

A PETITION TO:

Governor Rudy Perpich, Commissioner Sandra Gardebring and all members of the Minnesota State Legislature.

I. WE, THE PEOPLE OF MINNESOTA, STRONGLY URGE YOU TO REVERSE THE PLANS TO CLOSE ALL OF THE STATE'S REGIONAL TREATMENT CENTERS FOR MENTALLY RETARDED PEOPLE.

II. We remind you that these beautiful facilities were built and paid for with many millions of tax payer dollars. Most of the remaining residents are severely or profoundly retarded. The excellent care they are now receiving should not be jeopardized by forcing them into small group homes scattered throughout the state. Many have life threatening medical conditions in addition to their mental retardation.

III. We urge you to support a system of choice, and a voice, in decision making by parents and guardians when determining the needs of mentally retarded people.

Distributed by Minnesota Chapter, Congress of Advocates for the Retarded, Inc. (Mn-C.A.R.) Melvin D. Heckt, Chair, 3550 Multifoods Tower, Minneapolis, Mn 55402-3787 (612) 333-3000

NAME		ADDRESS			
Print	Signature	Street	City	State	Zip
1.					

Copies of this petition are presented with the signatures of over 11,000 MINNESOTA VOTERS.

These signatures were obtained from virtually all parts of Minnesota between Chisholm and Winona.

We ask one **vital** question —

WHY

must these defenseless mentally retarded people be uprooted from their safe and sound homes in the Regional Treatment Centers and be forced to live in hundreds of small neighborhood group homes scattered all over the state? This makes no sense at all from either a humane or economic standpoint. Especially, since this heartless maneuver will cost the taxpayers at least an additional, unnecessary 50 million dollars! Once the beautiful facilities and programs for the retarded are destroyed, they are gone forever.

* These petitions are dedicated to all mentally retarded people
* who cannot speak for themselves

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MINNESOTA CHAPTER
CONGRESS OF ADVOCATES FOR THE RETARDED, INC (MnCAR)

7672 W. 78th Street • Edina, Minnesota 55436 • (612)941-5304

COMMUNITY LIVING IS NOT FOR EVERYONE

- I. The Regional Treatment Centers are the single most vital part of the State of Minnesota's covenant to care for its developmentally disabled.

In Minnesota the facts are that the "state of the art" is vested in the Minnesota Regional Treatment Centers and not in the community small home facilities.

If Regional Treatment Center skills and programs are dissipated into a community of care services incapable of sustaining its expertise, the result will be a catastrophic loss of skills.

- II. The financial burden, to accomplish the recommended Department of Human Services abandonment of the Regional Treatment Centers for the developmentally disabled, will force an unnecessary state debt approaching one hundred million dollars without having solved the issue "state of the art" care. There does not exist a comprehensive financial plan that clearly delineates the magnitude of the cost implications.

- III. The Department of Human Services is forcing an ill-conceived plan, that will devastate the adequacy of Minnesota's care for the developmentally disabled. It is based on "five months" of "manipulated" negotiations. The plans they are pursuing, forces the dumping of hundreds of developmentally disabled, critically sick people, into a community that is totally unprepared. Nothing is in place to take care of the present crying need for care, not to mention the abandonment of the Regional Treatment Centers, where they are blocking admittance for desperate people, Minnesota's citizens, who need help.

- IV. The Regional Treatment Centers are the corner stone for building a carefully developed plan for state and private community living for those who want, and should live in the community. To do that will take five years. Keeping the Regional Treatment Centers as the nucleus of the system, and creating a strong Advisory Council for future planning is what the "WHY" bill is all about.

- 1 A bill for an act
2 relating to human services; imposing a moratorium on
3 discharges of persons with mental retardation from
4 regional treatment centers; establishing an advisory
5 council on regional treatment centers; proposing
6 coding for new law in Minnesota Statutes, chapter 252.

By:

Dean Thomas Vice
President

1 A bill for an act

2 relating to human services; imposing a moratorium on
3 discharges of persons with mental retardation from
4 regional treatment centers; establishing an advisory
5 council on regional treatment centers; proposing
6 coding for new law in Minnesota Statutes, chapter 252.

7 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

8 Section 1. [252.026] [MORATORIUM ON DISCHARGE OF RESIDENTS
9 WITH MENTAL RETARDATION.]

10 No person with mental retardation who is a resident in a
11 regional treatment center shall be discharged from a regional
12 treatment center for five years from the effective date of this
13 section unless:

14 (1) the parent or guardian of the resident requests that
15 the resident be discharged; or

16 (2) the resident is in the regional treatment center on a
17 temporary basis under a respite program.

18 For purposes of this section, "guardian" does not include
19 the commissioner of human services appointed as public guardian
20 under chapter 252A.

21 Sec. 2. [252.027] [ADVISORY COUNCIL ON REGIONAL TREATMENT
22 CENTERS.]

23 Subdivision 1. [ADVISORY COUNCIL ESTABLISHED.] An advisory
24 council on regional treatment centers is established. The
25 governor shall appoint the members of the advisory council.

26 Subd. 2. [COMPOSITION OF ADVISORY COUNCIL.] The advisory

1 council shall have 15 members. The governor shall select all
2 members from a list submitted by The Minnesota Chapter, Congress
3 of Advocates for the Retarded, Inc. At least one member of the
4 council shall be an employee of the department of human services.

5 Subd. 3. [DUTIES.] The advisory council shall meet on a
6 regular basis to study and recommend to the legislature ways and
7 means to improve the care of persons with mental retardation who
8 are currently residents in regional treatment centers.

9 Subd. 4. [REPORT.] The advisory council shall report its
10 findings and recommendations to the legislature on an annual
11 basis.

12 Subd. 5. [ADVISORY COUNCIL CHAIR.] The members of the
13 advisory council shall elect one member to serve as its chair.

14 Subd. 6. [TERMS AND COMPENSATION OF MEMBERS.] The terms of
15 advisory council members are governed by section 15.059.

16 Members of the advisory council shall not receive the per diem
17 provided in section 15.059. Members shall be reimbursed for
18 food, travel, and lodging expenses they incur in carrying out
19 the business of the advisory council.

20 Subd. 7. [EXPIRATION.] The advisory council expires five
21 years from the effective date of this section.

22 Sec. 3. [EFFECTIVE DATE.]

23 Sections 1 and 2 are effective the day following final
24 enactment.