

Good Morning and welcome to Lower Fairfield Regional Center a wonderful congregate condo type setting that is home to 71 severely developmentally/physically and behaviorally disabled individuals. My name is Antoinette Lanzarone. My husband and I are the loving parents and advocates for our two adult children that reside here at LFC. Michael is 53 with severe developmental and behavior disabilities has called LFRC home for over 30 years, Holly is 45 with severe developmental/physical and behavior disabilities and is nonverbal she has called Lower Fairfield Regional Center(LFRC)home for most of her adult life. They see each other almost daily as their "family style" apartments are housed in the same condo type building and they attend Day Programs at the Kennedy Center in Bridgeport. They show love for one another and enjoy times they spend together... Because of their profound disabilities they require 24/7 care to keep them safe and protected and will require this need for the rest of their lives and their disabilities worsen as they age. They will never be able to work or self-advocate for themselves.

Because LFRC is an ICF/MR it provides intense support to medically fragile (feeding tubes, seizures, quadriplegics) and behaviorally complex people with profound disabilities for these residents LFRC is the most appropriate life sustaining option. At LFRC they receive 24 hour on site nursing; speech, physical and occupational therapy, behavior specialist and **nutritionists. These services are provided by caring and** nurturing individuals. Our staff is trained and dedicated and provide the continuity and hands on services to our residents. Our direct care staff is a vital part of operations they often know our children better than anyone else. Our residents are treated with respect and dignity and are given opportunities for choices in their life. The direct care staff are like their extended family. I feel so fortunate to have my children at LFRC. At LFRC we are one big family with a caring and nurturing attitude towards all. **Michael** and Holly love their home they have grown and prospered here. Our direct care staff cook, clean, do laundry, transportation, care of the residents, shop, do recreation, and are required to do active treatment. Some residents need one to one to be safe and some of our residents are in wheel chairs requiring total care. Staff have become my right hand and I can rest peacefully at night knowing that many compassionate and caring eyes and ears are watching over them.

Recently on a visit home Michael said "go back to Center" because he missed his friends and staff. They are his family also. How comforting it is knowing he is happy there and wants to return back to his "home" that he loves and is happy and secure there and where he should remain and be allowed to age in place. The care of the State's most needy and vulnerable will be costly regardless of where it is provided, in the community or in a facility. I consider LFRC in Norwalk an assisted living for the profoundly disabled-where residents go out into the community for medical care, recreation day programs and other community trips.

I am fond of ICF/MR facilities where another agency (Department of Public Health) is holding DDS accountable for what they do and what they do not do. Regulations for care are necessary and vital to quality care for our most profound residents. I strongly support the Olmstead Act of 1999 the right to freedom of choice. Choice is very important and remains vital to the American with Disability Act. For those who can function safely community placement is right choice. However we do not want to eliminate services that we need now and in the future. We need to acknowledge that a small percentage of the disabled community will never be able to work or self-advocate that they will need to be safe and protected for the rest of their lives and that it is our moral obligation and duty and their right.

As a member of Parents and Friends of Lower Fairfield Center and Associated Group Home I support the expansion of quality based service options and I oppose the ELIMINATION or any proposal that would weaken the ICF/MR program at LFRC...

Olmstead 1999 that nothing in ADA or its implementing regulations does not condoning termination of congregate settings for persons unable to handle or benefit from community settings. Nor is there any federal requirement that community-based treatment be imposed on people who do not desire it.

Open your heart as I take you on an imaginary, emotional journey. Picture yourself or a loved one in my having lived in the same home for 30 years, shared the same bedroom with someone for 30 years and ate the same table with friends for 30 years surround by many of the same people who you have trusted with your care and looked out for your wellbeing for 30 years. Now imagine, someone who really doesn't know you or understand you making a life altering decision as to where you will live and be cared for. Uprooting you from all you love and where you were loved secure and safe and you have no real voice in this process. No one is asking you what you think is best. Anxiety, depression, regression take over you as you experience the detrimental effects of losing life as you once knew it. Do you feel the loss of your loving home and loved ones and the people who knew how to care for you? Do you feel those feelings? ...It is our moral obligation not to allow this to happen and it is their given right to stay in the home they love and to age in place if they so desire.

Thank you

Sincerely,

Antoinette Lanzarone