Our Experience of Transition/Discharge Planning

Dear Committee Members,

We would like to share our experience with the transition planning process from out-ofstate residential placement to adult placement in New Mexico. At an earlier meeting of this subcommittee, Dauna Howerton reported that New Mexico has a good process. . The transition process is more like two agencies handing off a baton or passing off a hot potato while various people listen in on monthly conference calls. The transition process never considers that New Mexico's adult placements might not meet the level of care needed by those placed out of state as children.

We are 31 days away from John Paul Taggart's discharge from his current placement, and we have no certain placement to receive him. We have no commitment from Molina to fund a medically necessary treatment placement.

No transition planning was initiated despite a court order for two years' transition planning. Dan had to contact officials such as Cathy Stevenson to get the process started.

The planning process has been bureaucratic, enabling agencies to check off participation. The planning has not been clinical. There was no discussion whatsoever of discharge criteria.

The state has ample documentation of our son's numerous challenging behaviors from his current placement, yet the state offered the same level of care as was offered previously, a level of care inadequate for our son. We have been told, "We can only work with what we have. We can't work with what we don't have."

It could not have been the judge's intention to have New Mexico merely offer what was available two years ago. The judge meant the state to plan to meet the real needs of an actual person.

Real planning only commenced in the first week of May 2016, when two certified behaviorists from the CDD observed John Paul at his current placement. They reported that his behaviors had to be reduced prior to his discharge, or he would not be able to return to New Mexico. Their offer to return to our son's placement, perform additional assessments, and train his current staff was rejected by Molina, saying "There's no money."

Our son remains a danger to himself and others. He cannot live in the off campus group home associated with his current placement. There has never been a professional evaluation of our son concluding group home placement is appropriate for him. The court order implied cooperation between Molina and DDWaiver. John Paul could only go to a group home (if ever at all possible) if there was an enormous commitment of resources not usually provided. Throughout the meetings state agencies (with the exception of the CDD) have refused to authorize needed services and goods.

On Tuesday 8/23/2016, DDSD and DDWaiver agreed that John Paul's needs could not be met in New Mexico. If planning had begun to meet the stipulated April 2015 deadline, we would have known a year and a half ago that John Paul needed an inpatient hospitalization level of care, not discharge to a group home in the community.

He meets admission criteria for the Neurobehavioral Unit at Kennedy Krieger Institute in Baltimore, MD. The unit is highly specialized and treats severely challenging behaviors. The wait for an opening can be as long as a year.

While awaiting an opening, he may have the opportunity to receive behavioral treatment in Colorado while living in a residence for those who have failed previous placements. Both of these options were made known to us through the diligence of the CDD, not Molina, DDSD, or BHSD.

HSD has not met the requirements of the court order, and has certainly not met the needs of our son.

Students placed out-of-state because they are a danger to themselves and others do not lose their disability when they turn 22. New Mexico needs to develop adult placements that can serve and safeguard these young adults. If this were done, the money sent to other states could remain in New Mexico, providing jobs for entry level workers and college students as well as attracting professionals to our beautiful state.

Living in the same state as their siblings could improve the quality of life for those requiring an institutional level of care, maintaining family ties with those who might assume legal guardianship when the parents no longer can.

New Mexico must recognize that a small percentage of its citizens cannot be served in the community. To offer only one level of care is tantamount to abuse and neglect.

Dan and Barbara Taggart