

California NCI Adult Consumer Survey

Tri-Counties Regional Center Report

Fiscal Year 2014-2015 Data



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Quality Assessment Project and National Core Indicators ©

This report contains regional center level results from California’s statewide National Core Indicator (NCI) Adult Consumer Survey data collection from fiscal year 2014-2015 (FY14/15) in accordance with Welfare and Institutions Code (WIC), Section 4571. WIC, Section 4571 directs the Department of Developmental Services (DDS) to collect accurate, reliable, and valid consumer and family satisfaction measures as well as individual outcome data. In California, data from the project will be used to review and benchmark statewide and regional center developmental disability service system performance.¹ This report shows Adult Consumer Survey findings from Tri-Counties Regional Center compared to the California statewide and NCI averages. Regional centers can use this report to help guide strategic planning and monitor systemic changes.

What is NCI?

The NCI program is a voluntary effort by state developmental disability agencies to gauge their own performance using a common and nationally validated set of measures. The effort is coordinated by the National Association of State Directors of Developmental Disabilities Services (NASDDDS) in collaboration with the Human Services Research Institute (HSRI). NCI has developed a set of more than 100 standard performance measures (or “indicators”) that states use to assess the outcomes of services provided to individuals and their families. These indicators focus on areas such as: employment, rights, service planning, community inclusion, choice, health, and safety. During the FY14/15 data collection cycle, 41 states, the District of Columbia and 22 sub-state entities participated in NCI. Not all participating states complete each NCI survey every year.

What is the NCI Adult Consumer Survey?

The NCI Adult Consumer Survey is a face-to-face interview conducted with an adult (age 18 and over) who is receiving services from the state; it is used to gather data on approximately 60 consumer outcomes, and it is refined and tested to ensure that it is valid and reliable.

¹Refer to the California Adult Consumer Survey Report FY 14/15 for information about Quality Assessment Project implementation, the NCI, and California’s Statewide results.

Interviewers meet with individuals to ask questions about where they live and work, the kinds of choices they make, the activities they participate in within their communities, their relationships with friends and family, and their health and well-being. The Adult Consumer Survey also contains a Background Information Section. The data in this section, typically compiled prior to the face-to-face interview by consulting state/case management records, contain information on demographics, personal characteristics, health diagnoses and employment.

What topics are covered by the survey?

The National Core Indicators are organized by “domains” or topics. These domains are further broken down into sub-domains, each of which has a statement that indicates the concerns being measured. Each sub-domain includes one or more “indicators” of how the state performs in this area. The table on the following page lists the domains, sub-domains, and concern statements addressed by the NCI Adult Consumer Survey indicators.

TABLE 1. NCI ADULT CONSUMER SURVEY – DOMAINS, SUB-DOMAINS, CONCERN STATEMENTS

Domain	Sub-Domain	Concern Statement
Individual Outcomes	Work	People have support to find and maintain community integrated employment.
	Community Inclusion	People have support to participate in everyday community activities.
	Choice and Decision-Making	People make choices about their lives and are actively engaged in planning their services and supports.
	Self Determination	People have authority and are supported to direct and manage their own services.
	Relationships	People have friends and relationships.
	Satisfaction	People are satisfied with the services and supports they receive.
Health, Welfare, and Rights	Safety	People are safe from abuse, neglect, and injury.
	Health	People secure needed health services.
	Medications	Medications are managed effectively and appropriately.
	Wellness	People are supported to maintain healthy habits.
	Respect/Rights	People receive the same respect and protections as others in the community.
System Performance	Service Coordination	Service coordinators are accessible, responsive, and support the person's participation in service planning.
	Access	Publicly-funded services are readily available to individuals who need and qualify for them.

How were people selected to participate?

Based on the total number of adults (age 18 and over) who are receiving DDS services, it was determined that a target number of 400 surveys per regional center would provide a valid sample for this analysis.² People who were presently living in a developmental center were not part of the sample.

An additional group of people who had moved from developmental centers to the community in the past five years was selected so that their results could be looked at separately³. Overall, the total number of surveys completed across the State of California was 8,405. For more information on sampling, please see Appendix A and Appendix D of the FY14/15 Consumer Outcomes Final Report/Adult Consumer Survey Final Report, accessible at <http://www.nationalcoreindicators.org/resources/reports/>.

