PUBLIC HEARING REPORT

Project: 13-058

Warren G. Murray Developmental Center, Centralia

October 9, 2013

Hearing held at Centralia City Hall

The following summarizes the attendance figures:

Individuals who registered their attendance at the hearing and provided only written testimony:	53
Individuals who registered their opposition to the project:	72
Individuals who registered their support for the project:	5
Individuals who registered neutral:	1
Total individuals registered:	78

Hearing Officer: Courtney Avery, Board Administrator
Staff Support: Nelson Agbodo and George Roate
HFSR Board member: Philip Bradley

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION
Name (*Please Print*) Wylie Blair (Sandberg Phoenix & von Gontard P.C.)

City St. Louis State MO Zip 63103

Signature Wylie Blair

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)
Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)
Attorney for Petitioners Friends for Murray Center Incorporated, et al., Clinton County Circuit Court Cause No 13-CH-49

III. POSITION (*please circle appropriate position)*

Support (Oppose) Neutral

IV. Testimony (*please circle)*

(Oral) Written

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Rita Winkeler

City Bartelso State IL Zip 62218

Signature Rita Winkeler

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Murray Parents' Association

III. POSITION (*please circle appropriate position)*

Support Oppose Neutral

IV. Testimony (*please circle)*

Oral Written

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION
Name (*Please Print*) ROBERT KERSHEIMER

City CENTRALIA State IL Zip 62801

Signature Robert Kershaimer

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)
Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care) GREATER CENTRALIA CHAMBER OF COMMERCE

III. POSITION (*please circle appropriate position)*

Support (Oppose) Neutral

IV. Testimony (*please circle)*

(Oral) Written

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Tom ASHBY

City CENTRALIA State IL Zip 62801

Signature

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

MAYOR, CITY OF CENTRALIA

III. POSITION (*please circle appropriate position)*

Support (Oppose) Neutral

IV. Testimony (*please circle)*

(Oral) Written

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) KAREN KELLY

City O'Fallon State IL Zip 62269

Signature Karen Kelly

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Member, Murray Parents Association (guardian)

III. POSITION (*please circle appropriate position)*

Support (Oppose) Neutral

IV. Testimony (*please circle)*

(Oral) (Written)

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) CHARLIE E MEIER

City OKAWVILLE State IL Zip 62271

Signature Charlie E Meier

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

ILL STATE REP

III. POSITION (*please circle appropriate position)*

Support (Oppose) Neutral

IV. Testimony (*please circle)*

(Oral) (Written)

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Rita Burke

City Makanda State IL Zip 62958

Signature Rita A. Burke

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

President, Illinois League of Advocates for the Developmentally Disabled (IL-ADD)

III. POSITION (*please circle appropriate position)*

Support (Oppose) Neutral

IV. Testimony (*please circle)*

(Oral) Written

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION
Name (*Please Print*) Marsha D. Holzhauer

City Centralia State IL Zip 62801

Signature Marsha D Holz

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)
Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Legal Guardian/Mother of Derby B, disabled adult, age 33 Resident of Murray Center for 26 years

III. POSITION (*please circle appropriate position*)

Support (Oppose) Neutral

IV. Testimony (*please circle*)

(Oral) (Written)

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) MR. VERNELL BURRIS

727 N. LINCOLN BLVD

City CENTRALIA State IL Zip 62801-2717

Signature Vernell Burris

618-339-9239

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*please circle appropriate position)*

Support (Oppose) Neutral

IV. Testimony (*please circle)*

(Oral) Written

OVER

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Judy Groner

City Nashville State IL Zip 62263

Signature Judy Groner

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Parent of Murray Resident
Judy Groner

III. POSITION (*please circle appropriate position)*

Support (Oppose) Neutral

IV. Testimony (*please circle)*

(Oral) Written

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

Cavallo

I. IDENTIFICATION

Name (*Please Print*) John D. Cavaletto

City Salem State IL Zip 62881

Signature John D. Cavaletto

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of ony group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

State Rep 107th Dist.

III. POSITION (*please circle appropriate position)*

Support (Oppose) Neutral

IV. Testimony (*please circle)*

(Oral) (Written)

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) JOHN RAYMER

City SALEM State IL Zip 62881

Signature John Raymer

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

CITY of Salem, Illinois - Mayor

III. POSITION (*please circle appropriate position)*

Support (Oppose) Neutral

IV. Testimony (*please circle)*

(Oral) (Written)

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) LORETTA Maddox

City Robinson State IL Zip 62454

Signature Loretta Maddox

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*please circle appropriate position)*

Support (Oppose) Neutral

IV. Testimony (*please circle)*

(Oral) Written

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Steve Coleman

City Centralia State Illinois Zip 62801

Signature Steve J Coleman

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care) Concerned Citizens Group Keep Murray Center open

III. POSITION (*please circle appropriate position)*

Support (Oppose) Neutral

IV. Testimony (*please circle)*

(Oral) (Written)

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION
Name (*Please Print*) Eddie Caumiant

City Springfield State IL Zip 62707

Signature Eddie Caumiant

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)
Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care) AFSCME Council 31

III. POSITION (*please circle appropriate position)*

Support (Oppose) Neutral

IV. Testimony (*please circle)*

(Oral) Written

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION
Name (*Please Print*) Nate Wheeler for Senator Kyle McCarter

City 310 W. Gallatin State Vandalia IL Zip 62471

Signature Nate Wheeler

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)
Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)
State Senator Kyle McCarter

III. POSITION (*please circle appropriate position)*

Support (Oppose) Neutral

IV. Testimony (*please circle)*

(Oral) (Written)

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION
Name (*Please Print*) Bill Henson

City Centralia State IL Zip 62801

Signature Bill Henson

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)
Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Employee + family member

III. POSITION (*please circle appropriate position)*

Support (Oppose) Neutral

IV. Testimony (*please circle)*

(Oral) ~~Written~~

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

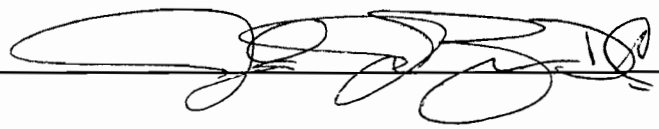
Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Joshua J. Berger

City Centralia State Illinois Zip 62801

Signature 

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care) Myself

III. POSITION (*please circle appropriate position)*

Support (Oppose) Neutral

IV. Testimony (*please circle)*

(Oral) Written

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION
Name (*Please Print*) Steve Koppen

City Centralia State IL Zip 62801

Signature Steve Kopp

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)
Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)
AFSCME Local 401
Murray Center

III. POSITION (*please circle appropriate position)*

Support (Oppose) Neutral

IV. Testimony (*please circle)*

(Oral) Written

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION
Name (*Please Print*) RAY KNOECKNER

City GERMANTOWN State IL. Zip 62245

Signature Ray Knoeckner

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)
Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care) CLINTON CTY BD CHAIRMAN

III. POSITION (*please circle appropriate position)*

Support (Oppose) Neutral

IV. Testimony (*please circle)*

(Oral) (Written)

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Mike Hall

City Effingham State IL Zip 62401

Signature Mike Hall

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Congressman John Shimkus
101 N 4th St. Suite 303
Effingham, IL 62471

III. POSITION (*please circle appropriate position)*

Support (Oppose) Neutral

IV. Testimony (*please circle)*

(Oral) (Written)

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Ed LaPorte

City Alton State IL Zip 62002

Signature [signature]

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

AFSCME Council 31

III. POSITION (*please circle appropriate position)*

Support (Oppose) Neutral

IV. Testimony (*please circle)*

(Oral) Written

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Jackie D. Burch Mathus Jr

City WAMAC State IL Zip 62801

Signature [signature]

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of ony group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

MAYOR OF WAMAC

III. POSITION (*please circle appropriate position)*

Support (Oppose) Neutral

IV. Testimony (*please circle)*

(Oral) Written

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Joe Turner

City Dwight State IL Zip 60420

Signature Joe To

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

IL Department of Human Services - Division of Developmental Disabilities

III. POSITION (*please circle appropriate position)*

(Support) Oppose Neutral

IV. Testimony (*please circle)*

(Oral) (Written)

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Testimony Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Mark Doyle - Governors office

City Chicago State IL Zip 60601

Signature

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Office of the Governor - JRTC
100 W. Randolph, Suite 16-100
Chicago, IL 60601

III. POSITION (*please circle appropriate position)*

(Support) Oppose Neutral

IV. Testimony (*please circle)*

(Oral) (Written)

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Tabitha Meador

City Kell State IL Zip 62853

Signature Tabitha Meador

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Concerned citizen

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Celeste Stratemeyer

City Centralia State IL Zip 62801

Signature Celeste Stratemeyer

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Friends for Murray Center, Inc,

employee

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Cecil Black

City Centralia State IL Zip 62801

Signature Cecil Black

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) BERNARD WINKELER

City BARTELSO State IL Zip 62218

Signature [signature]

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) E. Richard Langhaar

City Breese State IL Zip 62230

Signature E. Richard Langhaar

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

_____

_____

_____

_____

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Jan Monken

City Centralia State IL Zip 62801

Signature Jan Monken

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Friends FOR Murray Dev Center

Volunteer

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Christie S. Ciotola

City Centralia State IL Zip 62801

Signature Christie S Ciotola

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Murray Volunteer

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Melissa Cahoff

City Centralia State IL Zip 62801

Signature Melissa Cahoff

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Volunteer for Murray individuals

Friends for Murray

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) NATHAN M. ROTHSCHILD

City CENTRALIA State IL. Zip 62801

Signature Nathan M Rothschild

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Centralia Area Historical Museum

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) MARGARET WINKELER

City BREESE State IL Zip 62230

Signature Margaret Winkeler

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care) PARENT

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Carl Mashburn

City CENTRALIA State IL Zip 62801

Signature Carl Mashburn

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) LINDA MASHBURN

City CENTRALIA State IL Zip 62801

Signature Linda Mashburn

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Mary Holtkamp

City Centralia State IL Zip 62801

Signature Mary Holtkamp

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Connie Ward

City Xenia State IL Zip 62899

Signature Connie Ward

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Monica Sobczak

City Belleville State IL Zip 62226

Signature M Sobczak

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, orgonization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care) [illegible] & Sisters at Murray

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) JOSEPH G WINKLER

City BREESE State IL Zip

Signature Joseph G. Winkler

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

PARENT

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Ray Vest

City Texico State ILL Zip 62889

Signature Ray Vest

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Parent

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Vickie Vest

City Texico State IL Zip 62889

Signature Vickie Vest

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Parents

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Decenda Whitelaw

City Centralia State IL Zip 62801

Signature Decenda Whitelaw

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position*)

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Patty Wiebler

City 19465 Boulder Rd Carlyle State IL Zip 62231

Signature Patty S Wiebler

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Donald E Cline

City Salem State IL Zip 62881

Signature [signature]

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Murray Staff Spouse

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Monica J. Cline

City Salem State IL Zip 62881

Signature Monica J. Cline

II. REPRESENTATION (*This sectian is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care) Murray Staff

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Penny Myers

City Carlyle State IL Zip 62231

Signature Penny Myers

II. REPRESENTATION (*This section is to be filled if the witness is appearing an behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

_____

_____

_____

_____

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Michele Mashburn

City Centralia State IL Zip 62801

Signature Michele Mashburn

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Susan K. Aldrich

City Centralia State IL Zip 62801

Signature Susan K. Aldrich

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Murray Staff

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Christine Frost

City Sandoval State IL Zip 62882

Signature Christine Frost

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Citizen

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Denise C. Schoppet

City Bethalto State IL Zip 62010

Signature Denise C. Schoppet

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Murray Parents Association

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Steve Bruce

City Centralia State IL Zip 62801

Signature Steve Bruce

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) TERESA. MYERS

City CENTRALIA. State IL. Zip 62801

Signature Teresa A. Myers

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Kimberly A. Davis

City Centralia State IL Zip 62801

Signature [signature]

