



CT NEEDS MORE SERVICES FOR PEOPLE WITH INTELLECTUAL/ DEVELOPMENTAL DISABILITIES

"Parents call our agency and weep about the desperation they feel at not knowing how their child will fare after they die." – CT Nonprofit Provider



Several thousand people with an intellectual/developmental disability (I/DD) are currently languishing on a waiting list for residential services in Connecticut. This is because the state has not allocated resources to provide enough programming to serve everyone who is entitled to receive care.

For each of these individuals, this means remaining in the care of their parents, grandparents, siblings, or other guardians, many of whom must alter or eliminate their own work schedules to provide support. Often, this forces families to seek additional state-funded social services, as they are not able to provide their own insurance, medical benefits, or even funding for food.

With supports tailored to their needs, people with intellectual and developmental disabilities can thrive in their communities, and families who have left the workforce to care for their children can return knowing their loved ones are being supported in the most appropriate environment possible.

NONPROFITS STAND READY TO HELP

Community providers are ready and willing to offer new programs in a wide range of categories needed -- however, as the waiting list for services continues to grow, providers struggle to cope with increasing costs. They stand ready to support people with I/DD, pulling from their deep expertise, infrastructure, and community ties -- but the state must provide them adequate resources to do so.

Nonprofits are critical partners with the State serving people with I/DD. Through nonprofit private providers, the Department of Developmental Services (DDS) provides individuals with I/DD the services and supports necessary to develop relationships, exercise personal choice, develop competence and participate in community life. Across Connecticut, 17,206 individuals with I/DD currently receive services funded by the Department of Developmental Services (DDS). Thousands more, while eligible, unfortunately remain on the waiting list for services due to lack of adequate state funding.

THE LEGISLATURE CAN MAKE MEANINGFUL CHANGES FOR PEOPLE WITH I/DD, NOW

01. Increase funding for current services

Despite their invaluable contributions to our communities, nonprofit providers have been underfunded by the State for decades. The State should increase funding for nonprofits to cover the true cost of inflation, raising funding levels by nine percent (\$261 million) in Fiscal Year 2023-2024 and by seven percent (\$221 million) in Fiscal Year 2024-2025.

02. Implement the Innovation Incentive Program

The program promotes efficiency. The State's contracting process encourages "spending to the line," or spending all allocated funds, rather than encouraging efforts to realize efficiencies or economies of practice. An efficient or innovative agency that succeeds in meeting every contractual expectation experiences no net benefit, compared to a less efficient agency that spends all allocated funds. Purchase of service contracts had essentially built-in disincentives for efficiency, as savings generated must be returned to the State rather than reinvested in community programs and services.

03. Provide sustainable funding for the waiting list

There are thousands of people who need services but who do not have services available due to lack of state funding. Providing sustainable funding to stand up new programs to serve them is imperative. But it's important that the funding is sufficient to pay for services at their actual cost, not at the same under-funded levels that current services are funded, and that they include sufficient start-up costs.

04. Convert state-operated services to the community

Nonprofits already provide services to more than 90% of the people in the I/DD system, and there are fewer than 30 state-operated group homes that have not been converted. Finally eliminating the bifurcated service system will allow the state to focus solely on its primary role: oversight and quality assurance rather than dedicating significant resources to providing its own direct care.

05. Ensure legislative oversight for systems-level change

With significant systems changes being promoted by DDS, it's important to establish renewed legislative oversight over the service-system, including voices from families, advocates, consumers and providers. This oversight should include the state-operated system, as that system is where the most-restrictive institutional settings are currently operating.

06. Eliminate unnecessary contracting requirements

Nonprofit providers waste valuable time and resources on contract requirements that do not add much or any value to the quality of the services they deliver to people with I/DD. The legislature should work to streamline contracting requirements so nonprofits can focus more on service-delivery and less on paperwork.

