

**2003-04 SESSION  
COMMITTEE HEARING  
RECORDS**

Committee Name:

*Senate Committee on  
Health, Children,  
Families, Aging and  
Long Term Care  
(SC-HCFALTC)*

Sample:

Record of Comm. Proceedings ... RCP

- 03hrAC-EdR\_RCP\_pt01a
- 03hrAC-EdR\_RCP\_pt01b
- 03hrAC-EdR\_RCP\_pt02

➤ Appointments ... Appt

➤ \*\*

➤ Clearinghouse Rules ... CRule

➤ \*\*

➤ Committee Hearings ... CH

➤ \*\*

➤ Committee Reports ... CR

➤ \*\*

➤ Executive Sessions ... ES

➤ \*\*

➤ Hearing Records ... HR

➤ 03hr\_sb0057\_pt04

➤ Miscellaneous ... Misc

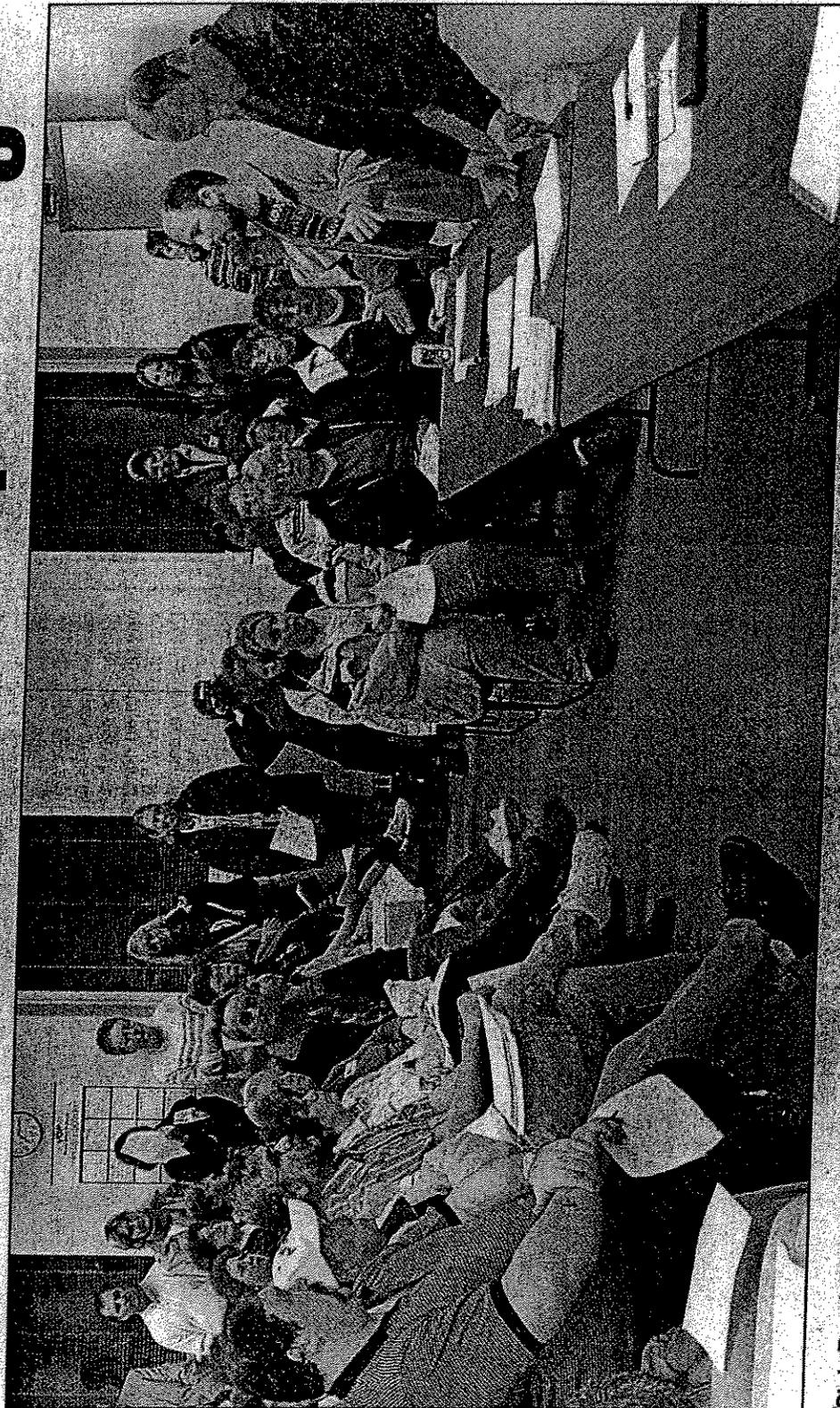
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➤ Record of Comm. Proceedings ... RCP

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B-4-103 C. Herald

## Center supporters plan fight



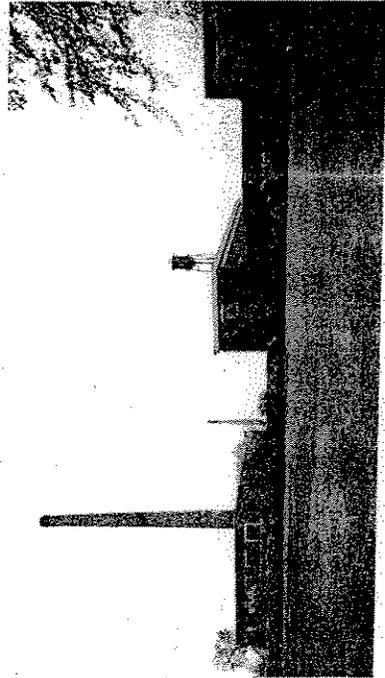
State Rep. Jeff Wood, second from right, talks to an overflow crowd at the Chippewa County Courthouse Monday as Northern Center supporters made plans to fight to save the center from closing. At far right is county Supervisor Rick Schaller, who heads the Economic Development Committee.

MARK BUNDENMAN / THE CHIPPEWA HERALD

### CENTRAL STATE HOSPITAL

Mrs. Wm. P. Lynde, who was the first woman in the United States to be appointed to a state board of charities, considered the problem of the criminal insane in 1875. Mrs. Lynde was of the opinion, as were other members of the board, that a separate institution should be provided for this class. Wardens of the prison continually asked for the removal of the insane from the prison. Although it was universally conceded that the dangerous and criminal insane should be segregated and that care should be given by a specially trained personnel, in a specially planned hospital, very few states established institutions. New York established the first institution for the criminal insane in America, at Matteawan and made further provision at Dannemora. The pioneer work of Drs. Robert Lamb and Charles North at these institutions paved the way for the other institutions.

In 1909, the legislature (Ch. 499) by an appropriation of \$100,000, made provision for the erection of a hospital for the criminal insane at the Northern Hospital for the Insane. This appropriation proved to be insufficient for construction of the building needed and no work was done. The legislature of 1911 (Ch. 585) deemed it inadvisable to locate the criminal insane and insane criminals at the general hospital at Winnebago and made an appropriation of \$20,000 for a site near Waupun. The Board purchased seventy-two acres on the outskirts of the city and let a contract for one hospital wing, a portion of the administration building, the connecting corridor and the power house. The excavation for foundations for the hospital was done by prisoners and the crushed stone for all concrete work was furnished through prison labor.



Power House and Ward Building Central State Hospital

### MENTAL HOSPITALS

The legislature of 1913 (Ch. 356) created the hospital as a separate and distinct institution under the jurisdiction of the Board of Control and supervised by a medical superintendent. This legislature also provided that insane persons of the following classes should be treated at the institution:

1. Persons who have been convicted of a criminal offense and who become insane while in the state prison, state reformatory, house of correction or other correctional institution.
2. Persons accused of crime but not guilty because insane.
3. Persons accused of crime but not tried because of insanity.
4. Persons who because of suicidal or homicidal tendencies are dangerous to themselves or others are in state or county hospitals or asylums for the insane.
5. Persons adjudged to be insane who were previously convicted of a felony.

The institution, which had a bed capacity of 40 patients, was opened on January 12, 1914 with Dr. Rock Sleyster, the former prison physician as superintendent. The legislature of 1917 (Ch. 314) changed the name of the institution from "Hospital for the Criminal Insane" to The Central State Hospital.

At the present time, the institution has a population of 331 patients and a rated bed capacity of 204 male patients. Dr. W. A. Deerhake is the superintendent.

### PSYCHIATRIC INSTITUTE

In 1907, Dr. Charles Gorst, then superintendent of the Wisconsin State Hospital (now Mendota State Hospital) recommended a ten year plan for the development of that institution. One part of that plan contemplated a department of medical research with "the installation of a neuropathologist in the medical department of the University, who would deliver each semester a course of lectures on nervous and mental diseases and hold class clinics in the hospital; room and equipment to be furnished by the university for a laboratory for research work on mental and nervous diseases and his salary to be paid by the Board of Control". Dr. Gorst also asked for an appropriation of \$3,000 for a laboratory and mortuary at Mendota. This was allotted in 1913 and together with an additional \$1,700 from other state hospital funds provided for remodeling of an antiquated building at Mendota and the purchase of some equipment. From this appropriation the Psychiatric Institute has been gradually developed.