Proxy Respondents

Proxy responses are allowed only for Section II (Community Inclusion, Choices, Respect/Rights, and Access to Needed Services), which is based on objective measures. Proxy respondents may also provide supplemental information for the Background Information Section. Proxy respondents are used only when the individual cannot complete the survey or chooses to have a proxy respondent. Only people who know the individual well – such as family, friends, or staff – are acceptable proxy respondents. To avoid conflict of interest, service coordinators are not allowed to provide proxy responses for individuals on their caseloads.

Cautions in the Use of These Data

The NCI Adult Consumer Survey tool is not intended to be used for monitoring individuals or providers; instead, it assesses system-wide performance. The NCI Average should not be interpreted as necessarily defining “acceptable” levels of performance or satisfaction. Instead, it describes average levels of performance or satisfaction across states and sub-state entities using representative samples, such as regional

² A randomly selected group of 400 people meets the accepted standard for a representative sample with a +/-5% margin of error and a 95% confidence level. For additional details on sampling and administration methods, please see the California Adult Consumer Survey Report FY14/15.

³ A supplemental Movers report will be produced by UC Davis and made available on the DDS website.

centers. It is up to public managers, policy-makers, and other stakeholders to decide what is an acceptable or unacceptable result (i.e., scale score or percentage of individuals achieving the indicated outcome).

What is contained in this report?

This report compares the FY14/15 NCI Adult Consumer Survey demographic and individual outcome results from Tri-Counties Regional Center to the California Statewide Average and the NCI Average. The NCI Average is calculated by averaging all the states' estimates (i.e., an "average of averages"). Therefore, each state contributes the exact same weight to the NCI Average, including California. Statistical weights were applied to the statewide and regional center estimates to account for the oversample of movers as well as regional center population size.⁴ Thirty-one (31) states, the District of Columbia, and one regional council submitted valid samples of Adult Consumer Survey data. The average of the results from these states comprise the NCI Average. All 21 regional centers are represented in the sample. All results are shown in charts, with averages or percentages noted on the chart. **Please note**, if a regional center had fewer than 20 respondents to a certain question, the data is excluded from the analysis for that particular question; however, that regional center's data are included in the statewide average.

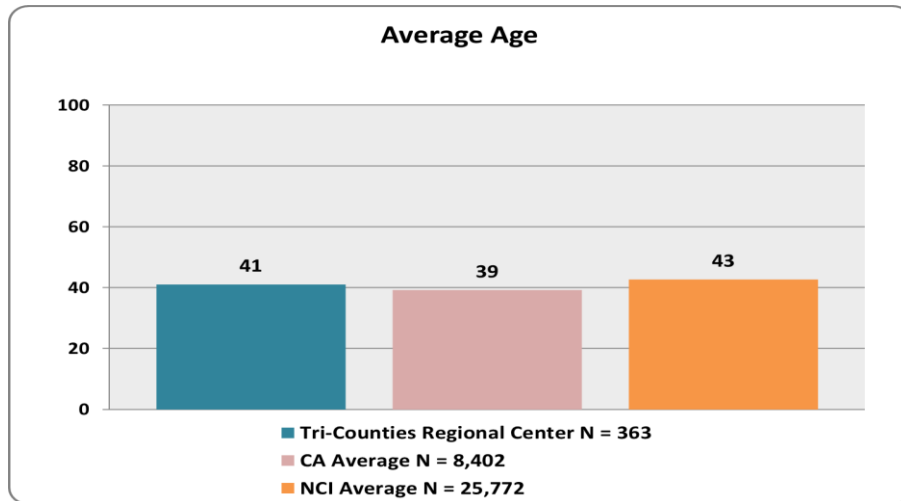
Further information on how the NCI Average is calculated as well as individual state and national data results for the NCI Adult Consumer Survey can also be found online at <http://www.nationalcoreindicators.org>.

⁴ For more information on the weights applied to data, refer to the California NCI Adult Consumer Survey Results FY14/15.