OVERVIEW:

TYPES OF I/DD SERVICES

More than 90% of people in the DDS system are supported by community providers. Services for people with I/DD fall into two categories: (1) residential services or (2) day and employment services. Nonprofits offer a wide array of residential supports, including Community Living Arrangements and Continuous Residential Supports—commonly known as group homes, individual home supports, Community Companion Homes, and more. About half of people receiving supports and services through DDS receive residential services, Community Living Arrangements, or CLAs. Nonprofits also offer support for people with I/DD during the day.

RESIDENTIAL SERVICES

- **Community Living Arrangements (CLAs)**

Commonly referred to as group homes – offer individuals opportunities to live in typical community housing. Homes generally serve six or fewer individuals and are part of neighborhoods and communities across the State and are meant to provide people with disabilities the ability to live in the community while still receiving the 24-hour supports they need to live safe and productive lives. To capture federal reimbursement, CLA residents are enrolled under the Medicaid Home and Community Based Waiver.

- **Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID)**

These homes provide support for individuals who would otherwise need to reside in a more restrictive or institutional setting. They operate much like specialty group homes for people with very significant needs. Private ICF/IID services are not part of a Waiver and are funded directly through Medicaid.

- **Continuous Residential Supports (CRS)**

A shared living arrangement for three or fewer DDS individuals that often provides 24-hour staff support.

- **Community Companion Homes (CCH)**

In this arrangement, a family shares their home with an individual who is eligible for services from DDS. The family accepts the responsibility for caring for one to three individuals with I/DD.

- **Individualized Residential Supports**

A tailored package of services and supports that best meet the individual's needs, goals and preferences to live in the community in a home of their choosing. These services and supports may be delivered in a family or an individual's own home.

“Francis lives in a real home in a real neighborhood where he gets all the attention he needs and loving supportive care from a wonderful staff. He is content, happy, and calm. We could not be more pleased with his excellent personal and medical care.” – Patrick and Marjorie Johnson, family members

EMPLOYMENT SERVICES

- **Competitive Integrated Employment (CIE)**

Employment at minimum wage or higher, in a fully integrated setting. Job coaching support if needed based upon each individual's level of need.

- **Individualized Supported Employment (ISE)**

An employment specialist (job coach) helps an individual find competitive employment through a job discovery process, provides training and support, and then gradually reduces time and assistance at the worksite.

- **Customized Employment (CE)**

This is an alternative method of finding competitive integrated employment, highly structured, focusing on each individual's strengths, skills, and abilities and the unmet needs of employers.

- **Group Supported Employment (GSE)**

Supported employment in a competitive employment environment in which a group of individuals with I/DD work together at a particular work setting under the supervision of an employment specialist.

PRE-EMPLOYMENT SERVICES

- **Employment Transition Services (ETS)**

Community-based, occupational service that is time limited up to 3 years (with some exceptions). Activities occur in integrated settings and may include unpaid career exploration, financial management, networking, building skills leading to employment and health and fitness activities that lead to better employment outcomes.

- **Project Search**

Nine-month internship training program, available to school-transition-age students and young adults eligible for DDS services, who need more intensive employment skills training.

DAY SERVICES

- **Group Day Supports (DSO)**

If an individual with I/DD chooses not to work, they can participate in facility-based group day services with other people with I/DD and support staff. Program activities can occur in both community and facility-based settings.

- **Individualized Day Supports – Vocational (IDV)**

An individualized day service that enables someone to overcome barriers to accessing, maintaining, or returning to employment. This service is provided within the community or with a community partner and is not provided at a facility or home.

- **Individualized Day Supports Non – Vocational (IDN)**

An individualized day service centered around community participation and/or meaningful retirement activities. This service is provided within the community or with a community partner and is not provided at a facility or home.

- **Senior Supports**

Pre-retirement service designed to prevent isolation, assist in maintaining skills, and stimulate social interaction with others.

Contact Us

Gian-Carl Casa, gcasa@ctnonprofitalliance.org

Ben Shaiken, bshaiken@ctnonprofitalliance.org

Jeff Shaw, jshaw@ctnonprofitalliance.org

Julia Wilcox, jwilcox@ctnonprofitalliance.org