The Board of Control was of the opinion that the laboratory could be of service to other state institutions and by resolution designated it as the Wisconsin Psychiatric Institute. The work outlined was scientific research in causes of mental disease; assistance in the care and treatment of mental diseases and a prevention program. The institute was also delegated to investigate a system of

garding the number of mentally deficient in the state and received the names of 300 children "who are incapacitated by nature or accident from deriving any advantages from the common school. . . ." However, the board was not satisfied with its survey as is evidenced from the following quotation from the report of 1877: "And when not a single imbecile is reported from the great city of Milwaukee, we are sure that the work of investigation was scarcely attempted by the school officers there". The board made the following recommendation: "We are convinced that such instruction is both morally and economically profitable to the people of the state, and we believe that it is the right of all children bred among us to receive education according to their capacity. We therefore recommend that early and effective action be taken by the legislature for the establishment of an institution for the training of feeble-minded children."

#### NORTHERN COLONY AND TRAINING SCHOOL

The Board of Charities and Reform, the state Board of Health, the medical society and the teachers' associations continued to call attention to the need of such an institution. A bill providing for an institution was passed in 1887 only to be vetoed by the governor. In 1891 the bill failed to pass both houses of the legislature, but in 1895, twenty-eight years after the first introduction, the bill providing for a Wisconsin Home for the Feeble-minded became a law.

In compliance with the requirements of the act, the Board of Control visited many localities offering land or a bonus. The city of Chippewa Falls offered 600 acres of land and \$10,000 in money and the Board decided to locate the institution in the beautiful Silver Spring Park near that city. Part of the cash bonus was used in purchasing additional land, bringing the total acreage to 1,021 acres.

Plans were made for an institution of an eventual capacity of 1,000 children, but the capacity of the first buildings, when they were opened on June 16, 1897, was only 250. The legislature of that year appropriated money for the erection of a third cottage to contain 150 inmates. Before this cottage was finished there was (on September 30, 1898) a population of 373 inmates and a waiting list of 200 more seeking admission. The second report of Dr. A. W. Wilmarth, superintendent, called attention to the overcrowding of the institution. Nine years after the institution opened (1906) courts of the state had committed to the school 650 children who could not be received because of the crowded condition.

#### SOUTHERN COLONY AND TRAINING SCHOOL

Recognizing these conditions, the legislature of 1909 made an appropriation of one thousand dollars to be used by the Board of Control to secure "option contracts for the purchase of a suitable site to be suitable for the establishment of a home similar to that

at Chippewa Falls to be conducted under the laws provided for that institution". About thirty sites were visited and options secured. So great, however, were the demands upon the session of 1911 for money for other purposes, that the legislature could not make provisions for an additional institution. It did, however, provide funds for another cottage at Chippewa Falls to relieve some of the tension of the overcrowding.

An appropriation of \$300,000 was made by the legislature of 1913<sup>1</sup> for the purchase of a site and for construction of the first buildings. The Board again visited various sites, but comparatively few met the requirements of size, location and adaptability. Two or three sites were considered excellent, but according to the Board of 1913, were exorbitantly priced. The Board purchased a site consisting of 519 acres located two miles northwest of the village of Union Grove in Racine county. This site, which cost \$53,937.50, was considered desirable because it was in the southeastern part of the state near the cities of Milwaukee, Racine, Kenosha and Burlington.

Much of the land was swampy, ten acres being under water, and the remainder was stony and barren, although soils experts of the University had expressed the opinion that the soil was good. Many state officials, and private citizens interested in institutions, became discouraged after visiting the school and suggested abandoning the site and buildings.

Construction of the buildings was carried on with much difficulty. Due to the swampy condition of the building site, roads were almost impassable. Horses and equipment were mired. The contractor was unable to secure needed building material. Finally on February 14, 1919, the institution, consisting at that time of two inmate buildings, a barn, a silo and a residence occupied by the superintendent was opened and fifty-nine children were transferred from Chippewa Falls. A raised wooden sidewalk connected the superintendent's residence and the cottages for the inmates, but after a rain it was usually covered with water.

Due to the high cost of material, the Board did not let any contracts for construction in 1919-1920, but did make provision for a drainage system. Since that time twenty-five miles of drain pipe have been laid, and Dr. C. C. Atherton, the present superintendent, has succeeded in building a landscaped institution with green lawns a thousand trees, box hedges, shrubs and flowers, far different from the morass which greeted him when he accepted the superintendency of the school.

#### Superintendents

Dr. H. C. Werner was the first superintendent but he served only until 1923, when Dr. Atherton succeeded him. Dr. Atherton

<sup>1</sup>Chapter 384, Laws of 1909.

<sup>2</sup>Chapter 669, Laws of 1913.

## Jermstad, Sara

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**From:** Jane Waldkirch [jwaldkirch@elknet.net]  
**Sent:** Monday, March 10, 2003 11:54 PM  
**To:** sen.zien@legis.state.wi.us; sen.reynolds@legis.state.wi.us; sen.roessler@legis.state.wi.us; sen.kanavas@legis.state.wi.us; sen.brown@legis.state.wi.us; sen.welch@legis.state.wi.us; sen.robson@legis.state.wi.us; sen.chvala@legis.state.wi.us; sen.jauch@legis.state.wi.us; sen.carpenter@legis.state.wi.us  
**Cc:** rep.woodj@legis.state.wi.us; rep.suder@legis.state.wi.us; rep.kreibich@legis.state.wi.us; rep.hines@legis.state.wi.us; rep.balow@legis.state.wi.us; rep.ladwig@legis.state.wi.us; rep.lasee@legis.state.wi.us; rep.musser@legis.state.wi.us  
**Subject:** Senate Bill 57

I realize that I am sending this message to you very close to the time you will be considering Senate Bill 57, but hope that you will have time to read this before further action is taken on this bill.

I am an aunt of one of the residents at Central Wisconsin Center and I know first-hand the excellent care that is provided at the Center. I am also an employee of a nursing home in Walworth County, and I know that excellence in one's job is not a factor in how health care is funded these days. I am aware that we have a huge budget deficit in Wisconsin, and that cuts must be made that will negatively impact everyone. However, I would like you to consider that Central Center provides care to people who would be difficult to place anywhere else. These people have profound medical and developmental disabilities which preclude them ever being mainstreamed into their communities. They require trained, experienced, caring individuals to provide for their physical and emotional needs. They have this at Central Center. I seriously doubt that the quality of care and the quality of life provided by the staff could be duplicated either in their individual communities or by overburdening the staff at either Northern or Southern Center.

I'd like to reiterate a suggestion which my sister also sent to you, to consider closing the WI School for the Deaf (WSD) in Delavan and/or the school for the blind in Janesville. As a Delavan resident, I can attest to the fact that WSD provides a fine program for deaf residents of Wisconsin. But at what cost? We provide room, board, education, and weekly transportation for these students, to name just a few of their expenses. I'm sure it is excellent care, but these people represent only a fraction of the deaf population in our state. Other community programs are obviously already available. The same could be said of the blind served in Janesville. Both these groups are being served so that they can go back into their communities as productive, normal citizens. If that is the case, why not begin as we mean to go on, with having their training and education in the communities where their families live and where they would get their education ordinarily? The same cannot be said for the residents of Central Center. These people are always going to need specialized care and protection. In their case, having a number of highly skilled, dedicated caregivers available is not just desirable. It is our duty to provide them, as Wisconsin citizens the same as all of us, with the best possible environment to obtain the care they need.

I ask that you consider these things in relation to Senate Bill 57, and please seek alternatives to closing Central Wisconsin Center.

Thank you.

Jane Waldkirch  
1133 Center St.  
Delavan, WI 53115  
(262) 728-8465

**Jermstad, Sara**

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**From:** Diane Santi [dedewood@yahoo.com]  
**Sent:** Monday, March 10, 2003 11:57 PM  
**To:** sen.roessler@legis.state.wi.us  
**Subject:** 2003 Senate Bill 57

Dear Senator Roessler:

As Chairwoman of the Health, Children, Families, Aging & Long-Term Care Committee you will be conducting a hearing on "Senate Bill 57". The hearing is scheduled for March 11, 2003 - tomorrow!!! (Unless it is postponed.) I implore you to look beyond the simple dollars and cents issue, and see that this involves the lives of many.

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-  
I want this e-mail entered and read as testimony during this hearing for "Senate Bill 57":

My name is Diane Santi. I live in Cudahy, Milwaukee County. My son's name is: Scott Manske. This is about my son's life.

Senate Bill 57 is attempting to close Central Wisconsin Center. Central Wisconsin Center is home for my 23 year old profoundly retarded son. This has been his home for the past 19 years. My son has extensive physical, medical, and psychological needs, and I know these needs are all being met at Central Wisconsin Center. I have been actively involved in his care and with his caregivers for the last 19 years. I feel he has the best quality of life living at Central Wisconsin Center. Closing down this Center, will literally compromise his life, along with the other 350 residents. I am at a loss to understand the reasoning behind this proposed closing, but I believe it is about saving money.