II. REPRESENTATION (*This section is to be filled if the witness is appearing an behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Jerra Geurin

City Centralia State IL Zip 62801

Signature Jena Geurin

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Crystal Beshon

City Centralia State IL Zip 62801

Signature Crystal E. Beshon

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Cheryl Williams

City Centralia State IL Zip 62801

Signature Cheryl Williams

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Shannon Ray

City Centralia State IL Zip 62801

Signature Shannon Lee Ray

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Selena Scott

City Central City State IL Zip 62801

Signature Selena Scott

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) THOMAS TATE

City Salem State IL Zip 62881

Signature Thomas Tate

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) TAMARA BAKER

City CENTRALIA State ILL Zip 62801

Signature Tamara Baker

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Tyrus A. Baker

City Centralia State Ill Zip 62801

Signature Tyrus A. Baker

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) ANNE IRVING

City Chicago State IL Zip 60630

Signature _____

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, orgonization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

_____

_____

_____

_____

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) KELLEN McMULLIN

City CARLYLE State IL Zip 62231

Signature Kellen McMullin

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

MURRAY CENTER

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Brian M. Aldrich

City Centralia State IL Zip 62801

Signature Brian M Aldrich

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care) concerned register voter and citizen of Illinois

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

WGMurray Center is a very needed 10/9 safety net which protects and preserves the lives and life of its residents/individual,

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Cindy Perkins

City Odin State IL Zip 62870

Signature Cindy Perkins

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Sonya Miller

City Centralia State Ill. Zip 62801

Signature Sonya Miller

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Curtis Perrish

City Salem State IL Zip 62881

Signature Curtis Perrish

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Teresa Downen

City Salem State IL Zip 62881

Signature Teresa Downen

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Cynthia S. Moore

City Centralia State IL Zip 62801

Signature Cynthia S. Moore

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) BRIAN MERRELL

City CENTRALIA State IL Zip 62801

Signature [signature]

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) JoAnn Pingsterhaus

City Bartelso State IL Zip 62218

Signature JoAnn Pingsterhaus

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Murray Employee, AFSCME member

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

oppose the closure of Murray Center

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Connie Cavaletto

City Salem State IL Zip 62881

Signature Connie Cavaletto

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Concerned Citizen

III. POSITION (*Circle appropriate position)*

Support (Oppose) Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Katherine D. Hamann

City Palos Park State IL Zip 60464

Signature Katherine D. Hamann

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

Family Transition Project

The Arc Of Illinois

III. POSITION (*Circle appropriate position)*

(Support) Oppose Neutral

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Tony Paulauski

City Frankfort ~~20901 Lafayette~~ State IL Zip 60423

Signature

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

The Arc of Illinois

III. POSITION (*Circle appropriate position)*

(Support) Oppose Neutral

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) Michele Westmaas

City Pittsfield State IL Zip 62363

Signature M Westmaas

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

parent

III. POSITION (*Circle appropriate position)*

(Support) Oppose Neutral

10/9

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

Public Hearing Appearance Only Registration Form

Facility Name: Warren G. Murray Developmental Center, Centralia Project

Project Number: 13-058

I. IDENTIFICATION

Name (*Please Print*) MARK HODAPP

City CARLYLE State IL Zip 62231

Signature Mark W Hodapp

II. REPRESENTATION (*This section is to be filled if the witness is appearing on behalf of any group, organization or other entity.*)

Entity, Organization, etc. represented in this appearance (i.e., ABC Concerned Citizens for Health Care)

III. POSITION (*Circle appropriate position)*

Support Oppose (Neutral)

Shefsky
& Froelich
Attorneys at Law

Copy to Ct. Rpt.

INTEROFFICE MEMORANDUM

TO: File

FROM: Yvette Coleman-Pitts

DATE: May 28, 2013

RE: 911 Call

Transcription of 911 call:

Caller:	"Leave it alone!"
911 Dispatcher:	"911, what is the address of the emergency?
Caller:	"Umm, ma' m my address is 275 Greenview Rd. I'm a DST Medevac. I have two individuals out here who are disabled and one will not leave everyone alone. He kicked him in his mouth and he is bleeding and he is not…, I can't even get them broken up hardly."
911 Dispatcher:	"Ok, so they're fighting?"
Caller:	"Yes."
911 Dispatcher:	"275 Greeview?"
Caller:	"Yes, ma' m."
911 Dispatcher:	"Do you need an ambulance, also?"
Caller:	"Yes, ma' m."
911 Dispatcher:	"Ok, bye, bye."
Caller:	"It's okay, sweetie. It's okay. I just called for help."

Keep Murray Center Open
Hearing Statement

one copy

My name is Bill Henson and I pray upon this group to make the recommendation to Governor Quinn, to keep Murray Center open! As a Social Worker with the Murray Center, I recently witnessed the hardship and uncertainty of these precious people who have been uprooted from their home and placed in the community setting such as those who went to the ill prepared, CAIL group in Centralia, which resulted in the physical assault and hospitalization of one resident as a result of understaffing and inadequate preparedness by the manager of this home. Additionally, I witnessed the suffering that my peers, the residents, and their families have endured as a result of the Active Community Care Treatment plan conducted by the CRA group.

Copy to ct. Rpt.

My 46 year-old, developmentally disabled sister, Paula has called Murray Center home since she was 11 years old, because her aggressive, self-injurious behaviors prevented her from living in a less restrictive environment. She has limited cognitive abilities and essentially no understanding of the need to move nor does she have the coping skills to adapt to a new environment for any length of time. Paula is typical of the majority of the residents who only know Murray Center as home. Essentially the closing of this facility will and has disrupted, traumatized, and prematurely harmed an already marginalized group of special individuals who would suffer emotionally and physically from this ill-advised proposal.

Keep Murray Center Open
Hearing Statement

It has been my pleasure to know and work with this great group of professional staff over the years and Murray Center's success has been astounding in achieving the goal of medical treatment, habilitation planning, and protecting the safety and welfare of the residents while maintaining a positive, caring, and overall loving attitude.

When you are deciding the fate of Murray Center, remember that the employees and their families have been and will continue to be emotionally burdened and more importantly the residents who live at Murray Center will be unnecessarily disrupted if forcibly integrated into the community.

This proposed closure is being done for the sake of minimal financial savings for the state, while ignoring the human factor, which is the cost of disrupting every one of these special people who fear losing their home, being placed in less than caring environments and being taken from their Murray Center family. Again, I pray upon you to tell Governor Quinn to save their home, "Save Murray Center". Thank you for this opportunity to speak to you.

Remarks of Eddie Caumiant

[whatever brief remarks you feel appropriate to introduce yourself and give props to Local 401 and members]

To the application:

The Board is supposed to look at specific criteria when evaluating whether to issue a closure permit. Let's see if DHS has met these criteria.

Has DHS demonstrated to the Board proof of an acceptable reason for closure? No. There are four reasons given under Board rules:

1. DHS can't argue there is insufficient demand for the service when 230 families are so dead set against losing the services of Murray Centers that they are raising thousands of dollars to sue the state to keep the service.

2. There is certainly adequate staff.

3. How about cost? When the difference between community and Murray's annual cost is so small - $120,000 for the community NOT including medical costs compared to $150,000 for Murray where medical services are included – DHS can't argue keeping Murray open impairs the facility's financial viability.

4. Murray is in compliance with licensing and certification standards. It's always been a high quality facility which is why the families of the residents are so set against leaving.

So DHS can't meet the Board's criteria for an acceptable reason for closure.

Next there are the criteria regarding impact on services:

1. DHS hasn't met their burden of demonstrating they can close Murray without an adverse impact upon access to care. The service in this case is residential and habilitative care for individuals with developmental disabilities who have significant health and/or behavioral issues that

Eddie Comment pg. 2 of 2

make it difficult to find care in community placements. That service will no longer exist within 45 minutes travel time. In fact, DHS admits it's 2 or even 3 and a half hours to the nearest state centers.

2. There will certainly be a shortage of beds in the area. How can DHS claim with a straight face it can house 230 residents in Centralia in the next 6 weeks? And while DHS boasts a list of 50 providers willing to take the residents, for the state wards pushed out the door only a handful of providers have actually been used so far. One of them is CAIL, which the recently appointed Guardian Ad Litem for state wards found employed abusive workers, failed to provide prescribed therapies and generally provided services that were not at all comparable to those at Murray Center.

How can the Board do anything but reject this application when its own criteria are not met?

My name is Steve Koppen. I'm president of AFSCME local 401, and I've been proud to work at Murray Center for 16 years.

DHS has not been truthful with the Board in its filing for a closure permit for Murray Center. Here are some examples:

- DHS states that community care is "significantly less costly". But the average cost of a community placement increased from $84,000 when the closure was announced 19 months ago, to $120,000 now - **not including most medical expenses**. According to the numbers from the original closure plan, the per-resident cost of Murray – which does include most medical expenses – is $150,000. DHS hasn't proven any savings.

- DHS says residents will have the "opportunity" to move to a "less restrictive" community setting. The residents and their families don't view this as an opportunity. We still have more than 230 residents at the Center who chose to stay and fight the closure.

- DHS says it has "worked collaboratively" with COGFA, the legislative commission that reviewed the closure last year. But COGFA said NO, voting against the closure of Murray. I don't think you can call ignoring the General Assembly collaborative.

- DHS says how great things went with the last closure you approved. DHS promised great alternative placements in the community, in the area the residents are from. But there were 30 JDC residents sent to other state centers the last two weeks of operation not because they wanted to be further away from their families, but because no community provider would take them.

- DHS says the services provided at Murray Center are only for the residents. No, we have individuals in the community come to Murray Center to get services they can't in community settings: the dentist, behavior assessments and plans, psychiatry. Once that's gone it will be even harder for the individuals to succeed in a community placement.

- DHS says the closure date will be Nov. 30 "upon permit approval by the Board". No it won't! Judge Aspen of the US District Court of Northern Illinois just ruled that the state can't dismiss a lawsuit the parents brought, and he extended the temporary restraining order that keeps the state from moving individuals against their will until January. Murray Center isn't going to close any time soon.

The Board should reject this application and tell DHS honesty is the best policy.

Oct. 6, 2013

To the members of the Illinois Health ~~and~~ and Services Facilities Review Board,

I am against the closure of Murray Center.

The notion to close Murray Center in an attempt to save the State of Illinois money is reckless and irresponsible. I'm sure that we have all heard success stories from various disabled people who would have you believe that all SODC's need to be closed down. We have to bear in mind that not all people with disabilities are at the same functioning level as most of these speakers.

According to the SODC Census and Tier Report and the Murray Developmental Center Profile that is found on DHSOneNet, At Murray, there are 211 *"individuals with medical and/or behavioral needs* ***preventing transition to the community*** *at this time,"* or *"individuals and/or guardians* ***saying 'no' to community placement*** *at this time."*

It goes on to state that ~~the individual profile for~~ Murray Center has 84% of its residents functioning in the *"**Severe** and **Profound** Mental Retardation range."* It also states that 68% *"have a behavior intervention program, often* ***requiring higher levels of staff supervision."*** This same Tier report states that *"Murray Center serves a broad spectrum of individuals with* ***moderate to high behavioral*** *and* ***Moderate to high medical needs."*** I am not just pulling numbers out of the air. These numbers came from DHS.

In summary, once again, I am **against the closure of Murray Center** for the above stated reasons. There are people with disabilities whose medical and **behavioral needs PREVENT** transition into the community and who **CHOSE** not to live in the community at this time. Both options of SODC's and CILAs should be available to people with disabilities to choose from as options based on their particular needs.

Copies of the documents quoted from are attached to my written statement.

Human Services
Developmental Disabilities
SODCs In-House
- SODC Forms
- State-Operated Developmental Center Profiles
- SODC Census and Tier Report
- SODC Operations
- Choate Developmental Center
- Fox Developmental Center
- Kiley Developmental Center
- Ludeman Developmental Center
- Mabley Developmental Center
- Murray Developmental Center
- Shapiro Developmental Center

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SODC Census and Tier Report

Tier Report as of 8-30-13

- Tier 1 - Individuals and guardians involved in actively pursuing transition to a community provider
- Tier 2 - Individuals with medical and/or behavioral needs preventing transition to the community at this time.
- Tier 3- Individuals and/or guardians saying "No" to community placement at this time.