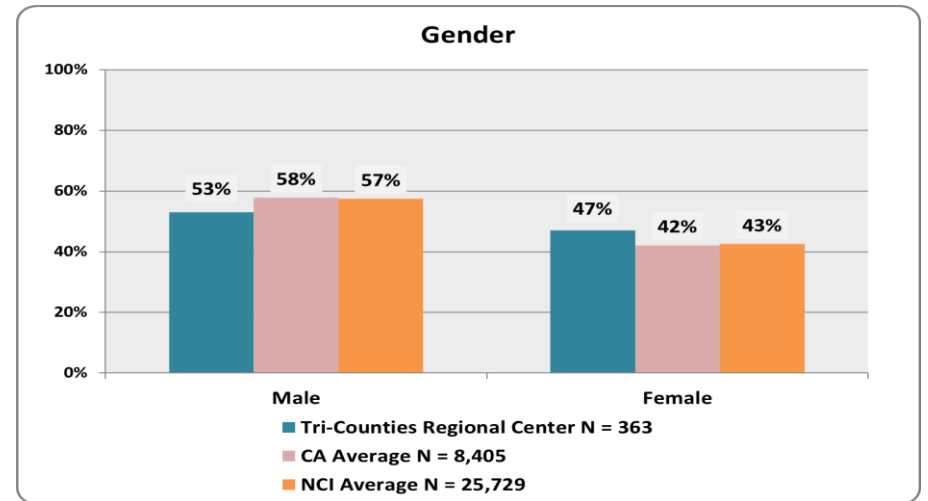
Results: Demographics

Illustrates the demographic profile of survey participants

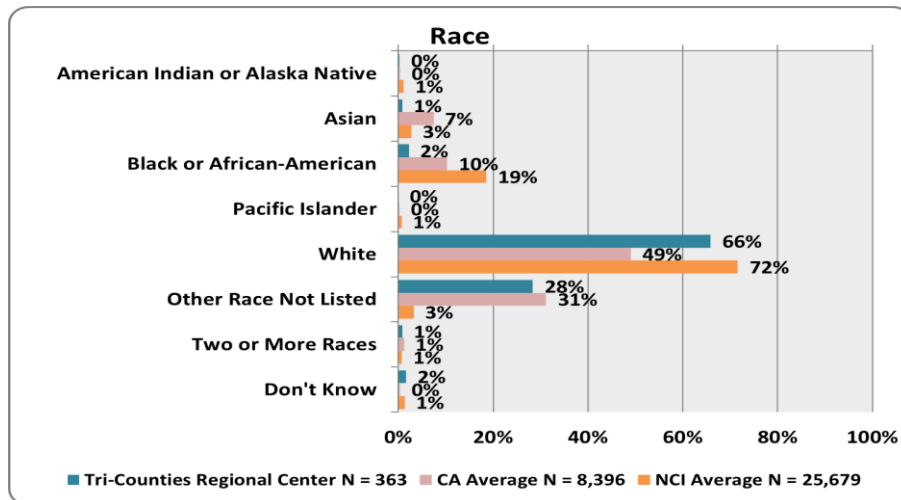
GRAPH 1. AVERAGE AGE



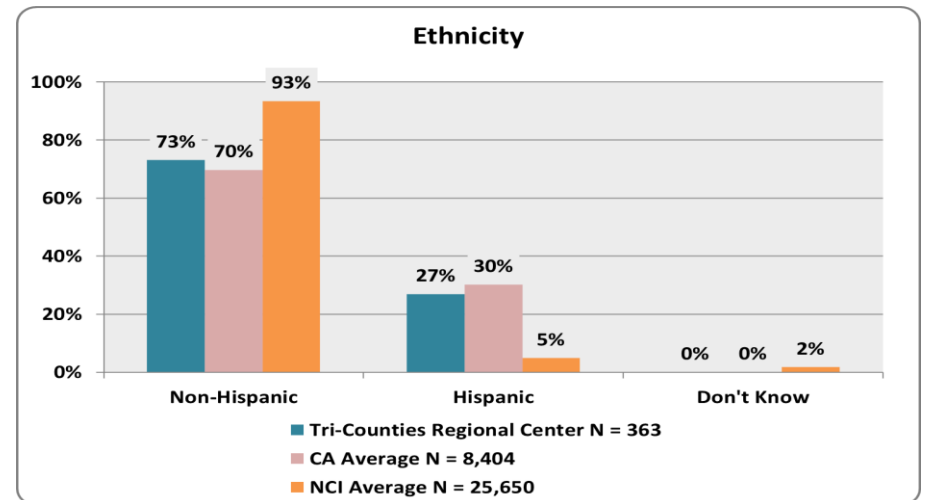
