

Jack Mabley
Developmental Center

Public Comments
as of 10/28/2011

Zena Naiditch
 President & Chief
 Executive Officer



FAX TRANSMITTAL

Date: 10-20-11
 To: DAN LONG
 Organization: ILL. Comm. on Govt. Econ. & Account.
 Fax Number: 217-782-3513
 From: KAREN WARD
 Comments: _____

Original Will Follow

Original Will Not Follow

There will be 3 pages, including this cover page. If you do not receive all of these pages or if you have any questions, please contact the office with the checked box below:

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Advancing the human and civil rights of people with disabilities
 SELF-ADVOCACY ASSISTANCE ★ LEGAL SERVICES ★ DISABILITY RIGHTS EDUCATION ★ PUBLIC POLICY ADVOCACY ★ ABUSE INVESTIGATIONS

October 19, 2011

Mr. Dan Long
 Executive Director
 Illinois Commission on Government Forecasting and Accountability
 703 Stratton Office Building
 Springfield, IL. 62706



Dear Mr. Long:

I am writing to bring to your attention several concerns we have about the conduct of the October 17 CGFA Hearing held in Dixon, Illinois regarding the recommendation to close the Jack Mabley Developmental Center. We hope these issues can be addressed before the upcoming hearing regarding the Jacksonville Center.

First, just moments before the five o'clock start time for the hearing, the stage curtains closed, a huge screen appeared, and a video was presented extolling Mabley and opposing closure. This was entirely inappropriate for a Commission Hearing and should not have been permitted. We were advised by the young man CGFA had stationed at the front door (to distribute agendas and obtain witness sign-ups) that the Mayor of Dixon had requested this and had been granted approval by the Commission. The video obviously had a captive audience of hundreds of persons, and it had the effect of stirring up the audience, many of whom behaved in an undignified, and often disrespectful, manner throughout the hearing. (We also note that the video was not captioned, and was shown before the interpreter arrived to the theater, reflecting insensitivity to persons who are deaf and hard of hearing.) We request that no such display be permitted at future hearings.

Second, we were shocked to observe that a hearing on the very subject of the rights and needs of people with disabilities would have had witnesses and Commission Members seated on a stage that provided no access for witnesses using wheelchairs. Indeed, apparently the Commission had not considered that such witnesses might appear, with the result that, after the name of one witness using a wheelchair was called, a microphone had to be removed from the witness table for her to testify from the aisle—in the dark—and out of the view of most audience members and far from commission members. Further, it is my understanding that bathrooms, although useable with difficulty, were also not fully accessible. We request that the Commission make certain that the venue for the future hearings is fully accessible to witnesses and audience members who have mobility disabilities.

THE INDEPENDENT, FEDERALLY MANDATED PROTECTION & ADVOCACY SYSTEM FOR THE STATE OF ILLINOIS

MICHAEL A. PARKS, BOARD CHAIRPERSON ★ ZENA NAIDITCH, PRESIDENT & CEO

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Mr. Dan Long
October 19, 2011
Page 2

Finally, at the Mabley hearing, after listening to the entire testimony of all of the witnesses on the two family member panels, most Commission members left the stage just as the panel of advocacy organizations took the stage. As a result, the Executive Director of the Illinois Council on Developmental Disabilities and other advocates testified to mostly empty chairs. Certainly, after several hours of attentive listening, Commission members were entitled to and deserved a break. We suggest, however, that the better procedure would be for the Chair to announce a ten minute break in the proceedings, so that all witnesses are accorded the full attention of all Commission members.

Equip for Equality appreciates the important and difficult task facing the Commission in a compressed period of time, as well as the challenges presented by the necessity to conduct hearings in local venues with large seating capacities. We make these suggestions in a good faith effort to assist the Commission in this important endeavor.

Thank you.

Sincerely,

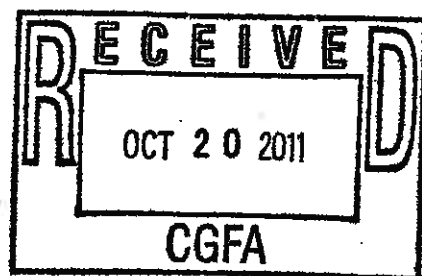


Karen I, Ward
Vice President for Public Policy

Mr Long

I got a letter from CC Di For the
closure of Jacksonville and Mabley
Developmental centers. Mr Long I never
have meet you if the goverment want to
close the to place where are the peo,
be going to the two place also need
money to all the people well lose there
I ask to all the money they have lost if
they going to the 2 place please please
(over)

don't close the 2 place in till
Mr Long will you please write to me
at Steven A Bierman 215 N Banker St
APT 208 Fittingham Ill 62401. Let me
no about the 2 place there you
Steven A Bierman





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ACMHAI

Association of Community Mental Health Authorities of Illinois

To: Governor Patrick Quinn, Senate President Cullerton, Speaker Madigan and Members of the Commission on Government Forecasting and Accountability

From: Association of Community Mental Health Authorities of Illinois (ACMHAI)

Re: Planned closures of state operated facilities housing people with severe mental illness and developmental disabilities

Date: October 7, 2011

It is the policy of this association to collaborate with the State of Illinois, Department of Human Services and other relevant stakeholders to planfully reduce the State's investment in State Operated Facilities (SOF) for people with mental illness or developmental disabilities. Decisions to close SOFs should be predicated on a well thought out plan which assures there are adequate beds for people who require the highest level of care in terms of restrictiveness and supervision. In addition, all dollars saved as the result of closure or reduction in beds should be fully allocated to support community-based care for people who are affected by the SOF reduction. Redirection of resources to community alternatives should include:

- Reinstatement of CHIPS funding to private hospitals to cover the cost of inpatient psychiatric services to the indigent population.
- Recruitment of additional medical staff to increase the number of private hospital beds.
- Development of community-based crisis beds as an adjunct and step down to inpatient services.
- Resources to expand psychiatric, nursing, case management, residential treatment and linkage case management to stabilize community treatment for the non-Medicaid population.
- Closure of Developmental Disabilities facilities accommodated with appropriate resources to address one-on-one care and medical issues.

It is ACMHAI's understanding that the State of Illinois DHS has not promulgated a long term plan for SOF closure or reduction of beds for people with mental illness or developmental disabilities. Input from ACMHAI and other community-based stakeholders has not been sought to determine the extent to which closures or bed reductions of SOFs should be implemented. Also, the State of Illinois DHS has a poor track record for transferring the savings which result from closures to community-based providers. Most recently, the Zeller Mental Health Center in Peoria, Illinois was closed and this resulted in a savings of about \$19,000,000 per year. Only \$4,000,000 of the savings was transferred to community-based providers.

ACMHAI is adamantly opposed to the current closures proposed by Governor Quinn, and views these decisions as arbitrary and capricious; furthermore, they were made, not in the best interest of clients served by these facilities, but as positioning for reappropriation of funding. Our opposition is based on the absence of a plan which is linked to an assessment of need and appropriately transitions people in these facilities to the community. Lastly, there is no evidence the State of Illinois DHS intends to transfer the savings from closures to community-based providers. Because of these deficiencies, ACMHAI believes the current round of closures is irresponsible and places people at risk.



THE STATEWIDE INDEPENDENT LIVING COUNCIL OF ILLINOIS

October 11, 2011

It's Time to Close Mabley Developmental Center

My name is William Gorman, and I am the Executive Director of the Statewide Independent Living Council of Illinois. Unfortunately, I am unable to be physically present at the October 17th hearing so I am providing my testimony in writing and ask that it be read into the record.

Governor Quinn has proposed the closure of the Mabley Developmental Center based on fiscal reasons. There are times when a fiscal crisis can provide an opportunity to do the right thing and also save money. This is one of them.

The Statewide Independent Living Council of Illinois (SILC) supports the closure of the Mabley Developmental Center. The SILC of Illinois has the responsibility for state planning for independent living services across Illinois and we believe the facts to support the closure are overwhelming. Fourteen states have already closed all of their state institutions. Illinois institutionalizes more people with intellectual and other developmental disabilities than 48 other states with our eight (8) state developmental centers.

All of the national studies conducted regarding Illinois' developmental disability system clearly state the need to move away from institutional spending and invest in community services. Numerous national studies indicate that the vast majority of parents: 1. changed their attitudes about community living after their family member had moved to the community; 2. after experiencing community living, parents viewed the institution less positively than they did when their family member lived there; and 3. parents observed improved quality of life and relationships for their family member after the move out of the institution. Overall, individuals served in the community are safer, healthier and have a higher quality of life than individuals living in institutions.

Yes, with some previous closures of institutions, a small number of individuals have returned to a state institution. However, this was not a failure of the individual but a failure of the system to develop sufficient supports for the individual. We believe that Illinois' low rank (47th in the nation) in community spending on community services can explain these infrequent occurrences. We understand the fears of parents who have a loved one residing at Mabley and

Jacksonville; however, with adequate transition funding services can be provided in the community to meet their needs. We now have the opportunity to rectify this situation by re-allocating funds during the veto session, to ensure the smooth transition of individuals to the community. A supplemental appropriation may also be needed next year since the savings from the closure of an institution lag 1-2 years behind the closure.

There is a reason that 14 states have closed all of their state institutions and this is not based on programmatic or quality of life considerations alone. It also happens to be true that community services, in general, are also more cost effective than institutional services. The average cost of an Illinois state institution is \$181,700 per person per year while the average Community Integrated Living Arrangement (CILA) cost is \$52,454. Rates of reimbursement for community providers should be increased to ensure a smooth transition for individuals leaving the developmental centers and to develop future community capacity. Therefore, in this time of fiscal austerity, how can we justify the continuing existence of these two developmental centers? Let's take the savings from the closure of Mabley and Jacksonville to expand community supports and services in the community. At this time, can we not operate with six rather than eight developmental centers?

We hear time and time again the need to reduce government expenditures. We can no longer justify, fiscally or programmatically, the continued operation of Mabley Developmental Center. Let's rebalance Illinois' system of services towards the community, close the developmental center and move forward.



William L. Gorman, Executive Director

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The Civic Federation

177 North State Street, Suite 400, Chicago, IL 60601 • 312.201.9066 fax 312.201.9041 • civicfed.org

October 17, 2011

Senator Jeffrey Schoenberg
Co-Chair
Commission on Government Forecasting and Accountability

Representative Patricia Bellock
Co-Chair
Commission on Government Forecasting and Accountability

Dear Senator Schoenberg and Representative Bellock:

The Civic Federation supports Governor Quinn's plan to close state-operated centers for the developmentally disabled in Jacksonville and Dixon. The closings are consistent with the July 2010 strategic plan of the Department of Human Services' Division of Developmental Disabilities. That plan calls for bringing Illinois in line with federal law and national standards of care by 2017 by reducing reliance on state-run institutions and moving residents into settings that are not isolated from the broader community.

However, the Federation remains concerned that the compressed timetable proposed for the closings might not be adequate to relocate residents to the most integrated settings appropriate to their needs. The Federation is also concerned about the lack of detailed information available about the financial impact of the closings—net of additional costs—on the State's FY2012 budget.

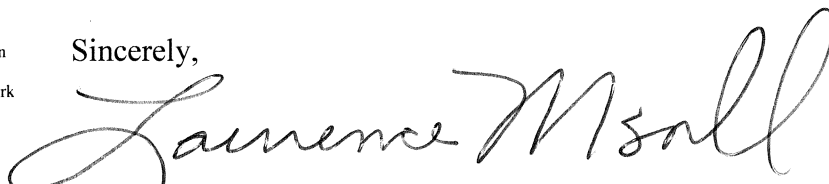
The Civic Federation is an independent, non-partisan government research organization founded in 1894. The Federation's membership includes business and professional leaders from a wide range of Chicago area corporations, professional service firms, and institutions. Our mission is to promote rational tax policies that will improve the quality of our local governments and eliminate unnecessary burdens on taxpayers.

The Federation urges the State of Illinois to provide more details about access to community-based services for relocated residents and about projected financial savings.

The Federation is not taking a position on the Governor's proposed closings of mental health, correctional and youth detention facilities due to insufficient information on the logistical and financial planning related to the closing of these facilities and the proposed alternatives.

Thank you for this opportunity to submit commentary.

Sincerely,



Laurence Msall
President



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October 17, 2011

TO: Commission on Forecasting and Accountability
Attention: Facility Closure

FROM: Halima M. Jabulani, Board Member, The Arc of Illinois

RE: Closing of the Mabley Developmental Center

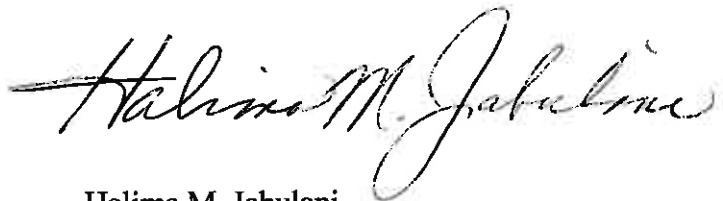
I am a concerned citizen, parent of an adult with a disability and advocate who believes Everyone should be supported in the community. I am in support of the closing of the Mabley Developmental Center and for the transitioning of the people there with all the needed resources and support in a safe and appropriate manner.

I have a daughter with a disability who has been waiting two years for placement in a group home. Additionally, I have MS and this delay has caused great stress for both of us.

Illinois is 50th in small community settings and 47th in community spending.

I fully support your decision to close the Mabley Developmental Center.

Respectfully,

A handwritten signature in cursive script that reads "Halima M. Jabulani". The signature is written in black ink and is positioned above the typed name and address.

Halima M. Jabulani
305 W. Swann Street
Chicago, Illinois 60609



Ray Graham Association

Empowering people with disabilities

October 14, 2011

Senator Jeffrey M. Schoenberg, Co-Chair
Representative Patti Bellock, Co-Chair
Commission on Government Forecasting and Accountability
703 Stratton Building
Springfield, IL 62706

RE: Support of SODC Closures – Jacksonville and Mabley

Dear Senator Schoenberg, Representative Bellock, and members CGFA,

My name is Kim Zoeller and I am the President and CEO of Ray Graham Association (RGA). I am writing to you on behalf of the nearly 2,000 children and adults with intellectual and developmental disabilities and their families served by Ray Graham Association. Further I represent a team of 400 employees.

I fully support the closure of both Mabley and Jacksonville Development Centers. I have prepared some materials that highlight some important issues.

- A brief summary of several former institution residents who have moved to RGA community residential programs. Among the people highlighted is a gentleman who spent 25 years in state institutions before moving to RGA last year. Hopefully information such as this helps to dispel the myth that some people will always need institutional care.
- A narrative summary of “Fact vs. Fiction” concerning the community vs. institution debate.
- Key pieces of data that outline rates comparisons, Illinois spending relative to other Great Lakes states, and current unmet needs in Illinois.

As a provider of community based services for people with intellectual and developmental disabilities in Illinois, we stand ready and eager to partner in an effort to advance our system to one that is focused toward the rebalancing of resources and that values our citizens who often times do not have a voice. Please feel free to contact me at (630) 620-2222 or at kimz@raygraham.org.

Best regards,

Kim Zoeller
President and CEO
Ray Graham Association
901 Warrenville Road, Suite 500
Lisle, IL 60532

Kimberly R. Zoeller, President and CEO
901 Warrenville Road, Suite 500 • Lisle, IL 60532
Phone: 630.620.2222 • Fax: 630.628.2350

www.raygraham.org



Ray Graham Association Partners for a Solution

Real Life Stories

Profiles of Former Residents of Illinois State Institutions Who Now Live, Grow and Thrive in the Community

Despite the suggestion that people leaving state institutions cannot be supported in the community, Ray Graham Association (RGA) has supported a number of people to move from isolated and costly state institutions, into neighborhood homes where they're able to explore and become a part of their community and begin to experience a productive and meaningful life. Families are overwhelmingly positive about receiving Community Integrated Living Arrangement (CILA) services through RGA, and thankful that they and their loved one have become a part of the Ray Graham family.



Laura moved from the Howe state institution in 2007, where she had lived for nearly 25 years. Because she had resided in an institution for most of her adult life, it was not an easy transition for Laura to move into a home. However, Laura had a full team of professionals and direct support staff working with her to make sure that she would be successful. Today Laura is cheerful, fun-loving and adventuresome. She loves living in Naperville and exploring the community around her, including regularly volunteering for Meals on Wheels and taking advantage of the many parks and resources her community has to offer. Laura's connection and involvement with her family has strengthened during the past few years, and she now attends and actively participates in family celebrations and important events.



Michael is another former state institution resident who is thriving in his new home. Michael moved to RGA after having lived for nearly 20 years at the oldest state institution in the country (opened in 1879). Michael's family wanted him to move closer to them and to be able to experience a better quality of life than what the institution offered. Michael and his family visited several homes where Michael could live, so that they could choose they thought would be the best fit for him. Through the individualized planning process, Michael and his family were able to let staff know what he liked, disliked and things he wanted to do now that he lived in a community. Michael and his roommates lead an active life, including attending sporting events, concerts and shopping. Michael's family is regular visitors and he's able to spend as more time with them now that he's not a 2 hour drive

away. Michael's father couldn't be happier with his progress: "I think he's doing well at Ray Graham. He didn't have the liberty or the social involvement when he was living at Shapiro that he has now. The staff is also teaching him to be more independent!"



Angel lived in state institutions from the time he was 5 until finally moving into his own "home" 3 years ago. One of the excuses for Angel living in an institution was that his uncontrolled seizure activity required continuous nursing presence. With support and determination from RGA, Angel's medications have been adjusted with great success. While he requires continuous close monitoring, Angel's condition doesn't require him to live in a segregated institution. Now Angel fully participates in the life of the community, including attending a Community Learning Center during the week, volunteering, participating in activities at his home and going out with friends on the weekend. Staff became aware of Angel's interest in animals, and have created numerous, ongoing opportunities for him to interact with a variety of different animals, including pet therapy, visiting the horses and barn area at an RGA program site, and visiting pet stores near his home.



Billy had lived in state institutions since 1959, until finally moving to an RGA CILA home less than a year ago. Billy and his family visited his home several times before moving, to make it a smooth and comfortable transition. Billy was able to get to know his housemates and staff and was excited when he got to join them permanently. Being close to his family was a priority for Billy and his family. Billy's family expressed surprise that they could visit with him so freely and that he could join them at important family events; his mother reported that staff at the institution had discouraged them from visiting with Billy and establishing a meaningful relationship with him. The family experienced their first RGA Holiday Party this year, and was thrilled to see so many other families present and see how happy their son was with his new friends. A treasured memory of this event for both Billy and his family is the picture staff took of them in front of the Christmas tree – the first family photo they had with their son.



Harlan was a resident of the Howe institution for nearly 25 years before moving to an RGA CILA home. Harlan immediately began to blossom and expressed his happiness with his new home, staff, friends and opportunities. Harlan enjoys going to concerts, playing sports, going out to dinner, bowling and visiting the zoo. Harlan is happy to have the responsibilities of living in home, and enjoys helping with cooking, chores and deciding how he spends his free time. Most importantly Harlan feels safe in his new home and is enjoying life day by day!



Rick also moved to an RGA CILA home from the oldest state institution in the country, where he had lived for many years. Rick's father was seeking alternative placements for Rick because he felt that there were better options for Rick to live in other than a state institution. Rick and his father are both very happy with the decision to have Rick move into a CILA home. Rick's dad has stated on several occasions that Rick is so much happier living in his new home than when he lived at the institution. Rick has been able to pursue more of his personal interests since moving, including playing and listening to music and attending concerts. Rick plays the keyboard and has performed at the Annual RGA Holiday Party.

Ray Graham Association is able to provide services to former residents of state institutions at a much lower cost -- we could support nearly 4 people in a CILA home for what the state pays to house 1 person in an institution. Of course, far more important than the savings in a community program, is the quality of life that people such as Rick, Harlan, Billy, Angel, Michael and Laura experience as a result of moving from an institution into a home in the community. The commitment, flexibility and our person-centered and mission-driven focus supports people to grow, thrive and live a meaningful life.

People with disabilities and support needs deserve the same opportunity as everyone else to chart their destiny and follow their dreams; moving from an institution into a home in the community is the first step on this journey.



**Ray Graham Association
Partners for a Solution**

Setting the Record Straight

Why Illinois Cannot and Should Not Continue to Support Costly Institutionalization for Citizens with Disabilities

The lives of tens of thousands of people with disabilities and their families across the state of Illinois depend upon how our lawmakers allocate the precious little amount of money available for disability services. It's an emotional issue for everyone:

- Those currently in Illinois institutions;
- Those receiving limited and under-funded services in the community;
- Those living at home receiving no services; and
- The families of every Illinois citizen with a disability who is either now confronting the reality of living in a state which only surpasses 3 others in per-capita community-based service funding, or those whose children are still in the school system and don't yet even realize their well-educated children will leave school only to discover that they are entering an adult service system that cannot support them, because Illinois won't fund the services they need.

There is no quick or easy solution to the challenge of equitably and responsibly allocating limited resources, but there is a right solution – Illinois' support of archaic, costly and outdated institutional settings must end, and our limited resources be used to support as many people as possible in a community-based service delivery system.

The issue of how to best support people with disabilities in Illinois is gaining increasing prominence:

- Taxpayers are demanding accountability for the use of public revenues;
- At least 21,000 citizens of Illinois are registered with the state as needing community-based services, with no plan on the state's part for meeting this demand;
- The stability of the existing community service delivery system is subject to a growing threat caused by delayed and insufficient payments from the state; and
- The continued reliance on a system which throughout the world, is recognized by professionals, advocates and people with disabilities themselves as archaic and outdated, has become completely indefensible.

The debate over how scarce resources will be spent becomes more critical with each passing day, and as such, sometimes facts become clouded or overshadowed. A few facts about institutional and community-based services in Illinois warrant repeating:

Costs

- In FY12, it will cost an average of \$192,000/person to keep an Illinois citizen with disabilities in an institution, versus an average of \$50,000/person to support that same person to live in a community residence.

- This year, Illinois is projected spend more than \$307,500,000 (Three-Hundred Million, Five-Hundred Thousand dollars) on institutional services for 2,101 residents of state institutions. Nearly 3 times that number of people could be served for the same amount of money in community residential settings.

Support Needs

- Thousands of former residents of institutions are leading productive and fulfilling lives living in community residences. There is no clinical or diagnostic standard that distinguishes residents of institutions, from people supported in community residences. Indeed, for the former residents of state institutions who have moved into the community during the past several years, the most relevant criteria is whether the person's guardian will permit the move.
- State institutions hold the same licensure category as hundreds of facilities throughout Illinois. These facilities are held to the same standard of care and service as state institutions, though are reimbursed at one-third the cost of state institutions.
- A common argument made by advocates of institutions is that many residents of such settings have "failed" or been "discharged" by the community. In fact, there is no quantitative research on the population of Illinois institutions to support this claim. Many responsible community providers feel that if the state would fund services for people with more intense needs at a reasonable level, those actual instances where a community agency petitions for discharge would decline precipitously.

Personnel

- The majority of contact residents of institutions or community settings have is with Direct Support staff. There is no discernable difference between the training, competency or commitment of people functioning in this capacity, based on where they work.
- Many providers of community based services are mission-based, local, not for profit organizations with a history and connection with their local community. Staff in institutions are part of a bureaucracy, overwhelmed by rules and subject to a myriad of requirements that are completely unrelated to the provision of care and support to people with disabilities.

Numbers

- In the current fiscal year there were 2,100 residents of state institutions and 21,000 residents of Illinois who qualify for, but don't receive any disability services. Policymakers, politicians and professionals in the field all know that as long as those 2,100 people continue to be housed in institutions, the remaining (and growing) group of our citizens who are equally deserving of services, will be left with nothing.

Comparison of Rates for Institutional and Community Services



Ray Graham Association for People with Disabilities

Average FY11 Cost in an Illinois Institution

\$168,656

Average Payment to RGA for all 24/7 CIA Residents (N=108)

\$ 52,797

Average Payment for RGA ICFDD (same licensure and regulations category as State Institutions) N=98

\$ 58,828

Average Payment to RGA for People Leaving State Institutions 2007 – 2010 (N = 8)

\$ 54,654

Annual Savings Generated by 8 Former Institution Residents Living in Community Residences:

\$912,016

Unmet Need for I/DD Services in Illinois as of 9/1/11

Unduplicated Count of PUNNS Records with Current Needs

- ▶ Emergency: 3,398
- ▶ Critical: 11,602
- ▶ Planning: 6,490

A total of 21,490 Illinois residents are identified as needing services and supports today!



Comparison of Illinois and Great Lakes Region States Spending for Intellectual/Developmental Disability Services



Ray Graham
Association of Illinois
2010-2011

Source: State of the States in Developmental Disabilities 2011 Braddock et. al.

