO: Senator Dino Rossi, Prime Sponsor; Ramona Hattendorf, The Arc of King County, Director of Advocacy; Eric Matthes, People first of Washington; Ivanova Smith, People first of Washington; Noah Seidel, Self Advocates in Leadership; Robertm Werdell, citizen; Cathy Murahashi, The Arc of King County; Anthony Nash, Self Advocates in Leadership; Scott Rapp, Executive Director of Tahoma Associates; Margaret-Lee Thompson, parent advocate.

CON: Julianne Moore, Washington Federation of State Employees; Matt Zuvich, Washington Federation of State Employees; Lindsey Grad, SEIU Healthcare 1199NW; William Anderson, Friends of Fircrest; Terri Anderson, Friends of Fircrest - Board; Saskia Davis, Friends of Fircrest.

OTHER: Loren Freeman, Freeman & Associates; Sue Elliott, The Arc Of WA.

Persons Signed In To Testify But Not Testifying: No one.

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