SODC Center	Tier 1	Tier 2	Tier 3	SODC Census as of this date
Choate	37	68	67	172
Fox	7	9	102	118
Kiley	16	18	177	211
Ludeman	57	143	219	419
Mabley	18	31	50	99
Murray	38	33	178	249
Shapiro	90	214	242	546
TOTALS	263	516	1,035	1,814

Human Services
Developmental Disabilities
SODCs In-House
State-Operated Developmental Center Profiles
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- Fox Developmental Center Profile
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Murray Developmental Center Profile

See SODC Tier Report for latest census information

Individual Profile

Number	Data
47	average age of persons served (21 - 77 age range)
84%	Severe or Profound M.R. range
68%	have a behavior intervention program, often requiring higher levels of staff supervision
50%	receive psychotropic medications

Location: Centralia - Clinton County

Murray Center is located on the West side of Centralia, IL in Clinton County on Highway 161. Murray's campus is 120 acres with 16 buildings. Murray Center serves a broad spectrum of individuals with moderate to high behavioral & moderate to high medical needs.

Murray Center operates five residential buildings that are all certified for up to 60 individuals each. Individuals from Murray Center attend two on-campus workshops, and one off-campus workshop.

15 YEARS
PARTNERING WITH COMMUNITIES

Illinois Department of Human Services

Pat Quinn, *Governor*

Michelle R.B. Saddler, *Secretary*

100 South Grand Avenue, East • Springfield, Illinois 62762
401 South Clinton Street • Chicago, Illinois 60607

Kevin T. Casey, Director
Division of Developmental Disabilities
319 East Madison, Suite 4N
Springfield, IL 62701

October 9, 2013

RE: Discontinuation of Warren G. Murray Center
- HFSRB #13-058

Submitted in writing for the record

Health Facilities Services Review Board
525 West Jefferson St.
Springfield, Illinois 62761

Dear Chairperson Olsen and Board Members:

On behalf of the Illinois Department of Human Services, Secretary Michelle R.B. Saddler and the Division of Developmental Disabilities, I extend our appreciation for your facilitating this important hearing regarding the proposed closure and discontinuation of the Warren G. Murray Developmental Center.

This proposed closure is reflective of the Governor Pat Quinn's commitment to providing community-based alternatives to state operated intuitional care, and the State of Illinois' Rebalancing Initiative for the system of services for people with intellectual disabilities. Additionally, this effort will better align Illinois with the national trends, standards and expectations in serving people.

It is important to recognize that the Murray Center is an Intermediate Care Facility (ICF) certified under Federal Standards. The intermediate care program is a federal Medicaid program that contains two parts.

1. An ICF program which certifies larger facilities, usually sixteen beds or more, either public or private; and a
2. Medicaid waiver program that allow states to serve people in smaller and more integrated community settings.

Illinois has utilized both parts of the Medicaid programs for more than 20 years and the expansion of Medicaid waiver services has greatly reduced the need for State operated ICF services, as well as private ICF services.

Consider that in a ten years span, Illinois has seen its census at State Operated Developmental Centers reduce from approximately 2,800 people served to approximately 1,800. In that same

period of time, people accessing community-based residential waiver services has expanded from approximately 5,700 to 9,800 people.

It is an important distinction that neither the Murray Center, nor any of the other six State Operated ICF's are regional facilities. They are all statewide programs, and all serve people from around the state. Illinois does not operate on a "catchment area" theory for State Operated ICFs, nor do most other states.

In order to make an assessment as to whether adequate services are available, it is necessary to consider the programs and capacities in the Community Waiver to the ICF program. Under Rebalancing Initiative, the State does not intend to lessen the ability to serve people in the Medicaid program; in fact, the goal is to expand capacities and access to services for persons in need.

Each person who transitions from the Murray Center will be afforded the opportunity to have an independent assessment related to their needs and ongoing supports. These assessments are important resources in the development of individualized, person-centered supports and services that will be available and funded for each person upon their transition to a new setting.

It is anticipated that some families and guardians will decline to participate in this individualized person-centered planning process, and we are respectful of their position. Families and guardians do have the option of identifying either alternate community-based services, or private or public ICF's depending on where the person can be best supported.

Illinois has unfortunately lagged far behind other states in the movement of individuals from large congregate care facilities to small and more integrated community homes. The State' Rebalancing Initiative is meant to begin to make up that difference.

The closure and discontinuation of the Murray Center is one more important step that improves Illinois' position in complying with national trends in service for people with intellectual disabilities, and to comply with the expectations of Federal Medicaid funders, and legal requirements in this area.

Again, I extend our apperception for your hosting this hearing and I thank you for the opportunity to present on this important matter.

Respectfully Submitted,

Kevin T. Casey

Testimony to Health Facilities and Services Review Board

October 9, 2013, Centralia, IL

Good afternoon, I am Mark Doyle and I am the Transition of Care, Project Manager for the State of Illinois. I would like to thank the members and staff of the Health Facilities and Services Review Board for this opportunity to provide testimony.

In November of 2011 Governor Quinn announced the Rebalancing Initiative. This means Illinois is joining other states in rebalancing the system of care for persons with developmental disabilities and mental illness by increasing community care options and reducing the number of out-dated institutions in the state. Evidence strongly suggests that residents living in smaller homes have a better quality of life and enjoy being a part of their community.

The Rebalancing Initiative will help our state:

- Improve services
- Serve more persons in need
- Expand community capacity, create jobs in community homes and community linkages

Rebalancing is about offering options and opportunities. Therefore we have created **Active Community Care Transitions (ACCT), a** safe and thoughtful transition process for developing service & supports that is

- personalized
- family focused
- valued based

- offering maximum control
- supporting individual preferences

This is proven process which was utilizes in the successful closure of the Jacksonville Developmental Center last year. It involves the safe transition of persons with disabilities to licensed community agencies across Illinois to replace the services historically provided at Murray Developmental Center.

The ACCT process begins with an independent, comprehensive needs evaluation. This evaluation is key to the design of a customized support plan. The evaluation starts with the person as the center of the conversation. Since the information discussed is highly individualized and personal, the result is the development of what is titled a **Person-Centered Plan (PCP)**.

Our team works with the individual, guardian/family and providers agencies to create the community setting that will meet the needs of the person. This has resulted in enriched lifestyles and activities for many who have already transitioned.

The closure of large and inefficient Centers allows the funds to be better spent to expand home and community based services. The Governor along with the Illinois Department of Human Services Division of Developmental Disabilities is committed to providing community-based alternatives to institutional care that is consistent with the Supreme Court's 1999 Olmstead ruling, mandating that persons in institutional settings be afforded greater opportunities for community living.

The State believes we can better use very limited state funds to care for people in the community. In addition, the Federal Government through Money Follows the Person program provides additional federal matching funds to incentivize states to transition nursing home residents to community living, and facility closings.

We urge you to support the Governors Rebalancing Initiative and vote to support the closure of Murray Developmental Center. Thank You.

Project 13-058, Warren G. Murray Developmental Center, Centralia
Written Comments by: Mayor Tom Ashby, City of Centralia
October 9, 2013

First, I would welcome all of you to this public hearing and encourage this to be a productive exercise in sharing our concerns about the closure of Warren G. Murray Developmental Center. I speak on behalf of the City of Centralia when I say that the impact of the closure of this facility affects us on several fronts and I strongly oppose the application to discontinue services and close this facility.

The residents of Murray Center are citizens of the City of Centralia and they call this community their home. They have family members who have relocated in or around this community to be close to their loved ones at Murray and this impact would require them to relocate. This creates an enormous hardship on those individuals and their families – our friends and neighbors. These citizens worship here, shop here, eat at our restaurants – they are part of the community – some of them for as many as 40 years.

The loss of our citizens who call Murray Center home has a grave impact on those organizations that provide support services to the facility. Our hospital and medical services, Kaskaskia Workshop and other professional organizations specifically designed to provide programming and service to the residents of Murray, will, in turn, have to make significant adjustments to their organizations. This could create, in turn, more job loss, loss of professional providers and organizations that continue to support our economy.

The job loss of those individuals who work at Murray Center has a direct economic impact on our community. Our area remains within the top 5 unemployment rates in the state – currently 11.3%. By comparison to a larger community such as Springfield, the loss of these jobs would be comparable to 3.17% of the total workforce in that community – lifting their unemployment rate from 8.4% to 11.4% Ours will result in an unemployment rate of 15%. These are good paying, specifically skilled positions that are unable to be replaced in our community. For those who can seek employment with other state agencies, they will most likely have to travel some distance to continue to work in the profession. For others unable to secure employment, they will have to move out of our area. The loss of those individuals and their families affects our schools, our neighborhoods, our churches....our community as a whole!

The effects are far-reaching and devastating to our regional community and I cannot emphasize my opposition to this closure more strongly. The City of Centralia has the support of SIMA (the Southern Illinois Mayors Association) in addition to a regional coalition that is comprised of local officials from over 80 different municipalities in five counties - Marion, Clinton, Washington, Jefferson and Fayette counties. These representatives believe that Southern Illinois residents deserve a voice in the policies that impact our vitality and safeguard our communities and employees. I know that I echo their opposition to this application to discontinue services and close this facility.

Economic Impact Comparison
Centralia Springfield

	Murray	Springfield
Labor Force	18,114	115,543
Employed	15,978	105,781
Unemployed	2,136	9,762
575 employees Equal to Workforce	575	4,818
New Unemployed Number	2,711	14,580
Unemployment Rate	11.8	8.4
New Unemployment Rate	15%	12.6

575 represents 3.17% of workforce
3.17% of Springfield workforce would equate to loss of 3,662 Jobs
Loss of 3,662 jobs would shoot their unemployment from 8.4% to 11.6%
- City of Springfied = 1500
- University of IL Springfield Campus = 1166
- Blue Cross Blue Shield = 1000

That is JUST DIRECT
29 in supply chain plus 182 Indirect
Just took out Horrace Mann Insurance Company = 1000

A 288 Mile Gap in Services
Is NOT Appropriate for Illinois!

GOVERNOR'S PLAN

KEEP MURRAY CENTER OPEN & FUNDED!

CURRENT CENTERS

(After Jacksonville Closure)

Illinois Developmental Centers

1. Kiley - Waukegan
2. Mabley - Dixon
3. Ludeman - Park Forest
4. Shapiro - Kankankee
5. Fox - Dwight
6. Murray - Centralia
7. Choate - Anna

DISTRICT OFFICE:
821 MAIN STREET
HIGHLAND, IL 62249
PHONE: 618-651-0405
FAX: 618-651-0431
EMAIL: REPCMEIER@GMAIL.COM

SPRINGFIELD OFFICE:
206 N STRATTON BUILDING
SPRINGFIELD, IL 62706
PHONE: 217-782-6401
FAX: 217-558-1068

COMMITTEES:
- ENVIRONMENT
- ECONOMIC DEVELOPMENT
- SMALL BUSINESS EMPOWERMENT & WORKFORCE DEVELOPMENT
- AGRICULTURE & CONSERVATION

CHARLIE MEIER

STATE REPRESENTATIVE · 108TH DISTRICT

I am Representative Charlie Meier and I am against Project 13-058. I am against the closing of Murray Center.

The DHS application for permission to close Murray Center is flawed, incomplete and a costly mistake.

Title 77 of ADMINISTRATIVE CODE, provided by the Joint Committee on Administrative Rules, pertains to the decision criteria that this Board must use. Section 1110.130 and titled "Discontinuation-Review Criteria" clearly states that "The applicant shall document that the discontinuation of the entire facility will not have an adverse impact upon access to care for residents of the facilities market area." I do not accept the DHS misleading view that Murray Center's market area should be defined as the entire state of Illinois. A significant number of the residents and their families have homes in central and southern Illinois. I refer once more to the map clearly indicating that large portions of Illinois will lose critical services. Going way beyond the suggested 45 minute driving time, distances become completely unreasonable for residents and families concerned.

