Louisiana Developmental Disabilities Council Position on Consolidation and Closure of Developmental Centers Adopted April 2005, Updated January 21, 2010

Position Statement

Louisiana's reliance on six segregated developmental centers for residential services to people with disabilities is excessive, costly, unnecessary and fundamentally unfair. Louisiana should immediately reduce the number of its developmental centers by consolidating them into a few smaller residential facilities, develop a plan to eventually close the remaining centers, and reallocate the state's resources from a reliance on institutional services to support of adequate, high quality community-based options for individualized supports and services.

Discussion

All people, regardless of the severity of their disability, have a right to live in their own homes in the community. The Louisiana Developmental Disabilities Council supports the full inclusion of individuals with disabilities in all facets of community life - where they live, learn, work, play and worship - so they are free to experience life and pursue happiness and meaningful relationships. Segregation in developmental centers deprives individuals of the benefits and freedoms afforded by participating in community life. It prevents countless reciprocal and loving relationships and robs Louisiana communities of the gifts and talents of thousands of our citizens.

"The goals of the Nation properly include a goal of providing individuals with developmental disabilities with the information, skills, opportunities, and support to make informed choices and decisions about their lives; live in homes and communities in which such individuals can exercise their full rights and responsibilities as citizens; and achieve full integration and inclusion in society, in an individualized manner, consistent with the unique strengths, resources, priorities, concerns, abilities, and capabilities of each individual." The Developmental Disabilities Assistance and Bill of Rights Act of 2000 (P.L.106-402)

Society's values change as civil rights, contemporary technology, and new medical and health approaches are incorporated into mainstream society. Outdated technologies and treatment approaches are then replaced by more advanced practice. Developmental centers, by their very nature, do not allow people with disabilities the freedom of choice to live where they wish. These institutions are no longer the contemporary approach for the way individuals with disabilities seek to live and receive treatment and supports. Public funding, removed from developmental centers and spent on services and supports people with disabilities want, and most importantly, deserve, will turn the restricted exercise of rights into the realization of freedom.

Louisiana's over reliance on institutional services is a barrier to freedom of choice for

people with disabilities; and by supporting six segregated developmental centers, the state does not allow the full exercise of freedom, not only to the residents of the developmental centers but also to the almost 9,200 individuals waiting for supports from the Home and Community Based Waiver.

Deinstitutionalization has been taking place in the United States for four decades. Unfortunately, Louisiana has not witnessed the same rate of reduction as the rest of the nation. In the 1990s alone there was a 44 percent decline in the number of people in state-operated institutions across the nation, while Louisiana saw a percent decline of 33 percent during the same time.³ From 2000 to 2006 there was a 20 percent decline across the nation with 17 percent in Louisiana.³ Deinstitutionalization of people with developmental disabilities has occurred because it is the right thing to do. The apparent lack of dedication to do the right thing has left Louisiana with the 4th highest number of people per capita living in developmental centers.³

Cost benefits would be realized with institutional closures in this state. According to figures obtained from the LA Department of Health and Hospitals, in State Fiscal Year 2008, Louisiana spent \$191 million to serve approximately 1,112 people in developmental centers and \$361 million to serve approximately 5,762 people through the New Opportunities Waiver (NOW). That amounts to an average cost per person in developmental centers of over \$171,000 as compared to under \$62,300 average cost per person receiving NOW funds. Newer NOW slots issued in FY2009 average \$41,000 per person. Recent cost comparisons of community and institutional services refute claims that institutions offer "economies of scale" or that the centralization of services at institutions is more cost-effective.¹

People with the most challenging needs can and do live successfully in their own homes in Louisiana and all over the country with appropriate, individualized supports. Research has proven that individuals grow and thrive as members of their community and have a better quality of life than in congregate settings.² Currently, eight states and the District of Columbia have found public institutions unnecessary in providing services and supports to people with disabilities.⁴ Alaska and New Hampshire do not utilize either institutions or small private ICFs/MR in supporting their citizens with disabilities. The continued practice of segregation in the face of this compelling evidence is inexcusable.

Louisiana must return its citizens with disabilities to their home communities where their lives can be enriched and they can enrich the lives of others. The consultants' report, *Program and Policy Review of Long Term Care in Louisiana* states, "downsizing inevitably pushes per person costs upward" and cites North Carolina as an example of a state whose costs have risen while they have downsized, but not closed, their developmental centers. It further states, "the amount of resources that could be redeployed to the community has been minimal. As a consequence, we recommend

that Louisiana confront facility closure sooner rather than later in order to maximize the amount of funds that can be shifted to community services."⁵

The state's efforts to expand community services to meet the needs of the nearly 9,200 individuals waiting for waiver services have been thwarted by maintaining costly institutions. This lack of community services has also forced families to institutionalize family members. It is time for the state of Louisiana to exercise leadership and chart a new course for services and supports for people with developmental disabilities and their families.

It is time for Louisiana to close, not downsize, its developmental centers.

The Developmental Disabilities Council urgently recommends that Louisiana:

- 1) Provide adequate funding and build capacity for high quality individualized supports and services in the community for all people with developmental disabilities.
- 2) Utilize the Resource Allocation Model across all settings to fairly distribute resources by allocating services according to need. (Individuals living in 24-hour small and large residential settings who do not require that level of support would be provided the level of services to meet their needs in alternate settings. Waiver recipients are already being assessed and their services are reduced if they are receiving more than their assessed level of need.)
- 3) Halt admissions into state developmental centers and improve the use of alternative safety nets by
 - a) expanding the criteria for and the number of emergency waiver slots available,
 - b) implementing a comprehensive crisis prevention and intervention system for individuals in the community including:
 - proactive preventive services, and
 - coordinated 24-hour crisis response services (including telephone hotline, mobile response teams, in-home crisis services, licensed short-term crisis residential services [private], and crisis response plans for hospitals and other general health care providers).
- 4) Consolidate and close all developmental centers by
 - a) designating three centers for immediate closure, giving the residents of each a choice of waiver services, private ICF/DD, or a developmental center remaining open, and
 - b) developing and implementing a transition plan for the closure of the remaining three developmental centers.
- 5) Redirect resources in the developmental disability service system utilizing cost savings from the Resource Allocation Model and the consolidation, closure, and sale

of developmental centers to support individuals on the waiver waiting list and those living in the community.

References:

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- ² Kozma, A., Mansell, J., Beadle-Brown, J., (2009). Outcomes in Different Residential Settings for People with Intellectual Disability: A Systematic Review. American Journal on Intellectual and Developmental Disabilities, 114, 193 – 222.
- ³ Braddock, D., Hemp, R., Rizzolo, M. C., (2008). *The State of the States in Developmental Disabilities 2008.* Department of Psychiatry and Coleman Institute for Cognitive Disabilities, The University of Colorado.
- ⁴ Prouty, R. W., Smith, G., Lakin, K. C., (2008) Residential Services for Persons with Developmental Disabilities: Status and Trends Through 2007. Research and Training Center on Community Living Institute on Community Integration / UCDD, University of Minnesota.
- ⁵ Milne, D., Smith, G., Holton, E., & Ploivka, L. (2004). *Program and Policy Review of Long-Term Care in Louisiana.* A Report developed for the State of Louisiana, Interagency Team.