Prepared by Ray Graham Association for People with Disabilities

Iisle, Illinois

Indicator	Illinois	Great Lakes Region	% Difference	Comments
Total Fiscal Effort for I/DD Services per \$1,000 Personal Income	\$3.13	\$4.90	64%	Total community and institutional spending for I/DD services, per \$1,000 of personal income
Community Fiscal Effort for I/DD Services per \$1,000 Personal Income	\$2.02	\$4.18	48%	Spending for residential settings for 15 or fewer persons and non-residential community services and supports, per \$1,000 of statewide, aggregate personal income.
Institutional (16+ Persons) Fiscal Effort for I/DD Services	\$1.10	\$0.71	155%	Note - this is <u>not</u> an indicator on which Illinois wants to be ahead of our neighboring states
Home and Community-Based Services Waiver Federal-State Spending Per Capita (note - per citizen of the general population)	\$38.00	\$95.00	45%	The Home and Community Based Services (HCBS) Waiver is the principal Medicaid program funding I/DD long-term care services. The HCBS Waiver funds a wide variety of residential and non-residential community services and supports
Average Annual Cost of Care in SODC	\$181,717.00	\$181,230.00	100%	The average "Topline CIA Rate" for "High-Need" individuals in Illinois is \$56,105 (Source DHS Website CIA Rates Update June 2011)
Average Daily Cost of Care in SODC	\$498.00	\$497.00	100%	The cost of institutional care does not vary across the region; however Illinois is substantially more reliant on this expensive archaic model of service delivery than any of our Great Lakes neighbors
Community Spending as a % of Total I/DD Spending	65%	85%	76%	Community spending is lower in Illinois than in neighboring states, as is overall I/DD spending
% of Total Out-of-Home Placements in Settings of 6 or Fewer	38%	71%	54%	Illinois residents with I/DD are substantially less likely to be served in a small integrated home in the community than residents of neighboring states
% of Total Caregiving Families Receiving Public Funding	8%	15%	53%	The vast majority of families who care for a member with I/DD do not receive any public support
Individual and Family Support Spending Per Capita (Per capita: Per citizen of the general population.)	\$13.00	\$49.00	27%	Individual and Family Support spending consists of spending for individuals with I/DD (supported living/personal assistance and supported employment) and for family support.



Comparison of Illinois and Great Lakes Region State Census and I/DD Funding

Source: State of the States in Developmental Disabilities 2011 Braddock et. al.; United States Census Bureau

Prepared by Ray Graham Association for People with Disabilities

Lisle, Illinois

State	I/DD Total Spending 2009	2010 Total State Census	Total I/DD Spending Per Capita	Total Number of People Served in Out-of-Home Settings	Total Number of People Receiving Family Support and Supported Employment Services	Total Number of People with I/DD Served	Total # of People with I/DD Served as a % of Total State Census
Wisconsin	\$1.16 billion	5,303,925	\$218	16,176	19,105	35,281	0.67
Minnesota	\$1.68 billion	5,686,986	\$295	18,258	9,119	27,377	0.48
Michigan (1)	\$1.31 billion	9,883,640	\$132	28,233	19,891	48,124	0.49
Ohio (2)	\$2.82 billion	11,536,504	\$244	30,417	25,830	56,247	0.49
Indiana	\$909.2 million	6,483,802	\$140	12,642	7,005	19,647	0.30
Illinois	1.71 billion	12,830,632	\$133	23,730	8,694	32,424	0.25

Notes:

1. Even though Total I/DD spending per capita is roughly the same in Illinois and Michigan, Michigan serves far more people due to Illinois' reliance on costly institutional care
2. Ohio is the closest Great Lakes Region state in size to Illinois and serves almost twice as many residents as a % of state census



October 25, 2011

**IARF Recommendations to the Commission on Government Forecasting and Accountability:
Proposed Closure of Jacksonville and Mabley Developmental Centers**

The Illinois Association of Rehabilitation Facilities (IARF) represents over 90 community-based providers serving children and adults with intellectual/developmental disabilities, mental illness, and/or substance use dependencies in over 900 locations throughout the state. For over 35 years, IARF has been a leading voice in support of public policy that promotes high quality community-based services in healthy communities throughout Illinois. Approximately 600 licensed and/or certified community-based providers provide services and supports to over 200,000 children and adults in the community system.

Based on our analysis of the state fiscal year 2012 budget for the state-operated developmental centers, the Association anticipated the Department of Human Services (DHS) would be forced to announce implementation plans to manage the reduced appropriations. However, the announcement to close the Jacksonville and Jack Mabley Developmental Centers along an aggressive timeframe with an estimated 250 individuals recommended for transfer to community-based settings was alarming. A major policy decision such as the closure of a state facility should not be completely driven by budget restrictions, as is the case with these two announcements, but should be driven by a commitment to making Illinois a leader in providing high quality community living for all individuals with intellectual/developmental disabilities.

Community-based providers want to provide services to individuals currently residing in state facilities, and many have a successful track record of serving former residents. IARF has identified recommendations that we believe must be implemented to ensure a successful downsizing/closure of a state facility and transition of individuals residing in those facilities to more integrated community-based settings. The recommendations below are more fully developed in the attached document.

- Establish a closure timeframe driven by process, which requires adequate preparation of community capacity prior to initial transitions of individuals from state facilities to the community.
- Provide an accurate assessment by an independent contractor of the facility residents with medical and/or behavioral issues that require careful planning.
- Establish a formal process for ensuring family members' and/or guardians' understanding of the closure process and the options available.
- Develop community-based capacity to appropriately address the needs and wishes of individuals transitioning to the community. This requires funding to supplement – not supplant - existing resources for individuals currently being served in the community.
- Revise existing Community Integrated Living Arrangement (CILA) rates to cover the cost of providing care and clearly identify specialized rates where appropriate. Timely payment must be secured as well.

In order to implement these recommendations, we do not believe the aggressive closure timeline of the developmental centers as recommended by the Department is conceivable. IARF has full faith and confidence in our members to serve individuals transitioning from state facilities if a commitment to implement these recommendations is made by the state.



Illinois Association of Rehabilitation Facilities
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Attachment: Description of IARF Recommendations to the Commission on Government Forecasting and Accountability: Proposed Closure of Jacksonville and Mabley Developmental Centers

Comments on the Announcements

IARF believes a strong network of community-based providers are integral to healthy communities in Illinois and reflective of the intent of the landmark *Olmstead* court case, which determined that services and supports for individuals with intellectual/developmental disabilities should be provided “in the most integrated settings appropriate to the needs of qualified individuals.”

As indicated in the summary cover page, IARF has full faith and confidence in our members to serve individuals transitioning from state facilities. That confidence is based on the assumptions of sound planning and reasonable timelines, the state meeting its obligations of adequate resources for the safe transition of individuals, and assurance that those resources will supplement – not supplant – resources currently supporting individuals in the community. We believe these assumptions are reflected in our recommendations, which are more fully described below.

These recommendations were developed by a workgroup specifically designated by the IARF Board of Directors, and include revisions from previous recommendations IARF developed in 2007. This workgroup includes representation from members that:

- have successfully served individuals who have previously transitioned from state facilities;
- currently provide services to residents from Jacksonville and Mabley Developmental Centers;
- are involved in the pre-admission screening process (PAS); and
- have administered state-operated developmental center programs in the past.

As evidenced by the composition of this workgroup, we believe our recommendations are supported by best practice and lessons learned from previous state facility closures in Illinois and other states.

Closure Process Recommendations:

Recommendation 1: Establish a closure timeframe driven by process, which requires adequate preparation of community capacity prior to initial transitions of individuals from state facilities to the community.

Data from past closures of state facilities in Illinois and data from other states indicate the closure process occurred from one and a half to as long as five years.ⁱ While five years may be an extended period of time – as we believe there are individuals currently residing in these state facilities that could transition soon to existing community capacity – IARF supports a time frame of twelve to eighteen months for other existing residents to ensure DHS’ Division of Developmental Disabilities is working collaboratively with individuals being served, their family members/guardians, and community-based providers to ensure the other recommendations we have provided are meaningfully implemented.

Recommendation 2: Provide an accurate assessment by an independent contractor of the facility residents with medical and/or behavioral issues that require careful planning.

Currently, community-based providers intending to serve an individual transitioning from a state facility must rely on a compilation of reports developed by state facility staff provided to PAS agencies. These reports are intended to provide a clear understanding to the provider of the behavioral, medical, and rehabilitation needs of the individual, as well as the individual's goals so that provider can ensure its capability of addressing those specific needs and empowering the individual to achieve desired goals. This information is critical to a successful transition.

While not citing any individual or system, there has often been a less than objective assessment that has preceded individuals from state facilities to the community. This is dangerous for the person and is unacceptable. Therefore, we recommend the Department establish a process for contracting with a third-party contractor to provide independent assessments of the residents of these facilities with medical and/or behavioral issues that require careful planning by an independent contractor to ensure no bias in the determination of the individual's service plan.ⁱⁱ This recommendation is in line with legislation sponsored by Senator Heather Steans (SB 1622 as introduced) and Representative Sara Feigenholtz (HB 1687) this year.

The Association also recommends the arbitrary geographic limitations on the operations of PAS agencies be lifted to allow for free choice in the system and to preclude the 'overloading' of any one PAS office geographically closest to the state facility recommended for closure.

Recommendation 3: Establish a formal process for ensuring family members' and/or guardians' understanding of the closure process and the options available.

Most likely due to the budget driven nature of the closure announcements, family and guardian notification came as an unexpected surprise, and so the very public resistance and vehemence for the facilities to remain open is understandable. Based on our review of previous closure processes, we believe this anxiety is due to the Department:

- not previously providing families/guardians with the reasons the closures are occurring;
- presenting families/guardians with an unimaginable timeline for their family member to be moved; and
- providing inadequate information about the services and/or supports that are available to them in the community.

The combination of these factors, as well as the experience at Howe provided insight into how high staff ratiosⁱⁱⁱ at state facilities (not based on individual need and inordinately high) compared to community settings instill fear in families that their family member will receive less care in the community than at a state facility.

Family/guardian involvement in the transition/closure process is essential. A collaboration of community stakeholders developed an excellent guide for family involvement called the "Community for All Toolkit."^{iv} The basic tenets of the toolkit are:

1. Information Sessions are critical for the families to feel engaged;
2. Open Houses in the community should be planned so families can learn what is available;
3. Families of individuals currently living in the community – especially those whose family member has moved from a state operated facility to the community – are essential in helping educate other families and allay concerns;
4. Set up a Family Buddy System between state facility families and community families; and

5. Families must be invited and involved in the actual relocation, so scheduling around their time is critical and they should be encouraged to stay involved with their family member's activities and with their parent buddy family as well.

Recommendation 4: Develop community-based capacity to appropriately address the needs and wishes of individuals transitioning to the community. This requires funding to supplement – not supplant existing resources for individuals currently being served in the community.

The development of community-based capacity targeted to address the needs and wishes of individuals transitioning from state facilities to community-based settings is a requirement for successful transitions. There are several important components to capacity building, which are outlined below.

- *Workforce Training* – Adequate community-based staff training is a pre-requisite to a transition. Individuals who have been institutionalized require more supports during and after a transition as opposed to an individual who has never been institutionalized. That support is essential and staff in the community agencies must be aware and have the support to be fully prepared to engage with new individuals in the same way they have engaged in the lives of others living and working in the community. Experience gained from transitions from Fox Developmental Center and the closure of Howe Developmental Center, wherein state facility staff familiar with the individual worked collaboratively with staff in the community-based agency to create a “bridge” of experience, lead to increase transition success. For a period of time after transition the state facility staff most familiar with the individual in transition should continue to provide technical assistance and support until the individual is fully adjusted to his or her new home.
- *Direct Support Wages & Benefits* – Direct Support Professionals (DSPs) are the frontline workers that are integral to assisting individuals with intellectual/developmental disabilities realize their goals of living, working, and recreating in the community. Wages and benefits paid to direct support professionals account for 90 cents of every dollar invested in community-based agencies.^v However, the disparity between the wages paid to DSPs working in community-based agencies compared to those working in state facilities is growing, with an average entry wage of \$8.85/hr for a community employed DSP as compared to the average entry wage of \$14.77/hr for counterparts working in a state facility.^{vi} This disparity represents nearly a \$6.00/hr differential. Unfortunately, state fiscal year 2008 was the last time an increase for these wages and benefits was approved, but only at 2.0% - compared to significant wage and benefit increases gained by counterparts working in state facilities. Adequate funding for DSP wages and benefits must be prioritized in state budgets to address the disparities and encourage growth in the field to address the dramatic need for these workers over the coming years as the baby boomer generation approaches retirement and primary care givers are unable to tend to the needs of individuals with intellectual/developmental disabilities living in-home.
- *Nursing Supports* – Since the approval of SR 514 by the Illinois Senate during the 94th General Assembly, IARF has advocated for the need to increase nursing support in community-based residential settings, specifically Community-Integrated Living Arrangements (CILA). Despite our advocacy efforts, the state has shown little interest in investing the revenues necessary to implement the recommendations of the CILA Nursing Services Report – despite evidence that the needs have reached the critical, if not crisis, stage.^{vii} The current CILA Rule (Rule 115) and the Medication Administration Rule (Rule 116) must be updated to reflect the level of need of individuals currently living in the community as well as individuals who may transition from state facilities.

- *Behavioral Supports* – Adequate behavioral supports are also essential to the transition planning process. The community-based provider must be fully able to provide such supports for the time necessary to integrate an individual transitioning to their new residence and possibly their new work environment. Individuals will have to meet new staff and build trust while developing new relationships. The community-based provider staff will need to be perceptive to changes in behaviors that if left unaddressed, could escalate, causing serious adjustment issues and possible harm to the individual. Whether those behavioral supports are provided by the community-based provider or through linkages with other community resources, they must be planned and they must be funded. That funding must recognize that adjustment times will vary from individual to individual and community-based providers must be assured that an “add-on” will not arbitrarily disappear without strong clinical evidence that the transitioning individual is stable in his or her new setting.
- *Crisis Supports* - It is strongly indicated that behaviors can change throughout a person’s life for a number of reasons unique only to that person. When that happens, funding must be available to assess what additional supports are necessary and for the duration of the stabilization of the individual. Resources must be quickly available when the situation warrants.
- *Residential Capacity* – There is limited existing CILA capacity in the community-based system, however, the majority of individuals currently residing in CILA group homes are under the six to eight bed CILA model. The shift this CILA size is primarily driven by individual CILA rates that don’t cover the costs of smaller group home settings. We believe it is the intent of DHS’ Division of Developmental Disabilities to transition individuals from state facilities to the four bed CILA model, as this model will provide enhanced federal matching assistance percentage (FMAP) according to the Money Follows the Person (MFP) Demonstration Program. However, as evidenced by the current landscape, the four bed model is not predominant due to inadequate rates and reimbursements.

We encourage the Division to explore utilizing existing capacity where and when appropriate to serve individuals that may transition from a facility, however, we acknowledge that the existing capacity is insufficient to serve the estimated 250 individuals the Division has recommended to transition. This will then require community-based providers to either purchase, renovate, or build new group homes – a process that requires capital and time to meet permit and building code requirements. We note that the state’s existing process of cutting community funding and delaying payments to community-based residential providers has all but wiped out any resources providers might’ve had in the past to develop this infrastructure. IARF therefore recommends that as a component of building residential capacity, the state must prioritize an improved payment cycle for providers and capital support to not only build capacity, but cover the cost damage or destruction to property that often occurs during an institutional-to-community transition.

Recommendation 5: Revise existing Community Integrated Living Arrangement (CILA) rates to cover the cost of providing care and clearly identify specialized rates where appropriate. Timely payment must be secured as well.

If the state truly wants to drive the future of services and supports to community-based settings – as articulated by Governor Quinn during his September 8, 2011 announcement, then the Department must be willing to shift previous decisions relative to rate and reimbursement methodologies.

Recent rate studies^{viii} conducted by DHS’ Division of Developmental Disabilities have looked at the real cost of serving individuals in group home settings of four persons defy the current discussions of using the “average” CILA reimbursement to support individuals transitioning from state facilities. Similar studies have determined that that

‘average’ does not support individuals living in six and eight-person settings and are disquieting when compared with other state ‘averages’ for similar supports in those settings. For example, Acting DHS Division of Developmental Disabilities Director Kevin Casey is openly concerned about the transition discussions considering Illinois pays – on average - \$55,000 per person and his previous state experience in Pennsylvania paid – on average - \$90,000 for essentially the same service packages. The ‘average’ CILA rate will not support individuals who transition during the early months/years of their transition in the best of circumstances. Furthermore, the ‘average’ CILA rate will not come close to supporting individuals who transition to a four-bed group home setting, which as noted above has been the policy determination by the Division in these discussions.

Specialized rates and rate add-ons^{ix} that actually pay for the identified supports an individual transitioning from a state facility to a community-based setting are essential. A multi-year commitment must be made by the state to these specialized rates and add-ons as long as they are deemed appropriate. Unfortunately, the most current experiences of several community-based providers that have responded to the state’s requests to serve individuals transitioning from state facilities is they are promised initial rate packages that are subsequently reduced against the clinical determination of the individual’s needs.

Illinois has reduced community resources through successive years of budget cuts, specifically 19.3% over four years – or \$174.58 million in cuts. Furthermore, the state has used specifically community-based providers as creditors of the state through years of long payment delays dating back to 2008. This situation has not improved, despite the expectation that once the payment cycle requirements of the American Recovery and Reinvestment Act (ARRA) expired, that more parity would exist in payment cycles for all health care providers. The state cannot expect the reality of the existing funding situation and payment delays to be ignored in the planning of potential transitions from Jacksonville and Mabley Developmental Centers.

IARF Members are Focused on Solutions

There is great anticipation among community-based providers about supporting individuals transitioning from state facilities to the community. Evidence shows that persons who have been institutionalized for much of their life can successfully live in the community^{x xi} and organizations have honed their skills in areas needed to open that opportunity to individuals and families who exercise their choice to transition.

However, there is great apprehension in the community as well. That apprehension is not based on their confidence to successfully support the individual – it is based on their confidence in the state to hold up its end of the bargain. That responsibility – to transition resources – has historically been spotty at best. Of even greater concern is the fact that these recent closures have been precipitated by inadequate resources, not policy decisions driven by sound planning. Furthermore, the community is expected to serve as many as 9,000 additional individuals with intellectual/developmental disabilities over the next six years per the *Ligas* court ordered consent decree.

As clearly stated in our cover summary page, IARF has full faith and confidence in our members to serve individuals transitioning from state facilities if a commitment to implement these recommendations is made by the state. If the state can bring these assurances to the table, then the discussions of closing Jacksonville and Jack Mabley Developmental Centers will produce quality outcomes for individuals that transition and as importantly, their families.

ⁱ ARC of New Jersey. “The Future of Individuals with Developmental Disabilities and New Jersey’s Developmental Centers.” May, 2009. Accessible at: <http://njddc.org/ResourcesforPolicyMakers/copy/The%20Future%20of%20NJ's%20DCs.pdf>

ⁱⁱ Shannon, Anne. “Howe Developmental Center – Final Report” June 2009. Accessible at: http://www.realchoiceinillinois.org/documents/Howe%20report_Shannon.pdf

ⁱⁱⁱ *Ibid*

^{iv} American Association on Mental Retardation (AAMR), ARC of the United States, Center on Human Policy, Council on Quality and Leadership, National Association of Councils on Developmental Disabilities (NACDD), University of Minnesota's Research and Training Center on Community Living, and Tash. "Community for All Toolkit – Resources for Supporting Community Living." August, 2004. Accessible at: <http://thechp.syr.edu/toolkit/>

^v 2011 IARF Salary Survey. Accessible for purchase at: <http://www.iarf.org/Public/SalarySurvey.aspx>

^{vi} Mosaic Collaborative for Disabilities Public Policy and Practice. "ANCOR 2009 Direct Support Professionals Wage Study: A Report on National Wage, Turnover, and Retention Comparisons. August, 2010. Accessible at: http://www.youneedtoknowme.org/downloads/research/ancor_wage_data_summary_2009.pdf

^{vii} Navigant Consulting. "Report of the Community Integrated Living Arrangement Nursing Services Reimbursement Work Group to the Secretary of the Department of Human Services, the Illinois General Assembly, and the Honorable Rod R. Blagojevich, Governor, in Response to Senate Resolution 514." October 2006. Accessible at: <http://www.iarf.org/uploads/docuploads/forums/cburnett@iarf.org/CILA%20Nursing%20Services%20Report%20Final%20October%202006.pdf>

^{viii} CILA Rate Workgroup. "Interim Report of the CILA Rate Workgroup of the Statewide Advisory Council Rates Committee – CILA Model and Reimbursement Issues." March 2009. Accessible at: <http://www.iarf.org/uploads/docuploads/forums/cburnett@iarf.org/CILA%20Rates%20Interim%20Report%203-9-09.pdf>

^{ix} IARF Concept Papers on Specialized Rates and Reimbursements. Accessible at: <http://www.iarf.org/Members/PolicyInformation.aspx>

^x University of Minnesota Research and Training Center on Community Living. "Status of Institutional Closure Efforts in 2005." September, 2005. Accessible at: <http://www.iarf.org/uploads/Univ%20of%20MN%20Policy%20Brief.pdf>

^{xi} Braddock, David and Richard Hemp. "Establishing a Tradition of Commitment: Intellectual and Developmental Disabilities Services in Indiana: Executive Summary." October, 2008. Accessible at: <http://www.iarf.org/uploads/Braddock%20Summary%20Report%20Final%202008.pdf>



**SPRINGFIELD CENTER FOR
Independent Living**

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October 17, 2011

Commission on Governmental Forecasting & Accountability (COGFA)
Facility Closure
703 Stratton Building
Springfield, Illinois 62706

Senator Jeffrey Schoenberg, Co-Chair COGFA

Representative Patti Bellock, Co-Chair COGFA:

The Springfield Center for Independent Living (SCIL) supports the closing of Jacksonville and Mabley Developmental Centers. We at SCIL see this as an opportunity to rebalance the archaic system that serves people with Developmental Disabilities in Illinois.

Community residential settings have been the national standard for years, Illinois has continued to operate institutional settings and has fallen further and further behind on how it serves some of our most vulnerable citizens.

Illinois is clearly not following a national trend to move people with disabilities into community settings. We rank 49th in the provision of community integrated settings by housing more people with developmental disabilities in state institutions than 48 other states.

As the Commission on Governmental Forecasting & Accountability examines relevant facts to make a decision about the closing of the Jacksonville and Mabley Developmental Centers, please consider the following:



- The transition from an institution to a community setting must include a transition period that will not just “dump” people somewhere else. “One size does not fit all”.
- Each resident should be treated on an individual basis with family members included in the decision making process.
- The safety and welfare of every resident should be the highest priority.
- Funding should be available to move residents into appropriate community based settings.
- The Olmstead decision of 1999 should be the standard as you decide how to move forward in your considering the futures of the Jacksonville and Mabley residents. This Supreme Court decision on Olmstead “is a prohibition, mandated by federal law, against avoidable and unnecessary institutionalization of individuals with developmental disabilities, and as a requirement that states make reasonable efforts to place institutionalized individuals with developmental disabilities in the community”.
- Fourteen states have closed all of their institutions. Perhaps a visit to some of these states that have successfully created community settings would be worth considering: District of Columbia, New Hampshire, Vermont, Rhode Island, Alaska, New Mexico, West Virginia, Hawaii, Maine, Michigan, Oregon, Alabama, Minnesota, and Indiana.

Sincerely,



Pete Roberts

Executive Director

scil@scil.org

Name: Alan L. Thomas
Title: Deaf Services Coordinator
Organization: PACE, Inc. Center for Independent Living
Please indicate your relationship to Facility: Employee
Address: 1317 E. Florida Avenue, Urbana, IL 61801
Email: alan@pacecil.org
Your position: No Position
Type of Testimony: Written Statement

To Editorial Board,

My name is Alan L. Thomas. I work as Deaf Services Coordinator for PACE, Inc. Center for Independent Living in Urbana, IL. I am representing in behalf of deaf and deaf-blind residents with developmental disabilities.

People with disabilities can and should be supported in their communities. I am concerned about deaf and deaf-blind people in Jacksonville Developmental Center. They have been living there successfully for years with community supports. They have gained independent living skills that many residents would not have predicated.

The community system mentioned can better serve the nearly 30 deaf and 7 deaf-blind residents with developmental disabilities of this institution to be closed. For a responsible transition, the governor and legislators MUST see that the money saved follows those individuals into the community for group homes and other supportive services. Planning for the transitions must be based on the need of the individuals.

Research surveys of parents of formerly institutionalized individuals report that in the community their loved ones changed for the better in a number of ways: being more communicative independent, responsible and happier; showing positive behavior change and gaining daily living skills especially with Deaf community and Deaf culture.

Both chambers of the Illinois legislature have adopted a resolution calling for a plan to enhance and expand access to quality community services and supports for people with developmental disabilities. Those community services are woefully underfunded in Illinois. Closing the institutions presents both an opportunity AND a responsibility. Our elected officials have the responsibility to provide appropriate funding for Illinois citizens with developmental disabilities.

