# TOP SIX REASONS TO RETAIN OUR RHCS

Only four percent of people with developmental disabilities who receive state services live in state operated Residential Habilitation Centers (RHCs). Washington State Supports four such centers; Fircrest in Shoreline, Rainier in Buckley, Lakeland Village in Medical Lake and Yakima Valley in Selah. *Why do we need them?* 

# 1. PART OF A NEEDED CONTINUUM OF CARE, AND CHOICE

The Supreme Court Olmstead decision (1999) guarantees the right of individuals to choose an appropriate setting. For some, that is an RHC. We shouldn't let special interest groups and for profit providers tell us "everyone belongs in a community setting." We know this isn't true because of failed community placements and a recent increase in crisis and permanent admissions to our RHCs. People with severe or profound developmental disabilities, and their families, should continue to have the RHC option as part of a continuum of care.

# 2. EFFICIENTLY PROVIDES A FULL ARRAY OF SERVICES

RHCs care for the four percent of developmentally disabled people who are among the most afflicted. This population requires a wide range of services including mental health, psychological services medical, nursing, dental, physical therapy, speech therapy, occupational therapy, social services, recreation and more -- most of them for a lifetime. These services require the professional staff that is always available at an RHC. Because of concentrated individualized services, some RHC residents become able to live in a community setting.

## **3. PROVIDES RESPITE CARE AND OTHER SERVICES TO COMMUNITY BASED CLIENTS**

Respite care in our RHCs serves the community with short term respite for families and caretakers.

Respite provides services to the client, including physical and psychological evaluations and dentistry. Respite care can also prevent the need for full-time RHC residency. Respite is a highly sought after and needed service.

### 4. ONLY SAFETY NET WHEN OTHER SERVICES FAIL

Case managers and community residential services depend on the RHCs when they cannot provide the intense level of care some people require. There is often no backup available when an aging family caregiver is suddenly unavailable due to illness or death. Private businesses (AFHs, group homes) have the right to refuse to serve those who, for example, demonstrate behavioral challenges that endanger others. RHCs are the only safety net available.

### 5. PREVENT TRAUMA AND MORTALITY

Many residents of long term care facilities suffer transfer trauma when moved away from their familiar facility. The effects of transfer trauma include mortality and damage to physical and mental health. Acute care patients and long term care residents, such as RHC residents, are at an elevated mortality and health deterioration risk when they are relocated.

### 6. NO SAVINGS IN CLOSING AN RHC

Because RHCs care for people with severe disabilities, the cost of their care is about the same no matter where they are cared for, DDA administrators have said so. There is also considerable expense in closing an RHC, expenses both anticipated and not anticipated.