GRAPH 2. GENDER



GRAPH 3. RACE*

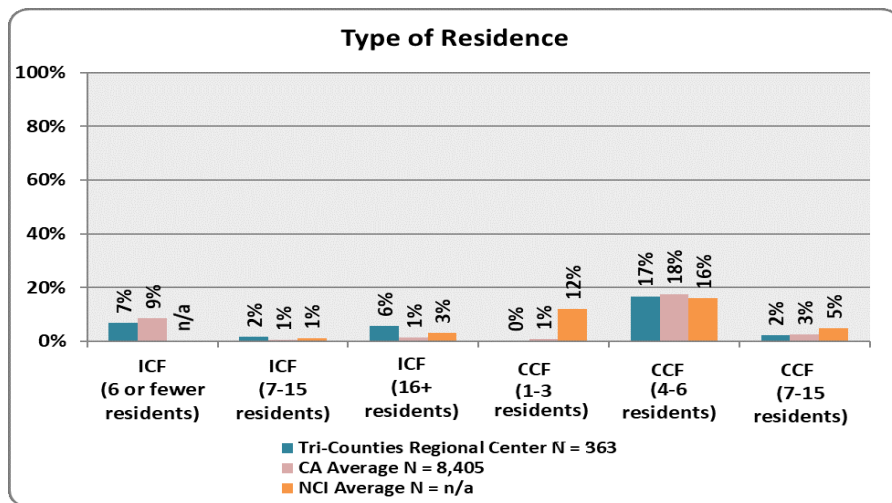


GRAPH 4. ETHNICITY

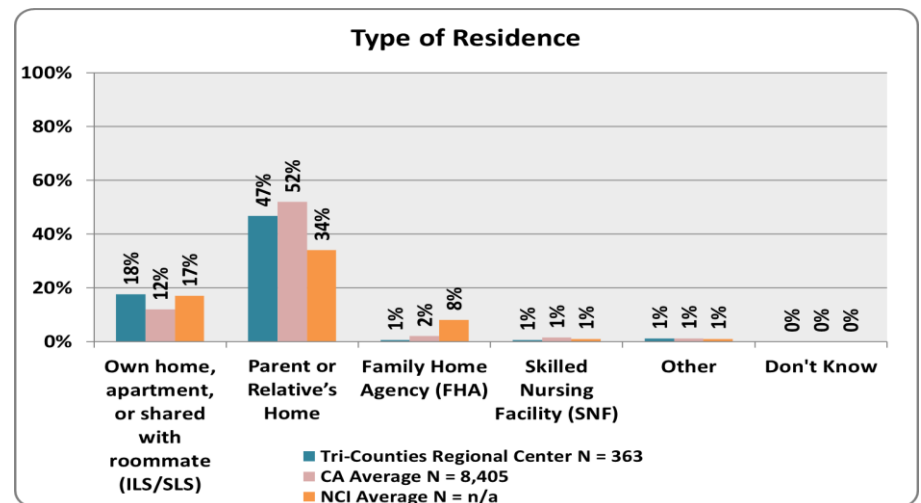


*Categories are not mutually exclusive, and therefore some results may add up to more than 100%.