Sincerely yours,

Alan L. Thomas

October 11, 2011

Colleen Balija
106 Zapata Lane
Minooka, IL 60447
cbalija@gmail.com
Position on the Closure: Opponent
Testimony: Written statement



Mr. Dan R. Long
Executive Director
State of Illinois
Commission on Government Forecasting & Accountability
703 Stratton Office Building
Springfield, IL 62706

Re: Illogical Plan Proposed by Governor Quinn to close JMDC

Dear Members of the Commission:

The Jack Mabley Development Center (JMDC) provides specialized care for those with behavioral challenges and dual sensory impairments and is a safety net to people in the community serving the important role of providing crisis stabilization to individuals who are unable to safely remain living in their family home or community setting. Regardless of this important role, Governor Quinn plans to displace 90 disabled residents with highly specialized needs for the sake of trying to balance the state's budget. This plan would be appalling even if it would succeed in the Governor's goal; however, it is clear that the Governor's plan will not result in community placement and will not save money.

Despite the Governor's promises, the majority of the 90 residents will not be moved to community settings, but will instead be moved to target state operated developmental centers. There are already 21,000 people on waiting lists for community placement in Illinois. If the community has been unable to meet the needs of the people on the waiting list, how can it be expected to also serve the nearly 300 people with highly specialized needs currently living at Mabley and Jacksonville? History shows us that when the state closes developmental centers the majority of people simply move to other state centers. When Howe Developmental Center closed 73% of their residents moved to other SODCs.

No money will be saved by disrupting the lives of these disabled residents. The remaining developmental centers will need to hire staff to serve the people who live there. When Howe Developmental Center closed, the budgets of the remaining centers had to be increased by millions of dollars to pay staff to serve the residents who moved there.

I ask that the Commission members take into consideration the truth that lies behind Governor Quinn's detrimental plan to close Mabley Center and save this center to continue to offer highly specialized care for the Developmentally Disabled.

Respectfully,

Colleen Balija

October 11, 2011

Edward Balija
106 Zapata Lane
Minooka, IL 60447
edbalija@gmail.com
Position on the Closure: Opponent
Testimony: Written statement



Mr. Dan R. Long
Executive Director
State of Illinois
Commission on Government Forecasting & Accountability
703 Stratton Office Building
Springfield, IL 62706

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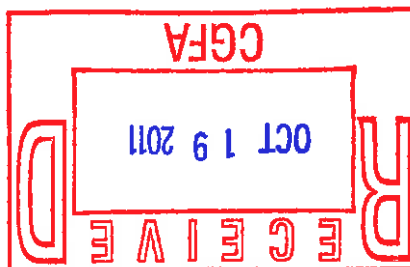
I ask that the Commission members take into consideration the truth that lies behind Governor Quinn's detrimental plan to close Mabley Center and save this center to continue to offer highly specialized care for the Developmentally Disabled.

Respectfully,


Edward Balija

Jean C. Collins
P.O. Box 512
Western Springs, IL 60558

October 17, 2011



Mr. Dan R. Long
Executive Director
COGFA
703 Stratton Office Bldg.
Springfield, IL 62706


Dear Mr. Long:

Please know that I support Governor Quinn's proposal to close the Jacksonville & Mabley Developmental Centers.

We urge the state to develop a plan to help the people who live at these two institutions Transition in an organized & safe manner & to insure that there are the necessary services and supports in the communities (not institutions) where they live.

Thank you for your respect, and that of all the *members of CGFA.

Yours truly,


Jean C. Collins

* Jeffrey Schoenberg, Michael Frerichs, Matt Murphy, Suzi Schmidt, Dave Syverson, Donne Trotter, Patricia Bellock, Kevin McCarthy, Elaine Nekritz, Raymond Poe, Al Riley, & Michael Tryon.

Name: Katherine Dunbar
Title: Regional Director
Organization: Bethesda Lutheran Communities
Facility being Closed: State Institutions in Dixon and Jacksonville
Relationship to Facility: Concerned Citizen and Advocate
Address: 1905 Montana Drive, Suite 10 Springfield, IL 62704
email: katherine.dunbar@mailblc.org
Position: Proponent of closing
Type of Testimony - Oral at hearing (Monday, Oct. 24 @ 5 pm)

Good evening. I'd like to thank members of the Commission for holding these important hearings on the proposal to close the state institutions for people with intellectual and developmental disabilities in Dixon and Jacksonville. My name is Katherine Dunbar, regional director for Bethesda Lutheran Communities. As someone who has worked in this field for XX years and as a life-long resident of Illinois, I am excited that Illinois state officials are taking this long-overdue first step to provide more appropriate, effective and efficient supports for people with disabilities.

I have long been confused as to why, as a society, we still feel it is acceptable to segregate people simply because they have a developmental disability. People with disabilities have the right to live in the community with access to community supports like any other citizen. Advocates, professionals and service providers have long recognized this right. So to has the United States Supreme Court in *Olmstead v. L.C.* in which the court ruled that the Americans with Disability Act prohibits states from discriminating against people with disabilities by providing services in institutions when the individual could be served more appropriately in a community-based setting." It is unconscionable to continue to deny the civil rights of people with disabilities based on outdated and faulty beliefs and prejudices.

Given the fiscal crisis facing the state of Illinois it is foolish to waste taxpayer dollars on an ineffective and biased system. It costs all of us more than \$181,000 to institutionalize an individual at one of our state centers. That same person could be supported in the community at an average cost of less than \$53,000. How often do we have the opportunity to provide better services while actually saving money? To provide a much higher quality of life and grant an individual the freedom to live in the community and save more than \$25 million is an opportunity we must embrace.

With more than 21,000 Illinois citizens with developmental disabilities languishing on waiting lists, how can we continue to operate these costly and archaic institutions? We must close these institutions and reinvest resources in a service delivery system that embraces choice and treats all individuals as valued members of society.

It is, quite frankly, embarrassing that it has taken state officials so long to acknowledge that it is unacceptable to strip people of their civil rights and remove them from the community based solely on a disability. Fourteen other states have no state institutions. They demonstrate how they respect and value all their citizens by providing quality and cost-effective community-based supports.

Nationally, Illinois ranks last in utilization of community-based settings and 47th in its investment in community-based supports. The question is not whether we should close Mabley and Jacksonville. The question should be why are we only closing two institutions?

Anyone with disabilities, including those with multiple disabilities and intensive needs can be effectively and safely supported in the community. Research indicates that

people who move from institutions to community settings have improved adaptive behavior skills. They also enjoy more natural social interaction, personal integration and more contact with their families.

The success of this rebalance effort rests in the partnerships you establish with private community-based based providers. We have experience and achieved great success providing supports in the community at a much lower cost than state-run facilities. We have insights and best practices that will be of great benefit as we move forward with this plan. It is imperative that Illinois officials invest in appropriate community supports – particularly mental health supports and access to emergency medical services. These investments today will save millions of dollars down the road and provide access to services for thousands of Illinois citizens that currently have nothing.

Once again, thank you for holding these hearings and taking this important first step.

Date: October 25, 2011

Name: Kathryn Duffy

Facility Being Closed: Mabley Developmental Center

Please indicate your relationship to the Facility: Family of Client – Thomas Becker

Address: 133 S. West Ave, Elmhurst, IL 60126

Email: kduffy87@gmail.com

Your Position: Opponent

The type of Testimony you would like to give: Written Statement Filed

Commission on Government Forecasting and Accountability

ATTN: Facility Closure

703 Stratton Building

Springfield, IL 62706

Dear Members of the Commission:

After hearing the news about the proposed closure of the Jack Mabley Developmental Center in Dixon, Illinois, I feel I must voice my concerns on behalf of the voiceless people who depend on this home for their health and welfare. I do not support this plan for closure.

There are numerous reasons why Mabley Center should remain open and why closing this center would mean the loss of a needed resource for developmentally disabled citizens of Illinois:

- Mabley Center is the newest and smallest of the IL state operated developmental centers, comprised of 7 homes that resemble mid-sized group homes.
- Mabley Center was designed to support individuals with dual sensory impairments - people who are deaf, blind, or both.
- All Mabley Center staff are trained in sign language and contact sign language (used when working with clients that have auditory and visual impairments).
- Mabley Center provides specialized care for residents with severe behavioral challenges. Care is provided by direct care staff trained by specialists in treating severe behavior problems.

I am confident that the commission will do the only ethical and responsible thing; to reject the governor's plan to close such a valuable asset in the community. There is no other facility like it in the state.

Respectfully,

Kathryn Duffy

Public Comments on the Facility Closure of the Jack Mabley Developmental Center

I am opposed to the closure of the Jack Mabley Center. This facility is called home to 90 individuals who have disabilities. The community of Dixon had the State School closure many years ago [where the current prison is]. With the history this small community has had with the DD population there are no prejudices; only acceptance. Kreider Services offers a large well run sheltered workshop that integrates the DD population into it's daily schedule. One of the newer programs of Kreider is Workshop Without Walls mainstreams clients that may have lacked services in the past.

Mabley offers recycling options to many businesses in the community.

To all people sitting in Springfield counting \$\$ you need to look at what you are doing with the proposed closures. These clients have already been short changed in their lifetime why would you take their home away??

Jan Norris

I am writing this email in support of saving (not closing) the Mabley Developmental Center. It plays a way too important role in our society and our state. There are many other areas of government waste that can be cut first before you cut important services for those that need it the most.

Robert Horne
340 Birch Street
Winnetka, IL 60093

We request reconsideration of the Mabley facility. This is not in the interest of your constituents. Certainly there are better ways to cut state expenses Direct your attention to pension funding, particularly double-dipping, for starters, the look at advisory committee appointments and pay.

George and Susan Van Der Bosch

Save Mabley

Joe Dillon

10/4/2011

Joyce Pancratz
108 N. Dwyer Ave
Arlington Hts, IL 60005
kjpancratz@comcast.net
Position on the Closure: Opponent
Testimony: Written statement

Mr. Dan R. Long
Executive Director
State of Illinois
Commission on Government Forecasting & Accountability
703 Stratton Office Building
Springfield, IL 62706

Re: Benefits of the services offered at Mabley Developmental Center

Dear Members of the Commission:

I am surprised and appalled at the lack of regard being shown to the residents that will be affected by the governor's plan to close Jack Mabley Developmental Center (JMDC) within a few unrealistically short months. The fate of 90 disabled people with very specialized needs rests in the decision of this commission to accept or deny Governor Quinn's attempt to balance the state's budget, the wrong reason anyone should ever be taken from their home.

The Mabley Center provides specialized care for those with behavioral challenges and dual sensory impairments. In addition, JMDC is a safety net for the community, serving the important role of crisis stabilization for individuals in Northern Illinois who are unable to safely reside in their family home or community setting. Residents at JMDC are under the watchful care of experienced staff, with specialized personnel working as direct care staff, doctors, nurses, psychologists, dieticians, educators, speech and hearing specialists, and behavioral analysts. In addition, all direct care and clinical staff are trained in sign language. It is the goal of every staff member at the Center to prepare their clients for successful community placement.

Instead of closing Mabley Center, the governor's office should be using it as the model for the future care of individuals with developmental disabilities who require stabilization and intensive behavioral treatment.

I ask that the Commission members take into consideration the benefits of the services provided at Jack Mabley Developmental Center and the specialized care offered at this state of the art facility.

Respectfully,
Joyce Pancratz

Date: 10/4/11

Ruth Mettenburg
6709 Meadowcrest Drive Downers Grove, IL 60516
rjmmay@comcast.net
Position on the Closure: Opponent
Testimony: Written statement

Mr. Dan R. Long
Executive Director
State of Illinois
Commission on Government Forecasting & Accountability
703 Stratton Office Building
Springfield, IL 62706

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Respectfully,
Ruth Mettenburg

Date: 10/4/2011

Ann Bormett
7243 Farmhome Lane
Cherry Valley, IL. 61016
abormett@comcast.net
Position on the Closure: Opponent
Testimony: Written statement

Mr. Dan R. Long
Executive Director
State of Illinois
Commission on Government Forecasting & Accountability
703 Stratton Office Building
Springfield, IL 62706

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Respectfully,
Ann Bormett

Date: October 4, 2011

Ann Bormett
7243 Farmhome Lane
Cherry Valley, IL. 61016
abormett@comcast.net
Position on the Closure: Opponent
Testimony: Written statement

Mr. Dan R. Long
Executive Director
State of Illinois
Commission on Government Forecasting & Accountability
703 Stratton Office Building
Springfield, IL 62706

Re: Illogical Plan Proposed by Governor Quinn to close JMDC

Dear Members of the Commission:

The Jack Mabley Developmental Center (JMDC) provides specialized care for those with behavioral challenges and dual sensory impairments and is a safety net to people in the community serving the important role of providing crisis stabilization to individuals who are unable to safely remain living in their family home or community setting. Regardless of this important role, Governor Quinn plans to displace 90 disabled residents with highly specialized needs for the sake of trying to balance the state's budget. This plan would be appalling even if it would succeed in the Governor's goal; however, it is clear that the Governor's plan will not result in community placement and will not save money.

Despite the Governor's promises, the majority of the 90 residents will not be moved to community settings, but will instead be moved to larger state operated developmental centers. There are already 21,000 people on waiting lists for community placement in Illinois. If the community has been unable to meet the needs of the people on the waiting list how can it be expected to also serve the nearly 300 people with highly specialized needs currently living at Mabley and Jacksonville? History shows us that when the state closes developmental centers the majority of people simply move to other state centers. When Howe Developmental Center closed 73% of their residents moved to other SODCs.

No money will be saved by disrupting the lives of these disabled residents. The remaining developmental centers will need to hire staff to serve the people who live there. When Howe Developmental Center closed, the budgets of the remaining centers had to be increased by millions of dollars to pay staff to serve the residents who moved there.

I ask that the Commission members take into consideration the truth that lies behind Governor Quinn's detrimental plan to close Mabley Center and save this center to continue to offer highly specialized care for the Developmentally Disabled.

Respectfully,

Ann Bormett

Date: 10/4/2011

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7243 Farmhome Lane
Cherry Valley, IL. 61016
abormett@comcast.net
Position on the Closure: Opponent
Testimony: Written statement

Mr. Dan R. Long
Executive Director
State of Illinois
Commission on Government Forecasting & Accountability
703 Stratton Office Building
Springfield, IL 62706

Re: Benefits of Mabley Developmental Center
Dear Members of the Commission:

After hearing the news about the proposed closure of the Jack Mabley Developmental Center in Dixon, Illinois, I feel I must express my concerns on behalf of the voiceless people who depend on this residential site for their health and welfare. I do not support this plan for closure.

The governor's plan is absurd and he and his staff do not seem to be taking the dignity of 90 vulnerable individuals into account with this hasty budget-balancing measure that will affect their lives and the lives of their guardians.

The governor should know that JMDC is the newest of the state's developmental centers, and is also the smallest facility, composed of 7 ranch-style homes on a beautiful tree-lined campus situated in a residential community in Dixon, Illinois. The homes on the campus offer its residents a mid-size group home experience while having 24-hour access to medical professionals and technicians specially trained to work with behavioral difficulties and sensory impairments.

The governor should understand that the Mabley Center was designed and built to accommodate a special population – those with sensory impairments. Each home on the campus is linked by trailing fences that allow residents with visual impairments the ability to move around campus with more independence and safety. Additionally, the homes and main office building were built with wood rails that allow residents to maneuver inside independently as well.

Rather than closing Mabley Center, the governor's office should be using it as the model for the future care of individuals with developmental disabilities. I ask that the Commission members take into consideration the benefits of the physical layout and purposeful design of this state of the art facility.

I implore the commission to reject the governor's plan to close such a valuable asset in the community.

Respectfully,
Ann Bormett

October 4, 2011

Ann Bormett
7243 Farmhome Lane
Cherry Valley, IL. 61016
abormett@comcast.net
815-621-5552

Mr. Dan R. Long
Executive Director
State of Illinois
Commission on Government Forecasting & Accountability
703 Stratton Office Building
Springfield, IL 62706

Re: Proposed closure of the Mabley Developmental Center

Dear Members of the Commission:

Governor Quinn's proposal to close down the Jack Mabley Developmental Center in Dixon, Illinois, among other facilities, is an attempt to cut state spending and control costs. Despite the fact that this proposal is akin to peeing in the ocean to warm it up, there is a human element to this.

Any parent who is raising a child with an intellectual and/or developmental disability will tell you their greatest fear is who will care for their child when they no longer are able. You may assume another relative or a friend can fill this role? Maybe. Or perhaps a residential placement in the community? Perhaps. But what happens when the care required by the individual extends beyond what family members or community-based placements can provide? That is where facilities like Mabley come in. These centers can provide a safety net of sorts—the means to support and care for those folks who are affected by severe health, behavior and other issues that intellectual, developmental and related disabilities can sometimes leave in their wake. And shouldn't they have access to these services? Section 1, Article 25 of the Universal Declaration of Human Rights states:

Article 25.

- (1) Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control.

Universal Declaration of Human Rights
<http://www.un.org/en/documents/udhr/>

When we discuss the closure of facilities like the Jack Mabley Center, we are not simply talking about making cuts ineptly disguised as fiscal responsibility in an ill-fated attempt to balance a state budget that

is realistically beyond our abilities to fix. We are discussing basic human rights. The rights that people like Eleanor Roosevelt and other international leaders worked the better part of two years to elucidate in a document that rose out of the tragic aftermath of World War II, so that never again would it be so easy to strip human beings of their basic rights and liberties. It is unconscionable to revisit this history, especially with a population as vulnerable as the folks who depend upon facilities like Mabley to support their complex needs and maintain their dignity and care.

My son Ed has autism. We are fortunate that we are able to provide him with the care and support he requires at home. But what if that ever changed? What would become of Ed? As Ed told a clinician during his diagnostic process when asked to describe something that made him feel scared, he said, "If my Mom ever stopped loving me. Because autism is really hard."

Who will assume responsibility for the intellectually and developmentally disabled people in our community if Mabley is forced to close its' doors? These are human beings. They are loved. They are other people's children, brothers, sisters, aunts, uncles, and cousins. They deserve better than to be manipulated in a shell game where fiscal responsibility and cost savings are promised, but never realized. Don't be fooled by those telling you that these folks can be safely housed and cared for in community-based placements. If that were the case, wouldn't they be? If there is no money to care for them at Mabley, where will the money come from to care for them in the community?

I will never stop loving you, Ed. Not ever.

I implore you, members of the commission: please reconsider this proposal, and let us all get on with the task at hand—caring for those in our families and communities with intellectual and developmental disabilities.

Thank you for your thoughtful consideration in this matter.

Sincerely,
Ann Bormett

Date: 10/04/11

KH Seppah
1738 33rd Avenue, Oakland CA
Position on the Closure: Opponent
Testimony: Written statement

Mr. Dan R. Long
Executive Director
State of Illinois
Commission on Government Forecasting & Accountability
703 Stratton Office Building
Springfield, IL 62706

Re: Benefits of the services offered at Mabley Developmental Center
Dear Members of the Commission:

I am surprised and appalled at the lack of regard being shown to the residents that will be affected by the governor's plan to close Jack Mabley Developmental Center (JMDC) within a few unrealistically short months. The fate of 90 disabled people with very specialized needs rests in the decision of this commission to accept or deny Governor Quinn's attempt to balance the state's budget, the wrong reason anyone should ever be taken from their home.

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Instead of closing Mabley Center, the governor's office should be using it as the model for the future care of individuals with developmental disabilities who require stabilization and intensive behavioral treatment.

I ask that the Commission members take into consideration the benefits of the services provided at Jack Mabley Developmental Center and the specialized care offered at this state of the art facility.

Respectfully,
KH Seppah

Date: 10-05-11

Julia Wade
807 Monroe St.
Mendota, IL 61342
juliaannwade@gmail.com

Position on the Closure: Opponent
Testimony: Written statement

Mr. Dan R. Long
Executive Director
State of Illinois
Commission on Government Forecasting & Accountability
703 Stratton Office Building
Springfield, IL 62706

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Respectfully,
Julia Wade

Date: 10-05-11

Julia Wade
807 Monroe St
Mendota, IL 61342
juliaannwade@gmail.com

Position on the Closure: Opponent
Testimony: Written statement

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703 Stratton Office Building
Springfield, IL 62706

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Julia Wade

Date: 10/05/11

Julia Wade
807 Monroe St
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juliaannwade@gmail.com

Position on the Closure: Opponent
Testimony: Written statement

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I implore the commission to reject the governor's plan to close such a valuable asset in the community.

Respectfully,
Julia Wade

October 5, 2011

Michael J. Bielenda
The Workshop
P.O.Box 6078
706 West Street
Galena, IL 61036

Position on the Closure: Opponent
Testimony: Written statement

Mr. Dan R. Long
Executive Director
State of Illinois
Commission on Government Forecasting & Accountability
703 Stratton Office Building
Springfield, IL 62706

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Respectfully,

Michael J. Bielenda LCPC, QSP

To whom it may concern,

A close friend of mine has a brother-in-law who has severe autism and is deaf. He lives at Mabley and has for many years.

In our talks, she has told me how wonderful Mabley has been for him, as he does not have the skills to live on his own. He also does not have the skills to live in the care of his immediate family, which is something they have tried several times. Mabley is his home and his caregivers are his family.

If we close all the places that serve the neediest of our population, what will become of these people?

Please, save Mabley.

Sincerely,

Amy Ward

I currently work in a nearby facility that works with developmentally disabled adults that are at severe or profound level. I find it appalling that the closure of this or any other much needed facility is even being considered. Before you should consider the closure of the facility maybe you should walk a mile in the residents who live there shoes and the caregivers who give there. These people are the people who need the most help. They did not ask to be born the way they are or to have what caused them to be the way they are. They only ask to be treated with respect and dignity. The people who are considering closure of this facility are putting residents in a dangerous position. The facility I work for does have a few behavioral residents. At times I feel they should be moved to mabley. There the residents could get what they need. Currently we are not equipped to deal with these behaviors as we are not that type of facility. There is nowhere for them to go because of the threat of closure of state facilities. This is not fair to some of the residents who need the attention and care that they can receive at mably and probably nowhere else. Residents who currently reside at Mabley are going to be forced to adjust somewhere else if they are fortunate enough to find somewhere else to live. Some of these people will not be able to adjust to new surroundings. That is not fair to these people. If the state wants these people to go to group homes then let the state take them in to their homes and see the problems that occur first hand. Mabley has already been reduced because of state issues. I believe that when that was done the residents who they could find alternate placement was done. Some residents at mabley may be dangerous when changed to alternate placement and if put in places where the training is in adequate for behavioral issues. It takes a special place to give the special care they need. Closing the center also will put economic strain on the surrounding communities.

Thank You

Debbie Buse



The Institute on Public Policy for People with Disabilities
683 South Prospect Avenue
Elmhurst, Illinois 60126
cathyfickerterrill@yahoo.com

To: The Members of the Commission on Government Forecasting and Accountability

From: Cathy Ficker Terrill, Institute on Public Policy for People with Disabilities

Re: Closure of the Mabley and Jacksonville Centers

Date: October 10, 2011

The State Facilities Closure Act charges you with providing an Advisory Opinion in regard to the closure of state developmental centers to the executive and legislative branches. As you are aware, Governor Quinn has proposed the closure of Mabley and Jacksonville Developmental Centers. The Institute fully supports the closure of all state operated residential facilities in a way that allows for the safe transfer of individuals as well as the provision of quality supports for a meaningful life.

Government Operations. Illinois should not be in the business of operating residential facilities for people with disabilities. It can be done more effectively and efficiently in the private sector. The privatization of this line of service should be the preferred model.

Success. Fourteen states have closed all of their state operated institutions. Illinois institutionalizes more people with intellectual and other developmental disabilities than 48 other states with Illinois's eight state institutions. Many studies of Illinois' developmental disability system by national experts clearly state the need to move away from institutional spending and invest in community services.

Rebalance. The federal government is offering states enhanced Medicaid match funds for moving in a direction away from large institutional settings toward smaller homes for 4 or fewer individuals. This is an opportunity to rebalance by re-allocating funds during the veto session to ensure the smooth transition of individuals to the community. A supplemental appropriation may also be needed next year since the savings from the closure of an institution lag 1-2 years behind the closure. I urge you to support sufficient funding to rebalance Illinois' system of service provision towards community services.

Community Capacity. As Illinois moves toward a rebalancing of the Medicaid long term care system in Illinois, it is essential that Illinois also focus on building community capacity so that individuals with complex medical and or behavioral challenges have innovative supports available to them.

Quality. As people transition from state operated residential facilities to new options in the community, their service plans need to be person centered and include outcomes for success.