However, the closing of CWC will not necessarily save the State money. The needs of the 350 residents are extensive, and not easily shifted to other caregivers.

For example: (From Fact Sheet dated 9/15/02 supplied by Ted Bunck, PhD, Center Director)

285 individuals are totally dependent on others for bathing.

216 individuals are totally dependent on others for dressing.

314 individuals are totally dependent on others to use the toilet.

258 individuals are totally dependent on others for eating their meals.

288 individuals are non-ambulatory.

180 individuals are fed by tube, and this occurs 570

times in a 24-hour period, all individuals have medically prescribed diets; 160 of those diets are mechanically altered or textured based on individual needs, 123 individuals are on therapeutic diets. These specialized diets are prepared three times a day, every day of the year.

106 individuals have limited or no vision.

265 individuals have limited or no hearing.

An average of 16 doses of medication are prescribed, dispensed, and administered per resident every 24 hours. There are approximately 5480 medications administered every 24 hours.

Additionally, there is a Centerwide total of 742 other prescribed nursing treatments or interventions given across the Center during every 24-hour period.

91 individuals have a history of fractures or very fragile bones due to medical conditions. These individuals require extremely careful lifting and transfer protocols.

246 individuals receive physical therapy, and 280 receive occupational therapy services.

63 individuals receive regular respiratory therapy 3-4 times per week.

25 individuals have tracheostomies. An average of 37 tracheostomy changes are performed each month.

75 individuals have psychiatric needs required medication.

264 individuals are being treated for seizures.

There are no instances of skin breakdowns or decubitus ulcers even though this is a group of individuals particularly susceptible to this condition.

54 individuals have problems with regulating body temperatures.

As you see by the above, these individuals have very special needs. I invite you and your committee to tour Central Wisconsin Center, so you can see for yourself these very special individuals.

The "saving money" issue is not just black and white.

Before an argument regarding the actual cost savings by closing this Center, accurate cost comparisons need to be done. Questions as simple as: What is the daily care rate?, Explanations as to what makes up this actual daily care rate? What exactly are Administrative overhead expenses? What is the actual Medicaid reimbursement received? What is the actual 40% State expense???

How can a bill be out there proposing the closing of this Center with all these unanswered questions?? What about the lives of these 350 individuals versus saving money?? What money? How much?

My child's life is in your hands (as well as 350

individuals currently living at Central Wisconsin Center). Don't act hastily without getting the facts -- visit Central Wisconsin Center -- do accurate cost studies.

Thanks you for listening. I look forward to your support.

Sincerely,

Diane Santi  
3259 E. Ramsey Avenue  
Cudahy, WI 53110  
(414-769-8277)

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**Jermstad, Sara**

**From:** KATHLEEN HART [kathyhrt@msn.com]  
**Sent:** Monday, March 10, 2003 1:28 PM  
**To:** sen.chvala@legis.state.wi.us  
**Cc:** sen.roessler@legis.state.wi.us  
**Subject:** Closing of CWC

----- Original Message -----

**From:** KATHLEEN HART  
**To:** sen.chvala@legis.state.wi.us  
**Cc:** sen.roessler@legis.state.wi.us  
**Sent:** Monday, March 10, 2003 11:25 AM

Dear Senator Chvala;

Approximately two weeks ago it was announced that Northern WI Center for the Developmentally Disabled would close due to low census of clients and other intended use of the facility. Since this time Senators and Representatives from this area as well as Southern WI Center in Union Grove have presented Senate Bill # 57 to close Central WI Center for the Developmentally Disabled (CWC) in Madison WI.

I oppose the closing of CWC for many reasons. The majority of residents who reside at CWC are in the least restrictive environment as possible. These individuals are profoundly retarded; many suffer from seizures, cerebral palsy and have respiratory and gastrointestinal disorders. CWC furnishes these people with education, respiratory, physical and occupational therapies on a daily basis. CWC is affiliated with physicians from University Hospital and Clinics and would not receive this care if they were moved to another part of the state. These are chronically ill children and adults who need 24-hour care with experienced medical staff and hospitals in close proximity.

Other reasons for opposing closing of Central WI Center include displacement of hundreds of employees.

I believe the senators and representatives who have drafted this bill are acting on their constituents requests. I am asking for the clients who reside at Central WI Center who can not speak on their own behalf. Please oppose the closing of Central WI Center for the Developmentally Disabled.

Thank you for your time.

Kathy Hart

03/10/2003

MAR 14 2003

March 10, 2003

State Senator Carol Roessler  
Room 8 South State Capitol  
PO Box 7882  
Madison WI 53707-7882

This letter is to express my deepest concern over proposed plans to drastically downsize or close the Northern Center in Chippewa Falls.

As a Chippewa Valley resident, one of my greatest concerns is for the economy of the entire region, with a definite possibility of irreparable harm to the area:

- The loss of revenue generated by the needs of the center itself
- The loss of revenue generated by the employees who shop in the area
- The greatly increased cost to the counties who will bear increased responsibility for any clients from the Northern Center who are moved to group homes

I am concerned about plans to move some residents to group homes:

- What is the record of care and quality of life for group home residents? It needs to be proven that the level and quality of care is anywhere near to being comparable to the care received at Northern Center.
- What guarantee is there of continued/permanent payments for care?
- What will the increased cost be for medical and dental care which is currently included in the care provided by the Northern Center?

I am also concerned about the choice of Northern Center rather than, for instance, Central Center:

- If central were closed, the value/benefit to the state if the land were sold would be \$30-80 million, versus the value of the Northern Center property of \$900 thousand to \$1 million
- What feasibility studies were done on closing other centers such as Central in comparison to Northern; if Northern is more expensive, are there justifiable reasons for that difference, or was Northern center chosen primarily because it's in the northern part of the state
- It would make much more sense for the residents and their families for the purposes of visiting and home stays to have one center in the northern part of the state and one in the southern part, rather than two in the southern part only. Making it difficult to impossible for families to be close to their loved ones is detrimental to the client's welfare, as well as to their families.

In a final note, I also have a great concern that this entire proposal has been done much, much too hastily without nearly enough background research, study, or discussion. Please carefully consider this proposal in light of the many great concerns that I, and many people in this area, feel. As presented, I consider this an ill-considered, great mistake.

Sincerely,

  
Janice Croissant  
4928 Coventry Court #6  
Eau Claire WI 54701

MAR 14 2003

112 N. Reynolds St.  
Boyd, WI 54726  
March 10, 2003

State Senator Carol Roessler  
Room 8 South State Capitol  
P.O. Box 7882  
Madison, WI 53707-7882

Senator Carol Roessler,

On February 24, 2003, I sent my first e-mail to the Governors office. I received a very generic answer back in response. I am now writing a letter hoping that what I write will have more meaning to those who read it. I have worked at Northern Wisconsin Center for almost 18 years as a Resident Care Technician. This job consists of 8 hours a day direct care of the people who reside there. I have worked in most of the buildings on these grounds, and have worked every shift at one time or another. In the last 18 years, I have worked with the very aggressive people and the very handicapped people that reside there.

The people who live there show how they feel with their emotions, as they cannot verbalize their feelings. Signs of things being wrong might be; a cry, a scream, throwing furniture, abusing them selves or others, a frown, a flinch, sleeping more or sleeping less, or just not being them selves. The signs that their day is going good might be; laughter, or a smile, a hug or a handshake. Each of us direct care technicians has, after working with these people for a long time, been able to detect when something is wrong with the people we care for by the smallest of signs. One reason these people are called "Our Most Vulnerable Citizens" is they can not verbalize when something is wrong.

Please take one moment and reflect on those words "Most Vulnerable Citizens." Now actually stop to realize what is being done to the people who reside at Northern Wisconsin Center during this drastic downsizing and or closing. The population of the Center is quite elderly. Those who remain are people who could not be placed at group homes in the past. For many of these people, aggressiveness and poor health were the reasons. Now you are going to take these same people and up the ante to the kitty from \$225 per day to \$325 per day, in hopes of auctioning them off to group homes.

Remember "Most Vulnerable." The ones that won't be placed at this higher rate will then be moved to Central Center.

We now have elderly developmentally disabled people. These people may be aggressive, with very severe medical problems. They will be removed from their homes, their families, and from their familiar caregivers. They will be moved to a strange living environment, with less of a chance for their family's to visit. They will now have unfamiliar caregivers. Remember these people do not speak. Now what have you done to these "Most Vulnerable Citizens?" You have added stresses that they may never be able to handle. They now have no familiar caregivers to read the little signs that say something is wrong. They now have less family involvement and this is not their usual environment. What would you do if this was your child or loved one?

I feel this is treating our "Most Vulnerable Citizens" in a very abusive and perhaps criminal way.