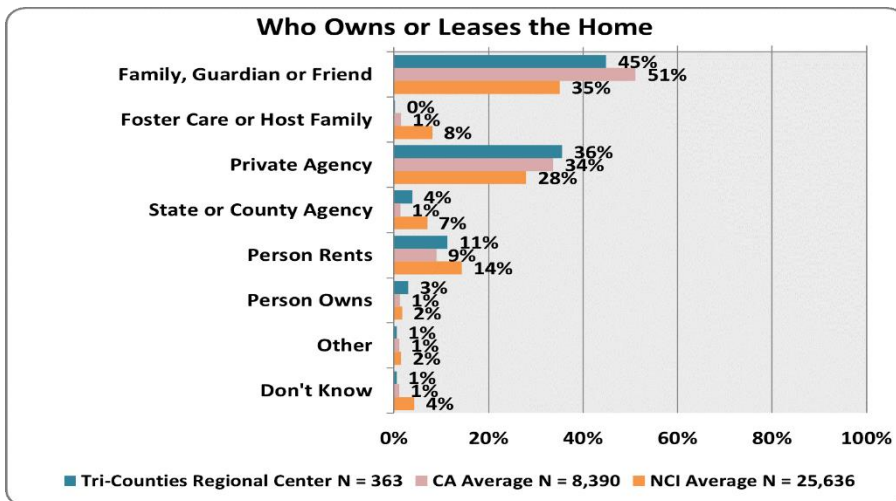
GRAPH 5. TYPE OF RESIDENCE*



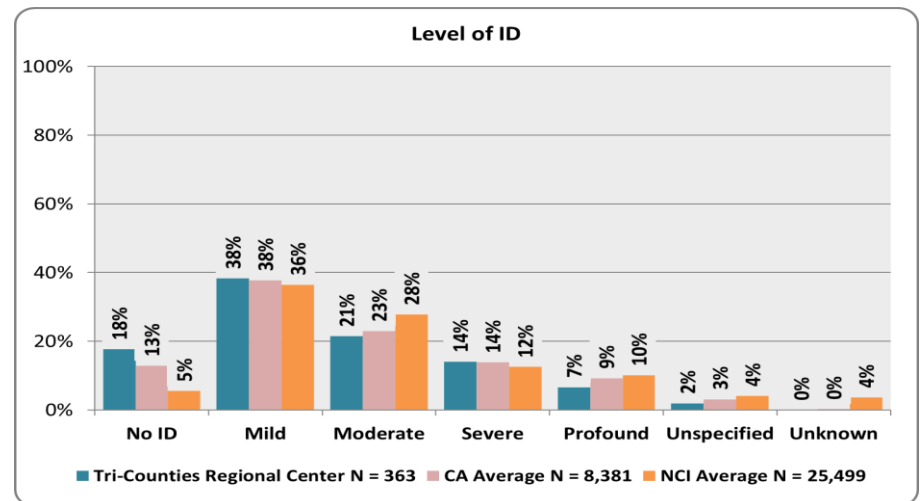
GRAPH 6. TYPE OF RESIDENCE (CONTINUED)**



