

Feb. 22, 2012

Regarding Deinstitutionalize of the Residents of Southbury Training School

As the brother of a long term resident of STS I encourage the legislature to retain this excellent facility and program. David Atwood, now almost 58, has been at STS since 1960. He has Downs Syndrome and although his mental level is that of a one and a half year old David is thriving at STS. He feeds and dresses himself, with help, is toilet trained and has a regular day program. David has a diet of 4000 calories per day which he utilizes in running back and forth.

David has been blest with a consistency of wonderful, caring staff at STS, some for more than 20 years. David gets out into the community making weekly deliveries for Meals on Wheels. He also goes to malls, community fairs including the Big E, football games, parks and recreation areas. David has never had a cavity which is a testament to the daily dental hygiene care he receives and the specialized dental services at STS. (His five siblings and mother, on the other hand, had more than their share of cavities and teeth problems.)

We have considered residential placement for David and visited several homes and agencies. We have not found, and I doubt we ever will, any arrangement that comes close to the quality of life that David has had at Farm 1 and his current home in Cottage #18. We were attracted to one group home in Torrington, largely because of the dedicated director. They had an opening and we expressed interest. Within a month the director left. This just highlights the staff turnover issue that will constantly plague the private sector facilities. Further, we have to consider how our very active brother will function in a home (smaller space, less outdoor yard area) with two wheelchair residents and one who uses a wheelchair and walker.

That is a major contrast with the living arrangements David has at STS where he has his own room and is part of a 'cottage like' subgroup of 4 -6 men of similar mental level. David, and the other 'B-Boys' as they are affectionately referred to by the staff, have functioned as a unit for years with long term consistency of care givers. Moving David and the other STS residents, average age 63; to community group homes will not improve the quality of care. A campus setting such as STS is a more cost effective way to deliver the host of services required for profoundly and severely retarded persons according to the 2003 CCS full study and the 2009 CCS update.

Staff turnover rates in group homes is higher, on-site availability of skilled nursing staff is less, and outside space that is so important for David would be much less. The care, if it were of similar quality as that of STS would be more costly in a community based setting. Has a cost study been done comparing STS vs. community placement for the care of profoundly retarded, elderly persons, many with multiple health issues? As a Connecticut taxpayer it is my opinion that the State and David Atwood will best be served having options: for community placement as well as for the STS larger institution with its specialized high quality care.

I encourage the legislature to make cost effective use of STS by opening these excellent facilities and program to new residents.

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