October 8, 2011

Rhonda Parsons
8110 Shore Drive
Machesney Park, IL 61115
Lilyspanda7@yahoo.com
Position on the Closure: Opponent
Testimony: Written statement

Mr. Dan R. Long
Executive Director
State of Illinois
Commission on Government Forecasting & Accountability
703 Stratton Office Building
Springfield, IL 62706

Re: Illogical Plan Proposed by Governor Quinn to close JMDC

Dear Members of the Commission:

The Jack Mabley Developmental Center (JMDC) provides specialized care for those with behavioral challenges and dual sensory impairments and is a safety net to people in the community serving the important role of providing crisis stabilization to individuals who are unable to safely remain living in their family home or community setting. Regardless of this important role, Governor Quinn plans to displace 90 disabled residents with highly specialized needs for the sake of trying to balance the state's budget. This plan would be appalling even if it would succeed in the Governor's goal; however, it is clear that the Governor's plan will not result in community placement and will not save money.

Despite the Governor's promises, the majority of the 90 residents will not be moved to community settings, but will instead be moved to larger state operated developmental centers. There are already 21,000 people on waiting lists for community placement in Illinois. If the community has been unable to meet the needs of the people on the waiting list how can it be expected to also serve the nearly 300 people with highly specialized needs currently living at Mabley and Jacksonville? History shows us that when the state closes developmental centers the majority of people simply move to other state centers. When Howe Developmental Center closed 73% of their residents moved to other SODCs.

No money will be saved by disrupting the lives of these disabled residents. The remaining developmental centers will need to hire staff to serve the people who live there. When Howe Developmental Center closed, the budgets of the remaining centers had to be increased by millions of dollars to pay staff to serve the residents who moved there.

I ask that the Commission members take into consideration the truth that lies behind Governor Quinn's detrimental plan to close Mabley Center and save this center to continue to offer highly specialized care for the Developmentally Disabled.

Respectfully,

Rhonda Parsons

October 8, 2011

Rhonda Parsons

8110 Shore Drive

Machesney Park, IL 61115

Lilyspanda7@yahoo.com

Position on the Closure: Opponent

Testimony: Written statement

Mr. Dan R. Long

Executive Director

State of Illinois

Commission on Government Forecasting & Accountability

703 Stratton Office Building

Springfield, IL 62706

Re: Benefits of the services offered at Mabley Developmental Center

Dear Members of the Commission:

I am surprised and appalled at the lack of regard being shown to the residents that will be affected by the governor's plan to close Jack Mabley Developmental Center (JMDC) within a few unrealistically short months. The fate of 90 disabled people with very specialized needs rests in the decision of this commission to accept or deny Governor Quinn's attempt to balance the state's budget, the wrong reason anyone should ever be taken from their home.

The Mabley Center provides specialized care for those with behavioral challenges and dual sensory impairments. In addition, JMDC is a safety net for the community, serving the important role of crisis stabilization for individuals in Northern Illinois who are unable to safely reside in their family home or community setting. Residents at JMDC are under the watchful care of experienced staff, with specialized personnel working as direct care staff, doctors, nurses, psychologists, dieticians, educators, speech and hearing specialists, and behavioral analysts. In addition, all direct care and clinical staff are trained in sign language. It is the goal of every staff member at the Center to prepare their clients for successful community placement.

The governor's plan is absurd and he and his staff do not seem to be taking the dignity of 90 vulnerable individuals into account with this hasty budget-balancing measure that will affect their lives and the lives of their guardians.

The governor should know that JMDC is the newest of the state's developmental centers, and is also the smallest facility, composed of 7 ranch-style homes on a beautiful tree-lined campus situated in a residential community in Dixon, Illinois. The homes on the campus offer its residents a mid-size group home experience while having 24-hour access to medical professionals and technicians specially trained to work with behavioral difficulties and sensory impairments.

The governor should understand that the Mabley Center was designed and built to accommodate a special population – those with sensory impairments. Each home on the campus is linked by trailing fences that allow residents with visual impairments the ability to move around campus with more independence and safety. Additionally, the homes and main office building were built with wood rails that allow residents to maneuver inside independently as well.

Instead of closing Mabley Center, the governor's office should be using it as the model for the future care of individuals with developmental disabilities who require stabilization and intensive behavioral treatment.

I ask that the Commission members take into consideration the benefits of the services provided at Jack Mabley Developmental Center and the specialized care offered at this state of the art facility.

Respectfully,
Rhonda Parsons
October 8, 2011

Date: 10/8/11

Deb Muhlstadt
1105 Meadowview Drive Mendota, IL 61342
debmuhlstadt@comcast.net
Position on the Closure: Opponent
Testimony: Written statement

Mr. Dan R. Long
Executive Director
State of Illinois
Commission on Government Forecasting & Accountability
703 Stratton Office Building
Springfield, IL 62706

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The Jack Mabley Developmental Center (JMDC) provides specialized care for those with behavioral challenges and dual sensory impairments and is a safety net to people in the community serving the important role of providing crisis stabilization to individuals who are unable to safely remain living in their family home or community setting. Regardless of this important role, Governor Quinn plans to displace 90 disabled residents with highly specialized needs for the sake of trying to balance the state's budget. This plan would be appalling even if it would succeed in the Governor's goal; however, it is clear that the Governor's plan will not result in community placement and will not save money.

Despite the Governor's promises, the majority of the 90 residents will not be moved to community settings, but will instead be moved to larger state operated developmental centers. There are already 21,000 people on waiting lists for community placement in Illinois. If the community has been unable to meet the needs of the people on the waiting list how can it be expected to also serve the nearly 300 people with highly specialized needs currently living at Mabley and Jacksonville? History shows us that when the state closes developmental centers the majority of people simply move to other state centers. When Howe Developmental Center closed 73% of their residents moved to other SODCs.

No money will be saved by disrupting the lives of these disabled residents. The remaining developmental centers will need to hire staff to serve the people who live there. When Howe Developmental Center closed, the budgets of the remaining centers had to be increased by millions of dollars to pay staff to serve the residents who moved there.

I ask that the Commission members take into consideration the truth that lies behind Governor Quinn's detrimental plan to close Mabley Center and save this center to continue to offer highly specialized care for the Developmentally Disabled.

Respectfully,

Deb Muhlstadt

The State of Illinois supports the closure of institutions and an institution free Illinois!

Siler Rachel

Proponent of closing Mabley.

As an advocate for individuals with intellectual and other developmental disabilities for over 30 years, I support the closure of the Mabley Developmental Center. It is time to re-balance the disability system in Illinois. This is long overdue.

The time to close state institutions is now. There are now fourteen states without state institutions.

With 2,027 individuals in institutions, Illinois now institutionalizes more people with intellectual and other developmental disabilities than 48 other states.

Illinois ranks 50th in small community settings. Illinois ranks 47th in community spending.

For the above reasons and more, I fully support your decision to close the Mabley Developmental Center.

The money saved by closing state institutions needs to be reinvested in the community and to support the 21,000 children and adults on the waiting list.

In addition, the transition needs to be safe, smooth and based upon the individual needs of the people leaving Mabley and Jacksonville.

We are in a time of scarce resources, so we must invest our state resources in community settings where people grow and prosper. It is the right thing to do!

Tony Paulauski
Executive Director
The Arc of Illinois

Linda C-Rolen
25060 Como rd
Sterling, Ill

Mr. Dan R. Long
Executive Director
State of Illinois
Commission on Government Forecasting & Accountability
703 Stratton Office Building
Springfield, IL 62706

Re: Benefits of Mabley Developmental Center

Dear Members of the Commission:

After hearing the news about the proposed closure of the Jack Mabley Developmental Center in Dixon, Illinois, I feel I must express my concerns on behalf of the voiceless people who depend on this residential site for their health and welfare. I do not support this plan for closure.

The governor's plan is absurd and he and his staff do not seem to be taking the dignity of 90 vulnerable individuals into account with this hasty budget-balancing measure that will affect their lives and the lives of their guardians.

The governor should know that JMDC is the newest of the state's developmental centers, and is also the smallest facility, composed of 7 ranch-style homes on a beautiful tree-lined campus situated in a residential community in Dixon, Illinois. The homes on the campus offer its residents a mid-size group home experience while having 24-hour access to medical professionals and technicians specially trained to work with behavioral difficulties and sensory impairments.

The governor should understand that the Mabley Center was designed and built to accommodate a special population – those with sensory impairments. Each home on the campus is linked by trailing fences that allow residents with visual impairments the ability to move around campus with more independence and safety. Additionally, the homes and main office building were built with wood rails that allow residents to maneuver inside independently as well.

Rather than closing Mabley Center, the governor's office should be using it as the model for the future care of individuals with developmental disabilities. I ask that the Commission members take into consideration the benefits of the physical layout and purposeful design of this state of the art facility. I implore the commission to reject the governor's plan to close such a valuable asset in the community.

Respectfully,
Linda C-Rolen

Date: October 11th, 2011

Linda C-Rolen
25060 Como rd
Sterling, Ill 61081

Mr. Dan R. Long
Executive Director
Commission on Government Forecasting & Accountability
703 Stratton Office Building
Springfield, IL 62706

Re: Illogical Plan Proposed by Governor Quinn to close JMDC

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Despite the Governor's promises, the majority of the 90 residents will not be moved to community settings, but will instead be moved to larger state operated developmental centers. There are already 21,000 people on waiting lists for community placement in Illinois. If the community has been unable to meet the needs of the people on the waiting list how can it be expected to also serve the nearly 300 people with highly specialized needs currently living at Mabley and Jacksonville? History shows us that when the state closes developmental centers the majority of people simply move to other state centers. When Howe Developmental Center closed 73% of their residents moved to other SODCs.

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I ask that the Commission members take into consideration the truth that lies behind Governor Quinn's detrimental plan to close Mabley Center and save this center to continue to offer highly specialized care for the Developmentally Disabled.

Respectfully,
Linda C-Rolen

As an advocate and parent, I support the closure of the Mabley Developmental Center. It is time to re-balance the disability system in Illinois.

I have a daughter that is in need of community based services and closing of costly and ineffective institutions offers a real opportunity to focus scarce funding on community based solutions.

The time to close state institutions is now. There are now fourteen states without state institutions.

With 2,027 individuals in institutions, Illinois now institutionalizes more people with intellectual and other developmental disabilities than 48 other states.

Illinois ranks 50th in small community settings.

Illinois ranks 47th in community spending.

For the above reasons and more, I fully support your decision to close the Mabley Developmental Center.

The money saved by closing state institutions needs to be reinvested in the community to support the 21,000 children and adults on the waiting list.

In addition, the transition needs to be safe, smooth and based upon the individual needs of the people leaving Mabley and Jacksonville.

We are in a time of scarce resources, so we must invest our state resources in community settings where people grow and prosper. It is the right thing to do!

Sincerely,

Charles Miles
1015 Westfield Course
Geneva, IL 60134

I am the parent of a young man with autism and I am STRONGLY IN FAVOR of CLOSURE of all SODC's, including Jacksonville and Mabley. I am a proponent of closure because it is the right thing to do both for individuals with intellectual and developmental disabilities and it is the best use of taxpayer dollars to provide community living arrangements. With appropriate supports, everyone can and should live in his or her own community, close to family and friends. We need to rebalance the system and reallocate resources. It is imperative that in moving individuals to community, we take into account their specific needs. Some individuals will need additional resources in order to maintain health and safety. Many of the individuals who are funded at over \$150,000/ per year will need far less to live safely and productively in the community. We need to build in incentives for providers who have been underfunded and unpaid. We have an opportunity to do the right thing and to save the state money in the long run. SODC employees can and should be trained to work in the community. Let's bring DHS/DDD into the 21st Century and join Alabama, the most recent state to close it's institutions for people with I/DD.

Thank you.

Ellen Garber Bronfeld, mother of Noah Bronfeld

My son David Cicarelli is finally in the process of moving from a large facility Riverside Foundation to a CILA Clearbrook Home close to us. I hope Illinois will close the large state facilities, catch up to the rest of the country, and give the intellectually disabled residents of our state the services they need in homes.

Thank you,

JULi Cicarelli,
1220 Vargo Lane
Arlington Heights, 60004.

As the mother of two adult sons with developmental disabilities I believe that the time to close state institutions is now! There are now fourteen states without state institutions. With 2,027 individuals in institutions, Illinois now institutionalizes more people with intellectual and other developmental disabilities than 48 other states. Illinois ranks 50th in small community settings. Illinois ranks 47th in community spending. For the above reasons and more, I fully support your decision to close the Mabley Developmental Center. The money saved by closing state institutions needs to be reinvested in the community to support the 21,000 children and adults on the waiting list. We are in a time of scarce resources, so we must invest our state resources in community settings where people grow and prosper. It is the right thing to do!

Respectfully Submitted,
Betty Korey
1416 Hackberry Rd.
Deerfield, IL 60015

I am the parent of two young men with autism and I am a proponent of closure because it is the right thing to do both for individuals with intellectual and developmental disabilities. And especially because it is the best use of taxpayer dollars to provide community living arrangements. With appropriate supports, everyone can and should live in his or her own community, close to family and friends. We need to rebalance the system and reallocate resources. It is imperative that in moving individuals to community, we take into account their specific needs. Some individuals will need additional resources in order to maintain health and safety. Many of the individuals who are funded at over \$150,000/ per year will need far less to live safely and productively in the community. The money saved by closing state institutions needs to be reinvested in the community to support the 21,000 children and adults on the waiting list. For those 2027 in state institutions, the transition needs to be safe, smooth and based upon the individual needs of those being served. We need to build in incentives for providers who have been under funded and unpaid. We have an opportunity to do the right thing and to save the state money in the long run.

The opportunities for our sons as they reach adulthood are so few and inappropriate in Illinois that it just makes a hard situation even harder than it needs to be. We are in a time of scarce resources, so we must invest our state resources in community settings where people grow and prosper. It is the right thing to do!

Elisabeth K Grzywa
5805 Washington St.
Downers Grove IL 60516

I have great sympathy for families worried about making this change for their family members because I also have an adult child with multiple and severe disabilities. When Alex was born I was told to not bring him home from the hospital, not bond with him, institutionalize him immediately or he would ruin my life; and that he wouldn't survive past his teens anyway. Fortunately I didn't listen. He is now healthy and happy living with housemates in a CILA group home where his needs are met and close enough to us that he is still a part of our lives and community. He is proof that a community setting can work for even the most vulnerable people if it is funded well enough to meet the needs of the individual. By the way, Alex is 41 years old now. I believe he would not have been with us had he been institutionalized. People with disabilities are not farm animals that should be kept in a place because of the jobs they provide, nor are they criminals who deserve to be removed from society. They are people just like any other law abiding citizen and deserve to be supported in their own communities, close to natural supports, family and friends. Isn't this what we want for all of our children?

The time to close state institutions is now. There are now fourteen states without state institutions.

With 2,027 individuals in institutions, Illinois now institutionalizes more people with intellectual and other developmental disabilities than 48 other states.

Illinois ranks 50th in small community settings.

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For the above reasons and more, I fully support your decision to close the Mabley Developmental Center.

The money saved by closing state institutions needs to be reinvested in the community to support the 21,000 children and adults on the waiting list.

In addition, the transition needs to be safe, smooth and based upon the individual needs of the people leaving Mabley and Jacksonville.

We are in a time of scarce resources, so we must invest our state resources in community settings where people grow and prosper. It is the right thing to do!

Jacki Neil Boss
Executive Director
The Arc of Winnebago, Boone & Ogle Counties
1222 East State St, Rockford, IL 61104

The Governor has made a good decision to better utilize public funds because community services is a better investment and result is positive outcomes for people.

Dianne Kariotis

I am extremely pleased that Governor Quinn and his administration are moving forward to close Mabley and Jacksonville Developmental Centers. This action will enable the State of Illinois to better utilize public funds. Illinois State Institutions have a proven record of providing negligent services that have placed people at great harm and often times resulting at death. These sub-standard services currently provided to 2,156 people come at a very high cost. The average annual cost per resident in a State Institution is \$168,656. The average annual cost per person served in a 24-hour supervised community based setting is near \$50,000. [Data source: Don Moss and Associates, 2/2011] If today the State of Illinois made a commitment to serve its 2,156 citizens residing in state-run institutions in community settings, there would be an estimated \$200 million savings. There are more than 20,862 people waiting for community services. 14,757 people have an emergency or critical need today. [Data Source: March 7, 2011 DHS PUNS Summary] I am saddened and angered that so many people are unable to receive the supports they need. The State needs to be more responsible in their spending so that more people with disabilities can be supported. I propose that State institutions be closed and residents of those institutions be supported in community-based settings at less than 1/3 of the cost of supporting them in State institutions, and that the money that is saved be used to support people with disabilities who currently do not receive services. The Ray Graham Association supports people who previously lived in a State institution, and since coming to Ray Graham's community integrated living arrangement (CILA or group home in the community) and attending a community learning center, these individuals have made tremendous growth. State institutions are also inefficient with their use of funds and staff. When one individual who lives in a State institution visited a Ray Graham CILA, he came with a driver and a direct support staff. While the individual was visiting the CILA for a few hours, the driver just sat in the vehicle. This occurred because the driver could only drive and the direct support staff could only support individuals. I urge you to ensure the closure of these State facilities and use the money saved to support individuals with disabilities in community settings.

Rosalie Der

QHSP

Ray Graham Association for People with Disabilities

748 Whalom Ln.

Schaumburg, IL 60173

Concerning the closure of Developmental Centers, I support the Governor's actions. However, as usual, such action is being taken for the wrong reasons. While closing large state facilities will surely save money, we should be concerning ourselves with the quality of services afforded to people who need our help. People with developmental disabilities and/or mental illness who cannot speak for themselves, if they are to have a better life in the community, are going to need some system changes. I believe that the closure needs to take place along with the following actions if it is to be regarded as successful:

- The community system requires a significant upgrade in order to support people with more serious needs. In fact, the community system is now supporting some people with very challenging behavior, or severe medical needs, but the data suggests that placing such persons in the community in large numbers is likely to fail. There are not enough medical supports available in the community Medicaid system, and there are virtually no behavioral supports except the mobile crisis teams.
- The community funding model (CILA) is not structured in a way that allows success. The physical plant expenses being borne by community agencies are enough to collapse the system, let alone the ever-increasing cost of food, energy, transportation, and employee benefits. The Home-based waiver system is even worse, but that is an issue for another day.
- If anyone is to take seriously the contention that jobs in the community are a replacement for state jobs lost through closures, then someone had best examine the ability of community agencies to pay employees a living wage. Minimum wage and minimal benefits are not a replacement for a state job that pays over \$25,000 per year with outstanding benefits. This is purely a funding issue, and only if some of the funds realized through closure are re-directed into the community will any change occur.

Thank you for the opportunity to comment.

Sally Ritchey
400 Maple lane
Shorewood, IL 60404

Dear Commission Members:

As an advocate for people with disabilities, I support the closure of the Mabley Developmental Center. It is time to re-balance the disability system in Illinois.

I am a retired professional who worked with people with disabilities over 40 years, I have seen first-hand the benefits of living with family or in one's home in the community.

The time to close state institutions is now. There are now fourteen states without state institutions.

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In addition, the transition needs to be safe, smooth and based upon the individual needs of the people leaving Mabley and Jacksonville.

We are in a time of scarce resources, so we must invest our state resources in community settings where people grow and prosper. It is the right thing to do!

Sincerely,

Elizabeth Lacey
Member, Board of the Arc of Illinois
5421 S Cornell
Chicago, IL 60615

Hello,

I want to voice my agreement with these closings. I have a brother who spent 21 years at Dixon State School. In 1980 Mike moved to Iona Glos Specialized Living Center in Addison, IL. We have come a long way in the humane treatment of the profoundly retarded. Institutionalization was my parent's only option in the 1950s when my brother went into the system. Now we have wonderful care, at a much lower cost, in group homes and cilas.

The closings of Jacksonville and Mabley are good for everyone concerned. Change is hard for those who know of nothing else for their loved ones. But those of us who have come out of that archaic system recognize the blessing of our loved ones living right in our communities, being part of something positive and healthy on a daily basis.

Thank you.

Sincerely,

Mary E Spreitzer

On behalf of families in Illinois who are successfully supporting people with disabilities in their home communities, I ask you and other legislators to move forward with the closure of both the Mabley and Jacksonville Developmental Centers. In addition, we ask that you ensure that funding follows these residents into the community, where it is so desperately needed for their success. Third, there will be a temporary need for additional funds during the closure transition so that communities, agencies and families can begin to prepare. We ask that you support additional appropriations to assure a successful transition.



One of the greatest fears that we, as parents, have, is that our loved one with disabilities will end up in places like Jacksonville and Mabley if Illinois doesn't take this opportunity to begin the process of building community supports. The State-operated developmental centers are sucking the life out of good community supports in Illinois, with an average cost per resident exceeding \$180,000.

Granted, some residents may need that level of support once living in the community, but most won't.

AFSCME members and some legislators look at SODCs as a source of good jobs, but in fact, people with disabilities who live in SODCs will still need the support of staff when living in community settings. The jobs won't go away, they will change into a form that better meets the needs of people who are served by them. Please do not consider maintaining institutions that are outdated vestiges of the 1960s. We can do better. The disability community has never come together so strongly. We CAN work together to make closure work for people with disabilities, the staff who serve them, and for the many in Illinois who still have no services.

Our project recently made a short video which describes the process and benefits of individuals with disabilities being supported well in their communities. The video is available at <http://vimeo.com/25665805>. I encourage you to take a few minutes and view the video to listen to people who just want to live near friends and family, make a contribution to their communities, with the freedom to make choices in their life at whatever level they are able.

If Jacksonville, Mabley, and, down the road, other institutions are shuttered, those who assisted in making it happen will be heroes of the disability community in Illinois. Please don't let us down.

Vicki Niswander
Executive Director
Illinois Association of Microboards and Cooperatives
<http://iambc.org>
104 Woodcreek Ct.
Mahomet, IL 61853

To Whom It May Concern:

My name is Barbara Pritchard and I am the co-founder of the Community for All Coalition and the Campaign for Real Choice in Illinois with my late husband, Lester Pritchard. I am also a board member of the Illinois Council on Developmental Disabilities and the State-wide Independent Living Council.

I am in support of the closure of the Mabley Developmental Center. I am a disability rights advocate. It is my belief that every person with a disability can be served in the community of their choice with individualized supports and services tailored to their needs. There are 14 other states which have closed all of their state-run developmental centers. Michigan, for example, serves more people in the community with less funding than Illinois does at this point. Michigan just closed it's last Center about 1 year ago. The reason I cite Michigan is because it is similar in its economic status and a very unionized state, much like Illinois. I believe if Michigan and 13 other states have moved people to the community, Illinois can do this as well.

It is the right of Illinois citizens to live where they choose and be surrounded by family and friends with the supports they need. We are in the Land of Lincoln, which should provide freedom and choice for all, regardless of a disability.

I will be giving an oral testimony at the Hearing on Monday, October 17th with copies given to COGFA and its members.

Barbara Pritchard
Barb Pritchard
bmpritchard@comcast.net
1907 Autumn Ridge Drive
Urbana, Illinois 61802

Hello,

My name is Curtis Harris from disability rights activist organization ADAPT. I am in support of the closure of Mabley state-run institution in Dixon and Jacksonville state-run institution. I want to see people with developmental disabilities live in the community with supports such as Community Integrated Living Arrangement (CILA).

Curtis Harris



1740 W. McDonough Street, Joliet, Illinois 60436

815-741-0800

E-mail us at ADVOCATESUNITED@AOL.COM

October 14, 2011

Commission on Government Forecasting and Accountability

ATTN: Facility Closure

703 Stratton Building

Springfield, IL 62706

Dear Mr. Schoenberg and Ms. Bellock,

The Mission of the Advocates United organization is to work together for quality life choices for all people with disabilities. The closure announcement of a facility or service for the Intellectually Disabled (ID) community impacts all of us in many ways and therefore limits the choices available for the ID community.

The announcement on September 8th to close the Mabley and Jacksonville Developmental Centers causes great concern for the ID community. The reason for closure of these facilities is to reduce the State of Illinois budget deficit. This is not a justifiable reason to displace fragile people from their caregivers and services. The State of Illinois is still financially obligated to provide the needed services to the ID community, even in community settings.

The Mabley and Jacksonville Developmental Centers provide intensive, highly specialized services to their residents that are not readily available nor provided in the current community settings. Around the clock nursing care, access to medical and dental clinics are not easily accessible in community group homes. It is not just choice that is compromised. It is the needed services that will also be compromised. The need for services does not go away with the closure of a facility. The person's need for intensive, highly specialized services does not go away and neither does the cost. Moving ID people from their home and requiring families to travel long distances to visit their loved ones will cause great harm and suffering.

Community Service Providers are on the brink of closing because state funds are not forthcoming for services that have already been provided. They are underfunded and understaffed to handle individuals with complex needs. These individuals need a strong, secure safety net. How is the budget going to support these specialized needs in a different setting?

The State of Illinois must be held accountable for the decision to close facilities. Until the State of Illinois makes public a detailed, comprehensive plan for closure that includes the same intensive, highly specialized services that are provided at state facilities, closure of the Mabley and Jacksonville Developmental Centers is the wrong choice.