GRAPH 7. WHO OWNS OR LEASES THE HOME IN WHICH THE PERSON LIVES



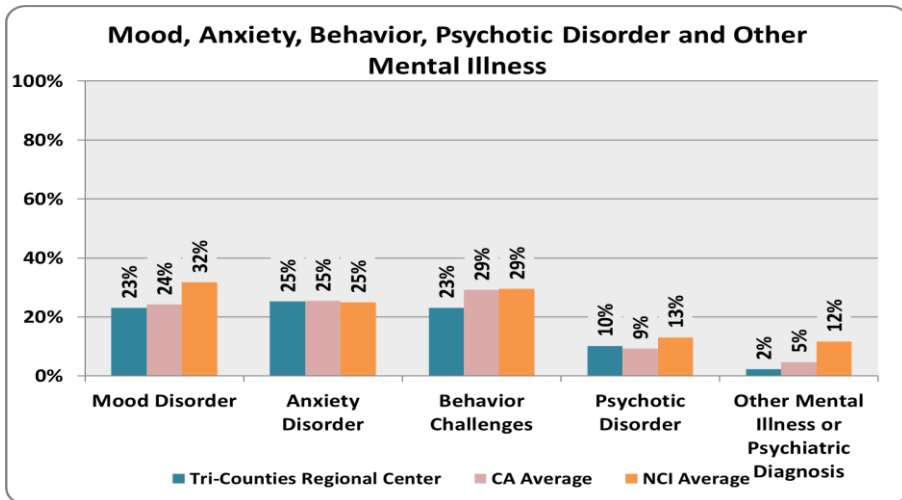
GRAPH 8. LEVEL OF ID



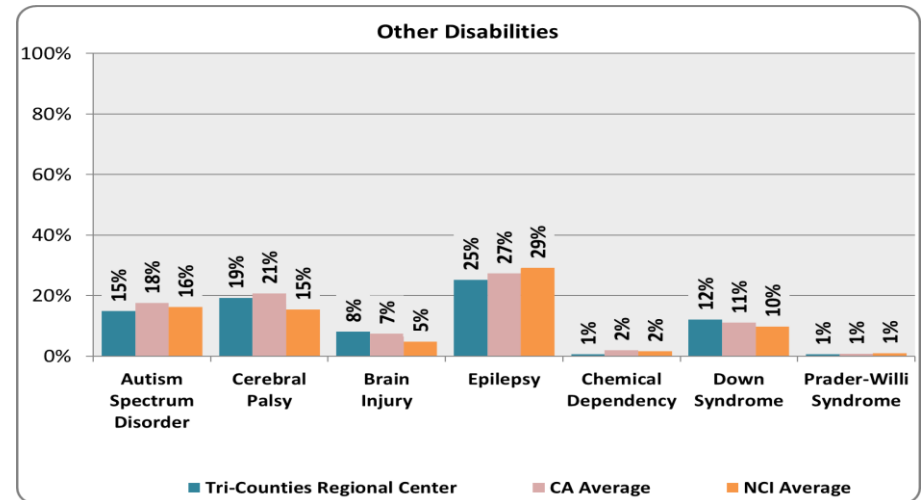
*CA residence types for ICF's with fewer than 6 residents are collected differently from standard NCI setting types and therefore the NCI average is not shown. The CCF categories correspond to NCI group home settings.

**California's FHA category corresponds to the NCI Foster Care or Host Home category; SNF's correspond to NCI category nursing homes.