The same "Impact On Access-Review Criterion" continues with "The applicant shall provide copies of impact statements received from other resources or health care facilities located within 45 minutes travel time that indicate the extent to which the applicant's workload will be absorbed without conditions, limitations or discrimination." A judge pointed out to me the key word "SHALL" in this code is the same as saying MUST! By my count, there are at least 15 ICF/DD facilities that should have impact statements included with the DHS application. It is misleading for DHS to simply state that there is no other SODC within 45 minutes of Murray Center. We already know that and appreciate this acknowledgement of the huge adverse impact that will be caused by closing Murray Center.

DHS told the guardians of current residents that they must look to other service providers, so the ICF/DD category should have been the minimal requirement for collecting and submitting impact statements. The closest ICF/DDs never received such requests. DHS is required to request these impact statements

DISTRICT OFFICE:
821 MAIN STREET
HIGHLAND, IL 62249
PHONE: 618-651-0405
FAX: 618-651-0431
EMAIL: REPCMEIER@GMAIL.COM

SPRINGFIELD OFFICE:
206 N STRATTON BUILDING
SPRINGFIELD, IL 62706
PHONE: 217-782-6401
FAX: 217-558-1068

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CHARLIE MEIER
STATE REPRESENTATIVE · 108TH DISTRICT

30 days prior, and to submit them with their application to you. The application is incomplete and misleading due to this omission. Most importantly, the application is missing important information.

Some of the Murray Center residents and their guardians did approach other area ICF/DDs and were rejected. So, to infer that there would be nothing gained from obtaining impact statements is incorrect. The areas "other resources and health care facilities" have significant conditions and limitations to express.

I am deeply concerned that decertifying Murray Center will eliminate the two million dollars the state receives monthly in federal dollars at a time when the state cannot fiscally handle that loss. There is no telling how long the federal lawsuit will last or what its final ruling will be. Decertifying Murray Center now could cost the state as little as two million dollars a month to as much as hundreds of millions of dollars over several years' time. This process should not be continued in its flawed manner. Until the Murray Center is closed, it should not be decertified.

During session this past spring, I had a woman in a wheel chair come and visit my office. Unfortunately, I was on the House floor and unable to see her when she arrived. My secretary, Susan, asked if she could help her. The visitor informed Susan that she wanted to urge me to close Murray Center. Susan said there are a number of people who live at Murray Center and enjoy it there. Susan then asked why the visitor wanted to ask me to close Murray. The visitor told Susan "I was told to say it". This occurred on lobby day for Arc of Illinois and Equip for Equality, who have both been working to close Murray Center. I have to ask, who is taking advantage of the mentally handicapped in the state of Illinois?

I am also still finding that most of my questions pertaining to the closure of the Jacksonville Developmental Center are being left unanswered. Repeatedly I have asked for reports relating to the health of the patients moved from JDC, however monthly reports have stopped. I would like to direct the board today to the Joint Commission on Administrative Rules Administrative Code, Title 77: Public Health, Chapter 2, Section 1110.130. According to that section, you should have received all questionnaires and data required related to JDC no later than 60 days from the date of discontinuation.

DISTRICT OFFICE:
821 MAIN STREET
HIGHLAND, IL 62249
PHONE: 618-651-0405
FAX: 618-651-0431
EMAIL: REPCMEIER@GMAIL.COM

SPRINGFIELD OFFICE:
206 N STRATTON BUILDING
SPRINGFIELD, IL 62706
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CHARLIE MEIER

STATE REPRESENTATIVE · 108TH DISTRICT

Has this commitment been met? If not, failure to comply with this Code should not be tolerated. What can be done to prevent hollow promises from being used again?

Closing Murray Center will have a significant adverse impact on access to services for the current residents, their families and to this region of the state. I urge you to deny project 13-058 and to keep Murray Center open. De-certification will begin to turn off the federal funds that we all know Murray Center brings into our struggling state. Do not rush into this dangerous action. I urge you to deny Project 13-058 and to keep Murray Center open.

Charlie E Meier

Charlie E. Meier
State Representative – 108th District

Joint Committee on Administrative Rules

ADMINISTRATIVE CODE

TITLE 77: PUBLIC HEALTH
CHAPTER II: HEALTH FACILITIES AND SERVICES REVIEW BOARD
SUBCHAPTER a: ILLINOIS HEALTH CARE FACILITIES PLAN
PART 1110 PROCESSING, CLASSIFICATION POLICIES AND REVIEW CRITERIA
SECTION 1110.130 DISCONTINUATION – REVIEW CRITERIA

Section 1110.130 Discontinuation – Review Criteria

These criteria pertain to categories of service and facilities, as referenced in 77 Ill. Adm. Code 1130.

a) Information Requirements – Review Criterion
The applicant shall provide at least the following information:

1) Identification of the categories of service and the number of beds, if any, that are to be discontinued;

2) Identification of all other clinical services that are to be discontinued;

3) The anticipated date of discontinuation for each identified service or for the entire facility;

4) The anticipated use of the physical plant and equipment after discontinuation occurs;

5) The anticipated disposition and location of all medical records pertaining to the services being discontinued and the length of time the records will be retained;

6) For applications involving discontinuation of an entire facility, certification by an authorized representative that all questionnaires and data required by HFPB or IDPH (e.g., annual questionnaires, capital expenditures surveys, etc.) will be provided through the date of discontinuation and that the required information will be submitted no later than 60 days following the date of discontinuation.

b) Reasons for Discontinuation – Review Criterion
The applicant shall document that the discontinuation is justified by providing data that verifies that one or more of the following factors (and other factors, as applicable) exist with respect to each service being discontinued:

1) Insufficient volume or demand for the service;

2) Lack of sufficient staff to adequately provide the service;

3) The facility or the service is not economically feasible, and continuation impairs the facility's financial viability;

4) The facility or the service is not in compliance with licensing or certification standards.

c) Impact on Access – Review Criterion
The applicant shall document that the discontinuation of each service or of the entire facility will not have an adverse impact upon access to care for residents of the facility's market area. The applicant shall provide copies of impact statements received from other resources or health care facilities located within 45 minutes travel time that indicate the extent to which the applicant's workload will be absorbed without conditions, limitations or discrimination. Factors that indicate an adverse impact upon access to service for the population of the facility's market area include, but are not limited to, the following:

1) The service will no longer exist within 45 minutes travel time of the applicant facility;

2) Discontinuation of the service will result in creating or increasing a shortage of beds or services, as calculated in the Inventory of Health Care Facilities, which is described in 77 Ill. Adm. Code 1100.70 and found on HFPB's website;

3) Facilities or a shortage of other categories of service at determined by the provisions of 77 Ill. Adm. Code 1100 or other Sections of this Part.

HFPB NOTE: The facility's market area, for purposes of this Section, is 45 minutes travel time. The applicant must document that a written request for an impact statement was received by all existing or approved health care facilities (that provide the same services as those proposed for discontinuation) located within 45 minutes travel time of the applicant facility. The request for an impact statement must be received by the facilities at least 30 days prior to submission of the application for permit. The applicant's request for an impact statement must include at least the following: the anticipated date of discontinuation of the service; the total number of patients that have received care or the number of treatments that have been provided (as applicable) for the latest 24 month period; whether the facility being contacted has or will have available capacity to accommodate a portion or all of the applicant's experienced caseload; and whether any restrictions or limitations preclude providing service to residents of the applicant's market area. The request shall allow 15 days after receipt for a written response from the contacted facility. Failure by an existing or approved facility to respond to the applicant's request for an impact statement within the prescribed 15-day response period shall constitute a non-rebuttable assumption that the discontinuation will not have an adverse impact for that facility.

(Source: Amended at 33 Ill. Reg. 3312, effective February 6, 2009)

A 288 Mile Gap in Services
Is NOT Appropriate for Illinois!

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KEEP MURRAY CENTER OPEN & FUNDED!

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4. Shapiro - Kankankee
5. Fox - Dwight
6. Murray - Centralia
7. Choate - Anna

ILLINOIS HOUSE OF REPRESENTATIVES

DISTRICT OFFICE:
1370 WEST MAIN STREET, SUITE A
P.O. BOX 1264
SALEM, ILLINOIS 62881
PHONE: (618) 548-9080
FAX: (618) 548-9087

CAPITOL OFFICE:
205-N STRATTON OFFICE BUILDING
SPRINGFIELD, ILLINOIS 62706
217-782-0066
217-782-1336 (FAX)

JOHN D. CAVALETTO
STATE REPRESENTATIVE · 107TH DISTRICT

For more than the past year, I have watched, read, and listened to the Governor say how he plans on closing facilities around Illinois. He's mentioned the state's large debt and how he feels closing the facilities will help reduce that debt. I don't disagree that we have a very large financial problem to deal with in Illinois, but I fail to see how saving a few pennies is worth risking the safety of the developmentally disabled patients of Murray Center.

Historically, Murray Center has been where patients that are too high risk to place elsewhere have gone. I've heard many stories from parents who have told me how their loved ones were denied entrance into community programs and how Murray Center was their last resort. But now, by closing Murray Center, the Governor is telling families to put the lives of their loved ones in the hands of the understaffed and undertrained community providers that originally told them "No".

All throughout the Governor's efforts to shut down Murray Center, I've asked a simple question: Is there nothing else we can cut from our bloated state government that doesn't impact the safety of the developmentally disabled patients that reside at Murray Center and require high levels of care and treatment? What about the safety of the employees at the community programs that have repeatedly said they are unprepared to deal with the severe disabilities patients at Murray Center have?

One of the fundamental roles of state government is to provide for the safety of its residents. However, part of ensuring the safety of residents is to make sure potential hazards are prevented and that residents are not placed in harm's way. I am convinced the Governor is placing the residents of Murray Center directly in harm's way, and I will do all I can to stop that from happening.

John D. Cavaletto
State Representative 107th District

10-9-13

RECYCLED PAPER - SOYBEAN INKS

DISTRICT OFFICE:
310 GALLATIN
VANDALIA, ILLINOIS 62471
618/283-3000
618/283-9750 (FAX)
senatormccarter@gmail.com

SPRINGFIELD OFFICE:
105B STATE HOUSE
SPRINGFIELD, ILLINOIS 62706
217/782-5755
217/782-0116 (FAX)

ILLINOIS STATE SENATE
KYLE MCCARTER
54TH SENATE DISTRICT

Oct 9, 2013

Ladies and Gentleman of the Board, let me first say thank you for your efforts to do the right thing in this case for the people of Illinois and most of all the residents of Murray Center and their love-ones.

As the Senator for the 54th District it is my duty to do the same. As I should, I know the budget challenges of our state. I agree that in many instances placing those who are developmentally disabled in a CILA can be the best, most respectful and affordable choice. There are circumstances, however, where we must take into consideration the severity of the disability. Such is the case with those at the Murray Center.

The people I am defending today are not able to come here and communicate their need to not be moved. Many are not even able to feed themselves, let alone able to enjoy playing the guitar like the gentleman who the Governor introduced in his budget address.

I understand the aim of the Governor is cost savings and dignity. By moving these most vulnerable residents at Murray we may indeed achieve the cost savings. The result if we go through with this, however, will surely not be dignity. I believe we will instead place in jeopardy the lives of the most vulnerable in our state, those who we should be defending and protecting, those who cannot come to the microphone or send a message like mine today, those whose mothers and fathers know them best and how sensitive they are to major changes like this.

The convenient choice for you here today is to allow the closure process to continue, treating the Murray residents like all the others and hope for the best, hope that they adjust, hope that they fit in, hope that somehow magically it works out.

But instead I ask you to make a better, yet more challenging, decision. Delay this closure and commission our state government to come up with an alternative arrangement to build a community at Murray more like the model the federal government and the Governor desires, one that is more efficient and cost effective but at the same time protects the lives of the residents. Yes, this option is not as convenient, nor can it be accomplished by the desired deadline. It is complex in ways but I am confident that parents, professionals, and care providers together have the ability and the willingness to craft a plan that achieves the Governors aim and too protects the lives of the residents.

