

## Individual and Family Support: Where You Live Matters

### The Unintended Impact of LA's Move to Local Governance Entities

*This article is to inform advocates about the impact on support services as the state's disability community support system has decentralized creating human services districts/authorities (LGEs) and the increasingly important role advocates must play to ensure individual and family supports are adequately funded and are a priority.*

Last year 2,683 individuals with developmental disabilities and their families across the state relied on the Individual and Family Support (IFS) program for supports and services so that they could live in their own home or with their families rather than in out-of-home placements. For many, IFS provides resources not covered through other programs, improves their ability to live on their own or care for their child and reduces the financial stress associated with living with a disability. This program often provides immediate access to supports in crisis situations and can provide a lifeline to families who have nowhere else to turn. Unfortunately, the number of people served and/or the level of support they receive has been decreasing the last several years and that trend will continue this year. The IFS program has been drastically reduced in some areas of the state due to budget cuts and decisions being made at the local level.

Prior to 1989, the delivery of community services for people with developmental disabilities, such as IFS, was the sole responsibility of the state through the Department of Health and Hospitals (DHH). This began to change when DHH transferred its authority to Jefferson Parish Human Services Authority in 1989 and Capital Area Human Services District (CAHSD) in 1997. In 2008, the framework for the remaining Local Governance Entities (LGEs), otherwise known as human services districts and authorities, was created. Currently there are six operational LGEs; the remaining four regional offices are scheduled to convert over by July 2013. Each LGE has the responsibility and authority for providing developmental disability community services, in addition to addictive disorders, behavioral health and some public health services. This means that when budget cuts are imposed, each LGE decides which programs to cut.

#### **Comparing IFS Budgets across LGEs and DHH Regional Offices**

Unfortunately, since 2005, LGEs have cut their IFS budgets on average 46%, whereas regions under state authority have only had their IFS budgets cut 1% during this same time period. (See Table 1 below for the IFS budgets by region). **Substantial differences in IFS budgets between regions create geographic disparity and/or inequity in the availability of this vital program.** Some of the difference between the amount of IFS budget cuts between the LGEs and DHH's regional offices can be attributed to DHH having a larger budget and therefore more flexibility in determining which programs to cut or where cuts to their overall budget can be absorbed. For instance, the state was able to protect home and community based services, including its IFS budget, by absorbing some of

the massive cuts over the past several years through the downsizing and closure of developmental centers.

## **Comparing IFS Budgets between LGEs**

However, even comparison of IFS budgets between LGEs reveals significant disparities across regions. For example, Florida Parishes Human Services Authority (FPHSA), which includes the Northshore of Lake Pontchartrain and the growing parishes of Livingston and Tangipahoa, has the smallest IFS budget amount per capita at only \$0.48. The most populated region, CAHSD, doesn't do much better at \$0.66 per capita. These per capita budget amounts are in stark contrast to Metropolitan Human Services District (Orleans, St. Bernard and Plaquemines parishes), that has an IFS budget of \$2.62 per capita, almost four times the amount of CAHSD and over five times the amount of FPHSA! Although there have been shifts in population in these three regions since Katrina, these population shifts do not explain the huge difference in their IFS budgets.

All the LGEs have sustained drastic cuts to their overall budgets over the last several years. What is unknown is how some LGEs were able to protect their IFS funds from these cuts and others were not. Is it simply a matter of priority or are there other issues that play into the decision?

One thing is certain, state law requires LGEs to maintain services on at least the same level as the state maintains in similar programs. This requirement is included in the Memorandum of Understanding (or contract) between DHH and the LGEs. That is clearly not occurring. Individuals with developmental disabilities and their families living in FPHSA, CAHSD and Jefferson Parish clearly do not have access to the same level of IFS resources as those living in other areas of the state.<sup>1</sup>

## **Comparing IFS to Consumer Care Resources**

To determine if other program budgets are being cut in the LGEs as compared to the regional offices, the DD Council also looked at Consumer Care Resources (CCR), a program similar to IFS designed to help children with behavioral health needs stay at home with their families. This program has a much smaller "pot" of state funds than the IFS program but is an important resource to the families who need it. From 2005 to 2012 CAHSD and South Central La. Human Services District (Lafourche/Terrebonne area) were the only LGEs that cut their budgets for CCR, by 61% and 47% respectively. The four DHH controlled regional offices protected their CCR funds with only two of the regions cutting their CCR budgets by very nominal amounts during the same time period. Again, families in two of the LGEs, this time with children with behavioral health needs, are not getting equal access to this program as their peers in other areas of the state.

The Council is charged with overseeing both the IFS and the CCR programs and others created and funded by Act 378 of 1989. Act 378 established the Community and Family Support System to

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<sup>1</sup> Acadiana Area Human Services District (AAHSD) was not included in this list because OCDD indicated in November 2012 that additional dollars will be transferred from OCDD to AAHSD for this fiscal year only.

enable individuals with disabilities to stay at home and with their families rather than having to move into an institution or community home to receive needed services. The Council has advocated for increased funding for the Community and Family Support System for over twenty years as these programs are proven to be cost effective, flexible and desired by families. As the state has shifted from the centralized DHH budget to the LGEs, protecting the Act 378 programs/funds has proven to be more difficult. And advocating for additional funds poses similar challenges.