The care and treatment of **"OUR MOST VULNERABLE CITIZENS"** should be **NUMBER ONE** on the list and not involved in a: **CURE FOR BAD GOVERNMENT SPENDING.**

Sandra Schara  
112 N. Reynolds St.  
Boyd, WI 54726

Cc:  
Governor Jim Doyle  
Representative Kitty Rhoades  
Representative Gregg Underheim  
Representative Scott Suder  
Representative Jeffrey Wood  
Representative Larry Balow  
Senator Robert Jauch  
Senator David Zien

MAR 10 2003

Dear *Sen. Roessler*

I am an employee of the state, a taxpayer, a voter and a concerned resident of Northern Wisconsin. I am also concerned about the downsizing of the Northern Center for the Developmentally Disabled. As residents of Wisconsin, shouldn't we all be given equal opportunity to utilize state facilities? Wouldn't Wisconsin be best served by having facilities at both ends of the state? Wisconsin as a democratic society we vote to elect our Governors, Representatives, etc. to serve all classes of people equally to preserve the best interests of our most vulnerable citizens as well as the taxpayers.

Northern Wisconsin Center (NWC) serves 90% of Wisconsin counties at the current rate of \$29 million for 174 residents and the Central Center costs are \$52.9 million for 353 residents. The inpatient rate at NWC as of December 2002 was \$522 and for the Central Center, \$465. The higher rate reflects the fact that patients staying at NWC require a higher degree of care. Many of the residents that live at the center have dual diagnosis; i.e. Pica, Psychosis, Behavioral problems etc. These people require intensive treatment, NWC has done just that through proactive approaches, continuity of care, and a genuine love and concern for them.

The Northern WI Center has followed the legislative mandate to place people in the community. 64% of the people that have been placed out are from the NWC. Northern is also the only center that has not been through investigation by the Dept. of Justice. The employees have a running 20-year track record being the best in the state.

The Northern Center also has potential, when the High View geriatric prison opens and the Stanley Prison is running, services such as food, laundry and medical can be shared. It would be a shame not to use what's already in place. Rest-bit and daycare for those with special needs is a possibility as well. What about juvenile services? I can't imagine that those services are only needed in the southern half of the state. The Center could bring and continue to bring good services to those truly in need.

Please try to put yourself in the shoes of those with loved ones that have special needs. Wouldn't you want to be close to them, to celebrate holidays and special occasions with those you love? Wouldn't you want to see your son, daughter or sibling's progress first hand? If you had to plan a three, four, or five hour drive one way just to see them for a couple of hours, chances are you couldn't make it as often as you would like. Who benefits from that, no one.

We, the staff at the Northern Wisconsin Center for the Developmentally Disabled, see the residents at their worst and at their best. We help them through the bad times and celebrate their successes. We become a part of their family. Families are important, as well as being treated equally and fairly.

Please consider our plea to keep the Northern Wisconsin Center alive and well, and to keep northern Wisconsin alive and well.

Sincerely,

*Cheryl Calkins*

Cheryl Calkins  
534 South Crestwood Court  
Cadott, WI 54727

P. S. Another possible way to reduce spending could be to go to using one license plate instead of two. Many states have one plate. Production costs go down but charge the current fees. That cost cutting measure would be distributed equally.

MAR 10 2003

Dear Senator,

I think Governor Doyle's budget proposal to close Northern Center is the wrong decision. The Northern Center serves 52 counties throughout Wisconsin. It has the best record of the three centers for placing clients in the community.

As a resident care tech., I know what it takes to place clients: It takes familiar caregivers. With the staff turnover at Central, the excessive sick time and overtime usage; I don't think clients will ever be placed. Familiar caregivers know the needs of each client and can make the transition to the community possible. If clients cannot be placed from Central center why not bring them to Northern or Southern center where placement can happen.

Governor Doyle wants to save money by closing Northern Center. Much more would be saved by closing Central Center. Not only is Central Centers property worth more, but the savings from sick time and overtime usage, would be more. Madison can absorb the job loss much better than Northern Wisconsin. The cost of operating Central Center last year was 52.9 million. The cost of operating Northern Center was 29 million.

The bill proposed by legislators Zien and Wood, requires DHFS to terminate all services at Central Center by July 2004 and sell the property. The department would be required to submit a proposal to the Joint Finance committee to terminate services, transfer residents and sell personal property and real estate.

I have worked at the Northern Center for almost 13 years. Also, I have worked as an Aide in a Nursing Home for 24 years. I think that keeping Northern Center and Southern Center open and closing Central Center in Madison, is a much better option.

Sincerely,

*Charles Krueger*

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## NEWS

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### Bill would close center for disabled in Madison

10:40 PM 3/10/03  
Scott Milfred State government reporter

Republican lawmakers want to close a state center for the developmentally disabled in Madison rather than closing most of a smaller center in Chippewa Falls, as Democratic Gov. Jim Doyle has proposed.

The Republican lawmakers, led by Sens. Ron Brown and Dave Zien, both of Eau Claire, argue that more money could be saved by closing the Central Wisconsin Center and selling some or all of its property on Madison's North Side. They also think the Madison economy could more easily absorb several hundred job losses.

A Senate committee will hold a public hearing on the issue today at 1 p.m. in Room 411 South at the Capitol.

The Central Wisconsin Center serves about 350 residents with a staff of about 940. The Northern Wisconsin Center serves about 170 residents with a staff of about 575.

The state's third center for the developmentally disabled is Southern Wisconsin Center in Union Grove near Racine. It serves about 265 residents and employs about 615.

"To keep the two down here open, geographically that means there's two southern centers and no northern center," Brown said Monday at the Capitol.

Brown and Zien have introduced legislation (SB 57) that would require the sale of Central instead of Northern. Seven additional Republicans are co-sponsoring the bill, which could be added to the

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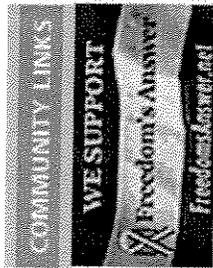
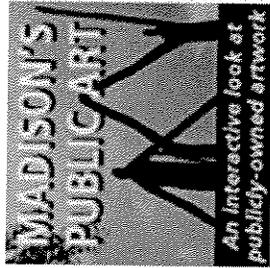
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Legislature's version of the state budget, Brown said.

Jim Malone, spokesman for the Department of Health and Family Services, said closing Central is "unworkable" because 238 of its 353 residents are deemed "most fragile with unstable health conditions." At Northern, only 45 of the 169 residents are so designated.

That means moving residents into community-based programs after a target closing date of July 1, 2004, would be much easier at Northern and probably impossible at Central, Malone said.

To help fix a \$3.2 billion budget deficit, Doyle has proposed closing most of Northern and eliminating a net 300 jobs to save the state \$4.6 million. Brown and Zien are waiting for a Legislative Fiscal Bureau analysis of their proposal.

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**Jermstad, Sara**

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**From:** Michael S. Manske [manskeguinea@yahoo.com]  
**Sent:** Tuesday, March 11, 2003 7:47 AM  
**To:** sen.roessler@legis.state.wi.us  
**Subject:** Senate Bill 57

Dear Senator Roessler:  
-----

I want this e-mail entered and read as testimony during this hearing for "Senate Bill 57":

My name is Michael Manske. I live in Milwaukee. My brother's name is: Scott Manske. This is about my brother's life.

Senate Bill 57 is attempting to close Central Wisconsin Center. Central Wisconsin Center is home for my 23 year old severely retarded brother. This has been his home for the past 19 years. My brother has extensive physical, medical, and psychological needs, and I know these needs are all being met at Central Wisconsin Center. Without CWC, he would not still be alive today. I feel he has the best quality of life living at Central Wisconsin Center. Closing down this Center, will literally compromise his life, along with the other 350 residents. Proponents of closing the CWC say that residents will be "integrated into the community" by being placed in group homes or private care facilities without ample regulations to insure proper quality of care for my brother Scott. I feel that the proponents of the bill don't have the slightest idea how much these people need to stay in an institution such as CWC. They may believe that these residents are more apt and capable than they really are. My brother can't walk. He has the mental capacity of a 14-month old baby (although he is 23 years old). He experiences seizures at a relatively high frequency and takes numerous medications. He is unable to feed he himself. He can't bathe himself or tell someone when he has to go to the bathroom (he can not speak). What some may believe is that these residents, such as my brother Scott, are able to go out into the world and work at McDonald's or bag groceries at a supermarket. He is NOT one of these people. His motor skills and cognitive functioning levels are extremely low. He needs to continue receiving the 24-hour, 7 days-a-week care that he receives at CWC. If not, his life will be compromised.

My brother's life is in your hands (as well as 350 individuals currently living at Central Wisconsin Center). Don't act hastily without getting the facts -- visit Central Wisconsin Center -- do accurate cost studies and a thorough evaluation of whether or not these people benefit.

Thanks you for listening. I look forward to your support.

