

July 8, 2019

Sent Via Email

Andrew Reese
Director
Winslow Woodland
Deputy Director
D.C. Department on Disability Services
250 E Street, S.W.
Washington, D.C. 20024

Dear Mr. Reese and Mr. Woodland,

We are writing to express concern regarding the Department on Disability Services' (DDS) decision not to continue the Health Initiative through a contract with Georgetown University's Center for Child and Human Development. The Health Initiative has provided vital support to DDS and providers for the past 14 years and has been instrumental in improving health care outcomes for District residents with intellectual disabilities and complex health care needs.

A focus of the longstanding Evans litigation was the failure of the District to ensure Evans class members were provided with adequate health care. The Evans Court Monitor documented the significant harm and sometimes death suffered by class members as a result of the District's failure to provide adequate health care to DDS consumers living in District-funded residential placements. The District initiated the contract with Georgetown to address and remedy these deficiencies. The Health Initiative played a critical role in the progress DDS has made in the area of health care as it has provided necessary technical assistance and training to provider staff and to other medical and clinical personnel who support and care for DDS consumers with serious medical needs.

The Health Initiative has improved the coordination of care for DDS consumers with serious health needs and has acted to ensure the proper treatment and medication regimens are in place. In addition to training provider staff, the Health Initiative provides invaluable hands-on assistance when DDS consumers are hospitalized and provides support to hospital staff with diagnoses, treatment and discharge planning. Their clinical expertise and their commitment to working alongside hospital staff has significantly improved health care outcomes for individuals with complicated health care needs. We have seen firsthand the positive impact the Health Initiative has had on the health and the lives of DDS consumers. For example, the Health Initiative was instrumental in ensuring that a DRDC client received life-sustaining medical care when he was hospitalized with a serious pressure sore. His medical team recommended surgery but the client was scared and refused to consent to the surgery. A nurse from the Health

Initiative met with the client and took the time to explain the need for the surgery (which resulted in the client consenting to have the surgery) and also worked with the hospital staff and doctors to coordinate his care. After the surgery, the Health Initiative nurse educated the direct care staff and provider nurses on his treatment needs. DDS nurses and staff did not provide this necessary support for the client. The Health Initiative's involvement avoided further hospitalization of the client, which was instrumental in improving his health and decreased the medical costs to the District.

The residential providers who support DDS consumers have expressed grave concerns regarding DDS' decision not to renew its contract with Georgetown. These providers support DDS consumers with serious and complex health needs and they have clearly stated they rely on the support from the Health Initiative to meet the health needs of the people in their care. These providers fear the harm that DDS consumers may suffer once this support is no longer available. The Health Initiative has offered providers a safe place to receive support and technical assistance and many may now fear the consequences if they contact DDS for similar assistance.

DDS' decision to terminate the Health Initiative at this time is especially troubling considering the upheaval that the closing of Providence Hospital has had on the District's health care system. The remaining hospitals in the District are overwhelmed and this crisis will be intensified when United Medical Center closes its doors in the near future. The assistance the Health Initiative provides is imperative to ensure DDS consumers' health needs are addressed and coordinated in DC area hospitals and provider nurses have the support they require.

We understand that DDS intends to hire or contract with a physician and with nurses in place of the contract with Georgetown. DDS' clinical staff do not provide the intensive hands-on assistance needed when DDS consumers face health care crises. DDS staff are only available during week days and during work hours. The Health Initiative staff are available when the DDS consumer needs their support even if that need occurs in the evening or on a weekend. The contract with Georgetown should not be terminated until DDS can demonstrate that it has the clinical staff in place and the capacity to provide the same level of support and technical assistance that the Health Initiative has provided.

The District was removed from Federal Court oversight in the Evans litigation in January 2017 because it demonstrated compliance with the Court's orders, many which related to the provision of health care to class members. If DDS fails to renew the Health Initiative, DDS consumers will likely be harmed and experience poor health outcomes as they did during the course of the Evans litigation. DDS' decision not to renew the Health Initiative is a step backwards and places District residents with intellectual disabilities and health needs at great risk. The Health Initiative has been paramount in improving health outcomes for DDS consumers and we request that you reconsider your decision to remove this essential safeguard.

Sincerely,

Sandy Bernstein, Esq.

Legal Director

Disability Rights DC at University Legal Services

Tina M. Campanella

Chief Executive Officer

Quality Trust for Individuals with Disabilities

cc: Councilmember Brianne Nadeau
Wayne Turnage, Deputy Mayor for Health and Human Services
Phyllis Magrab, Georgetown University Center for Child and Human Development