My comments today have not focused on the devastating effect this closure will have on an already struggling local economy, nor the tremendous burden we will place on the families who purposely live close to their loved ones so they can be with them as much as possible, but on what it should be, these precious people at risk, the most vulnerable in our state, the severely developmentally disabled living at Murray.

I know you desire to do the right thing today. I would humbly request that you delay this closure and request an alternative plan be submitted to you by a reasonable date. Thank you in advance.

Senator Kyle McCarter

Kyle McCarter

JOHN M. SHIMKUS
15TH DISTRICT, ILLINOIS

2452 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-5271

ENERGY AND COMMERCE
COMMITTEE
SUBCOMMITTEES:
ENVIRONMENT AND THE ECONOMY
CHAIRMAN
HEALTH
ENERGY AND POWER
COMMUNICATIONS AND TECHNOLOGY

Congress of the United States
House of Representatives
Washington, DC 20515–1315

October 8, 2013

15 PROFESSIONAL PARK DRIVE
MARYVILLE, IL 62062
(618) 288-7190

CITY HALL, ROOM 12
110 EAST LOCUST STREET
HARRISBURG, IL 62946
(618) 252-8271

101 NORTH FOURTH STREET, SUITE 303
EFFINGHAM, IL 62401
(217) 347-7947

201 NORTH VERMILION STREET, SUITE 218
DANVILLE, IL 61832
(217) 466-0664

Mr. Mike Constantino
Illinois Health Facilities And Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, IL 62761-0001

Dear Mr. Constantino:

RE: Opposed to Project 13-058

As you consider the pending closure of the Warren G. Murray Developmental Center, I urge you to look beyond the political and financial considerations and instead think about the residents. These patients need special care and may not be able to express their own thoughts about this situation.

As you are aware, there are lawsuits pending regarding various aspects of the closure. I am not commenting on those, but believe that the Review Board should not act till those suits are resolved.

You will also be presented evidence that concerns me about the residents and their situations after departing Murray Center. If reports are true, I worry for their health and safety outside of Murray Center.

Should a patient and their family fear placement in a new setting, far from "home," that causes not only mental anguish about the transfer but anguish over the physical care the patient will receive at the new site?

Another concern I have is about the tactics utilized by the State of Illinois in trying to silence workers at Murray Center who are the most knowledgeable about the patients. Why would the state put workers in situations where they face punishment for following what they believe to be the best course of care for a patient?

Again, please consider the hundreds of lives of patients: patients who aren't here in person but are here through us – their parents, guardians, family members, community members, and even elected representatives.

Thank you for your service to our state and for fully considering the lives of the residents of Murray Center. I urge you to deny the application for Project 13-058.

Sincerely,

JOHN SHIMKUS
Member of Congress

PRINTED ON RECYCLED PAPER

Mike Constantino, Supervisor
Project Review Section
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, IL 62761

Dear Mr. Constantino,

My name is Ray Kloeckner and I am chairman of the Clinton County Board and the residents of Murray Center consider our county home. I come before you to oppose Project #13-058 with the Illinois Department of Human Services requesting approval of the closure of Murray Center. Had the requirements outlined in the application process been followed and information complete it would be apparent that this closure would create a great hardship on both the clients and our region as a whole.

Our community has grown to love and care for the Murray Center Campus and enjoy their participation in the activities. They are an active part of our community participating in events from the parades to shopping at Wal Mart and local outlets. We all would love to see what is best for them with the highest level of community interaction that is feasible and in their best interest. The campus is a source of pride and beautifully maintained. The staff are respected for their dedication and knowledge in dealing with the severe challenges faced. Having a knowledge of the region and services – it is very apparent that closure of this facility would leave a significant gap in services available to provide a safe environment for all – including those existing residents currently residing in CILAs with less restrictive capabilities.

As a county and region, we are ill equipped to make such massive move in such a short time frame as requested. What we do know from experience that the results of such a move include increased pressure on emergency personnel and in some instances death. We do not have the necessary beds in CILA's to provide homes in the environment prescribed. The Murray guardians that have tried placements in CILA's have run into repeated rejections due to the special needs of their loved ones and place the current CILA residents at risk.

I have communicated with our emergency personnel and they concur that the opposition to this request just makes sense. At best it would result in the total upheaval of families for what has been home for years. It would create a total upheaval in the financial stability of a region already plagued with economic challenges.

Murray Center is a beautiful facility that provides a safe, ADA accessible facility with staff that know them and loves them within a feasible distance for the well-being of all. To keep this center open is clearly their choice and to initiate a process that clearly leaves a gap in that choice of services is a disservice to all. I respectfully request your opposition to Project 13-058.

Respectfully,

Ray Kloeckner

Ray Kloeckner
Chairman of Clinton County Board

Testimony On Project #13-058: Proposal To Close Murray Center Centralia 10/9/2013

My name is Robert Kelsheimer. I am the Executive Director for the Greater Centralia Chamber of Commerce. For the record, our organization is opposed to the closing of Murray Center, and our Board of Directors has sent a letter to Mr. Constantino to that affect.

The purpose for my testimony today is to discuss the economic impact our area has already seen just by the proposed closure and what will be experienced by an actual closing.

In 2012 Northern Illinois University Regional Development Institute did an impact study on the effect closing Murray Center would have on the regional economy. A copy of that

report has been included in my testimony for your records and more detailed review. Due to time constraints I will focus on the most relevant points. The NIU report stated that just the proposed closing of Murray would result in reduced economic activity. I can confirm that that has indeed been the case. Commercial and industrial realtors from outside our area have told me that the much publicized potential closing of Murray Center is having a negative affect when working with prospects to consider locating here. Local realtors experienced an immediate increase in home listings; commercial rental property leasing has slowed significantly, and numerous small business owners have deferred expansion plans or cancelled them altogether. In short, our area is experiencing reduced consumer confidence and economic paralysis. Marion County's unemployment rate is

already one of the highest in the state at 10.9 %, that number could exceed 13% following the closure of Murray Center. Centralia will realize the brunt of the economic impact as the significant majority of those employed at Murray Center live here and use Centralia as their retail hub. The study predicts a direct and indirect employment loss of 761 jobs as a result of the closing. The study estimates the direct and indirect regional economic impact will be in excess of $50 million dollars. Such an economic loss will have a devastating effect on our local economy. Finally, the average annual compensation for Murray Center employees used in the NIU study was $68,273 including wages and fringe benefits, which is almost double the average household income in Centralia. Unfortunately, experience has shown us that future users of closed facilities in our industrial park or other large employer

facilities has resulted in considerably fewer jobs and at a much lower wage in the range of $10-$15 dollars an hour with few or no benefits. In summary, closing Murray Center will create a staggering loss of wealth that will be felt in every segment of our economy. For the sake of our regional economy and those served at Murray Center, the Greater Centralia Chamber of Commerce respectfully asks that the request to close Murray Center be denied. That is the end of my testimony.

DRAFT

The Economic Impacts of the Murray Developmental Center in Centralia Illinois was prepared by John Lewis and Lisa Bergeron of the Regional Development Institute at Northern Illinois University under agreement with the City of Centralia, Illinois. Questions and inquiries regarding the contents of this report can be directed to John Lewis (815) 753-0936 or Lisa Bergeron (815) 753-0924. For more information on NIU Outreach and the Regional Development Institute, please visit our website at www.niurdi.org or www.outreach.niu.edu.

The findings and conclusions presented in this report are those of the authors/project team alone and do not necessarily reflect the views, opinions, or policies of the officers and/or trustees of Northern Illinois University.

Economic Impacts from the Murray Developmental Center in Centralia Illinois

The Regional Development Institute (RDI) at Northern Illinois University completed an analysis of the economic impacts of a proposed closure of a state of Illinois funded facility providing skilled services to individuals with development disabilities.

The following report captures the economic impacts on Clinton, Jefferson, Marion, and Washington Counties associated with the proposed closure of the Murray Developmental Center in Centralia Illinois. The results are based on two sets of impacts in the four county region. The first set of impacts focuses on the loss of household spending income by the Murray Center employees. The second set of impacts captures the reduction of supply chain industry revenue for annual contractual and commodity purchases made by the facility. The impacts captured in this report do not represent the entire economic impact as a result of the proposed closure.

The analysis was completed using the IMPLAN Pro input/output model developed by Implan group. The model is unique in that the I/O coefficients are based on 2010 county specific patterns and include both industry specific direct and indirect impacts.

Direct impacts are those that result from annual operations such as employee compensation, output, and taxes. Indirect impacts are the secondary effects on the area. For example, as a result of the proposed closure, the economy in the four county region will experience decreased economic activity. This leads to decreases in employment, employee compensation, and output in retail trade, professional services, and other industry sectors. The analysis does not include any economic impacts related to the proposed closure beyond Clinton, Jefferson, Marion, and Washington Counties associated with the proposed closure.

The economic impacts in this analysis were developed based on a developmental center with total employment of 550 full- and part-time employees and $23.7 million in employee wages. Supply chain impacts were estimated based on annual contracts and purchases of $3.6 million made by the facility in various industry sectors.

Murray Center Impacts*

	Direct	Indirect	Total
Employment (full- and part-time)	29	182	211
Employee Compensation	$1.0 mil	$5.0 mil	$6.0 mil
Output	$3.6 mil	$19.2 mil	$22.8 mil
Value Added (County GDP)	$2.5 mil	$11.2 mil	$13.8 mil
Local Sales Tax			$173,000

**excludes direct impacts from the Murray Center*

METHOLOGY AND ASSUMPTIONS

The Murray Center employs 550 full- and part-time workers in the Clinton, Jefferson, Marion, and Washington County region earning $23.7 million in wages annually.

As a result of a proposed closure, the region will lose the household spending impact from the wages earned by Murray Center employees. The indirect household spending impacts are, overall, less than total wages because employees do not spend all of their earned salaries nor do they spend them all locally.

Additionally, the closing of the Murray Center will have an impact in industries in the region providing services to the facility. These industries receive over $3.6 million annually and include healthcare, utilities, wholesale trade, and other supply chain industries.

As a result of the proposed closure, the supply chain industries will experience direct impacts resulting in losses in output (sales), employment, employee compensation, and value added. Other industries in the supply chain will also experience indirect losses in output (sales), employment, employee compensation, and value added.

This analysis focuses on the indirect impacts resulting from an income reduction for households earning $35,000 - $50,000 annually. Direct and indirect impacts as a result of reduced activity for supply chain industries serving the center are also included.

SUMMARY OF EMPLOYMENT IMPACTS

- Closure of the Murray Center will eliminate 550 full- and part-time workers directly employed by the center. The supply chain impacts will directly reduce employment in other industries by 29 jobs. Indirect employment of 182 jobs will also be lost in the four county region as a result of the reduction in household income spending by Murray Center employees and the loss of supply chain spending in other industries.

- Indirect employment losses will have the greatest impact in the following industries:

  - 21 in food services and drinking establishments
  - 14 in private hospitals
  - 12 in nursing and residential care facilities
  - 11 in offices of physicians, dentists and other healthcare practitioners
  - 10 in wholesale trade
  - 8 in dry cleaning and laundry services
  - 7 in retail trade – general merchandise
  - 6 in retail trade – food and beverages

DRAFT

SUMMARY OF OUTPUT IMPACTS

Output is used as a measure of overall industry productivity and represents the value of an industry's business activities including sales.

- The closure of the Murray Center will result in a loss of $22.8 million in direct and indirect economic activity (sales and output) in the region annually, $3.6 million in direct and $19.8 million in indirect output.

