

Olmstead Update – November 2002

Serving People with Developmental Disabilities in Communities

Developmental Disability Services Background

Up until the 1980s, services in North Dakota for people with developmental disabilities centered around institutions. If a family was unable to meet the unique needs of a loved one with disabilities, that person was placed at the Grafton State School (Developmental Center) or San Haven.

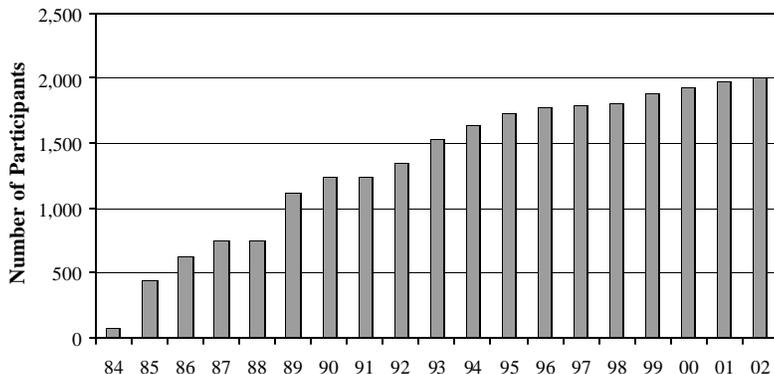
In the 20 years following a successful lawsuit filed by the ARC of North Dakota, the situation has changed dramatically. The voices and wishes of people with disabilities, their families, and advocates are being heard and an array of services and supports are available. Work with partnering organizations is ongoing to further expand consumer-directed services, independent supported living and family-based services.

A Time of Transition

1970s - 1980s

- 1,052 adults and children resided at the Grafton State School and San Haven in 1979.
- The legislature appropriated \$28.1 million dollars in the 1979-1981 biennium for the Grafton State School and San Haven.
- Four primary community agencies in North Dakota provided community developmental disability (DD) services.
- Community services for children and families did not exist.
- In 1982, a United States District Court ruling in the case of the *Association for Retarded Citizens of North Dakota, et al., vs. State of North Dakota*, resulted in substantial, court-ordered changes to North Dakota's service system for people with developmental disabilities.
- San Haven closed in 1987.

Developmental Disabilities Home & Community Based Waiver Participants



Evaluating Services

In North Dakota, DD providers are required to be accredited. The Council on Quality and Leadership in Supports for People with Disabilities consistently ranks North Dakota above most others in attainment of industry standards of quality.

Now

- About 147 people per month live at the Developmental Center in Grafton (formerly the Grafton State School), which has a 2001-2003 budget appropriation of \$41.1 million.
- The 2001-2003 appropriation for community-based DD services includes \$164 million for residential and day service providers and family supports, and \$9 million for supportive services provided by the eight regional human service centers such as infant development, case management, and supported employment.
- Forty licensed organizations provide DD community services in the state.
- 94 percent of the children receiving DD services are living in family home settings illustrating that supports and services keep children out of institutions.
- In order to maximize available dollars, needs and service usage are reviewed quarterly in the case management process. Funds can be transferred among family support programs and redistributed to meet needs. **OVER →**

People Served in the 2002 State Fiscal Year

- 1,922 adults and children with developmental disabilities received residential services, and of these, 1,102 people received supports in their homes, apartments or family foster care homes
- 1,286 families of children with developmental disabilities or delays received early intervention, support services in their homes or help with costs related to their children's disabilities
- 3,973 people with developmental disabilities received case management services to assess needs, review goals, and to access and monitor appropriate community services
- 324 people with developmental disabilities were employed an average of 21 hours per week with the support of a job coach (combined estimated earnings total \$1.65 million)

Funding of DD Services

- The Department of Human Services has sustained state general fund support for services for people with developmental disabilities (\$53.7 million in the 2001-2003 biennium). In addition, the department continues to increase the amount of federal funds accessed.
- The department reimburses DD providers for staff working in group homes at an average rate of \$10.83 per hour, which includes fringe benefits of 30 percent.
- In addition to regular inflationary increases, recent legislative actions to enhance wages of direct contact staff included a \$.44 per hour increase in 1997, a \$.36 per hour increase in 1999, and a \$.10 per hour increase in 2001.
- North Dakota did provide a 2.2 percent inflationary increase to DD service providers during the first year of the current biennium.
- In July 2002, acting to address a projected \$14 million state general fund shortfall, the Department of Human Services canceled a planned inflationary increase in payment rate to providers. Similar action was taken with almost all provider groups to rein in spending while preserving key services.
- DD community providers were exempted from the one percent allotment ordered by Governor Hoeven in July 2002. The Developmental Center and State Hospital were not exempted, illustrating the priority DHS places on community-based services.

How Does North Dakota Compare?

- 1st** In 2000, N.D. led the nation in total fiscal effort, spending \$7.16 per \$1,000 of state personal income on MR/DD Services. The national average was \$3.67 per \$1,000.¹
- 4th** In 2000, N.D. ranked fourth among the states in spending on community MR/DD services per \$1,000 of state personal income.²
- 1st** In 2001, N.D. ranked first in overall placement rate, with 314 persons receiving DD residential services per 100,000 of state population. (The national average was 115 persons per 100,000 population.)³
- 2nd** In 2001, the state ranked second in the nation in the number of persons per 100,000 of the state population receiving residential services in settings serving six or fewer persons.⁴
- 1st** N.D. ranked first in the nation for the number of persons per 100,000 population receiving residential services in settings serving 15 or fewer people in 2001.⁵

The Future

Services for people with disabilities in North Dakota will continue to adapt to changing expectations and standards. The input from consumers and families regarding services and program decisions is vital to this process. The one-on-one relationships that individuals and families have with DD case managers and advisory committees at state and local levels also help assure that the state is accountable and responsive.

As the department strives to find efficiencies, we will continue working to assure that the unique needs and goals of the people receiving services remain the focus.

- Carol K. Olson, DHS Executive Director

Notes

¹ *The State of the States in Developmental Disabilities: 2002 Study Summary*, Coleman Institute for Cognitive Disabilities and Department of Psychiatry, University of Colorado, January 2002

² Ibid.

³ *Residential Services for Persons with Developmental Disabilities: Status and Trends Through 2001*, Research and Training Center on Community Living, University of Minnesota, June 2002

⁴ Ibid.

⁵ Ibid.

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