



For Immediate Release

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The recent shooting of Belmont student, Jillian Ludwig, has uncovered a dire situation in Tennessee as its broken system and failure to provide critical services and housing for adults with disabilities who have been declared legally incompetent to stand trial but not to be supervised has resulted in tragedy.

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NASHVILLE, TN – The state agencies that provide rehabilitative care for adults with disabilities often overlap. The potential shortcoming of three different Tennessee departments – TennCare, Department of Intellectual & Developmental Disabilities (DIDD), and Tennessee Department of Mental Health & Substance Abuse Services (TDMHSAS) – to provide appropriate services for adults with disabilities who have been adjudicated (legally determined) incompetent to stand trial has raised questions among advocates about the broader system’s capacity to safeguard and support those in need.

The recent tragedy involving a college student in Nashville underscores the critical need for robust and reliable support systems to prevent future distressing outcomes in our communities. The alleged shooter, Shaquille Taylor, an adult diagnosed with an intellectual disability was adjudicated (declared) incompetent to stand trial for prior offenses. However, it appears Mr. Taylor did not receive critical rehabilitative services following that determination. **In reaction to this tragedy, we are hearing about proposals to institutionalize people with disabilities who commit violent acts rather than investigate the root causes of Mr. Taylor’s release to the community without services and supervision.**

The solution comes from better implementation and execution of current laws and properly funding existing programs to prevent gaps in services:

- 1) *TennCare*, the Medicaid program for the state of Tennessee, has exhibited an unwillingness to increase the number of people on the *Comprehensive Aggregate Cap (CAC) waiver*. The CAC waiver offers home and community services to individuals with intellectual disabilities to support independence and integration into the community. This includes people who have been discharged from the Harold Jordan Center following a stay of at least 90 days. The *Harold Jordan Center* is the last DIDD institution after the closing of *Clover Bottom Developmental Center* in 2015. **However, due to the high cost of caring for individuals with disabilities at the Harold Jordan Center, placement has decreased and despite room for 80 people, this is considered a four-bed facility, and only 3 people are currently receiving care there.**



- 2) Previously, adults with intellectual disabilities could receive services through the *Tennessee Department of Intellectual & Developmental Disabilities (DIDD)* in an *intermediate care facility (ICF)* – a “mini-institution” or large group home that provides long term care and supports to people with intellectual disabilities who may also be medically fragile, or having a health condition needing specific or extra care to stay healthy. However, with ICF placement at Harold Jordan no longer serving as an option, if the TDMHSAS does not take in these adults, their reality is often a lengthy stay in a hospital or jail. **Current Tennessee Code arguably points to DIDD as the appropriate custodian and service provider for adults with an intellectual disability where there is no mental illness (MI) diagnosis.**

- 3) *The Tennessee Department of Mental Health & Substance Abuse Services (TDMHSAS)* has the ability to treat adults with an *intellectual disability (ID)* who also have a *mental illness (MI)*. However, DRT has seen an increase in the number of adults with ID and MI being refused services through TDMHSAS, based on a determination that their mental illness is not what needs treatment. We know that TDMHSAS is experiencing major staffing issues, which has caused the closure of multiple units at the *Regional Mental Health Institutes (RMHIs)*, which treat people who have been involuntarily committed and others needing inpatient mental health services. **Bottom line: there needs to be services and supervision in place for this population following a legal decision of being incompetent to stand trial due to an intellectual disability. The relevant state departments must work together to ensure people like Mr. Taylor do not fall through the cracks.**

Disability Rights Tennessee’s (DRT’s) position as the Protection & Advocacy (P&A) agency for Tennessee gives us broad authority to access and monitor facilities across the state, including prisons and jails, where people with disabilities and/or mental health diagnoses receive services. **The recent gap in critical services for adults adjudicated delinquent is apparent to our investigators as clients sit in hospitals, jails, or out in the community while waiting for services they might not ever receive.** These service shortcomings put a strain on hospitals and jails as well as the disability population.

Instead of urging for reactive legislation, or legislation in response to this tragic event, that punishes vulnerable populations and calls for indefinite institutionalization, we ask lawmakers and advocates instead to address the current systems that fail them. **To keep our communities safe, we don’t need more laws seeking to institutionalize persons with disabilities who commit violent acts, just better implementation and execution of laws we have and proper funding to remedy the gaps in services and programming that exist.**

Key Terms List:

- A. **Adjudicated:** Pronounced or judged as



- B. **Clover Bottom Developmental Center:** Clover Bottom was a once the state's oldest institution for people with intellectual disabilities. The facility closed in 2015.
 - a. [Read about the closing of Clover Bottom here.](#)
 - b. [History of Clover Bottom and where it stands today.](#)
- C. **Harold Jordan Center:** A round-the-clock institution operated by the Tennessee Department of Intellectual & Developmental Disabilities (DIDD).
- D. **Intellectual Disability:** A disability that affects obtaining knowledge and skills, in this case specifically related to independent living.
- E. **Mental Illness:** A wide range of health diagnoses affecting thinking, behavior, and emotions.
- F. **Protection & Advocacy (P&A) Network:** A nationwide network of federally mandated legal-based agencies that protect and advocate for the rights of people with disabilities.
 - a. [Watch a video on the P&A Network here.](#)
- G. **Regional Mental Health Institution (RMHI):** Facility that treats people who have been involuntarily committed and others needing inpatient mental health services.
- H. **Rehabilitative Care:** Health care services that help you keep, get back, or improve skills and functioning for daily living that have been lost or impaired because you were sick, hurt, or disabled. (as defined by HealthCare.gov)
- I. **TennCare:** The Medicaid program for the state of Tennessee. It provides healthcare to multiple populations including children and individuals who are elderly or have a disability.
- J. **Tennessee Department of Intellectual & Developmental Disabilities (DIDD):** The state agency responsible for administering services and support to Tennesseans with intellectual and developmental disabilities.
- K. **Tennessee Department of Mental Health & Substance Abuse Services (TDMHSAS):** The state's mental health and substance abuse authority.

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**Spokespeople from Disability Rights Tennessee are available for comment.
For more information and for comment, contact:**

Disability Rights Tennessee (DRT) is the designated Protection & Advocacy (P&A) agency for Tennessee. DRT provides free legal advocacy services to protect the rights of Tennesseans with disabilities, and has broad access authority to monitor facilities, including juvenile justice facilities, and to investigate allegations of abuse and neglect. Visit www.DisabilityRightsTN.org for more information.