Sincerely,

Michael Manske  
1606 E. Royall Pl, #2  
Milwaukee, WI 53202

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Do you Yahoo!?  
Yahoo! Web Hosting - establish your business online  
<http://webhosting.yahoo.com>

**Jermstad, Sara**

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**From:** KATHLEEN HART [kathyhrt@msn.com]  
**Sent:** Tuesday, March 11, 2003 8:08 PM  
**To:** Roessler, Carol  
**Subject:** Re: Closing of CWC

Sorry about not including that. My address is

Kathy Hart  
1637 Wyoming Way  
Madison, WI 53704

Thank you for responding.

Kathy

---

----- Original Message -----

**From:** Roessler, Carol  
**To:** KATHLEEN HART  
**Sent:** Monday, March 10, 2003 12:40 PM  
**Subject:** RE: Closing of CWC

Thank you for your email.

Due to the volume of emails I receive, I ask that all emails include a home address. This will ensure that my constituents receive the highest priority. Your assistance is greatly appreciated. I look forward to your response.

Sincerely,

CAROL ROESSLER

State Senator

18th Senate District

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-----Original Message-----

**From:** KATHLEEN HART [mailto:kathyhrt@msn.com]

**Sent:** Monday, March 10, 2003 1:28 PM  
**To:** sen.chvala@legis.state.wi.us  
**Cc:** sen.roessler@legis.state.wi.us  
**Subject:** Closing of CWC

----- Original Message -----

**From:** KATHLEEN HART  
**To:** sen.chvala@legis.state.wi.us  
**Cc:** sen.roessler@legis.state.wi.us  
**Sent:** Monday, March 10, 2003 11:25 AM

Dear Senator Chvala;

Approximately two weeks ago it was announced that Northern WI Center for the Developmentally Disabled would close due to low census of clients and other intended use of the facility. Since this time Senators and Representatives from this area as well as Southern WI Center in Union Grove have presented Senate Bill # 57 to close Central WI Center for the Developmentally Disabled (CWC) in Madison WI.

I oppose the closing of CWC for many reasons. The majority of residents who reside at CWC are in the least restrictive environment as possible. These individuals are profoundly retarded; many suffer from seizures, cerebral palsy and have respiratory and gastrointestinal disorders. CWC furnishes these people with education, respiratory, physical and occupational therapies on a daily basis. CWC is affiliated with physicians from University Hospital and Clinics and would not receive this care if they were moved to another part of the state. These are chronically ill children and adults who need 24-hour care with experienced medical staff and hospitals in close proximity.

Other reasons for opposing closing of Central WI Center include displacement of hundreds of employees.

I believe the senators and representatives who have drafted this bill are acting on their constituents requests. I am asking for the clients who reside at Central WI Center who can not speak on their own behalf. Please oppose the closing of Central WI Center for the Developmentally Disabled.

Thank you for your time.

Kathy Hart

**Jermstad, Sara**

**From:** Bernard Waldkirch [golff8he@athenet.net]  
**Sent:** Monday, March 10, 2003 11:02 PM  
**To:** TWKW@aol.com; sen.zien@legis.state.wi.us; rep.woodj@legis.state.wi.us; rep.suder@legis.state.wi.us; rep.kreibich@legis.state.wi.us; rep.hines@legis.state.wi.us; rep.balow@legis.state.wi.us; rep.ladwig@legis.state.wi.us; rep.lasee@legis.state.wi.us; rep.musser@legis.state.wi.us  
**Cc:** sen.reynolds@legis.state.wi.us; sen.roessler@legis.state.wi.us; sen.brown@legis.state.wi.us; sen.weich@legis.state.wi.us; sen.schultz@legis.state.wi.us; sen.robson@legis.state.wi.us; sen.chvala@legis.state.wi.us; sen.jauch@legis.state.wi.us; sen.carpenter@legis.state.wi.us  
**Subject:** Re: Senate Bill 57

**From:** TWKW@aol.com  
**Date:** Sat, 8 Mar 2003 19:17:00 EST  
**To:** sen.zien@legis.state.wi.us, rep.woodj@legis.state.wi.us, rep.suder@legis.state.wi.us, rep.kreibich@legis.state.wi.us, rep.hines@legis.state.wi.us, rep.balow@legis.state.wi.us, rep.ladwig@legis.state.wi.us, rep.lasee@legis.state.wi.us, rep.musser@legis.state.wi.us  
**Cc:** sen.reynolds@legis.state.wi.us, sen.roessler@legis.state.wi.us, sen.kanavas@legis.state.wi.us, sen.brown@legis.state.wi.us, sen.weich@legis.state.wi.us, sen.schultz@legis.state.wi.us, sen.robson@legis.state.wi.us, sen.chvala@legis.state.wi.us, sen.jauch@legis.state.wi.us, sen.carpenter@legis.state.wi.us  
**Subject:** Senate Bill 57

Dear Senators Zien, Brown, Representatives Wood, Suder, Kreibich, Hines, Balow, Ladwig, Lasee, Musser:

Dear Senators:

As grandparents of Andrew Waldkirch, a resident of Central Center, I am writing to describe my dismay at the introduction of this Bill, to discontinue this facility a year from now.

I am a retired family physician, who practiced in De Pere for over forty years. My wife and I looked forward to the arrival of Andrew almost from conception. A tragic pre-delivery event resulted in the birth of a severely handicap human being. He is unable to eat, move purposely, talk, see, and is probably deaf. The care he has received at Central Center has been amazing to me.

He is now 16 years of age. Since admission to central center he has not had a bed sore, or any pressure ulcer. He has had

several operations to correct bone or joint problems resulting from the fact he cannot walk or bear weight. So far as I know, he has had not adverse effects from these surgeries, such as post-op pneumonia, etc. The care he has received for these sixteen years, to accomplish this result, is far better than I could have anticipated.

This was accomplished by a devoted nursing staff, first of all. It was also accomplished by the professional services available at the University of Wisconsin Medical school and ancillary programs. I hope that the legislature will preserve the Central Center in its present location, where the finest medical care is available in Wisconsin, from the appropriate care givers in several fields, located close by.

If I can be of help to you in any role in this endeavor, please let me know. We will be grateful for whatever you can do.

Dr. and Mrs. Bernard Waldkirch,  
867 St. Francis Rd. W  
De Pere, WI 54115

email--[golf8he@gbomline.com](mailto:golf8he@gbomline.com)  
or [golf8he@athenent.net](mailto:golf8he@athenent.net)  
or 920-336-4172



**Carol Roessler**  
STATE SENATOR

To: Members of the Senate Committee on Health, Children, Families, Aging  
and Long Term

From: Senator Carol Roessler

Date: March 11, 2003

Re: Written Testimony in response to Senate Bill 57

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The following letters are from individuals who have requested that their comment pertaining to Senate Bill 57 be submitted to the Senate Committee on Health, Children, Families, Aging and Long Term Care as written testimony.

Their names will be recorded in the committee report on Senate Bill 57 as having testified.

March 11, 2003

To: Senator Carol Roessler

From: Melissa Anderson  
308 W. Elm St.  
Chippewa Falls, WI 54729  
(715) 720-9064  
[mmanderson67@aol.com](mailto:mmanderson67@aol.com)

*Submit for  
Testimony*

Re: Hearing on SB57

I am offering testimony today as an advocate for people with developmental disabilities and as a resident of Chippewa County.

For the past 12 years, I have worked for a not-for-profit agency. I currently supervise five residential programs for adults with developmental disabilities. A major part of my job is to develop a home in the community for people who are moving from their current placement (often Northern Center). I have seen firsthand what a difference can be made in a person's life when they are offered choices about things that just can't be offered in an institutional setting (i.e. what to make for supper, showering or bathing, running out for an ice cream cone with one other person instead of 10, etc...). While these are things you and I take for granted, they are choices that a person living in an institutional setting never gets to make. I have seen the parents struggle and fight against community placement and understand that it is coming from fear and guilt. But, I have witnessed these same parents, 6 months after their child has been living in the community, weeping and thanking me for giving their child a new life. In 12 years, I have not witnessed one community placement that wasn't positive. So, obviously I am an advocate for community placement.

That said, the issue is really which of the Centers to close. Central Center is medically based. Their staff are trained to deal specifically with medically fragile children and adults. They are key players in genetic research, particularly Down Syndrome. And, because of their proximity to Madison, Milwaukee, and Chicago, they have access to technology and resources that northern Wisconsin doesn't offer. While Northern Center has certainly done a nice job of caring for people, they don't have the training or facilities necessary to care for children or medically fragile individuals. NWC's census is at its lowest point and the cost per day is at its highest. While I am sympathetic, keeping it open purely to appease its staff just doesn't make sense.

As a resident of Chippewa Falls for most of my 35 years, I also realize that the closing of Northern Center would affect the economy of the area. Those employees of Northern Center are accustomed to the salary and benefits a state job ensure. However, the closing of Northern Center would, invariably, create other positions to serve those individuals that would be moving into the community. In addition, the land that Northern Center sits on would be prime land that could be used to attract industry to the area.

In summary, I support the Governor's proposal to close Northern Center.

March 11, 2003

Teresa Bell Stone  
E10006 County Road C  
Elk Mound, WI 54739

Re: Hearing on SB57, Submit for Testimony

To Whom It May Concern,

I am writing in response to the hearing regarding the closing of Central Center as an alternative to closing Northern Center.