Sincerely,

Sarah Ross

Sarah Ross
Secretary
Advocates United Organization
<http://www.advocatesunited.org>

Commission on Government Forecasting and Accountability
Attn: Facility Closure
703 Stratton Building
Springfield, IL 62706
October 14, 2010

Dear Sir/Madam:

I am a concerned citizen and a parent of an adult child with developmental disabilities. I am also an ARC member, but find I must disagree with the stance of this organization in regards to the closure of Mabley Developmental Center. Please do not close this facility.

The issue is: Does one size fit all? It does not. My child has behavior problems stemming from her disabilities. Her current CILA placement is not working out for her. Quality organizations with openings in their CILA homes are rejecting her, as they can accept easier-to-care-for individuals from their long waiting lists. We have seen some unacceptable CILA homes, homes that no individual should be in.

The pressing issue in Illinois is the lack of over-all funding for DD services and the lack of quality homes. To fund the most DD individuals at the least cost, while neglecting the individuals that need the most care, is not the right moral position to take. It is not automatic that a DD person with behaviors is automatically given more CILA funding for higher staffing levels and training needed in that CILA. So why would a cash-strapped CILA accept them? Why is the state considering closing an institution that actually works for these people when there are no other placements for them? When a parent states (see 10/7/2010 Sauk Valley Daily Gazette) that the CILA placements that were tried did not work for their two children, I believe them. I have seen it first hand, in the CILA's that I have toured in looking for a placement for our child. We cannot close this institution at this time. Do not balance the Illinois budget on the backs of our most vulnerable citizens.

Please have this written statement filed. Thank you for your time.

Sincerely,

Karen Rainish
693 Wortham Drive
Mundelein, IL 60060

To Whom It May Concern:

We support closure and an institution free Illinois!

Much Thanks

Sam Knight

Hello,

I am the mother of a son who resides in Shapiro. While it is in vogue to say close the state op, not all special people are successful in the community. We cannot close state ops unless there are extra supports available to the institutionalized people who have all too long been institutionalized. Unless, we are simply moving these folks to the prisons, which I fear is where my son would end up. So PLEASE do NOT close ANY STATE OPS until there are solid, extra, long standing community supports available. My son would require a 1:1 for an extended period of time, and this is something the state of illinois does not provide.

Thank you,
Cynthia Bogue
18437 Glen Oak Avenue
Lansing, IL. 60438
Mother of a son at Shapiro

Date: 10/16/11

Annette Miller-Crone
1304 S. Peoria Ave
Dixon, IL 61021
elvisgirl66@comcast.net
Position on the Closure: Opponent
Testimony: Written statement

Mr. Dan R. Long
Executive Director
State of Illinois
Commission on Government Forecasting & Accountability
703 Stratton Office Building
Springfield, IL 62706

Re: Illogical Plan Proposed by Governor Quinn to close JMDC
Dear Members of the Commission:

I have been a social worker at the Mabley Center for over 17 years and I vehemently oppose the very idea of closure. In my time at Mabley, it has always been the ultimate goal to move people into the community. When an agency that is able to meet someone's needs comes together with the guardian and the individual, it is truly wonderful. Over the past decade the team at Mabley Center has moved 67 people to community placement. Over the same time frame Mabley had 76 admissions, indicating that the Center has a placement rate at about 88% of it's intake rate. With an 84% community placement success rate the Center has demonstrated a strong understanding of the supports needed for the people they serve to excel in the community. Mabley Center is actively involved in helping people to prepare for and find community placement. It is important to realize that a great deal of time goes into the planning and transitioning of people so that they are successful. The governor's plan to close Mabley by the end of February 2012 would not allow time for successful transition even if the community had the resources to serve the people at Mabley.

The Jack Mabley Developmental Center (JMDC) provides specialized care for those with behavioral challenges and dual sensory impairments and is a safety net to people in the community serving the important role of providing crisis stabilization to individuals who are unable to safely remain living in their family home or community setting. Regardless of this important role, Governor Quinn plans to displace 90 disabled residents with highly specialized needs for the sake of trying to balance the state's budget. This plan would be appalling even if it would succeed in the Governor's goal; however, it is clear that the Governor's plan will not result in community placement and will not save money.

Despite the Governor's promises, the majority of the 90 residents will not be moved to community settings, but will instead be moved to larger state operated developmental centers. There are already 21,000 people on waiting lists for community placement in Illinois. If the community has been unable to meet the needs of the people on the waiting list how can it be expected to also serve the nearly 300

people with highly specialized needs currently living at Mabley and Jacksonville? History shows us that when the state closes developmental centers the majority of people simply move to other state centers. When Howe Developmental Center closed 73% of their residents moved to other SODCs.

No money will be saved by disrupting the lives of these disabled residents. The remaining developmental centers will need to hire staff to serve the people who live there. When Howe Developmental Center closed, the budgets of the remaining centers had to be increased by millions of dollars to pay staff to serve the residents who moved there.

I ask that the Commission members take into consideration the truth that lies behind Governor Quinn's detrimental plan to close Mabley Center and save this center to continue to offer highly specialized care for the Developmentally Disabled. To do otherwise would be condoning the treatment of vulnerable citizens as throwaways whose opinions, wants, needs and families don't matter. Treating anyone in this way is completely unacceptable.

Respectfully,
Annette Miller-Crone, LCSW

I support the closure of Jacksonville and Mabley because it is the right thing to do for people with disabilities.

Regards,
Ann Myrna

I am a concerned citizen for the rights of the disabled. I support the closure of Jacksonville and Mabley because it is the right thing to do for people with disabilities because it better utilizes public funds in that community services are a better investment and result in more positive outcomes for people.

Kathleen Luttrell
340 N. Lombard Avenue
Lombard, IL 60148-2013

Date: 10/14/2011

Glenn A. Lancaster
2329 Thayer Street
Evanston, IL 60201

Mr. Dan R. Long
Executive Director
State of Illinois
Commission on Government Forecasting & Accountability
703 Stratton Office Building
Springfield, IL 62706

Re: Benefits of Mabley Developmental Center

Dear Members of the Commission:

After hearing the news about the proposed closure of the Jack Mabley Developmental Center in Dixon, Illinois, I feel I must express my concerns on behalf of the voiceless people who depend on this residential site for their health and welfare. I do not support this plan for closure.

The governor's plan is absurd and he and his staff do not seem to be taking the dignity of 90 vulnerable individuals into account with this hasty budget-balancing measure that will affect their lives and the lives of their guardians.

The governor should know that JMDC is the newest of the state's developmental centers, and is also the smallest facility, composed of 7 ranch-style homes on a beautiful tree-lined campus situated in a residential community in Dixon, Illinois. The homes on the campus offer its residents a mid-size group home experience while having 24-hour access to medical professionals and technicians specially trained to work with behavioral difficulties and sensory impairments.

The governor should understand that the Mabley Center was designed and built to accommodate a special population – those with sensory impairments. Each home on the campus is linked by trailing fences that allow residents with visual impairments the ability to move around campus with more independence and safety. Additionally, the homes and main office building were built with wood rails that allow residents to maneuver inside independently as well.

Rather than closing Mabley Center, the governor's office should be using it as the model for the future care of individuals with developmental disabilities. I ask that the Commission members take into consideration the benefits of the physical layout and purposeful design of this state of the art facility.

I implore the commission to reject the governor's plan to close such a valuable asset in the community.

Respectfully,

Glenn A. Lancaster

I support the closure of Jacksonville and Mabley because it is the right thing to do for people with disabilities. It is also a better use of taxpayer money. Staff from those sites should be ashamed of themselves for griping about losing their jobs when community agencies do a better job for less. Not to mention if they were smart they would see that community agencies will need staff to accommodate the people leaving the institutions. However, how many staff can be hired & at what rate depends on where the money previously spent on maintaining the outdated facilities ends up. Now there's something to think about. Let's see if the government can continue to do the right thing and allocate that money to the actual people with disabilities receiving Medicaid and/or the agencies supporting them. I'd rather see my money go to them than people who choose to stay home, have 6 kids they don't take care of, receive welfare, (my money!), use my money at the grocery store then leave in their ESCALADES while I spend the last of our checking account every month and leave in my old dented Honda!!!!!!!!!! Go to any Food For Less or Aldi in a lower middle class neighborhood and that is what you will see. At least I know firsthand that people with disabilities not only appreciate what they get; they want to & do work and those that aren't able volunteer. How many Medicaid recipients can honestly say that? LINK and Medicaid was meant to be transitional not a way of life for people who know or at least should know better. It would be nice to see the American/Illinois people finally do something right for people who truly need support but yet give back all they can rather than continue to reward greedy, lazy people who take pride in robbing the government and me.

Amy

Amy Castro
Systems Administrator
Ray Graham Association

We support the closing of these facilities in order to provide a better quality of life for the disabled persons currently living there, at a lower cost per individual, thus also freeing up more funds to help additional disabled individuals in need of services.

Mary Ellen & Paul Johnson,
Concerned Citizens and parents of a disabled child, now 30 years old
107 N. Maple
Bloomington, IL 60108

SODCs are obsolete. Other states have shown that there's no need for them.

The governor is right to close them.

Mike Ervin
Chicago

Hello.

I'm Robert Sandidge an advocate for persons with disabilities through our web site www.FundOurFriends.com.

I can be reached at 847.658.9273 or Robert@FundOurFriends.com.

FundOurFriends advocates strongly for community residential living vs. institutional living for persons with disabilities. We know from our work in the field that the quality of life is richer and the cost is less than institutional living.

Certainly there are challenges in making the shift from institution to community but we are confident that with careful planning and appropriate funding the outcome for all concerned is a higher quality of life at a more manageable cost.

We encourage the closing of these facilities and the orderly movement of clients into community supported living.

Thank you for your consideration.

Robert L. Sandidge
1421 Lowe Drive
Algonquin, Illinois

10/17/11

Sharon De Berry

3303 Rural St., Rockford, IL 61107 sddeberry@aol.com

Mr. Dan R. Long Executive Director State of Illinois
Commission on Government Forecasting & Accountability
703 Stratton Office Building
Springfield, IL 62706

Re: Benefits of the services offered at Mabley Developmental Center

Dear Members of the Commission:

I am writing in support of saving Mabley Center.

I am a retired former Facility Director of the Jack Mabley Center in Dixon, having been associated with the Center since 2000. Before that, I was the Director of the Developmental Disabilities Center at Singer Center in Rockford. My first 24 years were spent at the Howe Developmental Center in Tinley Park.

Mabley Center provides high caliber exceptional care, services and supports to people challenged by hearing, visual, sensory impairments and severe behavioral impairments. Quality of this caliber only happens when leadership, consistent care and compassion of staff, team spirit of parents and relatives and stakeholder enthusiasm come together as it does for the people who live at Mabley Center. Because of services and supports offered, people living at Mabley Center when asked how they viewed themselves when given Satisfaction Surveys gave answers such as, "O.K", "fine" "great" and (my most memorable) "a citizen". People living at Mabley go to churches, belong to social clubs, volunteer, vote, bring home pay checks, have bank accounts. Each requires some level of support or assistance, whether communication, adaptive transportation or behavior supports in order to fully access these every day events. Mabley Center has a proven track record for treating people with dignity and respect while assisting them.

As the Developmental Disabilities Center Director at Singer Center, I was involved in the closure of that Center. While employed at Howe Center, I witnessed Howe Center's admission of numerous residents from the community owned North Aurora Center and the abrupt transitions back into the community and homelessness for some of them. In addition while at Howe Center, I was a member of Howe's admission assessment and evaluation team during the Dixon closure.

Mabley Center was conceived and built to be everything that Dixon State School was not. Mabley has homes without dank back halls. There are no vast open day rooms where people soil themselves and rock aimlessly. Rather, each home has a sunny kitchen, a dining room a den. People have cook outson their patios. Neighbors visit each other's homes after work. Mabley is the kind of place you'd trust to leave a son, daughter, brother, or sister. It is not the kind of place that should be slated for closure in 90

days. It is the kind of place that should be used as a model for other state operated centers, if any are planned in the future.

My experiences have taught me that moving people from one place to another place is tough on people. It is jarring. Disrupting. Disturbing. These can be lessened with planning, patience and timing. At this time, it appears that there is no plan being offered by the state of Illinois adequate to give each of the 90 people at Mabley time and resources with which to transition into a community integrated living arrangement (CILA). Other state operated developmental centers do not offer the small homelike residences, visual and auditory adaptations integrated into Mabley's campus like setting or across the board training of all staff in American Sign Language (ASL). When Singer was in closure, I recall that guardians were assured that their wards would receive placements equal to or better than Singer. Since approximately 25% of the most challenged people did finally go to Mabley Center this occurred. With no plan and shrinking funding for community programs, it seems unlikely that anyone could be so assured.

It was reported that Mabley was slated for closure solely for budgetary reasons. Budget figures reported are misleading. Because of my involvement with Singer's closure and my familiarity with Lincoln Developmental Center's closure issues, I can say that costs do not disappear when a center closes. Costs follow people. As people went to other centers, budgetary dollars were shifted around.

Mabley Center over the course of my tenure there and during its history served as as a de facto regional crisis and respite center for people with intellectual disabilities whose behaviors were too extreme to manage but did not meet a criminal standard. Mabley's role was to work with the person, the person's supporters and to get them back into their community homes as quickly as feasible.

Mabley Center provides short term crisis management for the entire Northern region of Illinois which includes 12 counties. Closing Mabley means losing a vital resource to community partner/agencies and individual families. The state of Illinois will ultimately have to carry cost of care for individuals, agencies, jails, etc.

Recently in an open letter an advocate for de-institutionalization when speaking about the Mabley closure quipped, "Let my people go!" Although I found his use of this phrase in this instance reprehensible, I firmly believe that each person should be afforded the right to live where they choose given adequate resources. Governor Quinn, Illinois legislators, state of Illinois please provide adequate funding now in order to save Mabley. This is expedient. People at Mabley, their families, the staff who care for them, the town of Dixon and other stakeholder perceive that you are holding the residents of Mabley Center hostage by not allocating funds.

"Let my people go!"

I urge the legislature to allocate funding to keep Mabley open. Save Mabley

Respectfully,
Sharon De Berry

I think this is a wonderful idea. I do want to caution, however, that as each client is moved, AID, our local community non-profit based in Aurora and Elgin, must be given on DAY ONE the same amount as is presently costing that client for an extended period of time, perhaps as long as a year. AID has been cut for several years by the state. Last year they had to severely cut staff and find other ways to manage. Each new client will require more intense care and assistance in coming from a more hospital type setting. So there should be no "quick fix" The long term should be a good change.

Mary Lou Conover, an interested person

no relative has ever been a client of AID. though the children of several neighbors have been
age range -- over 80

Oswego, IL

The Autistic Self-Advocacy Network fully supports the closure of two institutions for developmentally disabled people in Illinois as proposed by Governor Quinn. Illinois is one of three states that institutionalizes cognitively and developmentally disabled people at dramatically higher rates than the rest of the nation. Institutions for cognitively and developmentally disabled people serve as significant barriers to meaningful inclusion in the community. Over the last few decades, most states have taken steps to reduce the number of people living in institutions, and ultimately, to close institutions for the cognitively and developmentally disabled. Research has repeatedly shown better outcomes for people who live in the community than for those who live in institutions. Not only will closing institutions save the state of Illinois millions of dollars in revenue, but it will also serve to improve the quality of life for those who would otherwise have been placed in those institutions.

Closing institutions is an excellent step towards promoting meaningful community inclusion for cognitively and developmentally disabled people. By encouraging cognitively and developmentally disabled people, their family members, and their caregivers to explore living and housing options based in the community rather than in a closed-campus institution, closing institutions promotes the idea that cognitively and developmentally disabled people not only have a right to live in the community but hold a particular place of value in their communities as peers of the non-disabled members of those communities. We urge you to support institutional closure.

Autistic Self-Advocacy Network

I am a concerned citizen who supports the closure of Jacksonville and Mabley because it is the right thing to do for people with disabilities. Public funding can be better used to support people with disabilities than to support people in State Operated Facilities.

I will not be able to be present at the hearing but would like my statement filed.

Thank you very much.

Sarah Pape
Lead Qualified Human Services Professional
Ray Graham Association
837 South Westmore Meyers Road, Suite A22
Lombard, IL 60148

Ladies & Gentlemen:

It has come to my Attention that Gov. Pat Quin is proposing the Closure of Mabley and Jacksonville Dev. Instutions - I am in support of this decision. These Individuals should be placed into CILA's instead.

Peggy Fetting
Waiting on AID's Group Home Waiting List for Son - Brian Fetting (Age 31)
Concerned Citizen and Guardian and Mother of Disabled Adult
630 E. Main Street
South Elgin, IL 60177

Hi my name is Shannon Dickerson I have a aunt that lives here this is the only home that she has ever known. This would be very difficult for her if you closed this down. She would be so distraught. I have two disabled children of my own and i know how it affects them any changes in our lives. This is not the right thing to do. I understand money is tight. It is for everyone but if your family member lived there you would be fighting to keep it open too.

Shannon Dickerson
122 joy drive
Clarksville, TN 37043

October 17, 2011

Dear Hearing Committee,

On behalf of families in Illinois who are successfully supporting people with disabilities in their home communities, I ask you and other legislators to move forward with the closure of both Mabley and Jacksonville Developmental Centers. Additionally, I ask that same funding follows these residents into the community where it is desperately needed for their success. Third, there will be a temporary need for additional funds during the closure transition so that communities, agencies and families can begin to prepare. Please support additional appropriations to assure a successful transition.

Every day of my life is centered around thinking, planning, supporting, developing, creating and pushing so my 17 year old son with autism will never have to live in a place like Jacksonville or Mabley. My son has been in situations where expectations were low, and medication, isolation and restraint were high. As a result of such an environment he responded horribly. Hitting, kicking, falling to the floor, biting others, running away and screaming, were all daily occurrences. At 6 ft 4 and nearly 300 pounds – each day I was stretched beyond my limits. Then, I decided that expecting him to behave in an “unhealthy” environment was analogous to telling a battered woman she could not leave until she learned to cope with her current situation. So, we did everything humanly possible to change and demand others around him change too. We had no funding and essentially were in a war against time and energy.

Specifically, I decided we needed to expand his communication support, raise expectations for reading, chores, and interaction with others. This didn't happen quickly or easily. Unspeakable sacrifices were made by my husband and younger son. But, I knew we were doing the right thing. Many loving people responded to my plea with “treatment” that really mattered such as communication supports, higher expectations (not lower!) exercise, better nutrition, massage and music therapy. We also formed a microboard, a small, formalized, circle of support that connects him to people he cares about in ordinary ways.

Our son was on the fast track to an SODC. But, because of our changes, he has changed. Our son still has classic autism, he is still nonspeaking and has difficulty finding the right words. His anxiety and frustration still swing out of control throughout the week. But now, in part because of community funding at the rate of about \$20,000 (and saving taxpayers 160,000) he swims, bikes, goes to movies, texts friends, homecoming, sporting events, is in a youth group, volunteers at various opportunities, cares for his dog, puts dishes away, and uses the internet with ease. What changed? We did. Our supports, expectations and environment changed and then he in turn, began to develop, grow and mature. Asking someone with a disability to thrive in an environment where there are no opportunities to make your own meals, move throughout some or most of the day at your own pace, have relationships with people that aren't constantly coming and going and take medication that is designed to dull will never result in freedom and dignity out in the community.

I felt it was my obligation to share our story today so that others may think a little differently about “residents” and their value as human beings. We are grateful for community funding. I know where we would be without it.

I refuse to be ashamed of my son. Even when hateful people say or do things, I remind myself that he is worth more than the inconveniences and misfortunes we sometimes endure.

Some day we will look back and be horrified at how we treated our brothers and sisters with disabilities. Let us take correct action now, and pride in knowing we rolled up our sleeves to do what was right and good.

Wendy Partridge, MS, QSP
Rockford, Illinois

Mabley Center provides specialized care for people with severe behavioral challenges. Care is provided by direct care staff trained by specialists in treating severe behavior problems.

Mabley Center has always provided a safety net to Northern Illinois communities by providing crisis stabilization for disabled people who live at home with their families or in community placement.

The Governor has not set forth an accurate time table of how long it would actually take to transition residents into the community if services were readily available.

History shows us that when the state closes centers most people living there are moved to other, larger centers. This benefits no one.

Linda C-Rolen
Mental Health Technician 1

I AM OPPOSED TO CLOSING THE MABLEY CENTER.

LYDIA RYAN

JMDC is a safety net for the community, serving the important role of crisis stabilization for individuals in Northern Illinois who are unable to safely reside in their family home or community setting. Residents at JMDC are under the watchful care of experienced staff, with specialized personnel working as direct care staff, doctors, nurses, psychologists, dieticians, educators, speech and hearing specialists, and behavioral analysts.

It is the goal of every staff member at the Center to prepare the people who live at Mabley for successful community placement.

To move them now to a facility that does not have the proper care would cause severe harm to each individual even death. Do you want this on your conscious? Could you sleep at night?

Donald Rolan
Family member of a JMDC client

History shows us that when the state closes centers most people living there are moved to other, larger centers. This benefits no one.

There are already 21,000 people on waiting lists for community placement in Illinois. If the community has been unable to meet the needs of the people on the waiting list how can it be expected to also serve the nearly 300 people with highly specialized needs currently living at Mabley and Jacksonville?

History shows us that when the state closes developmental centers the majority of people simply move to other state centers. When Howe Developmental Center closed, 73% of their residents moved to other SODCs.

No money will be saved by disrupting the lives of the people who live at Mabley. The remaining developmental centers will need to hire staff to serve the people who live there. When Howe Developmental Center closed, the budgets of the remaining centers had to be increased by millions of dollars to pay staff to serve the residents who moved there.

Eileen Collins
715 9th Ave
Rockfalls, IL

Please do not close Mabley Center, Dixon. I've been employed in the office area of JMDC for over 11 years. Coming into this environment was a totally new experience for me. It changed my entire well being. For the first 3 years of service to Mabley, I never worked directly with the individuals. However it is immediately obvious the safety necessity for these individuals and their need for direct care staff. At that time, I wasn't very aware of their medical conditions and emotional needs.

However, almost 9 years ago, I become a single parent to a non-verbal child with autism. I'm blessed in the fact that I am able to take care of him within his home setting and that he is able to attend public school, become independent and understand feelings and how to express himself.

Although I'm not an expert at autism, I created an autism support group for our community and I speak to the schools to educate about autism and how we can help these people to better understand their surroundings. I'm so fortunate that my son is able to understand and be somewhat independent, however each day his world is not always how we see it. He has meltdowns, tantrums, headbutts others, picks his fingers, wets his pants, and is often "out of sorts". However through therapy, he is learning to calm himself. I'm very proud of my son. Through my son, I've learned that the people we serve at the Mabley Center will never be able to do these things for themselves. They require day-to-day structure and routine, they require the help of someone capable of assisting them, they require someone to take care of their activities of daily living for them and mostly they require repetition and a place to call their home.

I've read about Equip for Equility and The ARC stating these people will thrive in the community. It deeply, deeply saddens me for them to even consider making such statements that they have made. I've called on EforE to handle my son's needs yet I did not get a response in a timely factor. Do these organizations work 24/7, are they medically capable of helping those we serve, are they even equipped to deal with this population on a day-to-day basis or is it their job to get them "somewhere" and leave??? I use to feel these were great organizations that are there to help those with disabilities but they failed me in my own simple, passive solutions. They cannot provide all the detailed care of the people who live at Mabley. Where will they go??

Thank you for your time. Our top priority is to serve the people who live at Mabley and to be assured their enviroment is a safe place where they can have structure and routine and live a life that best fits their (dis)abilities.

Kimberly Zera
Employee and mother of a son with autism

where are u going to send these disabled people. taking their home is not right. do have any idea on the damage that u will cause these people

annette brown

To Whom It May Concern:

I am writing concerning the proposal to close the Mabley Center in Dixon. I have over 22 years of service in the field, working with persons having developmental disabilities concurrent with other disabilities (eg., mental illness, deaf, blind, or physical). I have also worked in both the public and private sector and have a great understanding of both.

To close Mabley Center would be a great disservice to both those who currently reside there and those in the Northwest Network who count on Mabley for support services. As soon as someone is referred for services at Mabley, and upon admission, a transition plan is initiated with their 14 day staffing. This transition plan is comprehensive in nature and designed with eventual placement in the community for the individual in mind. As long as the person resides at Mabley, that plan is updated and further molded for the person to leave Mabley and move to the least restrictive setting in the community. Our placement success rate is over 84%.

We also help people in community settings to maintain their placements by providing consultation services with assistance for behavior monitoring. This can be done on site or at a monthly clinical review team held via video conference with other agencies in the Northwest Network.

Mabley staff assist individuals who reside there to lead productive lives working full-time in our center based recycling program that serves over 80 businesses in the Dixon area. Paper and cardboard are recycled and individuals are paid good competitive wages for the work they do.

