Mr. Roger Strand Governor's Planning Council on Developmental Disabilities
300 Centenial Building 658 Cedar Street St. Paul, MN 55155

Dear Mr. Strand:

Thank you for the opportunity to provide you with a brief explanation of the creative programs being developed and implemented in Stearns County Minnesota. You may feel free to send this information to Syracuse University.

Sincerely,

Tim Jeffrey
Social Service Supervisor

TJ/gl

Enclosure
A new way of thinking has begun which has resulted in many innovated programs for the developmentally disabled. These programs will increase community presence, participation, and acceptance of developmentally disabled people. Persons with developmental disabilities living in institutions have a continual feeling of isolation. The majority of their contacts with people are with either other developmentally disabled people or people being paid to care for them. This life-long exile from belonging to a community can only be imagined by most of us. People with developmental disabilities living in institutions, however, live with this isolation most of their lives. This institutional approach to caring for people has developed as a result of a desire to provide quality services.

A new way of thinking is necessary in order to provide quality services and at the same time avoid community exile and isolation. Community empowerment is empowering people in the community to make decisions to become involved with persons with disabilities and carry out efforts to assist those persons in participating and being accepted as a member of their community. Empowerment can take the form of planned formal and systematic delivery of service, or an informal spontaneous involvement by members of the community. The key to this way of thinking is that it does not empower government or service providers, but rather people in the community.

One such model is medical assistance waivered services provided in an adult foster home. By combining training programs traditionally found in intermediate care facilities for the mentally retarded with adult foster, an overlap occurs between the community and the service provider. It is in this overlap where the magic happens, where the community is empowered. We have seen wonderful things happen. Time after time we have experienced this magic where a person who was previously living in a regional treatment center [State Hospital] or a community ICFMR has not only blossomed in their abilities but also in their personhood, citizenship, quality of life, and community belonging. We presently have 49 such individuals in 23 different foster homes where waivered services is being provided. Attached you will find a specific example entitled, "All The Community Cried" which illustrates on an individual basis how this system encourages community integration. Please refer at this time to the attachment.

Another model which empowers the community and natural family is the one provided to children. Stearns County, with a population of 115,000, has not placed a child in a state hospital, community ICFMR, or any full-time out of home placement in four years. This is the result of a philosophy of commitment to maintaining a developmentally disabled child with their family in their community. A delivery system that has been developed to accomplish this has been the use of in-home services combined with child foster care waivered services. To insure permanency
and the likelihood of life-long contact with natural family members, children have remained in their family home a portion of the time. The time a child remains in the family home varies depending on the needs of the child and the ability of the family to meet those needs. The remaining time the child stays at a child foster care home where waivered services are provided, some children are gone from home only on weekends, some children are gone five days a week. An in-home component is also provided. The same individual travels back and forth serving the child both in the natural family home and in the foster home. Additional supports are provided to family in the form of counseling and program consultation. The child is maintained in the same school, regardless of where he is residing. By providing support an thus empowering families and communities, we have found the number of days in out of home placement decreasing as a child is served by this system. This system has been in place for three years. Satisfaction has been high, institutionalization rate has been zero.

Other services provided which are not residential based are critical in the acceptance of individuals with developmental disabilities by their communities. These services are 24 hour emergency response service to natural homes and foster homes with an alternative community placement. This has avoided traditional state hospital placement in cases of emergency. Day programs are also very critical in the area of integration. Community supportive employment is an area where the provider overlaps with the community. As a result, the community is empowered. Examples of this system is individuals working at restaurants where the employer is the community not the service provider, where the job coach, comes in and empowers the employer to maintain the individual in a job because of the job coach's assistance. Another day program component is the use of volunteers to help individuals on a one on one basis become active citizens in civic groups, leisure recreational groups, religious groups, and special interest groups which are all present in the community.

All these systems continue to be refined and developed further to insure opportunities for not only physical presence and participation, but true community belonging and acceptance through the empowering of the community.
Leo died on the evening of August 25, 1987, and "ALL THE COMMUNITY CRIED." Leo was a special man of 68 years, he had brown hair which was greying, green eyes, a protruding lower lip, and he was 6 feet tall. Leo was a friendly person who talked to anyone who passed by. He was very outgoing, and made you feel special when you talked with him. Leo always had candy available to share with his friends.

Leo was a person with developmental disabilities. Leo was epileptic and as a result of his seizures he was confined most of the time to a wheelchair.

Leo had lived 30 years of his life in institutions which cared for the mentally retarded. The last 10 months of his life he lived in a waivered service foster home where he received home and community based waivered services for the developmentally disabled. It was during the last 10 months of his life that Leo truly became a member of his community and family.

Leo lived with foster parents and their six grade-school children in a small community in central Minnesota during 1987. Leo's special needs were met by professional staff coming into the foster home on a daily basis. In addition, Leo worked at a developmental achievement center.

Leo loved his new family and he enjoyed being a part of a community. Because his community cared about the disabled, a ramp had been installed in his church which allowed Leo to attend church every Sunday with his new family. Leo's attachment to the community was evidenced by his interest in a Centennial celebration that occurred there this summer. Leo was an avid Twins fan and enjoyed discussing these games with his neighbors, friends, and his priest. Leo's placement in a foster home allowed him to visit with relatives of his foster parents, new neighbors, and he was able to enjoy a quality of life he had never had during the past 30 years. His last birthday was a special one for him in that his foster parents brought him to St. Cloud where he went out for dinner with his childhood friend.

Leo's quality of life was reflected at his funeral mass, which was attended by many of his friends from the local DAC, his sisters, and several nieces. His new family was very much in evidence. His foster parents attended with two of their children that lived at home, six of their adult children, two in-laws, and four grandchildren. During the homily, Leo's priest talked about him sitting in the church in his wheelchair where he would wait until everyone had left the church so he and the priest could discuss his work, the Twins baseball team, and his busy schedule at home. During the offertory, a staff member presented baseball magazines, three friends from the DAC presented candy, and two of the foster parents' children brought the wine and the host to the alter. Leo's foster mother sang his favorite hymn.
The women of Leo's church served a meal following the funeral mass. While his friends talked about how much they were going to miss him, his sisters expressed joy that he had lived with a family that cared so much about him. His foster family knew that there would be a void in their lives, and were thankful that Leo had lived with them; he added so much to their family life.

All of these things are a true reflection of the quality of life that Leo enjoyed during 1987 when he became part of the community by moving into a waivered service foster home. He was loved, not only by the people paid to care for him, but by their families, his neighbors, his co-workers, and community leaders. Leo gave and Leo received from his community during the last 10 months of his life. He was a precious man, and we dedicate this in remembrance of him, with the hope that all people with developmental disabilities who are living in institutions can someday come home to their communities.