



**Testimony to the Public Health Committee
February 27, 2013
By Leslie Simoes, Executive Director**

[Testimony: Proposed S.B. 129 AN ACT CONCERNING THE HARTFORD REGIONAL CENTER OPERATED BY THE DEPARTMENT OF DEVELOPMENTAL SERVICES.](#)

The Arc Connecticut is a 60-year old advocacy organization committed to protecting the basic civil basic rights of people with intellectual and developmental disabilities and to promoting opportunities for their full inclusion in the life of their communities. We have 18 chapters across Connecticut providing direct support and services. We rose from grass roots advocacy and have hundreds of families and individuals with disabilities in our Arc family.

The Arc Connecticut supports Commissioner Macy's direction and vision for the department and commends the administration with many new family centered, person driven initiatives. The mission of DDS is to partner with individuals with intellectual and developmental disabilities and their their families to create opportunities for individuals to fully participate as members of their communities. This is not only morally and fundamentally in alignment with national trends but a mission that can be achieved with adequate resources.

Carefully looking at how to do more with less is a daily struggle, not only for DDS but for the individuals themselves, the providers that support them and their families. Without the adequate resources, realizing the mission of the department to fully support individuals and families will not be possible. The continued underfunding and slow starvation of this support system is painful for all who rely on or who provide these services.

There are numerous things to consider here:

- The way Medicaid is funding supports and services is changing with less & less resources being allocated to Connecticut on a federal level.
- The DDS system of support was created on an expensive, outdated institutional model that cannot sustain itself. DDS is working diligently to improve and transform systems of support but without the resources needed this task is next to impossible.
- There is a very real crisis as children on the Autism Spectrum age out of school at an alarming rate. You must have an IQ of 69 or lower to be eligible for DDS services but many of these children will become adults with no adult service system and, therefore, with no support.
- No new money has been added in the DDS budget for families on the combined DDS residential waiting and planning list since June 2009. There are many families on these

combined lists now who been designated as needing supports within one year (Priority 1) but have been a Priority 1 for 8 plus years and there is no sign of assistance on the way. While DDS regular information reports say that 346 families were on the residential waiting list at the end of 2012 DDS has stopped tracking the number needing a residential support within the next 2 to 5 years i.e. on the Planning List. This number increases monthly.

- DDS is asking families and siblings to do more with less while cutting the very in-home supports they rely on such as Family Support Grants, & Respite Services.

The DDS yearly budget is a little over 1 billion dollars and supports approximately 20,000 people. DDS spends close to \$380,000 per year per resident for approximately 370 people living at Southbury Training School, over \$400,000 per person per year for 200 individuals living at the Regional Centers and hundreds of families in Connecticut are waiting for services.

Saying “NO” to any idea of funding residential supports and services for more people is not a luxury we can afford. DDS has resources. Together families, individuals with disabilities and DDS need to look at how we spend money and how we can reallocate existing resources in ways that can not only fully support the individuals we serve, the providers that support them but serve the families on the waiting list.

This should not be about “State versus Private”, “Families versus DDS”, “Union versus Non-Union” or “low wage workers against high wage workers”. Yet that is where the state has put us, in the middle fighting each other for scraps and year after year not getting what we need. Privatizing state beds without fully funding the cost of providing services in the private sector, including health insurance and wages, cannot be the answer. We all lose if we do that. What we need right now is for individuals, families, DDS, unions, Trade Organizations and providers to work together to create a new system of community supports that FULLY FUND THE SERVICES AND SUPPORTS THAT INDIVIDUALS AND THEIR FAMILIES DESPERATELY NEED.

Every legislator has a DDS funded agency in his or her district. Every legislator has families’ either receiving DDS services, waiting for DDS services or both in their district. This is a statewide, systemic issue that crosses all socioeconomic, gender, race and geographic boundaries. We all need to be involved if we are going to make this system work for EVERYONE. The costs are too high, needs are being ignored.

Please do not hesitate to contact me with questions, for clarification or to arrange a visit with a private provider of community based services for individuals with intellectual and developmental disabilities in your area. Thank you for your time and consideration.

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