

PUBLIC COMMENT - CULPEPER

Gary Close, *Commonwealth Attorney, Culpeper County*

Mr. Close discussed the impact on the public safety of the community when MR and MH patients are inappropriately released. If these individuals are not prepared, they can be victimized or even become perpetrators and enter the judicial system. The courts are not designed for people who don't understand the consequences of their behavior and decisions. MR adults need a structured environment and supervision as children do, because of their mental age. The CSB is trying to solve these problems, but lacks the necessary funds and manpower. He asked the Committee to support adequate funding for appropriate care.

James Lamar, *former CSB member*

Mr. Lamar remembered the last time deinstitutionalization occurred and the community did not receive the necessary funds to provide care. He hoped that it wouldn't happen again and encouraged support for additional funding for institutions and community care.

Alice Parcell, *parent of MR child*

Ms Parcell is concerned about what will happen to her child when she is no longer able to take care of her. She asked for additional funding to provide more placements, especially for children who need special arrangements. Ms Parcell thanked the Committee and is willing to help with advocacy.

Butch Davies, *House of Delegates*

Delegate Davies expressed concern for the lack of resources for young people, those with mental and physical disabilities. He hears aging parents worrying about their children's future and wondering if anyone cares. Mr. Davies believes resources should be equitable statewide because some areas are being neglected, and that regional cooperation for providing services should be encouraged. He thanked the Committee for sending a positive message by coming to a rural community.

Anne Sale, *Parents and Associates of the Institutionalized Retarded*

Ms Sale has a child at NVTC who is profoundly MR. He can walk but has a mental age of 9-14 months. She is very active in many advocacy groups and has served on dozens of committees. Ms Sale presented a list of recommendations that she wanted the Committee to support, including retaining all current service options, building on what is in place, and funding to address the waiting lists for services. *A copy of her written testimony is attached to these minutes.*

Waja Grimm, *parent of NVTC resident, member of PAIR*

Ms Grimm has served on many DMHMRSAS committees and work groups, but she isn't sure that much has been accomplished. She feels that the Department is using inaccurate costs and statistics in their decisions concerning facilities and community care, because they have not conducted the most relevant studies. Ms Grimm urged that additional funding be provided for MR and that the recommendations from HJR 240 be used. *A copy of her written testimony is attached to these minutes.*

Leanne Coladonato, *human rights advocate*

Ms Coladonato expressed her concern for the rights of individuals in the system. She believes that more decentralizing of services provides better care, because people could be merely warehoused and dehumanized in institutions. She believes that many individuals can be successful in the community with the proper services and supervision.

Pat Bennett, *President of PAIR of Virginia, parent of MR child*

PAIR supports a balanced comprehensive continuum of services in Virginia that includes well-managed residential facilities and increased community services. Ms Bennett discussed some main concerns about the system as a whole:

- Underfunding has created gross inequities in the services that are provided in the state;
- Due to the profound differences in MR and MH, the approach to programming should be individualized according to needs;
- Virginia's management system is outdated, resulting in delays such as a wait time of ten years for placement in NVTC;
- DMHMRSAS needs to develop an accurate data base system so information can be generated when needed;
- Politicization has been harmful to the system because of the high turnover of political appointees and starting over and over again with redundant studies and commissions;
- Community service providers should be held to the same accountability and monitoring as public programs.

Parents' main concern is that their children have a safe and stable environment, and PAIR offered their help to the Commission. *A copy of PAIR's comments on the J&E Draft Report is attached to these minutes.*

Jane Anthony, *parent of NVTC resident*

Ms Anthony is a full time advocate with PAIR and other groups. She is very satisfied with the staff at NVTC and the care that her son receives. She gave the Committee a copy of a presentation she made at the J&E public comment session in October in support of NVTC. Ms Anthony believes that both institutions and community services should be available to access for care. Her husband has developed a chart listing the *Differences and Similarities Among MR, MH, and SA*, which she shared with the Committee. *A copy of these handouts is attached to these minutes.*

Barbara Williard, *parent of child with MH issues*

Ms Williard told about her son who has chronic MH problems. By age 24 he had seen over 100 therapists, been hospitalized several times, and had entered and been released from numerous programs. He began SA problems and then entered the judicial system. He is currently being warehoused in DOC with no services. She believes that if he had received the continuum of appropriate services that he needed, rather than merely treating his symptoms, he would not be incarcerated. The number of youth with MH related problems detained in learning centers far outnumber their segment of the general population. This is a multi-agency and community responsibility and more resources are needed to address it.

Sallie Morgan, Director of Community Support Services for Rappahannock / Rapidan CSB

Ms Morgan feels that they have a good record of successful transitions from CVTC and WSH by providing the services and support they need. She believes that mentally disabled individuals who are cared for by their parents are in great need of services, and the families are worried about their future. Access to community services may reduce the number of placements requested in facilities. There are 45 MRs on the waiting list for residential placement and more are coming out of the public school program. They use Medicaid Waiver programs but there is no more match money available. HUD funds provided a new group home.

Nancy Wilson, ARC of Virginia

The ARC believes that appropriate support and services for mentally disabled individuals can occur in the community. Virginia is last in the use of Medicaid Waiver funds because of the lack of state matching funds. Long waiting lists are a statewide concern.

Lynn Blythe, parent of MR child and case manager for CSB

Ms Blythe is glad that her child can participate in the general education setting for part of the day and also have the special education program services. She feels that this approach is very important, and when he moves out into the community with support, she wants him to have a full range of opportunities to participate in community activities.

Jo Sargent, parent of MR child and President of Fauquier Community Residences

Fauquier Community Residences is a private nonprofit group that helped in securing HUD funds to build a group home. Ms Sargent said that additional funds are needed to complete the program and she is lobbying the Board of Supervisors. Placements are available, but staff are needed first. *A copy of a Fauquier News article on the group home and a copy of some of Ms Sargent's concerns are attached to these minutes.*

JoAnn Lyons, President of Piedmont Alliance for the Mentally Ill and member of CSB

Ms Lyons expressed her gratitude to Ms Sargent and advocacy groups like hers for their work in supporting community service programs. She hoped that there would continue to be people who look out for those who need help. *A copy of her letter to the Commission is attached to these minutes.*