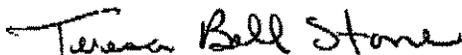
I have worked in the human services field for the past thirty years. My experience has included time in nursing homes, institutions and supervised living situations in the community.

The past few weeks, have brought many individuals who work at Northern Center, to the front of the news. Radio talk shows, opinion pages and news stories have carried their plight. I certainly understand their fear of an uncertain employment future. It has also distressed me to hear the old "horror stories" appear in these opinions. As an advocate of community placement, I have heard these stories over and over through the years.

My experience in human services, has shown the opposite to be true. I see individuals who previously lived in the institution, living in beautiful homes, with one to three other individuals. I see care givers who frequently have a university degree, or are working on a degree for a future in the field of human services. I see individuals who receive a great deal of one on one attention and many opportunities to live as normal a life as possible. I would invite any person who has doubt, to visit Northern Center, then visit one of the many community homes for people with disabilities. Decide where you would want to live.

As a taxpayer, I do not believe we can afford to pay the \$500.00 plus per day to keep a person in an institution. Community placements are, almost always, well under this cost. I also believe it is a mistake to state the large number of lost jobs now being expressed, if the Northern Center were to close. Community placements would simply transfer jobs to a different location, the community. I support the Governor's proposal to close Northern Center.

Sincerely,



Teresa Bell Stone

**Jermstad, Sara**

**From:** Berg [berg@globaldialog.com]  
**Sent:** Monday, March 10, 2003 11:15 AM  
**To:** Sen.Roessler@legis.state.wi.us  
**Cc:** Mary Brynes  
**Subject:** SB 57 - Central Center Closing

I received information late Friday regarding the public hearing being held tomorrow re: this bill . I am not able to attend, but would like to submit these brief comments.

Under the proposed SB 57, as I understand it, Central Center would close effective 7-1-2004. I have used the Short Term Care Unit (STCU) several times for my daughter, Hannah, who is severely physically disabled and profoundly cognitively disabled. She is able to walk with assistance. She requires total assistance for her activities of daily living. This past summer she had surgery on her knees and feet which required casts on her legs up to her hips. I was unable to handle her at home. She stayed at the STCU for a recovery period and until the doctor applied short casts - she was still non-weight bearing at that point. I don't know what I would have done if this service was not available. Madison is only a one hour drive from our house so I was able to visit her often.

The STCU provides a valuable service of extensive evaluations which help greatly in caring for my daughter at home as well as helping her reach her full potential. There is no other place I know of that has such knowledgeable and caring staff, who are comfortable in dealing with individuals who are severely and profoundly disabled.

PLEASE DO NOT DO AWAY WITH THE SHORT TERM UNIT.

Thank you  
Cheryl Berg  
mother of Hannah Berg, Age 10

03/10/2003

**Jermstad, Sara**

**Subject:** FW: 2003 Senate Bill 57

**Importance:** High

-----Original Message-----

**From:** Sheri Hartzheim [mailto:shartzheim@Banta.com]

**Sent:** Friday, March 07, 2003 4:21 PM

**To:** 'sen.roessler@legis.state.wi.us'

**Subject:** FW: 2003 Senate Bill 57

**Importance:** High

Senator Roessler,

Please see my letter below. In addition to it, I would like to add:

Please submit my e-mail letter as a written testimony at the hearing Tuesday March 11, 2003 for Senate Bill 57. I would like my letter to be read at this hearing to the committee for SB 57.

I have also sent e-mail letters to the Senators on your committee regarding this issue.

Thank you.

Sincerely,

Sheri S. Hartzheim

-----Original Message-----

**From:** Sheri Hartzheim

**Sent:** Friday, March 07, 2003 2:53 PM

**To:** 'sen.roessler@legis.state.wi.us'

**Cc:** Mom and Dad Hartzheim (E-mail); Mom Hartzheim (E-mail)

**Subject:** 2003 Senate Bill 57

**Importance:** High

Dear Senator Roessler,

I am writing to you as a concerned relative of a resident at the Central Wisconsin Center for the Developmentally Disabled. I am strongly opposed to

03/11/2003

Senate Bill 57 and ask that the Committee on Health, Children, Families, Aging and Long Term Care and you, as Chairperson, consider the information contained in this letter.

This bill, as you know, proposes the closing of the Central Wisconsin Center for the Developmentally Disabled (CWC). I cannot imagine the life that my sister-in-law, Missy Hartzheim, would have should the CWC close and her home be lost. Missy has spent many years at CWC and has had the care and attention that she's needed from the professionals there. Before her move to CWC, her continual grand mal seizures (as many as 24 a day) made living in her family's home impossible. Try as they did (with countless hours of volunteer assistance from family, friends and neighbors in Winneconne, WI), Missy's family could no longer give her the continual care and medical attention she needed in their home. It was a heart-wrenching decision for her parents to make; but Missy NEEDED CWC in order to LIVE, not just for a semblance of well-being. Without the CWC, Missy would no doubt have received sub-par care living in a less safe facility or even died in her family home.

Governor Doyle's 2003 budget proposes the closing of the Northern Wisconsin Center for the Developmentally Disabled (NWC). It is my assumption that Governor Doyle does not like the idea of displacing ANY of the developmentally disabled in the state of Wisconsin. However, since his budget calls for the closing of that facility, I assume that he and his staff also put much thought into the ramifications of closing any one of the three Wisconsin Centers for the Developmentally Disabled and have a proposal for how to care for those displaced by his proposal (those currently residing in the NWC in Chippewa Falls, WI).

In my research, I have found two significant items I would like to point out to you. First, the CWC is a larger facility, containing 477 licensed beds (versus the 260 offered by the NWC). Thus, fewer displacements of residents would occur with the closing of NWC than with the proposed closing of CWC in Senate Bill 57. As I'm sure that you can imagine, this will not be an easy process for those residents and their families; but both the emotional and the financial impact to 260 residents (and their families) versus the same impact on 477 residents (and their families) is no doubt less. I have great empathy for those who will be displaced. But I know that fewer families will have to experience the difficulties of such a move if the NWC is closed rather than the CWC.

You may think that closing the larger facility (CWC) would be beneficial to the Wisconsin since it would seemingly save the state money in these times of state budget crises. However, I assure you that the costs of closing the larger facility would, in fact, be greater -- both in terms dollars needed to transfer those displaced out of a state facility into group homes or elsewhere and the lives affected by such a facility closure. And those like Missy, who cannot in any way be placed in a group home (or the like) due to her seizure disorders and other profound medical needs, will still need a medical facility like CWC for long-term care.

Second, I cite the 2001 Consumer Information Reports for Facilities for the Developmentally Disabled (FDD) when I state that the NWC had a greater number of federal regulation deficiencies and a greater number of federal building safety violations than the CWC. Granted, both facilities' violations were BELOW the statewide averages for federal regulation deficiencies and building safety violations (-- kudos to the operations management of these state-owned facilities!). However, here are the numbers in comparison:

	Federal Regulation Deficiencies	Federal Building Safety Violations
CWC	3	2
NWC	5	14

It is apparent to me from these statistics that the NWC is not as safe or as well-run as the CWC. Thus, I agree with the Governor's budget proposal in this matter and hope that you, too, will see that the proposal to close the NWC is better for the RESIDENTS AND FAMILIES and for ALL state of Wisconsin residents than the closing of CWC. A decision to close any of these facilities is a weighty one, no doubt. But I hope you keep this letter in mind when you and your committee consider Senate Bill 57 and when the Senate votes on this bill..... and I hope you vote NO.

Thank you for your time.

Sincerely,

Sheri S. Hartzheim  
1053 Tayco Street  
Menasha, WI 54952

**Jermstad, Sara**

**Subject:** FW: Vote to KILL Senate Bill 57

-----Original Message-----

**From:** rick@accratec.com [mailto:rick@accratec.com]

**Posted At:** Friday, March 07, 2003 5:13 PM

**Posted To:** Sen.Roessler

**Conversation:** Vote to KILL Senate Bill 57

**Subject:** Vote to KILL Senate Bill 57

Dear Senator Roessler,

Please submit my written letter as written testimony at the hearing Tuesday March 11, 2003 for Senate Bill 57. I would like my letter to be read at this hearing to the committee for SB 57.

I am writing to you to ask that you vote AGAINST Senate Bill 57 which proposes the closing of the Central Wisconsin Center for the Developmentally Disabled (CWC). My sister has lived at CWC for the past 35 years. In addition to being severely and profoundly retarded, Missy suffers from very extensive medical problems, including but not limited to frequent grand mal seizures. She requires the kind of 24 hour hospitalization that can only be found at CWC.

Over the past 30 years, the state has dramatically cut the size and scope of the facilities devoted to the care of the developmentally disabled. Many patients were transferred to group homes and other such facilities. Only those with the most profound medical needs have remained in the care of the three Wisconsin Centers. Virtually everyone that could possibly be shipped elsewhere has already been moved out. Those who still live at CWC are not merely special ed students with low IQ's. They are for the most part physically and mentally disabled in a literal medical sense. They can not be cared for in group homes or the homes of their families. There are no alternatives for the residents of the CWC.