There is no "black and white" to the issue of whether or not the state is better than the community. Until Illinois improves its service system, there will continue to be a need for a continuum of services ranging from part-time in home care to 24 hour residential state operated care. Not all individuals with disabilities can fit a cookie cutter mold and fit into what some advocates want.

If Equip for Equality, Arc of Illinois and Access Living, for example, truly represent ALL people with disabilities, then they must acknowledge the fact that there have to be options available for all. Community agencies are not the answer for everyone at this time, because the resources and finances are just not available. Guardians should be allowed a voice for the people they represent, just as these advocacy groups feel they are representing people.

Please do what is right and recommend that Mabley be kept open. It is the smallest and newest of all centers in Illinois. It should be held up to the others as the standard bearer, showcased as the model of what a state operated center should be. Not closed because of its size and it can be done quickly.

Thank you.

Teresa Kurzrock

History shows us that when the state closes developmental centers the majority of people simply move to other state centers. When Howe Developmental Center closed, 73% of their residents moved to other SODCs.

No money will be saved by disrupting the lives of the people who live at Mabley. The remaining developmental centers will need to hire staff to serve the people who live there. When Howe Developmental Center closed, the budgets of the remaining centers had to be increased by millions of dollars to pay staff to serve the residents who moved there.

Please recommend that Mabley Center stays open.

Thanks,

Deb Muhlstadt
Business Administrator
Mabley Developmental Center

It is a disgrace that we continue to enable able-bodied persons to subsist on tax dollars but lack the compassion to help those who truly need support. Facilities such as this are a requirement for a humane and compassionate society. Playing games for political gain is not acceptable and is obscene.

Ron Miller
2433 Gurler Road
Ashton, IL 61006

I feel that the Mabley Center should remain open. So many people there get amazing care and the economy is going to just continue to get worse and worse if you continue to shut stuff down and people no longer have jobs.

Megan M. VanNatta
2365 Loko Ia Ln.
Wahiawa HI 96786

I am very much opposed to the closing of Mabley Center! Why would you close the smallest facility? There would be no money saved at all by doing this. The clients there are happy and at home and they don't want to move! I don't see any reason in disrupting their lives. Think you need to take a real hard look at the facts and you'll see what i see, that none of this makes any sense at ALL!! Make it Right!!!

Jamie LeBlanc
Mental Health Technician 2
Mabley Developmental Center

Mabley is the safety net for the private sector providers. Additionally the law that requires individual choice is VIOLATED if state services are not available. also Mabley provides services to those with hearing and vision impairment -- THE ONLY FACILITY IN THIS STATE THAT DOES . THIS IS HOME TO THE MABLEY RESIDENTS OF DIXON IL. THESE ARE OUR MOST NEEDY CITIZENS

IF WE DO NOT PROTECT THEM WHO WILL!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!

Frank Heniff
Mental Health Tech 3
Mabley Developmental Center

It takes certain people to work at mabley we are family and family for the persons served do not close there lives or the jack mabley center.

Lance Baker
mht 3
Mabley Developmental Center

I would like to see this stay open to all students.

Melissa Lewis

The clients that I (and every other employee) serve are more than just persons with disabilities! These are people that I/we spend a minimum of 8 hrs a day interacting with and caring for them. We are their family because their actual family cannot be there every day. Our clients depend on the consistency and reliability that is provided to them being in their homes! And may I repeat, "Their homes!" I urge to vote against the closure of Jack Mabley Developmental Center! There are 87 people who are depending on your help in ensuring that at the end of the day they have the same basic right as you or I, and that is being in the safe and secure environment they know.

Thank you,

Erin Miller
Mental Health Technician
Mabley Developmental Center

In a bottom line world here is the bottom line.....No money will be saved by disrupting the lives of the people who live at Mabley. The remaining developmental centers will need to hire staff to serve the people who live there. When Howe Developmental Center closed, the budgets of the remaining centers had to be increased by millions of dollars to pay staff to serve the residents who moved there. Any immediate savings recognized by the closing of the Mabley Center will be far outweighed by the longer term cost increases for finding alternate facilities and care givers for these residents who are among our state's most neediest and vulnerable citizens. Don't be short sighted. Consider the whole picture. And save the state money by keeping the Mabley Center open.

Peter Becker
302 Taylor Avenue
Glen Ellyn, IL 60137

I have been in the field of Developmental Disabilities for over 28 years. The individuals that live at the Jack Mabley Developmental Center are part of large, caring and warm extended family. For many of them, Mabley has been home for almost 25 years. Currently, in the State of Illinois, there are over 21,000 people on waiting lists for community services (which are virtually nonexistent) why add at least 300 more to the list? Mabley consists of 7 homes in a park like setting. Being part of a "community" means interacting with other members of the community, participating in community activities and being civic minded, all of which individuals that reside at Mabley currently do on a regular basis. The individuals that live at the Mabley Center should not have their lives disrupted under the guise of saving money.

Linda LeBlanc

Keep Mabley Center open! Mabley Center provides specialized care for people with severe behavioral challenges. It is a newer facility. Mabley Center staff are trained in sign language and contact sign language.

Steve J. Caudillo
2004 21st Avenue,
Sterling, IL

I work at jack mabley.I just want to take a few minutes and tell you that there's no other place on this earth like mabley, I'm not just saying that because I work there it's true, the individuals at mabley love it there they get the freedom to do so much, like ride their bikes around walk around outside, make money and spend it how they want to.you say that they should be in a community setting, but I'm here to say mabley is a community setting.our individuals are not the kind of people that adjust to change well.you want to move individuals that don't handle change well so they can beat themselves or hurt other people, and for what? you are risking the lives of these individuals to try and save a buck.

sabra brown

provides homes and schooling,and access to medical staff, to people who have, behavior difficulties. i understand it provides a safetynet to the people of the community.....signed by, tk foor

There are currently 21,000 adults and children on the list for community services in Illinois that cannot be served. The governor's plan will add nearly 300 additional citizens to that waiting list.

Jessica Wroble

Hello,

My name is Cynthia Bogue and I want these facilities open until such time the State of Illinois commits to approving and delivering services to individuals who have become institutionalized and require extended services, i.e., an extended 1:1. Failure to do so, would more likely result in increase State expenditures in the manner of increase inpatient psychiatric admissions, and/or increase prison admissions when the individual acts out and possibly hurts someone.

Thank you,
Cynthia Bogue

I remember vividly my introduction to field of developmental disabilities. I was a recent college graduate, eager and ready to put my degree in psychology to good use. I went on a job interview at a developmental workshop and afterwards was taken on a tour of the building so I could 'see the people I'd be working with.' Let me tell you that none of my training or previous life experience could have prepared me for what I saw. I was led from room to room, each filled with people who had disabilities of every sort; blind people, deaf people, people in wheelchairs, and people with walkers with helmets on their head. There were people twirling, and crying and drooling. Some tried to talk to me but could not understand their speech. I felt dizzy and sick and remember questioning God about the reason for suffering...I took the job. It paid \$5.65 an hour.

That was 15 years ago and I have since earned a Masters in Social Worker and love the work that I do. Over my career I have worked in direct client care, supervisory, and case management capacities. I have worked in the community at various group homes, a developmental training center, and an intermediate care facility. I have also worked at a State-operated Mental Health Center and a State-operated Developmental Center. I would like to share some of my experience with you and how it relates to the Governor's proposal to close these facilities.

First, if you haven't picked up on it by now, the system of care for these individuals is at the brink of disaster. I am hoping that if there is one positive thing about these threatened closures is that the public and General Assembly will become more educated about the current plight of this group. And it would be a horrific mistake to begin to set things right by closing any of these facilities.

The people who work at the State-facilities receive far more training, tend to have more education, and are more experienced in caring for people with more severe disabilities. They see more complex cases, respond to more people in crisis, and have as a consequence developed more finely tuned skills. Another important efficiency of State-centers is that they have most services under one roof. Ask someone from a community agency what it is like to get psychiatric consultation or medical services for their clients. While working with the State of Illinois I have had the opportunity of learning from several clinicians who I would consider brilliant and expert in their field. Also, you will hear from many individuals and their families that they not only received quality care at a State-operated center, but also compassionate and personable care. Some even report a feeling of family and home. This is a tradition that should be commended on, especially from something run by the State! And why is it that there is such a qualified staff at these facilities? Its simple really, it is because they have been fortunate enough to work at a job that allows for both personal reward and also provides a decent middle-class wage that can sustain their family.

The community providers on the other hand have suffered since their beginnings from underfunding, budget cuts, and untimely payments. The direct of effect of privatization and cost-savings. The front line workers and middle management suffer the worst with pitifully low salaries resulting in rapid turnover and in general a less qualified pool of applicants. As a result there are more instances of sub-standard care and more risk for abuse and neglect. Most of these agencies are not equipped or prepared to handle the challenging clients who remain in the State-centers. Furthermore, there is

already a process in place for assessing and transitioning individuals who are appropriate for community placement. It is slow, but effective. The plan offered by the Governor offers no real additional resources to the community and will undoubtedly result in what we call in the business "dumping." This is something you do with your trash.

I'd also like to remind you that this is not easy work that we do and it is difficult to not become a little disheartened by the callous attitudes of the Governor and the Department of Human Services. These disabilities are complex and have devastating effects across all aspects of life for our clients. And each individual is unique and requires caregivers who are highly adaptive and possess a wide range of technical and interpersonal skills. Working conditions are tough too; Caseload numbers can be daunting, staff to client ratios unsafe, and the regulations and paperwork requirements oppressive. And most clients don't care about the paperwork we generate about them, they have more human needs and dreams. And when these go unmet than maladaptive or even dangerous behavior is sometimes the result. I have on many occasions been physically assaulted in this line of work.

It would seem to me that if you wish to reform this broken system that you begin with investing in the community agencies. Allow these agencies to pay their staff living wages, decrease turnover, and develop a skilled staff. Agencies will also need to expand their capacity for new clients by opening new group homes and supported residential sites. Then there is the need for vocational and life skills training. Also, the massive and costly problem of transitioning people from long-term and intermediate-care facilities has received almost no attention during COGFA's investigations. This is Court mandated, will be extremely costly, and should be DHS's most pressing concern right now. The conditions that exist in some of these facilities is deplorable and there are many people residing in them being denied access to treatment in more appropriate settings. The plan to address this problem is even more lacking than the plans to replace the services at the State-operated center.

I urge you to keep the safety net of our mental health and developmental centers open and to hold the Department of Human Services accountable to present a comprehensive plan which sets about to repair our service system for this State's most vulnerable group of citizens.

Respectfully,

Matt Hoffman, MSW, LSW

Many need a place like this. Please reconsider Gov. Quinn.

Marcela Bermudez

Mabley should remain open, our individuals will not survive this, there is no place for them. the advocates for them made it real clear they want the states money and that is all not the individuals that are affected. I am sure that they know of some of our individuals because have already refused them service that's why they are at mabley. imagine the comforts of your home, anything and everything your hearts desires warm safe and yours, little did you know someone is making plans to take all yours away because they think they know what is better for you the powers don't even know your name you likes your wants or your needs your survival is not there concern just this could not would save them a few dollars so without asking ,without your input come pack your belongings and move you to a place never heard of or seen by you before 25 years living somewhere friend ,enemies, favorite things all gone for a buck, cause the powers that be can't figure out how to manage money.th e powers need to give back .no truth was told by the state what will happen to our individuals ,the explanation will oh they fell through the cracks in acceptable. KEEP MABLE OPEN

Gail vaughn

It is the onley facility of it's kind; closing it would be a terrible mistake,

Patricia L. Breen

Please do not close the Mabley Center. The facility is new and beautiful and will require less upkeep than some of the older facilities. Perhaps the facility that is under investigation from the government would be the better option for closure.

Laura Santos
502 E Bradshaw
Dixon, IL

This facility needs to stay open for the benefit of its residents, especially those with no other place to live.

Brian K. Bicknell
1881-D South Randall Road
Geneva, Il. 60134

I think the Mabley Center should stay open cause these residents deserve to have a roof over their head and food put on the table for them just as much as anyone else does. I have worked with some of these residents and they are all a joy to work with and all a lot of them want is to know some one cares about them.

The governor sure isnt showing he cares. Where are all of these residents going to go if they close? But why should the governor care cause he has a place to live and food to eat.

LaDonna Messenger
223 E Third St.
Dixon Ill

I personally know the story of a young man who will be completely disoriented by this change - perhaps permanently. I also know a number of people with friends or family members at Mable who rave about the conditions and the care.

Do not close Mabley!!

Sue Bordenaro
762 E. 156th Place
So. Holland, Il

To Whom it May Concern:

I would like to take this opportunity to share why I oppose the closing of the Jack Mabley Center. I currently work with a lady who has two sons in the Center. One functions at the level of a six-year-old, and the other at the level of a three-year-old. The latter has made himself blind by repeatedly beating his head. If this facility is closed down, I fear that she will be unable to find a facility that will take her sons due to their severe behavioral problems. The Jack Mabley Center has worked with her sons and have helped them reduce their severe behavioral problems by giving them a daily routine. I ask you to please choose wisely in determining the future of the Center, not just for my friend's sons, but for all of the people who call the Center "home".

Sincerely,

Jessica L. Metras

Dear Cogfa:

All evidence points to community placement as being unrealistic for most of the people at Mabley. They're at Mabley for a reason, often for violent behavior which is kept in check with careful behavioral plans and medication. A community placement in Illinois will result in lower and less attentive care, which will bring these behaviors back. The result is more cost to the state and worse conditions for the clients.

There are currently 21,000 adults and children on the list for community services in Illinois that cannot be served. The governor's plan will add nearly 300 additional citizens to that waiting list. Any openings in the community will go to clients who have lesser demands.

With budget cuts and payment delays, the state's failure to support community providers keeps them from being in a position to serve the people currently living at Mabley. So that's not a realistic option.

Sincerely,

David X Lee

This sounds like a place that really needs to stay open for many reasons. It would negatively affect a lot of families.

Matt Robinson
600 7th street
Fulton, IL 61252

Jack Mabley needs to stay open! This is these residents' homes and the only home that many of have known for years. These are special needs people who do not and will not understand being moved out the place they know as home. Residents at JMDC are under the watchful care of experienced staff, with specialized personnel working as direct care staff, doctors, nurses, psychologists, dieticians, educators, speech and hearing specialists, and behavioral analysts. No money will be saved by disrupting the lives of the people who live at Mabley. The remaining developmental centers will need to hire staff to serve the people who live there.

Do not disrupt my brother's life; he will not understand being moved to a new place. It will cause him mental anxiety and be very harmful to his well-being. The state needs to think about the people's lives they are disrupting and not a budget line item they can cross off like they have done to the school districts in the state!

Loretta Ferguson

I realize the State of Illinois is in serious financial difficulty.

The State has a moral and legal obligation to care for the well being of citizens entrusted to its care as Wards of the State.

These citizens are least able to object to the proposed closing of the Jack Mabley Center. They are also the most vulnerable and will suffer the most harm to the disruption in their lives if this closure should happen.

Of all the areas the State can look for cost savings, the Jack Mabley Center should not even appear as an option. It is needed. The State must provide for these citizens. To believe that significant savings can be had is wishful thinking.

The legislature should not and I repeat should not try to fix the fiscal woes caused by the inefficiency of the current lawmakers combined with the many years of previously inept lawmakers by attempting to destroy one of the few things they are currently doing well and that is keeping the Mabley Development Center open.

I have little patience with and feel contempt for any lawmaker that thinks closing the Mabley Development Center is a good idea.

I implore all lawmakers to come to their senses, use the brain God gave you and don't even think about closing Mabley.

Alex B. Becker
222 S Madison Avenue
LaGrange ,IL 60525

I want it to stay open because i have a brother who has lived there for years.

bonnie reed

Date: October 19, 2011

Commission on Government Forecasting and Accountability
ATTN: Facility Closure
703 Stratton Building
Springfield, IL 62706

Dear Members of the Commission:

After hearing the news about the proposed closure of the Jack Mabley Developmental Center in Dixon, Illinois, I feel I must voice my concerns on behalf of the voiceless people who depend on this home for their health and welfare. I do not support this plan for closure.

I am a family member of a young adult who is deaf, visually impaired, cognitively challenged and he has a mood disorder. Over several years, he was intermittently helped by brief hospitalizations and when released, his behavior would worsen. He has demonstrated aggression that put himself and his immediate family in physical danger. His parents were unable to find a home for him that was adequately staffed to care for him until he was placed in Mabley in 2011. Now he works, earns money and is learning life skills. He's enjoying new experiences and thriving in this environment!

JMDC is a safety net for the community, serving the important role of crisis stabilization for individuals in Northern Illinois who are unable to safely reside in their family home or community setting. Residents at JMDC are under the watchful care of experienced staff, with specialized personnel working as direct care staff, doctors, nurses, psychologists, dieticians, educators, speech and hearing specialists, and behavioral analysts. Mabley Center was designed to support individuals with dual sensory impairments - people who are deaf, blind, or both.

PLEASE DO NOT CLOSE THIS FACILITY.

Respectfully,
Julia Hobbs

Please keep the facility running for the residents.

kellie moran
5037 brampton parkway
ellicott city md 21043

I am opposed to Jack Mabley Developmental Center in Dixon, Illinois, being closed. The Center has seven homes that look like CILA homes. No home has more than 17 individuals living on the home. Currently one home has only 13 and my home has 15--not all homes have 17 individuals. All individuals have dietary, medical, clinical, educational, work training, psychological, social, dental, barber/beautician, clergy services. The facility is probably one of the newest built. It was remodeled within the last five years. Jack Mabley Developmental Center is not an institution. It is seven homes set around an area that the individuals can walk, run, and bike around. The homes look like CILA homes. Why would you take the individuals out of a CILA-like setting to put them in a CILA setting? or worse, to an institution? Our individuals are safe here. They are not in a home sitting right on a busy street. I could go on and on, but the point is, our individuals need their homes here at Mabley Center. Please don't let them down.

Thank you.

Patricia Jean Bowser
1006 E Chamberlin
Dixon IL 61021

I strongly support the continued access of MDC for the stakeholders of Illinois. I stand committed to participating in any legal and appropriate activities in efforts to advocate for the services and opportunities MDC provides for the people of the State of Illinois.

Billy Ray Williams
811 W. John St
Yorkville, IL 60560

I worked at Singer Mental Health for about 7 1/2 years and transferred to Mabley center in January 2006. Mabley is our home. We have a close nit family here. Homes in the community could not possibly give our individuals what we give them. The few that could be placed would just leave the rest to go to another state facility. Why mess up what we all have worked so hard on together. We have special programs created to fit every individual at Mabley. Please keep us open, and don't tear our individuals away from the homes some of them have ever known.

Thank you,

Tamara Stockdale
1104 E. 14th. St.
Sterling, IL 61081

I have been with jmdc for roughly 12 years. I have seen many changes in my time w/ mabley. Some for good and some for bad. I have been a part of some of the individuals being moved to community place settings. SOME have been successful, but MANY were not. They were either brought back to mabley OR shipped to other SODCS'. Typical "warehousing" syndrome, in Which you "BIG WIGS" are attempting to avoid. The individuals we serve ARE family to the employees. Some of the staff are with the individuals MORE than they are with their own flesh and blood. The "consumers", as you call them, rely solely on the staff that care for them. So Mr. Quinn and all of your cronies, I'm not happy with YOUR current living arrangements. Therefore pack your families up and YOU WILL "warehoused" into a Motel 6 down the street... No? Too bad!! You are NOT getting a choice and let's be honest, I know what's best for you and your cronies. How would you like to be told that?? You are virtually doing the something, but it's worse, because these labeled "consumers don't have a voice!! WE ARE THEIR VOICE!!! So keep riding the "budget" train if THAT helps you sleep better in the home that YOU chose!!

Matt vaupel
Po box 1018
Dixon il

many of the people who live there have only this location as a home the only one they

roger g anderson

Dear Commission Member,

It would seem an easy decision to save money by closing the Jack Mabley center. After all the residents do not understand budgets nor do they vote. These children of God do understand the unwavering care, love and championship the dedicated staff provides for them on a 24/7 basis.

Where will they go? How will they cope with moving from their home? Who will help them?

Please consider the residents and why the facility is there in the first place.

Thank-you.

Nicholas J. Becker
624 Lockwood Court
Saint Louis Missouri 63119

When each of us came into the world, we were given gifts of talents and abilities. It is the responsibility of those who have more to care for the needs of those who have less. One of the ways that the people of Illinois show their concern for some of the most fragile of our citizens is through the continued support of the Mabley Center.

One of the miracles that occur at Mabley on a daily basis is the staff's amazing commitment to communicating with residents who have multiple sensory and cognitive disabilities in a way that allows them to live full and satisfying lives. A group of faculty and students from DePaul were privileged to work with the staff and the parents group to develop learning software to help ease communication barriers. It was in this role that we witnessed the care and dedication of the staff to citizen who would have no options if Mabley closed.

Mabley is one of the state-supported institutions that all citizens of Illinois can take pride in. Please, Governor Quinn, please allow Mabley to continue doing its good work.

Rosalee Wolfe
6826 N. Oriole Ave
Chicago, IL

Mabley is the definition of a community center and is supported by the loved ones of the residents. It should not be closed.

Carol Winfrey
318 N Edgewood
La Grange Park IL

I oppose the closing of the Mabley Center. You heard the testimonies of the parents/guardians of the individuals we serve. Community placement without proper supports DOES NOT work !! Look how many of our individuals are returned back to us. How many out there are over-drugged just to manage their behavior? Where's the dignity for this population? Shame on our government!!

Cindy Maloney

- My son John Riley has lived at the Mabley Developmental Home for 25 years. He is profoundly hearing impaired, autistic, mentally retarded and has very severe behavior problems. John only communicates with sign language. The staff at Mabley is able to communicate to him in sign language and if he is with people who do not sign his severe behaviors increase. He is coming down with medical problems as are many of the residents as the population is aging. He needs medical care which Mabley provides. It would cost so much more to service their needs in the community.

- John was let go from a Chicago institution where he was overmedicated to the point he could hardly walk, they hospitalized him and there he was drugged some more, because they could not care for him and they did not sign. My husband brought him home for Thanksgiving, walked into the kitchen first and said you are not going to like what you see. He was a zombie unable to walk. He was refused placement in a community group home 2 years ago in Dixon. In fact just last week, he was at his workshop, became frustrated and threw over a table. What did they do but sent him back to Mabley

- There are no places in the community. There are 20,000 disabled waiting for community placement. Needless to say there is nowhere for the deaf and blind to go where they would receive the specialized care they need.

- Mabley is a cluster of group homes. It is a community. The residents are integrated into the community in Dixon. He goes swimming at the Y once a week, goes to a Pegasus program once a week, is taken to the Catholic Church for Mass, goes out to dinner, shopping and to the movies. He is integrated into the community, but has loving staff caring for him at the same time. He is safe and the COMMUNITY is safe.

- How dare any organization-(ARC) - tell us how and where our loved ones should live. It is an insult to the family members. Don't you all think we would have them in group community homes if they were able?

- Senators and Representatives please recommend a supplementary appropriation to keep Mabley open. This is one of the most important decisions you will make as lawmakers. 90 human lives are truly at stake. Not to say the lives of all the staff who so lovingly care for them You can cut things but you morally cannot cut out a decent existence for the most vulnerable

Mary Riley

I really disagree with the closing of this facility, we need to keep taking care of our disabled citizens who cannot take care of themselves

Dawn Wiegel

I have been mulling over my choice of words for a few weeks and now after attending the COGFA hearing, I feel that it is best to speak openly and from my heart. With that being said, I am a Habilitation Program Coordinator at Mabley Center, which is, in essence, a case manager of sorts. We manage our individuals' needs, monitor their behavior, seek needed referrals, work with the individuals, and various other tasks too numerous to mention here.

One big task under our umbrella job title is working towards placing our individuals in the community. Of the four individuals that have been placed since the closure announcement (mentioned at the hearing), I have had three on my caseload. That being said one of those individuals was placed at the end of August, not after the announcement. I am completely and utterly in favor of placement in the community for my individuals if the individual is prepared for placement and the receiving facility is prepared for the needs of the individual. The four individuals mentioned above had been preparing for their placements long in advance of the COGFA hearing and the closure announcement. They had gone for visits with the agencies, the agencies had come to visit them at the Mabley Center, and conferences were held to ensure that adequate care would be provided for the individuals. It has been a long process for each placement and one that has taken much longer than the projected three months.

I have also had many community agencies come to Mabley Center to visit with my other individuals. However, we are often told that these agencies cannot meet the needs of our clients, or that there are extensive waiting lists; not to mention the numerous referral packets sent to community agencies, which are not even feasible enough in the agencies' eyes to warrant a visit. In one case, I took an individual to visit a community-integrated living arrangement (a CILA) and the individual ran to the locked door of the home and yelled "Go home!" Needless to say, we took her back to her home, Mabley Center. That was her choice, Mabley is her home. I was elated to hear stories of success spoken by individuals with developmental disabilities at the COGFA hearing; however, that is not the case for every individual, nor is placement a viable option for every individual at the Mabley Center.