- Industries with the highest indirect output impacts include:
  - $3.3 million in real estate and rental
  - $1.6 million in electric power generation
  - $1.5 million in private hospitals
  - $1.4 million in offices of physicians, dentists and other healthcare practitioners
  - $1.3 million in monetary authorities
  - $1.1 in food services and drinking establishments

SUMMARY OF VALUE ADDED (Wealth) AND EMPLOYEE COMPENSATION

Value Added is a measure of wealth (Gross County Product) created by a business in terms of total of employee compensation, rent, interest, taxes, and profit paid or earned. Value Added is an important indicator of the industry's productivity and regional sector strength. Employee compensation includes wages and employee benefits.

- The closure of the Murray Center will decrease the value added (wealth) of the region by over $13.8 million, $2.5 million from the reduction in supply chain industry spending, and $11.3 million from indirect impacts from the reduction in household spending as well as the reduction in supply chain industry spending in the region.

- Closure of the Murray Center will result in direct employee compensation losses of $38.1 million, $23.7 million in wages and $14.4 million in fringe benefits. Additionally, the closure will result in direct and indirect reductions in annual employee compensation of $6.0 million as a result of the reduction in household and supply chain industry spending, $1.0 million directly by supply chain industries, and an additional $5.0 million from indirect employment in other industries in the region.

- Indirect employee compensation impacts will be greatest in the following industries:
  - $784,000 in offices of physicians, dentists and other healthcare practitioners
  - $623,000 in private hospitals
  - $524,000 in wholesale trade

- $306,000 in food and drinking establishments
- $301,000 in nursing and residential care facilities
- $266,000 in electric power generation
- $263,000 in nondepository credit intermediation

➢ Average annual employee compensation for the rehabilitation center is estimated to be approximately $68,273 including wages and fringe benefits.

OTHER ECONOMIC IMPACTS

➢ Closure of the Murray Center will reduce state and local taxes by $413,000 annually.

➢ Loss of economic activity as a result of the proposed closure will decrease local sales taxes by $173,000 annually.

DRAFT

oppose

Eric Schutzenhofer, Resident of Apple Cottage at Murray Center
October 8, 2013

I am Dr. Karen Kelly, the mother of a Murray resident, an experienced behavioral health care nurse, and an expert in health policy. I teach at an area university, serve as president of the state nurses association, and am a member of the Metro-East Human Rights Authority, of the IL Guardianship and Advocacy Commission.

My son is a 39 year old with autism, severe mental retardation (secondary to autism), and pica (the ingestion of non-food items [in his case, rocks, crayons, shoelaces, jewelry, coins, and other small items). He functions at the cognitive level of a 30 month old child. Eric's IQ measures 38-40. My son is nonverbal and large (6'5" and 250 pounds); has a propensity for temper tantrums, a/k/a autistic meltdowns, pica, biting, and wandering. Like many autistic people, he has a tendency toward obsessive-compulsive behaviors (e.g., putting household items in order). When his compulsive behaviors are thwarted, he has tantrums (autistic meltdowns) that can result in injuries to him and to those trying to thwart his behavior, including biting, scratching, and hitting like a toddler. He came to Murray Center when a less restrictive community-based facility, 20 minutes from the family home, was unable to manage him and meet his needs because he is 6'5" and functions at the level of a toddler.

Not long after he came to Murray Center, Eric had a bowel obstruction. He could not tell anyone he was in pain, but Eric took the hand of the nurse who gave him his morning medicines and put it on his abdomen. The nurse assessed Eric, notified his physician, and sent him to the local hospital where he had surgery a few hour later once he was stable. If a nurse had not been present, he would have suffered a rupture of the bowel with massive infection (sepsis) that could have been fatal.

Eric can be loving to family and friends, but has the potential to become easily frustrated with outbursts of aggression; this is characteristic of autism. Because of his size, he can easily injure another person, especially with inadequate numbers of staff to supervise him. What will a community home do if he becomes aggressive? Call the police? In February 2012 a teen with autism was shot and killed by police in Calumet City IL in his parents' home when police, who had been trained to work with him, shot him. National stories have reported the use of Tasers on autistic persons in the community. In my professional opinion as an experienced mental health nurse, moving a low functioning autistic person into a minimally staffed group home is tantamount to placing toddlers in a understaffed day care center. Safety of both the residents and the staff are threatened when low functioning autistic persons are placed in programs that are inadequate to meet their unique needs.

CILA care is cheaper than care in an SODC because it is a significantly lesser level of care. There is no nursing care 24/7, no regularly scheduled therapies (e.g., occupational, speech therapies), no physician present during the day or on-call at night. There are no well educated professionals present 24/7, just undertrained, underpaid caregivers who have no special qualifications to work with the developmentally disabled population. My son is on two drugs that require constant assessment for side effects, nursing assessments, not assessments by a high school graduate with a few days of

Submitted by Dr. Karen Kelly
kkellys@aol.com/618-910-8223

Eric Schutzenhofer, Resident of Apple Cottage at Murray Center
October 8, 2013

When Howe Developmental Center was closed, at least 11 residents' medical records were lost. Those records were critical to the future care of those residents. Since the state lacks electronic health records, how will the state ensure that such records are not lost again, exposing residents to risk.

The closure of Murray Center is bad health policy. Determining that Murray Center will be closed and then assessing the needs of individual residents is the equivalent of "fire, ready, aim." It is a backwards and dangerous approach to treatment planning. Governor Quinn has stated publicly that this is a budget issue, but then states that this plan is motivated by providing the developmentally disabled residents of Murray Center, along with Jacksonville, with a better quality of care. As an expert psychiatric nurse, with decades of experience, I am appalled that the state is attempting to balance the budget on the backs of disabled persons who cannot speak for themselves. While politically expedient, this is morally appalling and is dangerous health policy. The mass closure of mental health facilities that began in the late 1960s was also dangerous health policy: those closures have resulted in the establishment of a permanent underclass of the homeless chronically mentally ill in America.

The developmentally disabled residents of Murray Center cannot speak for themselves. As parents, family members, and guardians, we must speak for them. The revelations of Mr. Stewart Freeman, guardian ad litem of the Murray residents under state guardianship, has revealed evidence of abuse and neglect among the few residents who have been moved into CILAs. This is kind of horrific care that has been predicted by advocates for the residents of Murray Center. Do not allow this to become a reality for more residents of Murray Center.

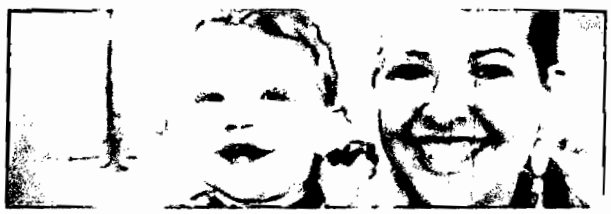
Submitted by Dr. Karen Kelly
kkellys@aol.com/618-910-8223

- Publications
- About DHS by Division

Breadcrumb

1. DHS
2. about DHS
3. About DHS by Division
4. Developmental Disabilities
5. Contacts For Services
6. State-Operated Developmental Centers
7. State-Operated Developmental Center Profiles

Murray Developmental Center Profile



Location: Centralia - Clinton County

Census: See SODC Tier Report

Individual Profile - Updated 5-31-13

Number	Data
253	Current Census
47	average age of persons served (21 - 76 age range)
84%	Severe or Profound M.R. range
68%	have a behavior intervention program, often requiring higher levels of staff supervision
51%	receive psychotropic medications

Murray Center is located on the West side of Centralia, IL in Clinton County on Highway 161. Murray's campus is 120 acres with 16 buildings. Murray Center serves a broad spectrum of individuals with moderate to high behavioral & moderate to high medical needs.

Murray Center operates five residential buildings that are all certified for up to 60 individuals each. Individuals from Murray Center attend two on-campus workshops, and one off-campus workshop.

Murray Developmental Center's annual operating budget is $35,908,000 and is budgeted for 575 full-time employees.

253

average/resident = $141,928.85

Illinois League of Advocates for the Developmentally Disabled

IL-ADD

To: Illinois Health Facilities and Services Board
submitted by Rita Burke, President
Illinois League of Advocates for the Developmentally Disabled (IL-ADD)
October 9, 2013
RE: OPPOSED To Project 13-058 (closure of Murray Center)

IL-ADD's members are the presidents and other key people from all of Illinois' State Operated Developmental Center (SODC) family/guardian organizations. Our loved ones served at Murray Center and the other SODCs have severe/profound intellectual disabilities, complicated medical conditions, severe behavior disorders or combinations of these conditions and rely on the intensive services provided in our SODCs.

We oppose the closure of Murray and the removal of any SODC resident from any of the SODCs under the current State plan, called the CRA/ACCT or "Person-Centered Plan" because it is illegal, dangerous and coercive. We have brought a lawsuit to that effect along with Murray Parents Association and several individual plaintiffs.

Currently, there are 249 residents of the Murray Center with 13 on pre-transition visits. Some residents who were transitioned out of Murray have been ordered back to the Center by the court-appointed Guardian ad Litem after he found that conditions at the CILAs to which they had been transitioned were inadequate or unsafe. Both Federal and State courts have put in place Temporary Restraining Orders (TROs) enjoining the State from removing any Murray residents, whether they have private or state guardians, until there is a ruling on the Motion for Preliminary Injunction, now scheduled for January 6, 2014, more than a month after the State's intended closure date. The State acts as though they can disregard these facts and close Murray on November 30 by pressuring guardians and frightening staff with continuing closure notices and threats. The fact is, Murray Center is not ready for closure any time in the near future.

The behavior of the State, suggesting that they can do as they will and ignore the oversight and judgment of the Courts is frightening. Families of SODC residents across the state are concerned that the State is willing to force an illegal and dangerous closure process on Murray Center as it did on Jacksonville Center and that process is a blueprint, in concept and method, for closing all the State Operated Developmental Centers in Illinois, depriving citizens with the most severe developmental disabilities the intensive level of care they desperately need.

➤Murray Developmental Center is the current target in Governor Quinn's ACCT plan to remove high-needs individuals from ICF/MR level of care and place them in non-comparable community settings. The plan is violative of the law.

All Murray residents are entitled to Intermediate Care Facility for the Mentally Retarded (ICF/MR) level of care which in Illinois includes SODCs and private ICFs/DD.

The right to access ICFs/MR by persons who qualify is an entitlement. Participation by states in the Medicaid program is voluntary; however, if a state elects to provide certain services, the state's provision of those services is "mandatory upon them." 42 U.S.C. § 1396a(a)(1). If a state elects in its Medicaid plan (as Illinois does) to offer qualified individuals services in an ICF/MR, it must provide that "all individuals wishing to make application under the plan shall have the opportunity to do so, and that such assistance shall be furnished with reasonable promptness to all eligible individuals." 42 U.S.C. § 1396a(a)(8). The Illinois Administrative Code provides that "[i]ndividuals or guardians shall be given the choice of receiving State-operated developmental center, community ICF/MR or Medicaid home and community-based services." 59 Ill. Adm. Code.120.150(c).

The Home and Community Based Waiver is OPTIONAL, NOT MANDATORY, and cannot be imposed on an individual who qualifies for and chooses an ICF/MR. In fact, the HCBS waiver will not be granted and may be revoked unless the state offers ICF/MR services to those who qualify. It is the state that has an affirmative duty to inform and provide the options of ICF/MR (SODC or ICF/DD) or Home and Community Based Waiver services. The guardian has the right to choose ICF/MR services and is not under a duty to justify his decision, other than that his ward "qualifies."

➤**The plan immediately impacts all the SODCs, not just Murray.** The CRA plan states that CRA will conduct a "Person-Centered Assessment and Planning Process for each SODC resident to secure critical information for planning for the transition of care of the Individual into the community" (ACCT plan p. 3). When an individual or guardian will not approve a community placement and the move is required by the state, the state will attempt to identify an individual from the receiving facility to move in that person's place (ACCT plan P. 8). There are 40 such assessments scheduled at Choate.