I strongly support many of the budget cuts that have been proposed. However, the closing of CWC can not be considered purely in monetary terms. This is not a debate about whether some UW extension "needs" new bleachers for the football field or if Menasha "needs" marble floors in their new library. This is a decision that will literally determine the very health and possibly survival of hundreds of people.

I believe that it is the fundamental responsibility of the State to care for those who can not care for themselves. I trust that you will do the right thing and vote to KILL Senate Bill 57.

Thank you,

Rick Hartzheim  
1053 Tayco Street  
Menasha, WI 54952  
rick@accratec.com

03/11/2003

## Jermstad, Sara

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**From:** Michael S. Manske [manskeguinea@yahoo.com]  
**Sent:** Tuesday, March 11, 2003 7:47 AM  
**To:** sen.roessler@legis.state.wi.us  
**Subject:** Senate Bill 57

Dear Senator Roessler:

-----

I want this e-mail entered and read as testimony during this hearing for "Senate Bill 57":

My name is Michael Manske. I live in Milwaukee. My brother's name is: Scott Manske. This is about my brother's life.

Senate Bill 57 is attempting to close Central Wisconsin Center. Central Wisconsin Center is home for my 23 year old severely retarded brother. This has been his home for the past 19 years. My brother has extensive physical, medical, and psychological needs, and I know these needs are all being met at Central Wisconsin Center. Without CWC, he would not still be alive today. I feel he has the best quality of life living at Central Wisconsin Center. Closing down this Center, will literally compromise his life, along with the other 350 residents. Proponents of closing the CWC say that residents will be "integrated into the community" by being placed in group homes or private care facilities without ample regulations to insure proper quality of care for my brother Scott. I feel that the proponents of the bill don't have the slightest idea how much these people need to stay in an institution such as CWC. They may believe that these residents are more apt and capable than they really are. My brother can't walk. He has the mental capacity of a 14-month old baby (although he is 23 years old). He experiences seizures at a relatively high frequency and takes numerous medications. He is unable to feed he himself. He can't bathe himself or tell someone when he has to go to the bathroom (he can not speak). What some may believe is that these residents, such as my brother Scott, are able to go out into the world and work at McDonald's or bag groceries at a supermarket. He is NOT one of these people. His motor skills and cognitive functioning levels are extremely low. He needs to continue receiving the 24-hour, 7 days-a-week care that he receives at CWC. If not, his life will be compromised.

My brother's life is in your hands (as well as 350 individuals currently living at Central Wisconsin Center). Don't act hastily without getting the facts -- visit Central Wisconsin Center -- do accurate cost studies and a thorough evaluation of whether or not these people benefit.

Thanks you for listening. I look forward to your support.

Sincerely,

Michael Manske  
1606 E. Royall Pl, #2  
Milwaukee, WI 53202

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Do you Yahoo!?  
Yahoo! Web Hosting - establish your business online  
<http://webhosting.yahoo.com>

**Jermstad, Sara**

---

**From:** Diane Santi [dedewood@yahoo.com]  
**Sent:** Monday, March 10, 2003 11:57 PM  
**To:** sen.roessler@legis.state.wi.us  
**Subject:** 2003 Senate Bill 57

Dear Senator Roessler:

As Chairwoman of the Health, Children, Families, Aging & Long-Term Care Committee you will be conducting a hearing on "Senate Bill 57". The hearing is scheduled for March 11, 2003 - tomorrow!!! (Unless it is postponed.) I implore you to look beyond the simple dollars and cents issue, and see that this involves the lives of many.

-----  
-  
I want this e-mail entered and read as testimony during this hearing for "Senate Bill 57":

My name is Diane Santi. I live in Cudahy, Milwaukee County. My son's name is: Scott Manske. This is about my son's life.

Senate Bill 57 is attempting to close Central Wisconsin Center. Central Wisconsin Center is home for my 23 year old profoundly retarded son. This has been his home for the past 19 years. My son has extensive physical, medical, and psychological needs, and I know these needs are all being met at Central Wisconsin Center. I have been actively involved in his care and with his caregivers for the last 19 years. I feel he has the best quality of life living at Central Wisconsin Center. Closing down this Center, will literally compromise his life, along with the other 350 residents. I am at a loss to understand the reasoning behind this proposed closing, but I believe it is about saving money.

However, the closing of CWC will not necessarily save the State money. The needs of the 350 residents are extensive, and not easily shifted to other caregivers.

For example: (From Fact Sheet dated 9/15/02 supplied by Ted Bunck, PhD, Center Director)

285 individuals are totally dependent on others for bathing.

216 individuals are totally dependent on others for dressing.

314 individuals are totally dependent on others to use the toilet.

258 individuals are totally dependent on others for eating their meals.

288 individuals are non-ambulatory.

180 individuals are fed by tube, and this occurs 570

times in a 24-hour period, all individuals have medically prescribed diets; 160 of those diets are mechanically altered or textured based on individual needs, 123 individuals are on therapeutic diets. These specialized diets are prepared three times a day, every day of the year.

106 individuals have limited or no vision.

265 individuals have limited or no hearing.

An average of 16 doses of medication are prescribed, dispensed, and administered per resident every 24 hours. There are approximately 5480 medications administered every 24 hours.

Additionally, there is a Centerwide total of 742 other prescribed nursing treatments or interventions given across the Center during every 24-hour period.

91 individuals have a history of fractures or very fragile bones due to medical conditions. These individuals require extremely careful lifting and transfer protocols.

246 individuals receive physical therapy, and 280 receive occupational therapy services.

63 individuals receive regular respiratory therapy 3-4 times per week.

25 individuals have tracheostomies. An average of 37 tracheostomy changes are performed each month.

75 individuals have psychiatric needs required medication.

264 individuals are being treated for seizures.

There are no instances of skin breakdowns or decubitus ulcers even though this is a group of individuals particularly susceptible to this condition.

54 individuals have problems with regulating body temperatures.

As you see by the above, these individuals have very special needs. I invite you and your committee to tour Central Wisconsin Center, so you can see for yourself these very special individuals.

The "saving money" issue is not just black and white. Before an argument regarding the actual cost savings by closing this Center, accurate cost comparisons need to be done. Questions as simple as: What is the daily care rate?, Explanations as to what makes up this actual daily care rate? What exactly are Administrative overhead expenses? What is the actual Medicaid reimbursement received? What is the actual 40% State expense???

How can a bill be out there proposing the closing of this Center with all these unanswered questions?? What about the lives of these 350 individuals versus saving money?? What money? How much?

My child's life is in your hands (as well as 350

individuals currently living at Central Wisconsin Center). Don't act hastily without getting the facts -- visit Central Wisconsin Center -- do accurate cost studies.

Thanks you for listening. I look forward to your support.

Sincerely,

Diane Santi  
3259 E. Ramsey Avenue  
Cudahy, WI 53110  
(414-769-8277)

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LUTHERAN SOCIAL SERVICES  
OF WISCONSIN AND UPPER MICHIGAN

FAX

TO: Senator Carol Roessler

DATE: 3-11-03

Number of pages including cover sheet: \_\_\_\_\_

PHONE: 608-266-5300

FAX: 608-266-0423

FROM: Lutheran Social Services  
of Wisconsin & Upper  
Michigan, Inc.

CC: \_\_\_\_\_

NAME: Barb McRae

PHONE: (715) 833-0992

FAX: (715) 833-9466

REMARKS:  Urgent  For your review  Reply ASAP  Please Comment

Please submit as testimony  
for SB 57 hearing today.

Thank You!

This telefaxed information is intended for the use of the individual or entity to which it is addressed and contains information that is CONFIDENTIAL. Furthermore, this information may be protected by Federal law relating to confidentiality (42 CFR Part 484.10 (d) prohibiting any further disclosure. If the reader of this message is not the intended recipient or the employee or agent responsible for delivering this message to the intended recipient, you are hereby notified that any review, dissemination, distribution, or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone and return the original message to us at the above address via mail. Thank you.

March 11, 2003

TO: Wisconsin Senate Committee on Health, Children, Families and Long Term Care

FROM: Barbara McRae  
421 W. Mac Arthur Avenue  
Eau Claire, WI 54701

RE: SB 57

I am writing to express my opinion on the **proposed Senate Bill 57** that has been introduced to close Central Wisconsin Center, while keeping Northern and Southern Centers open. I have worked in the social service field for 19 years; 17 of those years I have worked with adults and children with developmental disabilities. Most of this time I have worked in Chippewa Falls and Eau Claire.

For 3 years I worked as a Case Manager for the Chippewa County Department of Human Services. During this time, I had individuals on my caseload that lived at Central Center and those who lived at Northern Center. In all of my experiences, **the individuals who lived at Central Center were far more medically involved and fragile than those living at Northern Center.** I was always impressed with the level of care and knowledge of the staff at Central. The medical team and research that was happening was unmatched. It is my belief that the location of Central Center and the proximity to the medical technologies are key for individuals they are serving. While Northern Center staff I observed provided good care, it was not the same medical care that is found at Central.