People with developmental disabilities are just that, people. Every person has their own personality, their own strengths and needs, and everyone exists along a spectrum. What is the best choice for me may not be the best choice for you. It is much the same that while some individuals with developmental disabilities may do great in community placement, other individuals with developmental disabilities need more support.

After the announcement was made on September 8th, I was walking around campus. I had heard that one of my individual's had heard about the closure announcement due to lack of money on the news and had taken his 85 cents, the money he earns every day to get a pop, up to one of the secretaries in the hope that it might keep Mabley Center open. That evening I ran into that individual sitting alone at a picnic table outside of his home. He asked me "Susie, where am I going to live if they close my home?"

I had to look him in the eye and say "I don't know, B, all I can say is that I can try to make it some place where you'll be happy."

He replied "I know, but I want to stay at my home."

Susan Senn

My concern is for the clients that live at Mabley. In particular I have a long time friend who's son lives and thrives at Mabley. Justin is a very sweet, compassionate child that lives in a mans body and has the mental capacity of a 4 year old. He has lived there quite a long time and does not respond well at all to change. Justin is his Mother's whole life. She travels to get him and bring him home every other weekend but he is very anxious to get back to his real home at Mabley. He has made a family at Mabley and would be virtual lost if the facility was closed. My friend would be lost if her Son was displaced. Please consider all of the clients and the family that they have grown to love and depend on at the Mabley facility.

Laurie Bierl

I think this facility should not be closed. There are only a few still in operation and this would be a dis-service to the patients as well as the families.

Amashawn Buchanan

I would like to express my support of keeping Mabley open. These individuals have no other place they can call home. They did not chose to have the severe disabilities that require them to be away from their families. Mabley is now an extension of their family, they feel like this is their home. To take them away would cause pain and confusion to the residents and their families. Please keep this loving place open to protect the residents from any possible harm. They deserve a place where they can be treated with dignity and respect.

Thank you,

Beth Ranken

Regarding the closure of the Mabley and Jacksonville facilities--

Given the state of the Illinois financial status these closings and the moving of clients to CILA facilities is the correct move. The appreciation of the folks involved goes beyond the money aspect. While unable to voice their thanks please believe that your actions are embraced by all.

Sincerely,

Don Cote
Geneva, IL 60134

Please do what is right for the residents of Mabley and keep it open. We all take pride in our work and the projects that we back... but sometimes when we're wrong about something, we need to step back, swallow our pride, and do what is RIGHT! If you close Mabley after hearing the multitude of family members begging you to allow their loved ones to remain in this safehaven, then you have not done your job to the best of your ability to serve the citizens of Illinois... ALL of the citizens of Illinois. Once again I ask you to DO THE RIGHT THING...KEEP MABLEY OPEN!

Joyce Walker

People with disabilities should live in public communities and have access and the resources available to them as any other person in our community. Not only is it the moral thing to do, it is also financially responsible. Illinois is in a horrible budget situation and many more people with disabilities can be supported with funding given to community services than in an SODC setting. There are many people on the waiting list for services who are currently receiving nothing. It is in the public's interest that these dollars are put towards the most efficient and effective way possible. Once again, I strongly express my desire for Illinois to proceed with the closure of Jacksonville and Mabley SODC and continue to close the other SODCs in the state of Illinois as well.

Thank you.
Kathleen Gerhold

Please, please consider only the residents of the Mabley Center when making considering the closure of Mabley. Budget cuts CANNOT be made at the cost of special need citizens. This would be taking steps that will diminish their quality of care. Those at staff at Mabley have worked hard to create the best quality of care for all their residents. Don't close Mabley and desert these special need citizens. Let them keep the home, the only home some of them know.

Please read the attached, a letter I sent to Governor Quinn.

Thank you,

Rose Johnson

592 Bluff Str., Carol Stream, IL 60188-1632

Home phone: 630-665-6947

October 20, 2011
Office of the Governor
207 State House
Springfield, IL 62706
Re: Closing of Mabley Developmental Center
Attn.: Governor Quinn

My grandson, Derrick is deaf, blind in one eye, and mentally challenge young man. He will be 22 this coming December and presently lives at the Mabley Developmental Center in Dixon Illinois. Mabley is one of the facilities you announced that you would close on "behalf of the people of Illinois".

This would be a tragic development for my grandson and many of the residents who have lived there for many years. The only people to consider are the people who call this "home". What possible benefits do the people of Illinois receive from closing this home? NONE! Because where ever you try to relocate them the cost of their special needs will still be present. Whatever money you think you can save, you will have to spend to meet their needs in another place. Closing should benefit only the residents and IT DOES NOT.

It took over 4 years for Derrick's family to finally place him at Mabley. So as off April 2011 he has been a resident of Mabley and doing extremely well. He works and is well liked by the staff and other residents. He participates in bowling, horseback riding, golf, swimming, and many other activities. Derrick has not wanted to live at home for over 4 years and not understanding all the red tape delays would lash out violently punching holes in walls (over 25), breaking windows, big and small, TV's, doors and beating on his dad and step-mother. His father had to stay at home with Derrick and could not seek employment for a long time. Many times the police and paramedics had to be called and Derrick would be hospitalized for a time and then sent home. HE CANNOT LIVE AT HOME nor does he want too.

Where do you plan on placing the residents of these facilities? Like animals in cages? The days of "snake pit" facilities are gone and by law must treat them with the care that meets their individual needs. This cannot be done when residents are placed in nursing home or crowded facilities that do not have the abilities to meet their individual needs. Many of these residents were turn down for placement in group homes. I can't tell you how many group homes said they would take Derrick only to reject him after months of red tape delays.

I am just one of the people of Illinois born and raised here and believe me when I say you are not doing this for the people of Illinois. If you had a family member living at one of these facilities you would not have dared speak of closing the facilities. You would have selected other programs. Make drug testing and proof of citizenship mandatory for Welfare Benefits and you will be able to save millions perhaps even billions. Put more effort in TAKING CARE of the CITIZENS who live at the Mabley Center. Your administration seems to have more compassion for Illegals then those at Mabley.

Come on Governor Quinn; get real and starting living like the rest of the citizens of Illinois. The politicians made a mess of things and they should step up and be the first to make sacrifices not play games with the mentally and physically challenged.

We have had too many governors and politicians who think the elected office is an entitlement to do what ever they like and dam the citizens. No more Governor Quinn, you and the citizens of Illinois including those at Mabley are equal and the sooner you realize that and really get to working for all the people of Illinois including the residents of the facilities you want to close, then maybe we can talk about your qualifications to be governor of Illinois again. Because this is what it all about isn't it, RE-ELECTION.

Sincerely,

Rose M. Johnson
592 Bluff Street
Carol Stream, IL 60188

Please vote against the closure of Mabley Center.

Mabley is a safety net for the community, serving the important role of crisis stabilization for individuals in Northern Illinois who are unable to safely reside in their family home or community setting. Residents at Mabley are under the watchful care of experienced staff, with specialized personnel working as direct care staff, doctors, nurses, psychologists, dieticians, educators, speech and hearing specialists, and behavioral analysts.

It is the goal of every staff member at the Center to prepare the people who live at Mabley for successful community placement.

There are already 21,000 people on waiting lists for community placement in Illinois. If the community has been unable to meet the needs of the people on the waiting list how can it be expected to also serve the nearly 300 people with highly specialized needs currently living at Mabley and Jacksonville?

Sheila LoSchiavo

LEGISLATORS :

"NO GOOD" can come from closing this facility. I am a retired former Employee of the dept. of Human Services. My capacity , on paper, was a direct care, support Individual. That being said, this is where that discription stops.

After about a week , one realizes that you are becomeing one with this family, and you gain many friends and true family. Would you ever take away your family members Homes? Would you ever take away your family members livelyhoods ? I suggest, that you surely would not! I was often very verbal, of opinion, and I won't change. This closure isn't logical! The lines between worker, staff,

and residents, quickly blur in this love experience. This is not a bull statement, and you can take it as gospel. The friends and family you gain there at "MABLEY" , are very strong bonds, and family should never be broken up. This is not an institution of old, but a community of folks, that may need some help from time to time. I suggest that where you live is very nice as well, and you yourself would never destroy your own community, homes, or throw your own family members here and there. Please know this, If I ever had a dislike, It was the upper politic

s of

legislators. You gentlemen and ladies need to see the situation on a personal level, GO THERE. This is a henous mistake to close, "JACK MABLEY CENTER" in , "DIXON, IL " Thank You. You have my address, feel free to contact me at any time.

Nevin M Hvarre
727 Winton St.
Wausau , WI , 54403

My niece was at Mabley till she passed away, and the treatment there was wonderful. If this facility is closed it will be a travesty to the current, and future residents. We ask all concerned citizens to back Mabley, so those who can't speak for themselves, will find a voice in the all those who can speak for them.

Mr. & Mrs. Stanley Matusik

Please don't close the Mabley Center!

Mabley Center was designed to support individuals with dual sensory impairments – people who are deaf, blind, or both. Each home on the campus is linked by trailing fences that allow people with visual impairments the ability to move around campus with more independence and safety. All Mabley Center staff are trained in sign language and contact sign language (used when working with clients that have auditory and visual impairments).

Mabley Center also provides specialized care for people with severe behavioral challenges. Care is provided by direct care staff trained by specialists in treating severe behavior problems.

Where will these people go if Mabley's doors close? History shows us that when the state closes developmental centers the majority of people simply move to other state centers. When Howe Developmental Center closed, 73% of their residents moved to other SODCs. This would be tragic for the individuals, their families, and the Mabley staff.

Angela Jackson

Please please please don't close the Mabley Center. It has a lot of important people who live there and if Mabley closes they won't have anywhere to go. Other places don't know them. My Mommy loves her job at Mabley and so do all the other people who work there. And even though it costs money, it's their homes. So, please please please please please do not close Jack Mabley Developmental Center!

(as dictated by Cameron Crone, age 9)

Please do not recommend closure for the Mabley Center. Closing Mabley would have a detrimental effect on the individuals and their families. Mabley is a special place that serves a specialized populations of individuals with sensory impairments and individuals with significant behavioral issues. Most of these people will not move into the community. If the resources were in the community to serve these folks, they would already be placed. History shows us that when the state closes centers most people living there are moved to other, larger centers. This benefits no one and would be a tragedy to the individuals at Mabley and the people who love them.

Doris Miller

To the Members:

I am the parent of a young adult with autism who is still in high school. My daughter lives at home with us, so I know how challenging it is to parent an individual with disabilities. As a parent and an attorney, I would like to raise several questions about the transition plan at the early stage of planning. These questions and others must be considered before the proposed transition is implemented.

We hear that decentralizing the placement of these individuals will mean that they will be closer to family in the community. In truth, how easy will it be to place them in homes in communities near parents? Will local zoning rules be eased so that a transition will allow these individuals to live in different communities or will they be relegated to the least desirable communities that may lack any opposition to group homes? What is Illinois planning to do to help make a transition to local communities possible?

We all watched in horror the recent story of disabled adults locked in a furnace room in Philadelphia. Who will be monitoring the individuals that are moved out of centralized facilities? We are hearing how much money will be saved when individuals are moved out of large institutions. Do the expected savings include calculations as to monitoring costs for many more small facilities? Will Illinois be trying to educate members of the community that they will have to help in monitoring these facilities for safety and to prevent abuse? These are our most vulnerable citizens and most CANNOT advocate for themselves. Even their families may not be around to do real monitoring. What is the plan to protect these most vulnerable adults when this transition happens?

Finally, some very medically complex or fragile individuals may not be able to transition to the community. Or, the cost of providing these services in many small facilities could be very expensive. What plan exists for appropriate placements for individuals that are not going to be transitioned into the community?

I would like to hear answers to these questions from the government officials making these proposals for individuals with disabilities. Any transition to a decentralized system must ensure the safety of these most vulnerable citizens.

Pauline Shoback

October 22, 2011
Senator Jeffrey Schoenberg
Co-Chair
Committee on Governmental Forecasting and Accountability

Representative Patricia Bellock
Co-Chair
Committee on Governmental Forecasting and Accountability

Dear Senator Schoenberg and Representative Bellock:

As members of the Commission on Government Forecasting and Accountability (COGFA), per the State Facilities Closure Act, you are charged with providing an Advisory Opinion concerning the closure of state developmental centers to the executive and legislative branches. As you are aware, Governor Quinn has proposed the closure of Mabley and Jacksonville Developmental Centers. There are times when a fiscal crisis can provide an opportunity to do the right thing and save the state money at the same time. This is one of them.

On behalf of the Springfield Area Disability Activists, I urge you to support the closure of Mabley and Jacksonville. The facts to support closure are overwhelming. Fourteen states have already closed all of their state institutions. Illinois institutionalizes more people with intellectual and other developmental disabilities than 48 other states with our eight (8) state developmental centers. All of the national studies conducted regarding Illinois' developmental disability system clearly state the need to move away from institutional spending and invest in community services. The current system is unsustainable both financially and morally.

Numerous national studies indicate differing views among the vast majority of parents. The great number changed their attitudes about community living after their family member had moved to the community. After experiencing community living, parents viewed the institution less positively than they did when their family member lived there. Moreover, parents observed improved quality of life and relationships for their family member after the move out of the institution. Overall, individuals served in the community are safer, healthier, and have a higher quality of life than individuals living in institutions have.

It is true that with some previous closures of institutions, a small number of individuals have returned to a state institution. However, this was not a failure of the individual but a failure of the system to develop sufficient supports for the individual. We believe that Illinois' low rank (47th in the nation) in community spending on community services can explain these infrequent occurrences.

We now have the opportunity to rectify this situation by re-allocating funds during the veto session to ensure the smooth transition of individuals to the community. The General Assembly may need to fund an additional supplemental allocation next year since the savings from the closure of an institution lag

one to two years behind the closure. We, thus, urge you, the legislative members of COGFA, to support sufficient funding to rebalance Illinois' system of service provision towards community services.

There is a reason that 14 states have closed all of their state institutions, and this is not based on programmatic or quality of life considerations alone. It also happens to be true that community services, in general, are also more cost effective than institutional services. The average cost of an Illinois state institution is \$181,700 per person per year while the average Community Integrated Living Arrangement (CILA) cost is \$52,454. In this time of fiscal austerity, how can we justify the continuing existence of these two developmental centers? Let us take the savings from the closure of Mabley and Jacksonville to expand community supports and services in the community.

In the short term, closing these institutions will cost the state more money. However, the long-term savings will far outweigh the initial outlay of funds and, eventually, save the state tens of millions of dollars every year. Yet, it is imperative that the legislature apportion the appropriate frontloaded monies to ensure a safe and smooth transition of residents from state institutions into the community. It is easily convenient to assign blame to state agencies that have not prepared and promoted adequately for the transition of people with disabilities in institutions to life in the community. However, the state government, at its highest levels, is responsible for the well-being of all people in Illinois, and that sense of responsibility for inadequate preparation must be shared throughout all layers of Illinois government, the disability advocacy community, union members, and even the families of those living in the institutions. Nonetheless, that is not a conversation in which we, collectively, have time to engage. Too much is at stake, and far too much time has already been wasted.

To avoid discussion of whether or not appropriate community services are already in place, it is important to note that Illinois is 12 years behind the Olmstead decision of the US Supreme Court that mandates people with disabilities living in state operated facilities and nursing homes have the right to live in the "least restrictive environment" of their choosing. We could end much of the debate between advocates, union members, and families if the state had put the infrastructure in place to ensure quality community services were now available for people with disabilities transitioning into the community. Moreover, COGFA and the General Assembly could allay the fears of family members, if they saw the proof, which does exist, that residents currently in institutions receive the same high quality care in the community. Workers in the institutions can transition as well to jobs in the community providing that same type of care, and knowing that fact alleviates anxiety over unemployment or retraining. If done correctly and smartly, the proposed closures will provide victories for all the most interested and important parties.

The disability advocacy community urges you, based on both fiscal and programmatic reasons, to support the Department of Human Services' recommendation to close Mabley and Jacksonville Developmental Centers. Further, we ask that you provide sufficient funding to ensure the smooth transition to the community for individuals in need of long-term supports. Thank you for your time and attention.

Tyler D McHaley
Co-Leader, Springfield Area Disability Activists
334 Norwalk Rd.
Springfield, IL 62704

Our cousin Justin has been at Mabley for quite some time now. He has done so wonderful there!! The Staff are excellent. With out this special home to Justin & so many their quality of life would not be as it is.

PLEASE Do Not Close this wonderful facility!! It is not fair to the special folks that live there to uproot them & their way of life.

Sincerely,
Sandi & Joshua Newlin

JMDC is a safety net for the community, serving the important role of crisis stabilization for individuals in Northern Illinois who are unable to safely reside in their family home or community setting. Residents at JMDC are under the watchful care of experienced staff, with specialized personnel working as direct care staff, doctors, nurses, psychologists, dieticians, educators, speech and hearing specialists, and behavioral analysts.

Who will care for these people with the same love and commitment? My aunt had called JMDC home her entire life. How will she be safe living in a home with other people who could potentially harm her? How can you rip these innocent people out of their homes?

Nina Nolan

October 23, 2011

Jennifer R. Stevens
2731 Spaulding Ave
Janesville, WI 53546

Jennifer.r.stevens@gmail.com

Position on the Closure: Opponent

The type of testimony you would like to give: Written statement

Commission on Government Forecasting and Accountability
ATTN: Facility Closure
703 Stratton Building
Springfield, IL 62706

Dear Members of the Commission:

After hearing the news about the proposed closure of the Jack Mabley Developmental Center (JMDC) in Dixon, Illinois, I feel I must voice my concerns as you have to deliberate on this grievous plan, proposed under false pretenses of budget balancing. I do not support this plan for closure, as a psychologist or as a person.

The parents and guardians of the residents of Jack Mabley Developmental Center have made it quite clear that they desire to keep this SODC as their choice of residence for their wards. Many of them have attempted placement in the community or have had family moved to JMDC because community placements have failed them by not being able to keep their loved one safe.

I know that many people at the public hearing in Dixon felt that all SODCs should be closed in the state and as an advocate, I respect their feelings, however; not everyone is successful in the community and not everyone needs to live at an SODC. As a staff psychologist, I spend many hours every week in interdisciplinary meetings, making plans to help our residents become more independent in the future. We make plans that help to prevent maladaptive behavior and plans to teach skills that will make our residents successful citizens when they do move from JMDC, with a carefully and skillfully written plan that includes transition visits, training, and follow up visits. Governor's Quinn does not provide for this kind of successful transition.

I know personally that community placement is not always the most successful place for all people who have diagnoses of developmental, physical, and sensory impairments. In the late 90s, I was a site supervisor for the Association for Retarded Citizens in Pittsburgh, PA. I was a new graduate with a Master's of Psychology from Duquesne University and wanted to make a difference in the world. I managed a two bedroom home with one resident and 5 staff members. The experience was horrible for the person we were hired to care for at that home.

This client's behavior was so severe that a second resident was never able to be moved into the home as the furniture and decorations were totally destroyed monthly.

- We had no staff that had any more training than CPR and First Aid.
- No one had training in behavior management or vocational skills training to help this individual become more independent and successful.
- Pictures schedules and sign language were not utilized to help communicate with this non-verbal client.
- No PT or OT services were available despite the resident's diagnosis of cerebral palsy. Community medical services did not have expertise in working with clients with such specialized needs.
- No spiritual services were offered, in-home or in the community.
- Community interaction had to be kept to a minimum as several staff members had been injured when outings were attempted.

I left this position because the future for this person in our care felt so hopeless to many of us on staff, who know that there were places that could better care for all of these needs. A facility such as JMDC would have been an important resource for this person as behavioral programming, vocational training, and medical/psychiatric care from professionals with experience working with developmental disabilities could have helped to stabilize this resident and make the resident's stay with ARC successful.

There are many community agencies in the larger Northern Illinois Region that give safe residence to people with diagnoses of developmental disabilities. But why would the state want to deprive this region of a state of the art facility that can help residential settings with technical assistance, medical and psychiatric stabilization admissions, and respite for families. Not only should Jack Mabley Developmental Center not be closed, it should be used as a model program for all SODCs to provide what is needed for this population – specialized care for stabilization and increased independence.

After listening to all of the testimony that was offered at the public hearing in Dixon, I am appalled by the Governor's unethical, dishonest, and misinformed "plan".

- He suggests that only 12 residents of JMDC will be transferred to another SODC. We know from history, however, that will not be the case. We know from past center closures, such as Howe Center, 50-75% of residents were moved to other centers, all of which are larger and older than Jack Mabley Developmental Center.
- He states that the majority of residents will be placed into the community. But, if there is not enough money to keep JMDC open, there is not enough money to create the placements in the community for our individuals.
- Does the Governor suggest that he can find money to place nearly 90 residents with no money, into the community when there are already 21,000 adults and children

waiting for community placement? Then perhaps he should have come up with these funds to avoid this crisis.

- The Governor suggests that this closure and upheaval can take place in 90 days once a decision has been made. Howe Center had two years to plan transitions. JMDC received many new residents from this closure. Many of these residents had inadequate diagnoses and insufficient behavioral intervention plans. Inadequate documentation was transferred with these residents.

Suggesting that these transitions can take place in this short amount of time is suggesting a dangerous path to consider. I know that trying to balance the budget in the state of Illinois is not an easy task given our current economic climate. I am confident that the legislature can find the money needed to keep Jack Mabley Developmental Center open to ensure the safety and stability for our residents.

Respectfully,

Jennifer Ruth Stevens, MA, CT

Please do not recommend closure for the Mabley Center. Closing Mabley would have a detrimental effect on the individuals and their families. Mabley is a special place that serves a specialized population of individuals with sensory impairments and individuals with significant behavioral issues. Most of these people will not move into the community. If the resources were in the community to serve these folks, they would already be placed. History shows us that when the state closes centers most people living there are moved to other, larger centers. This benefits no one and would be a tragedy to the individuals at Mabley and the people who love them.

Doris Miller

To Whom this Concerns,

My uncle lives in the Mabley Center community & has since I can remember. Our family has been so grateful for the care that the Mabley Center is able to give to my uncle on a daily basis.

Please find a way to keep the Mabley Center running so that the future that lies ahead for my uncle & the others of the community can be as peaceful, safe & caring as possible.

Thanks you!

Joe Long

Do not close the Mabley Center. It's not an institution. It's home.

Brian Wrzalinski

This is a necessary facility for those that need it and should remain open.

Norma J. Spinney

Please don't close the Mabley Center because people with disabilities need it. It's their home and it's where people love them.

(as dictated by Calista Crone, age 11)

Please consider the rights and needs of the residents of Mabley Center. There must be a better way to reduce costs....one that does not impact the weakest members of society.

Dawn Thompson

To Whom It May Concern,

My sister,Cynthia Wells has been a resident at Mabley for 37 years.The care that Cindy has is professional and caring. The staff is wonderful and our family has never had a complaint in 37 years!!!!!! Without question this is her home and extended family.

It is a Great concern that she be removed from the only home she has ever known,as she functions at a 1yr9mos level and is Blind and Deaf. Ask yourself if you would remove a family member at 1yr9mos and have them start a new life!!!! It is very disturbing and hard to believe that people are willing to do this to fix the budget problems!!!!!!

Also I might add that the savings that are projected may not ever be realized when the cost of the full care of these individuals is realized. If these community centers cannot provide correct services they have the right to reject an individual and where does that leave the individual and their families?? These community centers also have the right to sell their business to a For Profit Owner and could end up costing the State much more than you have projected.When there are millions of State dollars to be had not all are going to be interested in Saving the State money!!

Do Not Remove Mabley Residents from Their HOME and away from their extended FAMILY!!!!!! MABLEY is a TRUE COMMUNITY!!!!!!

Laura L. Tito

There are already 21,000 people on waiting lists for community placement in Illinois. If the community has been unable to meet the needs of the people on the waiting list how can it be expected to also serve the nearly 300 people with highly specialized needs currently living at Mabley and Jacksonville?

How can our Governor sleep at night knowing that he is going to take away the weakest of our individuals without no regard for humanity.

History shows us that when the state closes developmental centers the majority of people simply move to other state centers. When Howe Developmental Center closed, 73% of their residents moved to other SODCs.

Please do not take away these clients home, please keep Mabley open.

Vickie Collins

Gentlemen,

An appeal is made to please keep the Mabley Development Center open. The JMDC is a safety net for the community, serving the important role of crisis stabilization for individuals in Northern Illinois who are unable to safely reside in their family home or community setting. Residents at JMDC are under the watchful care of experienced staff, with specialized personnel working as direct care staff, doctors, nurses, psychologists, dieticians, educators, speech and hearing specialists, and behavioral analysts.

It is essential for the well being of the individuals served and those on waiting lists to be able to utilize this facility to maintain their well being. No better and less costly facility to the State is available to safely assist these individuals.