➤**The State has not complied with the IHFSRB requirements for closure**. The application for Murray closure to the Illinois Health Facilities and Services Review Board boldly states that DHS/DDD did not comply with the requirement to solicit impact statements from facilities offering comparable services within 45 minutes from Murray because there aren't any. It goes on to say that the closest SODCs located in Anna and Kankakee are in time distance 1 hour and 44 minutes and 3 hours and 30 minutes respectively (Application p. 52) However, the application addresses its ability to meet intensive needs with the other SODCs' 2270 licensed beds with only 1563 currently used or 69% (Application p. 54) This is interesting because Jerry Stam, Assistant Deputy Director for SODCs has told Choate professionals and guardians that 10 people are waiting **in jail** to access Choate services and we must move people out before we can move those individuals in. The application further states that moving Murray to other SODCs will be "transition census neutral" because a proportional number of current SODC residents will move out as new residents from Murray move in (Application p. 54)

➤**The ACCT plan is numbers, deadline and dollars driven, not person-centered as the State claims.** Governor Quinn's rebalancing initiative and Active Community Care Transition (ACCT) Plan calls for the removal of 600 SODC residents to community settings in 2.5 years at the rate of 20 per month, as though they were cattle, instead of fragile human beings who have already been injured under this plan. Not only is that plan unrealistic, it is dangerous because it fails to take into account the fragility and vulnerability of these Illinois citizens whose guardians are now being badgered and pressured into choices they believe are **not** in the best interest of their loved ones.

We urge you to vote against the closure of the Murray Developmental Center

AFFIDAVIT OF MARSHA D. HOLZHAUER

I, Marsha D. Holzhauer, state as follows:

I, Marsha D. Holzhauer, of 1847 Moonglow Road, Centralia, Illinois, am the mother and Legal Guardian of Darrell L. Bronson, hereinafter referred to as "Darby", now age 33, a disabled adult.

1. Darby was diagnosed autistic at the age of 22 months. When he was little, his father, Gary Bronson, and I tried to keep him at home with us and his baby brother, Michael, until our family fell apart.

2. In January, 1986, after our divorce, Darby's father and I decided Darby would go to Murray Developmental Center in Centralia, Illinois, since we lived in Centralia and most of Darby's extended family also lived in the Centralia area.

3. Darby attended a special education class set up for him in his home school district of Central City (adjacent to Centralia) after his father and I won a due process hearing against the Kaskaskia Special Education District. He went to public school until his behaviors worsened about the time he hit the age of puberty. Thereafter, he attended special school in a building on the grounds of Murray Center until he was 21.

4. Over the years, various residential placement options have been considered for Darby – a group home, CILAs, etc. However, all alternatives have been found lacking and inappropriate for the level of care Darby needs.

5. Developmentally, Darby functions at the same level as a two (2) year old child (he does very minimal sign language and some gestures to communicate). He can and does feed and dress himself and sometimes he needs a lot of verbal prompting to accomplish his personal care/hygiene needs.

6. It is apparent to all that know and work with Darby that he needs structure and routine to make it through the day. Because of communication issues due to his autism, Darby needs staff and professionals that know him and his needs. It takes some time for Darby to get accustomed to new staff members.

7. Darby is a resident of not only Apple Cottage at Murray Center – he is also a resident of the greater Centralia community. Darby goes on outside activities frequently, not only with is family, but also with fellow resident and staff, such as restaurants, Carlyle Lake, etc.

8. I have chosen to locate my law office in the Clinton County area for the last 20 years so that I can maintain very frequent contact with Darby and the Murray Center employees that provide for his care. I bought a house and moved back to Centralia in 2012 so that I can live within 15-20 minutes of where my son goes to workshop, doctors, outings, etc.

9. If Darby had been able to be in a less restrictive environment that was able to meet his specialized needs as well as Murray Center, I would have considered such alternatives long ago – those options are not equipped to provide the level of care that my son requires.

10. To my knowledge, Murray Center, located in Darby's hometown of Centralia, where he has lived as a member of the Centralia community for more than 25 years, is the only place that can provide the level of care, maintenance, structure, safety, medical care, and the necessary levels of qualified staff members for my 33 year old, 6 '2", 260 lbs. non-verbal severely autistic son with severe behavior issues.

Murray Center is Darby's home!

Date: July 3, 2013.

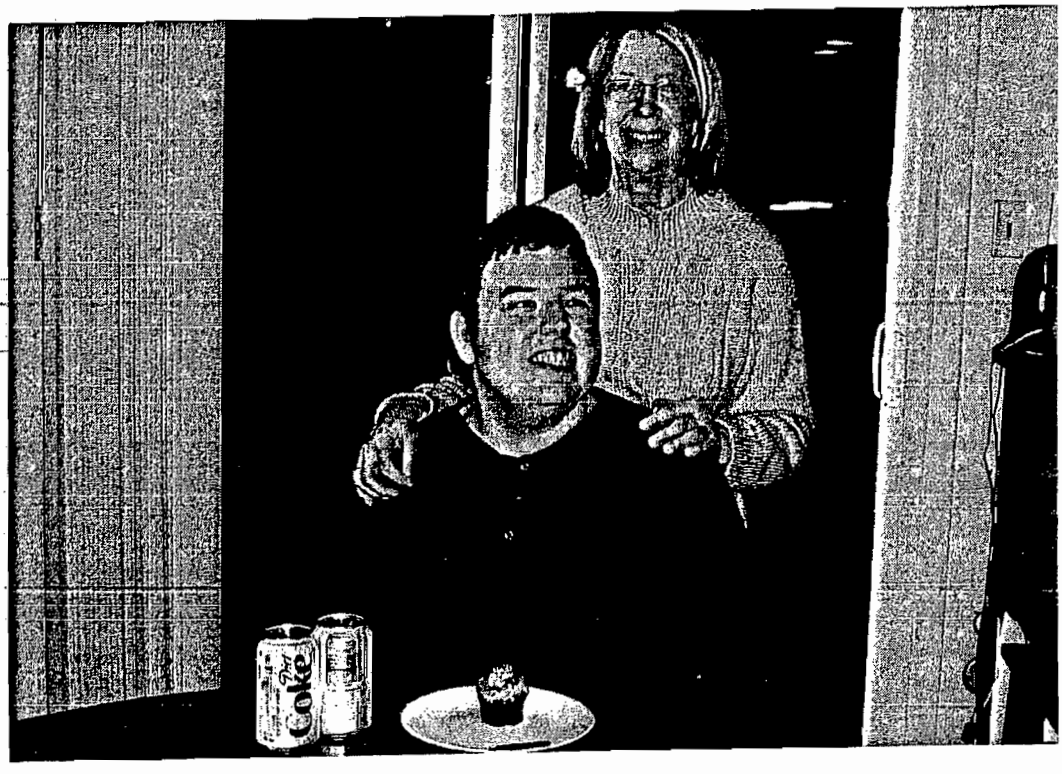
Marsha D. Holzhauer
Mother/Legal Guardian of Darby Bronson,
a disabled adult

STATE OF ILLINOIS)
) ss
COUNTY OF CLINTON)

Subscribed and sworn to before me this 3 day of July, 2013.

Tauna R. Conrad
Notary Public

OFFICIAL SEAL
TAUNA R CONRAD
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:04/30/15



"Darby" Bronson - Age 33
+ Marsha Holzhauer - mother/Legal Guardian

Attachment "A"

October 9, 2013 Opposition To HFSRB Project 13-058

My name is Judy Groner and I oppose the application for closure of Murray Center. I am a member of three different Human Rights Committees for the disabled. One committee is for a County Vocational Workshop, one is for an 8-bed CILA and one is for a State Operated Developmental Center. Even though these services and programs are different, the Human Rights objectives are the same: That each individual be treated with dignity and respect; and, that we act in the best interest of each individual. Murray Center achieves these objectives on a daily basis. I know this first hand because my 25 year old daughter Kathryn, is a resident at Murray.

For 18 years my full-time job was taking care of Kathryn. Her last year living at home was the most difficult as her self-injurious behavior had turned into a full-blown crisis. I would spend each day trying to stop Kathryn from banging her head, as hard as she could, against walls, tables, windows, bathtubs, doorjambs, dashboards or any hard surface she could find. I would spend each day trying to hold Kathryn down on her bed so that she would not punch herself in the face. She would yell, scream, cuss, bite and spit at me. During her last year at home, Kathryn was admitted to seven different treatment facilities within Illinois, Missouri and Ohio. No One Could Help Her!!

Our last hope was to place Kathryn in Murray Center, a State facility. Now believe me, a family does not enter into that decision lightly! It is an agonizing decision! It is a last resort decision but it is a decision filled with love and one that a parent never regrets making. Placing Kathryn in Murray may have been the hardest thing I have ever done but it was the best thing I have ever done for her! It was the right thing to do!

The progress Kathryn has made while living at Murray is amazing! Her self-injurious behavior has improved greatly and she is now able to attend a workshop program and earn a paycheck! She now goes to restaurants, movies, church, shopping and participates in Special Olympics! Murray Center is only a 35 minute drive from our family home and we visit her at least three times a week. When I see Kathryn's achievements, the guilt I felt seven years ago, has now been replaced with relief. When I see her fullness of life, the emptiness I once felt, has now been replaced with new Murray friendships. If Murray closes, I will be forced to make those agonizing decisions all over again. Kathryn will be forced to move from the safe, structured environment she now calls home. She will not be able to move to a CILA, because they are not appropriately staffed or trained to care for her behavioral needs. She will not be able to move to her family home, because her self-injurious behaviors still occur.

So now we come full- circle and Kathryn will probably need to be transferred to another State facility. Now doesn't that seem ridiculous ... to have to move her from one facility

that she calls home, and is only 35 minutes from her family ... to a different facility, filled with strangers and is at least 3 ½ hours away from her family? What will happen to families in the future, when they need the help that only Murray can provide? Where will they have to go? How far away will they have to drive? When Kathryn leaves Murray, it should be, because she is ready to leave, not because someone makes her leave! When Kathryn is ready to slowly transition out of Murray, she will need the physical presence of Murray Center to be nearby. She will need that security and safety net for years to come.

The Human Rights of the disabled are very important to me! I am very proud of Murray because the staff does treat each resident with dignity and respect. The staff does act in the best interest of each resident. Now I am asking you, to act in the best interest of over 200 residents and their families. I am asking you to please deny this application!

Thank you.

Judy Groner

Judy Groner
531 E. Gorman St.
Nashville, IL 62263
(618) 327-3909

Salem

101 S. Broadway Avenue, Salem, IL 62881
www.salemil.us ♦ mayor@salemil.us

Phone: 618-548-2222
Cell: 618-267-6082
Fax: 618-548-5330

Office of the Mayor
John A. Raymer

October 9, 2013

Mike Constantino, Supervisor
Project Review Section
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, IL 62761

Dear Mr. Constantino:

My name is John Raymer and I represent the citizens of Salem as their Mayor as I come before you to oppose Project #13-058 with the Illinois Department of Human Services requesting approval of the closure of Murray Center. I am confident that by the conclusion of today's hearing you will recognize that the criteria outlined in Title 77 of the Administrative Code was not followed and the application submitted is flawed and incomplete. Requirements outlined in the application process have been ignored and critical information is yet to be provided to make a final decision on such a vital matter.

Having expressed my concern over the application process and requirements – I would move to what I consider a bigger issue – the extreme concern for the adverse conditions that will surface should this committee move forward with the closure of the facility. The Murray Center residents are citizens that we all have grown to love and care for. They are an active part of our community participating in events from the parades to shopping at Wal Mart and local outlets. We all would love to see what is best for them with the highest level of community interaction that is feasible and in their best interest. Their choice and their guardian's choice has been repeatedly documented in the COGFA hearings and most importantly – in their files. Their choice is their current home – Murray Center. To shutter Murray Center flies in the face of all the mandates that clearly state that it is their CHOICE that matters. To shutter a campus of beautiful house that are specifically designed for their specific needs flies in the face of common senses. There is a synergy of care and love that cannot be replaced by trying to relocate into alternative locations which do not have the specialized skills sets to address the very unique challenges these individuals face.

As a community, we are not ready for this. We do not have the necessary beds in CILA's to provide homes in the environment prescribed. The Murray guardians that have tried placements in CILA's have run into repeated rejections due to the special needs of their loved ones and place the current CILA residents at risk. Last week Salem witnessed the opening of our first CILA.

