

State Developmental Centers

Mission

To provide quality institutional services to individuals with developmental disabilities to ensure each individual develops and lives to their greatest potential.

Summary of Activities

The **Family and Social Services Administration (FSSA)**, Bureau of Developmental Disability Services (BDDS) provides direction and oversight to the Fort Wayne State Developmental Center and the Muscatatuck State Developmental Center.



These two state developmental centers (SDCs) serve approximately 630 adults with developmental disabilities. The residents are severely or profoundly mentally retarded, or have severe anti-social behavior that is considered to be dangerous to themselves or others. The residents also typically have secondary disabilities such as mental illness, cerebral palsy, epilepsy, visual impairments, and hearing impairments. Only eight individuals have been placed in the SDCs since January 1999, while 183 have moved to community settings. The residents receive long-term services at the SDCs. Some individuals have called one of the state developmental centers their home for more than 50 years.

The SDCs work closely with the BDDS field services staff in conducting person-centered planning meetings with consumers, families, and advocates to ensure

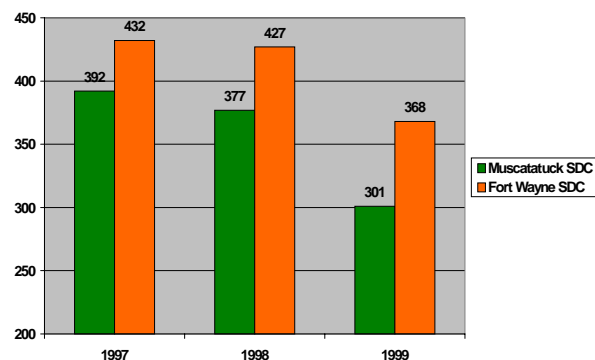
appropriate services are provided as well as effective conversion/transition processes are in place to address planned moves to community-based settings and institutional admissions.

Individuals with developmental disabilities should have the same rights and opportunities as all individuals. Individuals with developmental disabilities need support and assistance to experience life in a safe and enjoyable manner and to increase their skills and independence in the most integrated setting possible. Until cost-efficient and effective services are available in the community to meet the unique and challenging needs of this segment of the developmental disabilities population the services provided at the state developmental centers will continue to be needed.

External Factors

The emphasis of federal funding and oversight has shifted to ensure that meaningful, continuous treatment is provided for each client served at an SDC, and that health and safety standards are met. There is also evidence of increased federal focus on deinstitutionalization. Approximately every six months a large congregate facility closes in the United States. Implementation of these priorities requires expert planning and design, as well as appropriate resources to ensure compliance and meet federal expectations. This federal oversight coincides with the state's commitment to assure quality services are provided to the developmentally disabled. Since June 1994, over 700 individuals with developmental disabilities have moved from large intermediate care facilities for the mentally retarded (ICFMRs) into more individualized, integrated, community-based settings where they have an opportunity to experience a greater quality of life.

Number of Residents at Muscatatuck and Ft. Wayne State Developmental Centers



Evaluation and Accomplishments

With the closing of New Castle State Developmental Center and Northern Indiana State Developmental Center in 1998, over 200 people successfully entered community settings. In addition, 183 individuals have transitioned into community settings from Muscatatuck and Fort Wayne Developmental Centers since January 1999. At Muscatatuck, the entire service delivery system has been overhauled to address federal certification issues. This has resulted in a restoration of approximately \$1,445,846 in monthly Medicaid funding as of December 2000. The additional buildings are targeted for recertification as they become ready, which will result in the return of full Medicaid funding. This phased approach has enabled Muscatatuck to stratify improvement efforts to address the diverse needs of the consumers.

The Governor's Council on State-Operated Care Facilities issued a long-range plan in December 2000 to recommend a direction that will assure quality services are provided to persons living in and treated by Indiana's state-operated facilities.

Plans for the Biennium

A comprehensive plan for both state developmental centers has been initiated. It will be in process during the biennium to establish consistent operational practices at both state developmental centers to insure the aggressive provision of training to develop the skills and abilities of residents and to protect their health and safety. Person-centered planning, service plan development, behavior management, inclusion, medical services, and adaptive equipment are factors addressed in the plan.

Muscatatuck State Developmental Center was decertified from participation in the Medicaid reimbursement program in March 1999. As of November 2000, three out of the four phases have been recertified and are again receiving federal Medicaid funds. Efforts are underway to establish entirely new operational systems and service processes at Muscatatuck. New procedures ensure resident safety and have eliminated the use of mechanical restraints. Model training techniques emphasize best practices in behavior management, training, and skill development. Through this intense redesign, consumers benefit from a better quality of life that targets their involvement in continuous active treatment including training in personal skills essential for independence and privacy such as toilet training, personal hygiene, self-feeding, bathing, dressing, grooming, and communication of basic needs. This active treatment ensures the individual is involved in meaningful activity that increases their opportunities to reach their fullest potential.