## **How to ensure equal access statewide?**

To get back on track, IFS funding must be restored statewide and DHH must enforce the contract with the LGEs to ensure compliance with indicators measuring the level and quality of services to prevent future occurrences.

Legislators are probably not aware of the disparity that exists in the IFS program in the state nor would they be aware of the massive cuts to this particular program in some of the regions.

- Advocates are encouraged to meet with their legislators to educate them on the importance of this program and other home and community based services and the impact of these and future cuts to the LGEs and DHH.

In addition, advocacy must occur on the local level. Beginning in July 2013, an LGE will be the responsible entity in every region of the state. The LGEs are governed by boards of directors which meet monthly.

- Advocates are encouraged to attend their LGE board meetings to educate members about the impact of cuts to the IFS program and ALL home and community based programs for individuals with developmental disabilities.
- Advocates are also strongly encouraged to apply for membership on their LGE board when positions become available. The process for becoming an LGE board member varies from region to region. For more information on board membership, [click here](#).
- And finally, advocates are encouraged to join the Council's grassroots advocacy network, LaCAN. LaCAN will be advocating for protection and restoration of funding for the IFS program and other Act 378 programs such as the Flexible Family Fund and the NOW waiver. To sign up for LaCAN or for more information, visit the [LaCAN](#) website.

The protection and restoration of these important programs will take the resolve and efforts of many. Get involved today!

**Table 1: Comparison of Individual and Family Support (IFS) from March 2005 to August 2012 by Region/LGE**

Regional Office/LGE (District/Authority)	IFS Budget March 2005	IFS Budget August 2012 <sup>1</sup>	IFS Budget August 2012 Over/(Under) IFS Budget March 2005	Percent change from March 2005 to August 2012	2010 Census Population	Average budgeted per capita
Metropolitan (Orleans, St. Bernard, Plaquemines)	\$ 1,298,137	\$ 1,054,495	\$ (243,642)	-19%	402,768	\$2.62
Capital Area (East Baton Rouge and 6 surrounding parishes)	\$ 1,057,601	\$ 440,974	\$ (616,627)	-58%	663,255	\$0.66
South Central (Lafourche, Terrebonne, St. Charles and 4 others) <sup>2</sup>	\$ 751,050	\$ 674,741	\$ (76,309)	-10%	407,055	\$1.66
Acadiana Area (Lafayette and 7 surrounding parishes) <sup>2</sup>	\$ 1,131,824	\$ 579,082 <sup>3</sup>	\$ (552,742)	-49%	584,118	\$0.99
OCDD Region 5 (Lake Charles and 5 surrounding parishes)	\$ 503,135	\$ 494,808	\$ (8,327)	-2%	292,619	\$1.69
OCDD Region 6 (Alexandria and 8 surrounding parishes)	\$ 653,219	\$ 632,040	\$ (21,179)	-3%	309,761	\$2.04
OCDD Region 7 (Shreveport and 9 surrounding parishes)	\$ 805,739	\$ 835,506	\$ 29,767	4%	544,249	\$1.54
OCDD Region 8 (Monroe and 12 surrounding parishes)	\$ 789,444	\$ 756,600	\$ (32,844)	-4%	355,761	\$2.13
Florida Parishes (St. Tammany, Livingston and 3 surrounding parishes)	\$ 762,462	\$ 261,067	\$ (501,395)	-66%	541,234	\$0.48
Jefferson Parish	\$ 1,500,000 <sup>4</sup>	\$ 475,832	\$ (1,024,168)	-68%	432,552	\$1.10
<b>Total LGEs</b>	<b>\$ 6,501,074</b>	<b>\$ 3,486,191</b>	<b>\$ (3,014,883)</b>	<b>-46%</b>	<b>3,030,982</b>	<b>\$1.15</b>
<b>Total regions under state authority</b>	<b>\$ 2,751,537</b>	<b>\$ 2,718,954</b>	<b>\$ (32,583)</b>	<b>-1%</b>	<b>1,502,390</b>	<b>\$1.81</b>

<sup>1</sup> Data are from Act 378 reports provided by OCDD for the October 2012 meeting of the DD Council's Act 378 Subcommittee.

<sup>2</sup> In 2005, South Central and Acadiana Area were still operating as DHH/OCDD Regional Offices.

<sup>3</sup> In FY 13, OCDD will be providing Acadiana Area with an additional \$274,000 in Self-generated Revenue. These are one-time funds and will not be available in ensuing years. This information was reported to the DD Council on 11-20-12.

<sup>4</sup> 2005 budget figures were not available for Jefferson Parish Human Services Authority. The \$1.5 million budget data for IFS is from March 2007.