CILAs are the right places for some people with disabilities in the range that is appropriate. Many residents of Murray Center are properly placed at Murray as the scope of their disabilities is addressed.

We take pride in our emergency personnel, but recognize they are not in a position to respond to the special needs that surround placement in alternative locations - these calls and conditions have been documented repeatedly and they place an unprecedented burden on our local resources. I fear some of the residents of Murray will end up with a final placement in jails. We have already witnessed the death of residents following relocation. To uproot them from their home in a facility on the other side of the state just to say you closed Murray is an injustice to all.

The adverse economic impact on our region has already surfaced with just the discussion of possible closure. The Chamber of Commerce has documented the specifics of the economic impact of the loss 550 jobs. Due diligence will dictate that we include financial consequences of this new shift in unemployment costs to the local and state economy in any financial analysis on the consequences of closure.

I think Mr. Casey said it best when he spoke to the Murray Parents .... "I would never agree to a planning process that didn't go person-by-person, need by need for each person. That doesn't take a couple of months. It takes a period of time, and discussion, and a period of searching for the exact right thing for each person. And I think if you don't take that time, I think some of the mistakes Illinois has made in the past, by the way, is not taking that time to figure out exactly what each person needs." To set an urgent deadline smacks in the face of this logic.

Murray Center is a beautiful facility with beautiful residents that want to stay in their home. Many of the guardians reside in our region and know the facilities provide a safe, ADA accessible facility with staff that know them and loves them. To keep this center open is clearly their choice – and it is THEIR CHOICE – not mine – not yours – not paid advocates for closure – that matters at the end of the day. I respectfully request your opposition to Project 13-058.

Respectfully,

John Raymer

Mayor John Raymer
City of Salem, Illinois

A 288 Mile Gap in Services Is NOT Appropriate for Illinois!

GOVERNOR'S PLAN

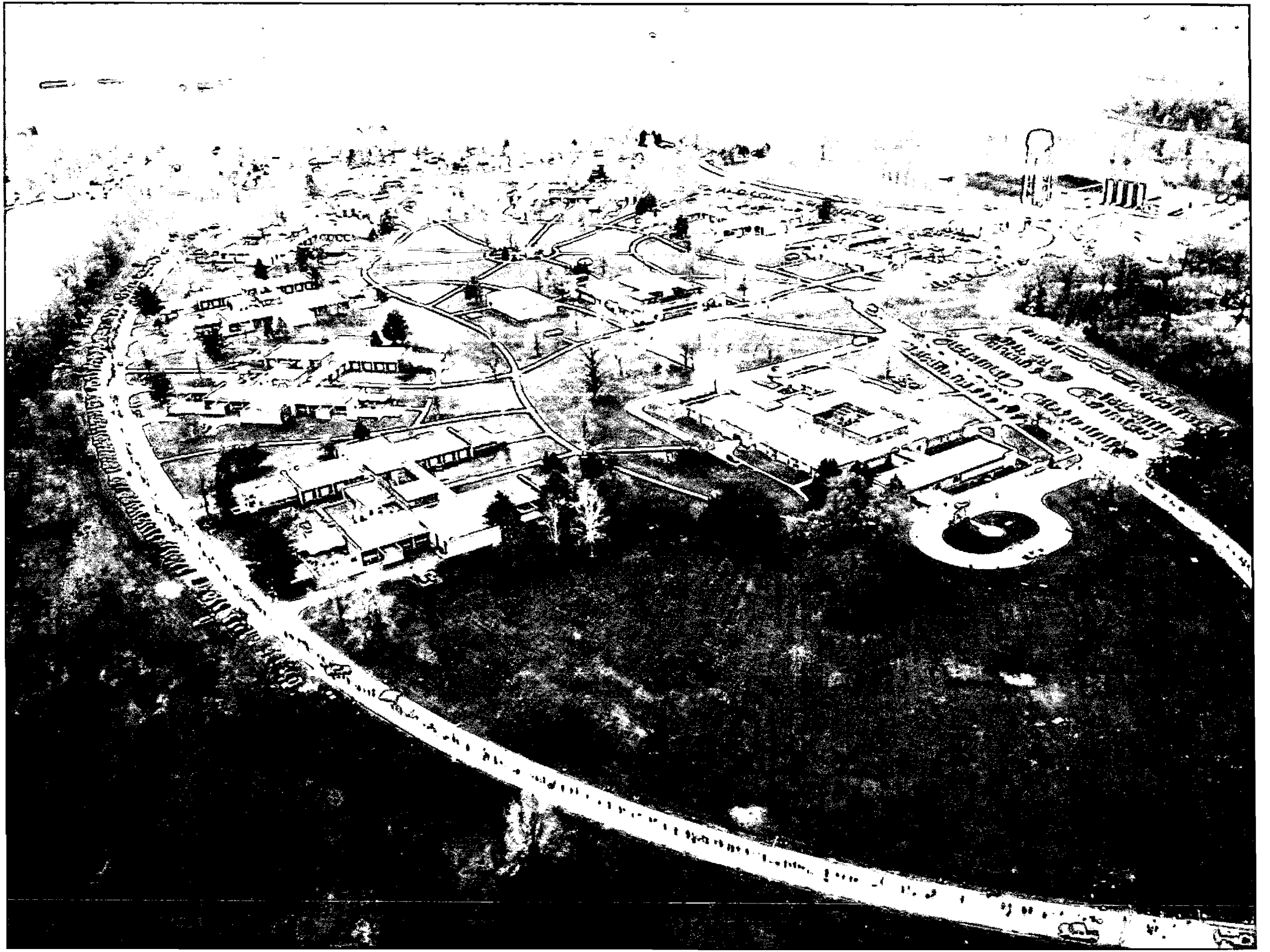
KEEP MURRAY CENTER OPEN & FUNDED!

CURRENT CENTERS

(After Jacksonville Closure)

Illinois Developmental Centers

1. Kiley - Waukegan
2. Mabley - Dixon
3. Ludeman - Park Forest
4. Shapiro - Kankankee
5. Fox - Dwight
6. Murray - Centralia
7. Choate - Anna



Under the administrative code for discontinuance or closure of a facility there are only a few reasons this can take place.
These are:

1. An insufficient demand for services.
DHS used the admittance numbers for 2012, a year that they were not ALLOWING people to be admitted to Murray, even those people who were requesting Murray as a placement for their loved one. Every week the social workers at Murray continue to receive requests from agencies about placement opportunities at Murray. The Social Workers have had to tell agencies that DHS does not allow anyone to be placed at Murray. The demand is definitely there but DHS is refusing Murray's services for these disabled citizens.

2. Lack of sufficient staff:
Once ads were place in local newspapers in our area there was no trouble hiring qualified staff, and this will not be an issue in the future if the administration continues to advertise in the local newspapers.

3. The facility is not economically feasible:
Murray Center is one state center that generates more federal funds than it consumes.

4. The facility is not in compliance with licensing:
Public Health is at Murray constantly and the last public health survey was good. We have consistently ranked as one of the best SODCs in the state.

Stating the above we come to the conclusion that there are no valid reasons to close Murray Center.

Also, of more importance is the fact that there are over 200 parents/guardians that want ICFDD level of care for our loved ones. The residents need this because of the trained staff, safety issues, and nursing care. Parents especially want this because of the higher standards set for SODCs than for community placement. Murray is inspected by over 5 different agencies each year. A community home is inspected once every three years, and if it is privately owned, only paperwork is looked at, not the inside of the home. This stringent oversight will be lost if our loved ones move to the community.

If Murray Center closes it will be a hardship for parents/guardians as the distance to visit our loved ones matters tremendously to us, and to the health and safety of our loved ones. We, along with the staff are part of a team that help our loved ones achieve their highest potential. It will be very detrimental for all of us if we are not in close proximity to our loved ones.

The closure of Murray will have a significant adverse impact on residents' health and well-being. Dental care for the disabled is virtually non-existent in the community. I know this from attempting to get dental care for my brother who lives in a CILA. Even though we were able to pay for the services it took us over nine months to find a dentist willing to care for him. For my son Mark and other residents of Murray finding a dentist who would care for their special needs would be virtually impossible. Besides dental care, the nearest psychiatric services are over an hour away. This can be the difference between life and death for our residents. The residents at Murray require the on-site care of the many professionals who work at Murray....behavioral analysts, speech therapists, occupational therapists, dieticians, doctors, and round the clock nurses. These are not consistently available in the community.

The closure of Murray will also have a significant adverse impact on residents' socialization and ability to be part of the community. The residents of Murray are part of the community of Centralia, participating in church, sporting events, shopping and all aspects of community life. In the community the disabled are often isolated due to lack of staff to take them on outings, and lack of access to community activities.

The closure of Murray will also adversely affect our residents because they will lose the services of highly trained staff. Staff at Murray center are not considered permanent staff until after almost six months of classroom, as well as on the job training. In the community staff receive 40 hours of classroom training, and 40 hours of on the job training. Frequently, due to budget issues the staff are poorly paid, and staff turnover is a constant battle in the community. The consistent staff at Murray enables staff to get to know and understand our severely disabled residents. This is extremely important to those residents who are nonverbal, highly medically involved, or have severe behavioral issues. They need the dedicated, trained staff that is present at Murray Center. This cannot be duplicated in the community.

Rita Winkeler, President, Murray Parents' Association
601 Parker Street, Bartelso, IL 62218 618-210-9678

Steve Coleman Comments

To Murray Center Review Board

I believe Murray Center should not be closed because so many people who are employed there would lose their jobs and pay. Also, they'd lose their health and other benefits such as retirement. These people have bills too pay such as rent, mortgage, auto insurance, grocery money, and if they have children money for their care or etc. Another important reason that the closure would do for our city is make it harder for our town to do good and grow economically. Centralia is already merely a ghost town. A lot of businesses have already left here and more are closing all the time. People are packing and leaving here because there are no jobs and places to shop especially downtown. The downtown part of our city is in need of some serious help because people don't hardly shop their way. Nevertheless, the mentally disturbed kids at Murray Center really don't have a decent place to go. I know that Grey Shaw and some more people are trying to find

Also I have a couple of friends that will be unemployed when and if Murray Center does close. Some of these people have worked there for a long time. I know that they aren't necessarily looking to be without money to take care of themselves and their families.

The coalition group that is trying to save Murray Center needs to get as many people together as they can to show the Governor that they are very serious about keeping it open in Centralia.

Furthermore, Murray Center has been in Centralia for a number of years. A lot of people here will be deeply sad if they do have to receive spent slips saying they lost their job. We really don't have any more big industries in town anymore.

Steve Clemens

Review Board Murray Center Comment Paper

some places for them to reside. Some of them are living good places, but some are them are finding hard to adjust to their new homes. It seems that Governor Pat Quinn's would be closure of Murray Center is supposed to help save money for our state. Illinois is broke money wise and economically. The closure is not really going to help save money for our state because we are too broke and getting worse daily. I realize that Governor Quinn's closed Jacksonville mental health facility, but I hope people in Centralia can really work their opinions on it and works hard as possible to keep Murray Center open here. God helps people who help themselves, especially if we pray and go to him in truth and spirit. Centralia is a good community that does want to keep its people here and grow in town and at the shopping center or west, south, and east sections including Central City. God bless our great nation, state, and city.

Nevertheless, I know people and employers or retailers in Murray Clinton, and Jefferson counties do not want Murray Center closed because they know that it'll hurt their town's economy and employees.

Also, they sorely need Murray Center to continue to operate in Centralia.

The residents that live at Murray Center have families that support this town by shopping, eating at its restaurants, etc.

They would miss Murray Center a lot because it has been their home for a very long time some over thirty years.

I have a deceased older brother Lowery Clemson Jr who was mentally disturbed and had too go live with my parents in Springfield, Il when I graduated from high school in 1984.

Lowery Sr and Barbara Clemson had too put him in a mental health care facility in Springfield and Peoria, Il where he died in 1999 they couldn't handle him