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## Care of Patients with Disabilities

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# Caring for Severely Mentally Disabled Children

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Recently, I had the privilege of witnessing the integration of care services for children with severe developmental disabilities at The Evergreen Center in Milford, Mass. The Evergreen Center ([evergreenctr.org](http://evergreenctr.org)) was founded in 1982 to provide educational services for children who could not function in a standard educational setting with their peers and had no alternatives. The model is holistic: Each classroom instructs up to eight children, who also live together in a community home. Students are paired with full-time staff members, who accompany the children both at home and at school. This individualized attention allows for continuity of care rarely found elsewhere.

Evergreen's guiding principles are social competency and normalization. Every day, students are given opportunities to function as members of their community, improving their abilities in language, activities of daily living and social and vocational skills. Staff members help their students develop these skills through the use of evidenced-based practices and interventions.

When I first visited Evergreen with Dr. Sheldon Benjamin, I was in awe, not only of the facilities but also of what the staff members were able to accomplish through their dedication to proven practices. In a moment that would cause me incredible stress and frustration (a child throwing a tantrum, for example), staff maintained their composure and intervened with the minimal redirection required to maintain safety, for both the child and those around him or her. At first, from my perspective, the goal of social competency seemed unattainable for many of these children; however, upon closer inspection, I realized that the success of the Evergreen model is nothing short of amazing.

For decades, Dr. Benjamin has made providing the highest level of care to the children of Evergreen his personal mission. His dedication to a population often marginalized is exceptional.

At each visit, we reviewed each patient's medical history and received behavioral updates through the use of accurate reporting of data presented in graphical form. These graphs allow for rapid assessment of changes in individual behavior over the preceding weeks and months. With each child on various medications ~ many of who are unable to communicate ~ the accuracy of data collection by the teachers and staff is paramount to monitor both therapeutic and adverse drug effects. Due to the patient's inability to participate in his or her treatment planning, great care was taken to assess adverse effects and adjust drug regimens, providing the lowest possible doses of medications while allowing the child to be as functional as possible. Many times, I found myself joining the cheers among the care team as we looked at a graph illustrating the decrease in self-injurious behavior from perhaps 1,000 episodes a month to 100, or even much less.

What was perhaps most impressive was witnessing Dr. Benjamin's rapport with each child. He knew every child's story. He knew their idiosyncrasies and the subtle ways they communicated. He greeted each child with a warm and genuine smile and completed whatever parts of the physical exam the child was willing to allow. My experience at Evergreen was invaluable, not only for developing my own comfort with and understanding of severe developmental disability but also for fostering future advocacy for a population in need. Dr. Benjamin's tireless work with this population is a testament to his dedication to practicing the highest level of medicine. It was an honor to help out at the Evergreen Center under his guidance ~ an experience I will never forget.

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