

Dear Lieutenant Governor Calley:

We are aware that you are accepting public comments regarding Michigan's Community Mental Health Services at various meetings around the state. We are unable to attend one of those sessions. This summer we experienced a major road block in the care facility placement for our 24 year-old, severely, multiply impaired daughter. We are writing now because we would like to have our opinions and concerns regarding Community Mental Health Services added to the public record.

We feel there are not enough options for daytime programming for severely, multiply impaired adults in our state – particularly in our area of northwest, lower Michigan. We think that competent day care programming, administrated and run by trained professionals of a Community Mental Health System, is a good idea, and should not be completely abandoned.

Briefly, our story is that our daughter (whose legal guardian is her father) was placed in one of two facilities in our area for the third summer in a row. We were trying out this placement in hopes that it would work for Kate when she completes the ISD based education program at the end of the 2013-2014 school year. However, it became clear from her behavior that the site was not a good fit for Kate. We removed her from the program for both her sake, and for the sake of the other clients for whom the program is successful. Our issue is that there were no other options through North Country Community Mental Health for her. The only other facility was full, and would not accept another client, even for only five weeks.

Kate has been living in adult foster care for seven years. That placement has been successful. However, her foster mother works outside the home. This foster mother is a single woman who bears the responsibility for maintaining a home herself. We feel that one of the reasons she is as good as she is with this population is that she goes out to work. In addition to our daughter, there is one other client in her home, and both these young women have alternative daytime placements as well. When we contacted North Country Community Mental Health after having been told by the caseworker that the only other facility was full to ask for help with the situation, we were told that the foster parent is already being paid to care for her, and should do so. Because I am a polite person, I did not ask the supervisor if she could live on \$867.00/month of social security and provide stimulating and interesting experiences in the home and community for a severely, multiply impaired adult. My husband said that he would have asked that question had he been on the phone.

When we asked if there were any plans to provide additional adult daycare options for severely, multiply impaired people in our area, we were told that the state will not be moving in that direction at all due to the Olmstead Act. The supervisor briefly told us that the Act banned care facilities because there were too many instances of abuse of clients by staff in years past.

In no way do we want to give the impression that we think there should be large institutions for severely, multiply impaired adults. We agree that a community based model of many fewer clients per placement is the ideal. However, we think that competent day care programming, administrated and staffed by trained professionals of a Community Mental Health System, is a good idea, and should not be completely abandoned. When we did further research about the Olmstead Act, it seemed to us that the adults suffering from misplacement in large institutions were much higher functioning than our daughter. Daycare programs may not be appropriate for many higher functioning intellectually challenged adults. There is, however, a great need for small, quality community-based programming for severely, multiply impaired adults. Just as we all benefit from getting out of the house daily to attend