Please keep the Mabley Center open.

Thanks

Russ Johnson

It has been a family's member second home for over 37 years! Staff has been great.

Raquel Wells

It seems this country is becoming more concerned with helping other countries citizens than our own. Shame on you for threatening to desert these people. I am appalled daily at what the State of Illinois will shell out for illegal immigrants but cut services to seniors and the handicapped. I think whoever is making decisions now needs to be removed from office and our priorities reassessed. We are losing this country one vulnerable citizen at a time and we need to make a change. Protect these people and their families.

Please,

Barbara Bates

I have lived next door to disabled children since 1976. It is amazing what the interaction at these facilities does for their growth and learning. I know that I am tired of high taxes too, but there are hundreds of other programs can be eliminated first. How about all the dollars spent on free programs for the illegals????? Stop the insane use of our tax dollars on people who should be deported because the are here illegally.

Nancy Harper

Unnecessary consideration for a budget cut. Facilities such as this should not be on the chopping block for government consideration. There has to be a better place to make cuts. The families that currently reside their loved ones in these facilities cannot afford the cost of private institutions.

Stacy Glendenning

We can't keep closing good support places and continue to be a viable society.

William A. Hansen

Mabley Center is a home--not an institution--to the people who live there. Do not allow them to be moved to bigger centers far away from their families and staff who know them and love them. These are people--and they should have a say in their own lives. Vote to keep Mabley open!

Wendell Miller

Please keep this facility open! This is "home" to the residents who reside there and disrupting their lives and the lives of their families is unethical. Many of the residents know no other home than this facility. Please reconsider your decision.

Thank You.

Alexis Saskowski

The Mabley Development Center is providing a quality living experience for people with specialized needs. There are already thousands of people in Illinois that do not have centers like this to live in; do not add to this number by closing Mabley.

Thank you for your consideration.
Francine K Johnson

I oppose the closing of the Mabley Center. This is a facility that has residents with very specific needs. It is not just a matter of moving the residents to another location to consolidate care and costs. Please do not be "penny wise and dollar foolish"

No one doubts that the State of Illinois is in dire straits financially, but lets think outside the box to preserve services for some of our most vulnerable citizens

Lori M. Cataldo

Mabley Developmental Center should remain open because the individual residents need the specialized care provided to them. It is wrong for the Illinois government to place these people and the community at risk! There are alternatives that Illinois can take but are not looking at because it affects the government representatives financially. The Illinois government is a business and I realize as a business they must make ends meet; If you are the owner of a business and the business is struggling to make ends meet, why would you not consider the aspect of reducing your own income first? This happens daily in small and large business throughout the state of IL, however the Governor and representatives do not do this, rather they give themselves a raise! This is against, not only their ownership of the business, but in the case of the government it is against all the people of IL! The closure of Mabley must be stopped to insure that the government is not allowed to be unaccountable to the people of IL. The accountability rests with providing services to people of need, rather than special interest spending and lining their own pockets! Please keep IL government accountable to the PEOPLE, not to themselves!

Greg Gross

From what I understand Mabley is a fine center and it would be terribly disruptive to move the clients who have lived there for many years.

Steve Cummings

The residents of Mabley, need this facility to survive.

Jennifer Enright

Please keep Mabley open and allow the residents to continue to live in the surrounding that they are familiar with.

Thank you.
Kaari Roberts

Please save Mabley:

- The disabilities of these residents is far to severe for them to reside in community residents. Where will they go?
- There is no other facility in the state that is able to provide these vulnerable citizens with the services they need and require.
- Mabley is very much designed as a residential & community facility with eight independent group homes.
- This residential facility provides skill care for some 100 individuals with severe disabilities. As a such, the staff is highly trained in sign language, Braille, and behavior therapy. This type of skilled care is a basic requirement for these residents and cannot be found in community settings.
- The Jack Mabley Center is a State of the Art facility and should be used as an example to all others.

Kara Cummings

It says a lot about a state that is willing to look the other way when it comes to the welfare of its citizens who are least able to care for themselves. Please save the Mabley Center - the residents there depend on us to keep them safe and secure! We must not let them down.

Martha Poch

ISN'T THERE ENOUGH PEOPLE LIVING PAYCHECK TO PAYCHECK OR SOME WITHOUT JOBS. WE HAVE ENOUGH PEOPLE ON THE STREET WHY IS ANYONE TRYING TO BOTHER THE PEOPLE WHO NEED THIS HELP AND FACILITY. I THINK QUINN AND ALL THE STATE REP. NEED TO REMEMBER ONE DAY THEY MAY NEED SOMETHING LIKE THIS CENTER AND HOW WOULD THEY LIKE BEING PUSHED TO THE STREET. GIVE US A BREAK REACH IN YOUR POCKETS AND HELP INSTEAD OF CLOSING THINGS DOWN ALL THE TIME.

Donna Jahiri

I am a good friend and former pastor of the sister of one of the patients at Jack Mabley Developmental Center in Dixon. Tom was born blind and deaf and is severely developmentally challenged. He is still alive today because of the good care that he has been getting at Dixon. I don't know what his family will do if Dixon closes as they are very happy with the care that Tom is getting there. Please find a way to keep this Developmental Center open so that the clients do not have to readjust to another setting and so that they will continue to receive good care.

Thomas E. Unz

October 20, 2011

Office of the Governor
207 State House
Springfield, IL 62706

Re: Closing of Mabley Developmental Center

Attn.: Governor Quinn

My grandson, Derrick is deaf, blind in one eye, and mentally challenge young man. He will be 22 this coming December and presently lives at the Mabley Developmental Center in Dixon Illinois. Mabely is one of the facilities you announced that you would close on "behalf of the people of Illinois".

This would be a tragic development for my grandson and many of the residents who have lived there for many years. The only people to consider are the people who call this "home". What possible benefits do the people of Illinois receive from closing this home? NONE! Because where ever you try to relocate them the cost of their special needs will still be present. Whatever money you think you can save, you will have to spend to meet their needs in another place. Closing should benefit only the residents and IT DOES NOT.

It took over 4 years for Derrick's family to finally place him at Mabley. So as off April 2011 he has been a resident of Mabley and doing extremely well. He works and is well liked by the staff and other residents. He participates in bowling, horseback riding, golf, swimming, and many other activities. Derrick has not wanted to live at home for over 4 years and not understanding all the red tape delays would lash out violently punching holes in walls (over 25), breaking windows, big and small, TV's, doors and beating on his dad and step-mother. His father had to stay at home with Derrick and could not seek employment for a long time. Many times the police and paramedics had to be called and Derrick would be hospitalized for a time and then sent home. HE CANNOT LIVE AT HOME nor does he want too.

Where do you plan on placing the residents of these facilities? Like animals in cages? The days of "snake pit" facilities are gone and by law must treat them with the care that meets their individual needs. This cannot be done when residents are placed in nursing home or crowded facilities that do not have the abilities to meet their individual needs. Many of these residents were turn down for placement in group homes. I can't tell you how many group homes said they would take Derrick only to reject him after months of red tape delays.

I am just one of the people of Illinois born and raised here and believe me when I say you are not doing this for the people of Illinois. If you had a family member living at one of these facilities you would not have dared speak of closing the facilities. You would have selected other programs. Make drug testing and proof of citizenship mandatory for Welfare Benefits and you will be able to save millions perhaps even billions. Put more effort in TAKING CARE of the CITIZENS who live at the Mabley Center. Your administration seems to have more compassion for Illegals then those at Mabley.

Come on Governor Quinn; get real and starting living like the rest of the citizens of Illinois. The politicians made a mess of things and they should step up and be the first to make sacrifices not play games with the mentally and physically challenged.

We have had too many governors and politicians who think the elected office is an entitlement to do what ever they like and dam the citizens. No more Governor Quinn, you and the citizens of Illinois including those at Mabley are equal and the sooner you realize that and really get to working for all the people of Illinois including the residents of the facilities you want to close, then maybe we can talk about your qualifications to be governor of Illinois again. Because this is what it all about isn't it, RE-ELECTION.

Sincerely,

Rose M. Johnson
592 Bluff Street
Carol Stream, IL 60188

Members of the Commission:

Please vote for a special appropriations of funds to keep the Mabley Developmental Center open for the following reasons:

- The disabilities of these residents is far to severe for them to reside in community residents. Where will they go?
- There is no other facility in the state that is able to provide these vulnerable citizens with the services they need and require.
- Mabley is very much designed as a residential & community facility with eight independent group homes.
- This residential facility provides skill care for some 100 individuals with severe disabilities. As a such, the staff is highly trained in sign language, Braille, and behavior therapy. This type of skilled care is a basic requirement for these residents and cannot be found in community settings.
- The Jack Mabley Center is a State of the Art facility and should be used as an example to all others.

Sincerely,
Kristen Paulson Watson

The purpose of closing the facility is to save the state money, however, by cutting jobs and closing facilities the state is not placing itself in a position to save money, but rather to place the overall health of our already fragile economy in greater jeopardy not to mention the displacement of the patients who desperately require stability for their treatment. Furthermore, the cost burden on the state remains the same after closing the facility as it does to continue to maintain the facility once you consider Federal funding and Medicare payments made to the state for this facilities operation. No evidence has been presented to support a financial gain by the state and once all factors are considered the burden on the state could actually be greater than the operating costs. This would devastate another Illinois community with an impact on the community that stretches far beyond the closure of the facility.

Toni Heniff

I cannot believe that you would even consider moving these wonderful people! They are happy where they are and safe. They are in a community that they understand where they are safe, you would rather put them in the community that doesn't understand them and won't keep them safe.

Shame on you for even considering closing Mabley!!!!

Pam Spurgeon

Please do not close.

Gail Macko

Please do not close the center. It is currently home to many people who want and need to stay in a familiar and comfortable setting.

Toni VanErt

i honestly think this should stay open dixon is broke anyway for one thats taking away more jobs isnt our state broke enough? thats not gonna make a difference the state is gonna have to pay so much in unemployment that there gonna regret it!!! the poor residents of the mabley center.. there home they dont need to be moved around!!!! they need to think of the residents i work in a nursing home and residents come first!!!!

patsy blaha

Please do not close Mabley. Our state needs more development centers.

- C. Milligan

Please keep Mabley Center open! This place provides a valuable life-giving service for people who really need help and support.

Thank you
Vicki Tollakson

Please do not close Mabley Center. I work there and I know alot of our individuals will not make it at a new home. If they were ready to move, they would already be moved. That is why we are here, helping them so that someday they can live in a community home. Our facility is beautiful, our staff are dedicated. We love our individuals as they do us.

Laura Atkinson

they need to keep Jack Mabley Center open and the recipients that live there in their homes that they have known for so long and have come to adapt to the surroundings and have grown in many ways with the nurturing of all the devoted staff, family and friends and not to throw them around when they have so much to lose by taking them out of their surroundings and make them start all over again and to not know where they might end up and the burden of their families seeing them taken away

Craig Kurzrock

Members of the Commission:

Do you have a family member with a Severe Disability? Do you know anyone with a loved one that has a Developmental Disability? Do you even know what a Severe or Profound Developmental Disability is? Do you have a family? What would you do if your child, brother or sister was living at JMDC? Do you have a conscience, or a heart?

I ask these questions because they need to be asked. Please take time out to listen to all interested parties on NOT closing the facility down. Jack Mabley is not a warehouse, it is a small community in a community.

These individuals are in a loving and nurturing environment. They are taught the principles and values what families are. This is the only family that some residents know. Do you want to take away their only home and to sentence them to death?

These are American citizens; their rights are in question. Do you really want to strip them of their rights? Some of our residents vote. They have a choice on whom they want in public office to fight for them.

I feel it's a sad situation that our Governor is attacking the weakest of Illinois population: the citizens of Illinois with Developmental Disabilities.

What is this world coming to when we care more about money and who's who in politics than our own American citizens. May God help each and everyone through this terrible time. Please vote to keep the homes of our residents open and keep them free from the basics of harm: the unkind human.

Thank you,

Linda Collins-Rolen

Have no family there but sounds like it is a much needed facility for our State.

Mrs Warren Goode

I realize our state has a huge debt - and we must cut, but closing the Jack Mabley Center is not the answer. Please keep the center open. Illinois has made enough mistakes, don't let this be another.

Bobbi Chiodo

Please keep Mabley open! None of these people asked for their issues and I feel it is our duty & responsibility to keep open a facility where they feel comfortable, cared for & loved. Keeping Mabley open is the right thing to do!

Thank you.

Mindi Timm

I have friends and famliy that have and still working there. Not only will they be out of jobs but where will all the patients go??? Please don't shut it down.

Derrick lee Flynn

Don't close this facility

Dennis Floto

Please keep the Mabley Developmental Center open. Some people with disabilities need the structure and services that a center such as Mabley offers.

Thank you for considering my position.

Jane Purcell

Facilities such as Mabley should not be closed. Already so many services for the disabled have been cut from the budget in recent years. This can not continue. It seems easiest to take from those who are the least able to speak for themselves. Facilities such as Mabley are rare and so needed. It is a safe, loving environment in a community that has not only accepted but embraced Mabley's residents. There is already a shortage for facilities such as Mabley. To close Mabley would increase the problem of finding help and homes for the disabled. There are other ways to cut spending that wouldn't hurt those who most need our help.

Nadia Lannie

I am writing as a close friend of someone who has placed their child in the very best facility available. This child has grown into an adult and has thrived at Mabley. He comes home to visit his family twice a month but is always ready to go back to Mabley. That alone speaks volumes for his care. It is a home to the residents and very much a close knit family structure.

How can the State of Illinois even think of closing such a facility when these people who need specialized and loving care have no place else to go? Mabley fills the need that their parents can't provide. We seem to find funds to rebuild crumbling neighborhoods, license more casinos, come up with projects that paint a pretty picture, and even provide substantial pay raises to some in a deteriorating economy. But we can't provide a safe environment for those who can't care for themselves??

Think about your normal child and ask them how they would react to being uprooted from their home and school and placed somewhere unfamiliar to them. They would certainly protest. The State of Illinois wants to do this to people who have no voice. Doesn't the State of Illinois already have a tarnished image? Closing facilities for those in need will add just one more black mark this state doesn't need.

Stand up and do what's right for these citizens. Keep Mabley Developmental Center open.

Nola Warren

I have been employed by the State of Illinois for 32 years. I started out working at the Dixon State School, which you certainly could call an institution. I now work at Jack Mabley Center, and have done so since 1987.

The Mabley Center is integrated into the Dixon community with 7 " CILA like " homes. On a campus where the individuals who live there, have access to visit their friends who reside on different homes. Are able to ride their bikes free from harm in a secure setting. This no matter what the detractors say is their home, for many this is all they know.

Equip for Equality will say EVERYONE should live in a community setting, at Mabley they do. Equip for Equality say they are advocates for people with developmental disabilities, in this case they are advocating for people they have never meet. This is not one size fits all, we have individuals with severe behavioral issues that have tried to live elsewhere (cila homes), BUT HAVE FAILED.

where will these people go ? SODC's farther away from their parents and loved ones, makes no sense. Please speak for the individuals at Mabley who have no voice, and save the place they call home JACK MABLEY DEVELOPMENTAL CENTER.

Thank you

Chris Kurzrock

Facilities such as Mabley are unfortunately few and far between. They serve a very under served segment of the population and every effort should be made to allow this facility to remain open. The campus like atmosphere and individualized care each resident receives at Mabley allows them to live a productive life with the dignity each and every member of our society deserves.

Please carefully consider your decision, taking into account not only the residents and staff, but their extended families that will be impacted by such a closure.

There must be other areas to trim costs that would not have such a devastating impact on the severely developmentally disabled.

Thank you for your consideration,
Regina Wisniewski, COTA

The closure of a facility such as the Mabley Development Center would be an awful mistake. Please find it in your budget and heart to keep this center operating!!!

Tracy Fies

Please vote to keep Mabley open. No money will be saved by disrupting the lives of the people who live at Mabley. The remaining developmental centers will need to hire staff to serve the people who live there. When Howe Developmental Center closed, the budgets of the remaining centers had to be increased by millions of dollars to pay staff to serve the residents who moved there. The people who live at Mabley will be moved to larger centers with staff who do not know them. They will be moved away from their families and the staff who have worked with them and know them well. Closing Mabley would be wrong on every level.

Forrest Miller

I've worked at the Jack Mabley Center for 6 years, and I must say- it's not a job for everyone. The individuals that live at Mabley have such severe behaviors or needs that extreme measures have to be taken for their protection. It's definitely a different environment if you've ever worked in smaller private facilities (which I have). The difference is so drastic in fact, Mabley had to start a mentor program for trainees because they would often quit soon after the classroom period. I think when most people think of mentally handicapped, they think of people who have mild to moderate needs or challenges. The truth is there is a very wide spectrum that covers mentally handicapped. There are people that have beat themselves blind, set buildings on fire, stabbed another person, or suddenly become violent for no apparent reason. How can these people live in the community? I know I've just implied they don't live in the community, but advocacy groups are constantly trying to differentiate Mabley from the "community." Mabley is always referred to as a facility vs a group home, but I don't understand the difference. A facility is something designed for a specific structure. Isn't that what a group home is? The major difference I see is the things that will be taken AWAY from the individuals if Mabley closes. Each home at Mabley houses the same number of people that many group homes offer, except there are 2 LESS bathrooms available to them. Also, some of the individuals have freedom to walk or ride a bike from home to home without the attendance of staff. Even the blind people are given the freedom to move about the campus independently, by trailing a sidewalk chain. I've never seen that sort of independence coming from a group home. I don't understand the groups that claim to advocate for these individuals, but they want to take some of their choices away. You can't "cure" these people, some have very severe issues that group homes are not equipped to handle. I know the other issue is the state budget, but you cannot put a price on their heads. They will still be mentally challenged, they will still have severe behaviors, and they will STILL need the same level of care, no matter where they live.

Nicole Perez

Do not vote to close Mabley. If Mabley closes, not only will the individuals who live there be moved away from their families and staff who know and love them, but the 21,000 people on the list for community services are even less likely to get services soon. The people at Mabley are safe, but what about the 21,000 waiting for services--15,000 of whom are in critical crisis???? Please let the people

who live at Mabley stay in their homes. Closing Mabley will not save money or improve lives. Please do the right thing and let Mabley continue to serve the vulnerable citizens who live there.

Jason Jackson

Please keep this facility open. Do not punish these people for poor leadership.

Jeff Riley

Members of the Commission,

Please do not close Mabley Developmental Center. No money will be saved by disrupting the lives of people who live at Mabley. The remaining developmental centers will need to hire staff to serve the people who live there. When Howe Developmental Center closed, the budgets of the remaining centers had to be increased by millions of dollars to pay staff who serve the residents who moved there. There are already 21,000 people on waiting lists for placement in Illinois. If the community has been unable to meet the needs of the people on the waiting list how can it be expected to also serve the nearly 300 people with highly specialized needs currently living at Mabley?

Thank you for your time and consideration in this matter.

Mrs. Cheri May

I wonder how much money our State of Illinois would have saved to not even have JMDC or the other facilities on the chopping block if the cuts would have started in the Governor's Office?

The residents of JMDC are American Citizens and they have the right to live in an environment that is safe from harm. They have the right to say where they chose to live. So why is our Governor trying to destroy what they have only known as home for most of their lives. He is trying to strip them of all dignity and this needs to stop.

Please rethink about keeping JMDC open for the residents. They are well cared for and loved by all that work with them.

Richard Schidmt

Date: 10/22/11

Elaine Lee, M.A., BCBA

Facility Being Closed: Mabley Developmental Center

My relationship to the Facility: Employee

Address: 107 7th Avenue, Sterling, IL 61081

Position: Opponent

Commission on Government Forecasting and Accountability

ATTN: Facility Closure

703 Stratton Building

Springfield, IL 62706

Dear Members of the Commission:

I work at the Mabley Center as a Board Certified Behavior Analyst (BCBA), overseeing behavioral programming designed to prevent and manage severe behavior problems. Of the people living at Mabley, 95% require behavioral programming. Many of them have been engaging in maladaptive behaviors for 30 or 40 years, unable to communicate their needs in a socially appropriate way. Some harm others. Some hurt themselves. Some break things. If common sense were enough to help these people, they would still be living with their families or in their prior community placements.

When harmful behaviors become a way of life for people, professional intervention is required. The services of a behavioral professional are one of many that are NOT included in the often-quoted artificially low annual cost of housing someone in the community. At Mabley, individuals are assessed and behavior programs are written and implemented on-site. Their guardians can rest assured they're not going to get another call stating that their son or daughter is drugged and sitting in an emergency room.

Of course, history tells us the likelihood of our folks going to community placement is very small. When other SODCs have closed, about $\frac{3}{4}$ of their residents were shuttled off to other SODCs. There's no reason to believe that this situation will be any different. At Mabley's public hearing Kevin Casey admitted that currently there are no openings for our folks in the community. Add to that the Governor's plan to close Mabley in 4 short months, and it's clear we are not talking about progress for the Developmentally Disabled in Illinois. We're just consolidating people into bigger centers.

Please vote to leave the Mabley Developmental Center open.

Respectfully,

Elaine Lee, BCBA

Dear Members of CoGFA,

I have worked with people with developmental disabilities for nearly twenty years.

I have worked in virtually every level of service available within the field - as a direct care staff, a case manager (QMRP) and community residential home manager, as a middle-level administrator over multiple community homes, a behavior specialist within a community agency, and as a psychologist working for state developmental center programs.

Currently I am a clinical psychologist and Board Certified Behavior Analyst (BCBA-D). In that capacity I operate a company that provides multiple services for people with developmental disabilities. We offer behavioral consultation services to multiple community agencies to assist with people with developmental disabilities who also have severe challenging behaviors and/or mental illness. We complete psychological, psychiatric, and psycho-social Pre-Assessment Screening (PAS) evaluations needed to qualify for state disability services. We provide diagnostic and consultative services to The Autism Program (TAP) in Rockford, IL, assisting children with autism and their families. I personally also work as Clinical Psychologist and Board Certified Behavior Analyst at Jack Mabley Developmental Center in Dixon, Illinois, and in that role I have been part of teams that have placed scores of people in community settings.

My work in these multiple roles over the course of the last two decades has allowed me to become intimately familiar with the condition of community and state developmental disability services in Illinois. As a clinical professional such an understanding is necessary in order to make appropriate recommendations for clinical treatment and placement.

For a child or adult with developmental disabilities who does not have significant behavioral or mental health, or other specialized needs there are a variety of appropriate community options available to them if they ever reach the front of the line of 21,000 person waiting list for services.

But for the developmentally disabled person with significant behavioral or mental health needs the community options are appallingly few.

In good economic times the funding structure and resource allocation models made it difficult for most community agencies to offer services to people with intensive needs. Now, with payment delays stretching half a year and sometimes longer community providers struggle to meet basic needs for the people they serve. As a behavioral services provider I am, again, intimately familiar with this problem - my company was nearly bankrupted by the delays in state payments. In the past we could serve people with intensive behavioral needs when they presented for services. Now, for each person who calls an agency must ask: Can we afford to serve this person?

This is further compounded by the fact that Illinois has no real community safety net for people with developmental disabilities. Treating behavioral and mental health issues among people with

developmental disabilities is a highly specialized process, requiring specific training and experience. Evaluation and treatment takes time - sometimes weeks or months - when done appropriately. When a person presents with mental health and behavioral challenges he will not find these specialized services in Illinois. Rather, he will be forced into the round hole of community psychiatric and mental health services - a system which is designed for acute stabilization.

In my professional experience this approach often results in the person being loaded up on sedating medications and returned to their community home, only to repeat that cycle again once the person adjusts to the sedation. Eventually this approach burns all bridges within the agency serving them, and the person is discharged. Sometimes directly to a state operated center, sometimes to another agency to repeat the cycle again before finally ending up at a state center.

Programs like Mabley Center are the safety net in Illinois for people with intensive behavioral and mental health needs. With an appropriate array of professional services oriented specifically to this specialized population Mabley takes all who come, manages all behavioral difficulties in-house, and taking the time needed to appropriately treat people and return them to community homes. Mabley serves the people that the community programs are unable to serve.

As a clinical professional I have feet in both the community and state services areas. I have worked - in other states - with community agencies who provide very intensive behavioral treatment services. Despite rumblings to the contrary, there is no magic to the words "community" and "state". I firmly believe - in fact I know - it is possible to provide such services in the community. But it is vitally important that we not become so blinded by philosophical perspective that we fail to see the practical reality: Possible or not, these services don't exist in the community in Illinois.

Mabley Center is the only safety net program in Northwestern Illinois. It provides a vital service for which there is no community equivalent. The people living at the center will be placed in other older, larger state centers. There will be no financial savings as a result of the closure.

I urge you to stop the governor's plan for closure of Mabley Center. The proposed closure of this facility is a plan no responsible advocate for people with developmental disabilities can endorse.

Sincerely,

Erin J. Wade, PhD, BCBA-D