Since working as a Case Manager, I have worked the last 13 years for a not-for-profit agency that serves individuals in the community. **I have found that there are very few people that the community service providers cannot serve.** In my experience, there are many individuals with disabilities residing at Northern Center (and probably at the other centers) because their guardian and/or family members are against community placement. They are afraid due to horror stories they have heard and/or because of a lack of resources in their own communities.

It is important for all on your committee and in the senate to remember: people in Wisconsin are living unnecessarily in institutions! **We all fight to keep our parents or selves out of nursing homes because of the institution setting, and feeling like a number. Why are we not fighting to keep and take people out of institutions for the same reasons?** Individualized care in a natural setting is a must. People with disabilities are not able to sound their voices for themselves, therefore people like myself, who feel passionately about this issue must speak out against institutional care. I have worked with many families who have been afraid of making the change to the community for their loved one, but in each case, those same families have been so delighted by the changes that the person made in the community. I worked very closely with a mother who went to court to fight her daughter's community placement. At the first WATTS review after the placement, I sat with the mother who tearfully thanked us for her daughter's "new life". "I never knew it could be so good" she said.

I have talked to other parents whose hearts were aching when I suggested community placement. They loved their son or daughter, and yet had placed them in an institution at some point in time due to a lack of community services and support. For me to tell them their daughter or son could now live in the community was like telling them they hadn't done a good job as a parent. There are so many emotions wrapped up in this issue. Please don't be swayed by emotion. Do the right thing by closing Northern Center now. The timing is right; the census is low and the residents will be able to live in the community. It is time to close the doors and work together for the betterment of all people.

I would be very happy to explain my position further if you have questions. I can be reached at home by email: [mcraepack@msn.com](mailto:mcraepack@msn.com) or by telephone (715)834-3619.

**PLEASE submit my letter as testimony for the SB 57 hearing on March 11, 2003 at 1:00 pm.**

# **Survival Coalition of Wisconsin Disability Organizations**

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16 North Carroll Street, Suite 400, Madison, Wisconsin 53703  
(608) 267-0214 voice/tty • (608) 267-0368 fax

March 11, 2003

To: Senator Carol Roessler, Chair, and Members  
Senate Health, Children, Families, Aging and Long Term Care Committee

From: Survival Coalition of Wisconsin Disability Organizations

Subject: Opposition to SB 57

The Survival Coalition has been on record for the last three biennial budgets in favor of closing both Northern Wisconsin Center and Southern Wisconsin Center. We believe that the community service system in Wisconsin is capable of appropriately serving all of the residents of these facilities, and doing it now. We actively encouraged the Doyle Transition Team and DHFS Secretary Nelson to consider closing both facilities.

We also believe that Central Wisconsin Center can eventually be closed, adding Wisconsin to the growing list of states with no state institutions for persons with developmental disabilities. However, the residents of Central Center include more people with complex medical problems which will require special planning at the county, provider and health care professional level for them to move into community living arrangements. Although there are people living in the community with complex medical needs already, counties have not had as much experience with this population.

When Governor Doyle announced his intention to close Northern Center, our reaction was "that is a good place to start." 44 organizations signed onto the attached proclamation in support of the proposal, including county and aging organizations. Northern Center has the smallest number of people to plan community placements for, and it has already been determined that a higher percentage of them can be served at the Governor's proposed \$325/day rate for Community Integration Program 1A than would be the case for Central Center residents.

Our concern about SB 57 is that in order to close Central Center, it will be necessary to transfer a large number of residents to Northern and/or Southern Center. We are not supporting institution transfer; we are supporting institution downsizing and closing. We also knew that in the case of county and private institutions where people have had to transfer to another institution before they could move to the community that the person is subjected to "transfer trauma" twice. This has been very difficult for some individuals.

# Survival Coalition of Wisconsin Disability Organizations

16 North Carroll Street, Suite 400, Madison, Wisconsin 53703  
(608) 267-0214 voice/tty • (608) 267-0368 fax

March 11, 2003

To: Senator Carol Roessler, Chair, and Members  
Senate Health, Children, Families, Aging and Long Term Care Committee

From: Survival Coalition of Wisconsin Disability Organizations

Subject: Opposition to SB 57

*Rhode Island*  
*No centering money*  
*Set up State Center group - WK group - this Council is Sunday group*

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*Disabilities coalition*

*if center closed would be moved from 1 to another*

February 19, 2003

## **WE SUPPORT GOVERNOR DOYLE'S DECISION TO END LONG TERM PLACEMENTS AT NORTHERN WISCONSIN CENTER FOR THE DEVELOPMENTALLY DISABLED**

### **WHEREAS:**

173 people with developmental disabilities currently reside at Northern Wisconsin Center (NWC) in Chippewa Falls, at an annual cost of \$29 million. The Governor proposes to enable the residents to return to their home communities via the Community Integration Program. The Governor's plan includes sufficient funding to provide quality community services for all current NWC residents.

Wisconsin has a higher proportion of people with disabilities in public and private institutions than all but a handful of other states. Wisconsin is one of only 12 states that have not closed a state institution for people with developmental disabilities. The Americans with Disabilities Act ensures the right of virtually every person in an institution to live in the community.

Wisconsin has successfully placed over 1,080 former Center residents via the Community Integration Program 1A (CIP 1A) since 1983. State and county governments have developed safeguards to assure the health and safety of individuals who move from the Centers into the community. 96% of the guardians of CIP1A participants report that they are satisfied with the services received.

It is not fiscally responsible to maintain three institutional campuses to serve the current combined census of under 800 residents; the excess administrative costs have led to an inflated cost per person of \$500/day at NWC. No longer using NWC as a long term residence will result in a savings of state and federal tax dollars in the 2003-05 biennium and in the future.

Ending long term placements at NWC will create an opportunity to capitalize on the skills of the Center staff and their relationships with residents by enabling them to develop and/or work in community programs which will serve former Center residents.

We believe that the state of Wisconsin has both the authority and the responsibility to downsize state-run facilities to achieve administrative and fiscal efficiencies.

**CONSEQUENTLY, WE BELIEVE THAT FOR POLICY, FISCAL, LEGAL AND HUMANITARIAN REASONS, IT IS TIME FOR WISCONSIN TO END LONG TERM PLACEMENTS AT NORTHERN WISCONSIN CENTER AND ENABLE THE RESIDENTS TO RETURN TO THEIR HOME COMMUNITIES.**

~~ADAPT - WI  
Arc Eau Claire  
ARC - Milwaukee  
Arc-Wisconsin  
Access to Independence  
Autism Society of WI  
Barrier Busters  
Brain Injury Association - WI  
Coalition of Wisconsin Aging Groups~~

~~North Country Independent Living  
Options for Independent Living  
People First of WI  
REM  
Rehabilitation for Wisconsin  
Ranch Community Services  
Respite Care Association of WI  
State Independent Living Council  
Survival Coalition of WI Disability Organizations~~

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*Arc-Wisconsin*  
*Access to Independence*  
*Autism Society of WI*  
*Barrier Busters*  
*Brain Injury Association - WI*  
*Coalition of Wisconsin Aging Groups*  
*Community Alliance of Providers of WI*  
*Community Living Alliance*  
*Creative Community Living Services, Inc.*  
*Dungarvin*  
*Eisenhower Memorial Cerebral Palsy Work Center*  
*Family Voices*  
*Grassroots Empowerment Project*  
*Hearthstone*  
*Independence First*  
*Independent Living Resources*  
*Mental Health Association - Milwaukee*  
*Midwest Community Services, Inc.*  
*New Horizons North*

*North Country Independent Living*  
*Options for Independent Living*  
*People First of WI*  
*REM*  
*Rehabilitation for Wisconsin*  
*Ranch Community Services*  
*Respite Care Association of WI*  
*State Independent Living Council*  
*Survival Coalition of WI Disability Organizations*  
*UCP - South East WI*  
*UCP - West Central WI*  
*UCP - WI*  
*WI Association of Family & Children's Agencies*  
*WI Board on Aging & Long Term Care*  
*WI Coalition for Advocacy*  
*WI Coalition of Independent Living Centers*  
*WI Council on Developmental Disabilities*  
*WI Council on Physical Disabilities*  
*WI County Human Service Association*  
*WI Disability Rights Coalition*  
*WI Family Ties*  
*WI Personal Services Association*

# Committee Meeting Attendance Sheet

## Committee on Health, Children, Families, Aging and Long Term Care

Date: 3/11/03 Meeting Type: Public Hearing  
Location: 411 South

<u>Committee Member</u>	<u>Present</u>	<u>Absent</u>	<u>Excused</u>
Senator Carol Roessler	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Ted Kanavas	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Ronald Brown	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Robert Welch	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Dale Schultz	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Judith Robson	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Charles Chvala	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Robert Jauch	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Tim Carpenter	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Totals: 9 \_\_\_\_\_