

# Parents Of Developmentally Disabled Decry Connecticut's Privatization Efforts

Gov. Malloy's plan to reorganize the Dept. of Developmental Services is being met with anger and disbelief from parents and guardians of adults who live in group homes.



By **Josh Kovner · Contact Reporter**

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**H**ARTFORD — Parents of developmentally disabled sons or daughters in state care, reeling from the layoffs of 605 state workers and the largest privatization effort in years, met at the workers' union headquarters Tuesday and called for a halt to the state's planned shift to the chronically underfunded private sector.

Though 90 percent of developmentally disabled people who receive services through the state already live in private settings, these parents said their world, and that of their loved ones, has been turned upside-down by the layoffs of hundreds of direct-care workers and the plan to transfer 30 state-run group homes to private companies who contract with the state.

They said the state workers, who are paid far more than the private workers and tend to stay in their jobs a great deal longer, have built lasting relationships with their children. The parents said the workers can recognize an oncoming illness by a look in their son's eyes, or the hue of their daughter's skin, and that wrenching them from homes they have come to love is akin to cutting a lifeline.

"The idea that someone else can care for our children the way the state employees have is ludicrous," said Lindsay Matthews, whose son, George, has lived in a state run group home on Brook Street in New Haven for 18 years.

"This isn't about money. It's about love and relationships," she said.

And the parents said that they don't believe statements from Gov. Dannel P. Malloy and officials with the Department of Developmental Services that money saved by privatization would be used to help over 2,100 clients and families who have been waiting for years for residential placements.

"Show me the statute that says that money that's freed up has to go to help the families on the waiting list," said Matthews, "That's a snow job, it's fictional, it's lying to people."

Advocates who support private care have also expressed outrage that savings that DDS has realized in the past several years has not been used to expand services, but has been returned to the general fund, or has been eaten up by the millions of dollars paid in overtime to the workers at the remaining state institutions. On top of that, DDS has been cut by tens of millions of dollars. Still, the agency has a budget of about \$1 billion, and advocates have called for the money to be redeployed so that several thousand more people can be served in a private sector that is given the proper resources.

The host of Tuesday's gathering was Local 1199 of the Service Employees International Union, which represents both the state and the private workers who care for the clients receiving state services.

Jennifer Schneider, spokeswoman for 1199, said the private sector has been underfunded by the state for so long that it cannot match the quality and consistency of the state-run facilities.

"We're at the Capitol fighting for \$15 an hour for the private workers ... They're making \$11 and \$12 an hour and are on state assistance, Husky health plans and working two jobs," said Schneider.

"What the governor is doing here is transferring middle-class jobs to a low-wage sector."

A direct-care worker with the state makes a base salary of about \$56,000. However, the workers routinely earn more than \$20,000 in overtime, and some have made as much as \$100,000 or more in overtime.

Schneider said that for privatization to work in this case, it would have to be done over a period of years, with steady raises for the private sector and an end to the high turnover rate that plagues private group homes and terrifies the families of people in state group homes who are facing transfers.

"This is a transition that the state is not prepared to make," said Schneider. "It hasn't been outlined. It will overwhelm the private sector."

The operators of private companies have said they do have the capacity to take on new clients, but they acknowledge they have been hamstrung by years of flat funding from DDS that has not kept abreast with the annual increase in operating costs. Advocates have faulted DDS for neglecting the private sector. For example, when two regional, state-run institutions were scheduled to close in Meriden and Stratford, DDS did not arrange a provider fair that exposed families to the services that were offered. A number of families in the Stratford facility are appealing the closing, while some of the Meriden families have accepted transfers to private care.

The parents who spoke Tuesday want nothing to do with the private sector.

"To take away the well-trained state employees who have cared for Arthur, would mean death to my son," said Martha Carney.

She said the staff members at Arthur's group home in Hamden were quick to recognize a sudden change in his condition when her son became sick. Arthur spent two weeks in a hospital intensive-care unit recovering from an illness that came on quickly.

Beverly Laporte said she cannot imagine her son Robbie receiving the same level of care that he has enjoyed at his state-run group home in South Windsor.

"For 24 years, the staff has been incredible," said Laporte. "I dread the day, should this happen, that they privatize the home. I would worry forever."

Ben Barnes, Malloy's budget chief, said last week after announcing 416 additional layoffs at DDS, that the state must adapt to a smaller government. DDS Commissioner Morna Murray noted that most states have closed their public facilities and rely on private care. In Connecticut, only a fraction of the 16,000 DDS clients live in state-run residences.

"Let's be clear — there should be no service level reductions involved here. This is closely following national trends," said Chris McClure, a spokesman at the state Office of Policy and Management.

He said since 2009, the number of individuals served directly by DDS in state-run facilities has dropped from about 15 percent to less than 10 percent. More than 90 percent are receiving services in facilities operated by nonprofits and community providers, he said.

Also, a recent federal audit was highly critical of DDS' ability to track serious injuries among clients, and advocates have long urged the state to get out of the business of delivering services and strengthen its oversight role.

Carney and other parents implored Malloy to visit the group homes and see how staff members interact with residents.

The private workers "don't know our children," Carney said. "They don't know our children's needs."

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