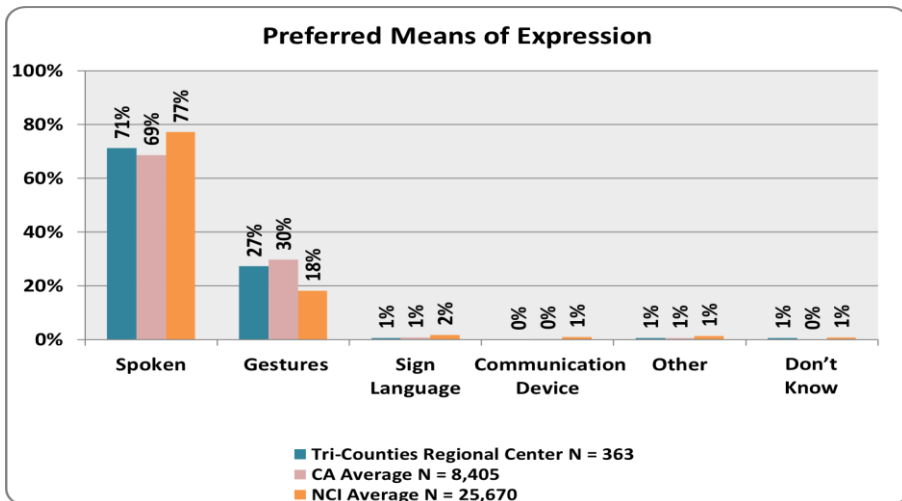
GRAPH 9. MOOD, ANXIETY, BEHAVIOR, PSYCHOTIC, AND OTHER MENTAL ILLNESS*



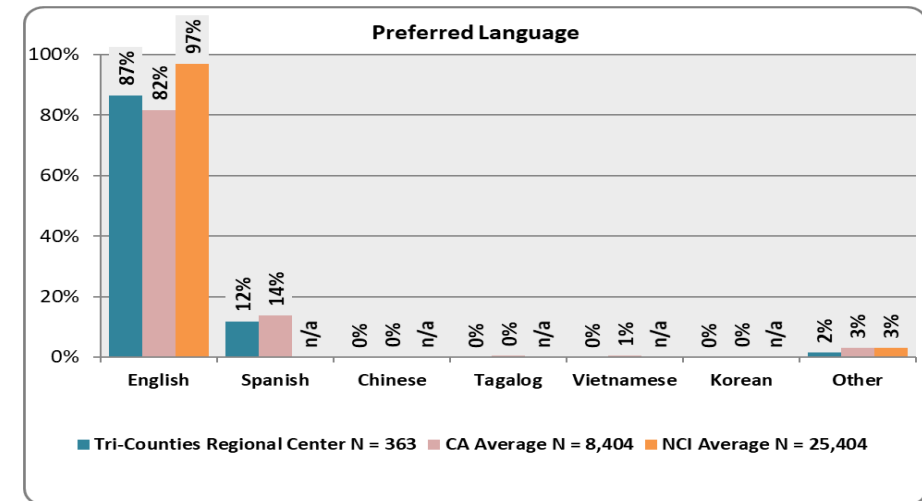
GRAPH 10. OTHER DISABILITIES*



GRAPH 11. PREFERRED MEANS OF EXPRESSION

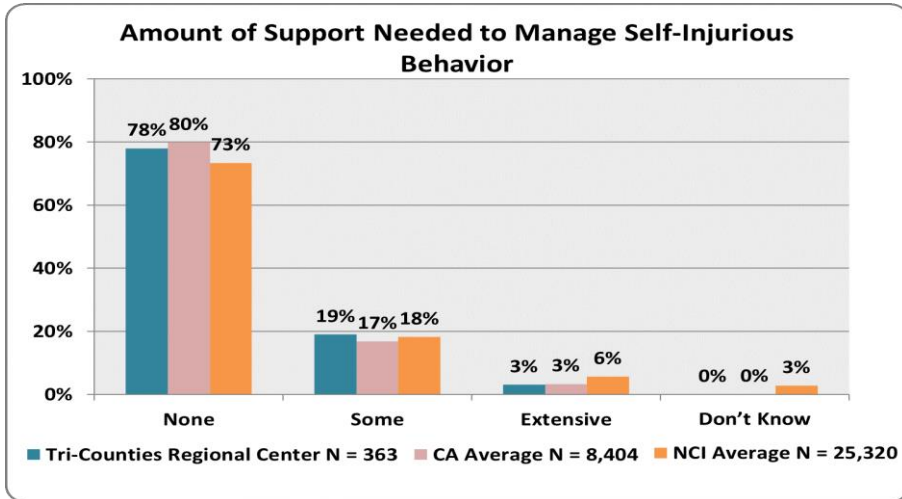


GRAPH 12. PREFERRED LANGUAGE

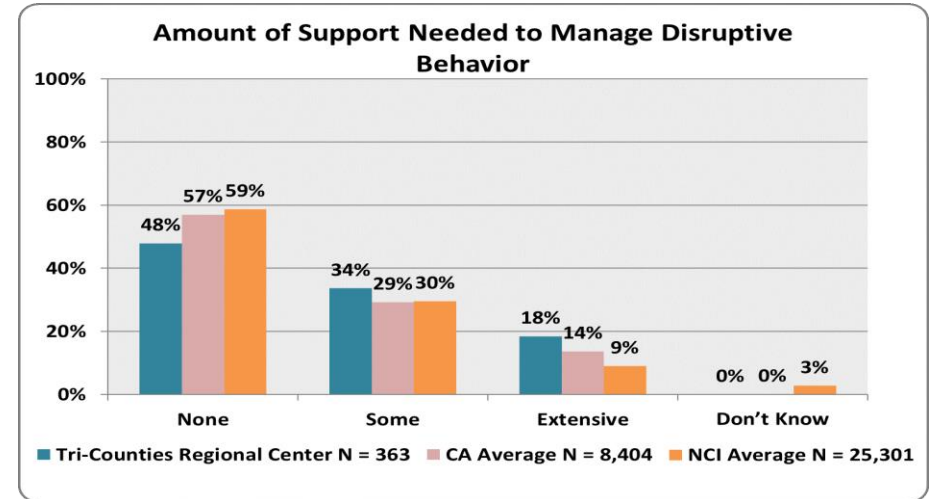


*Categories are not mutually exclusive and therefore N's are not shown

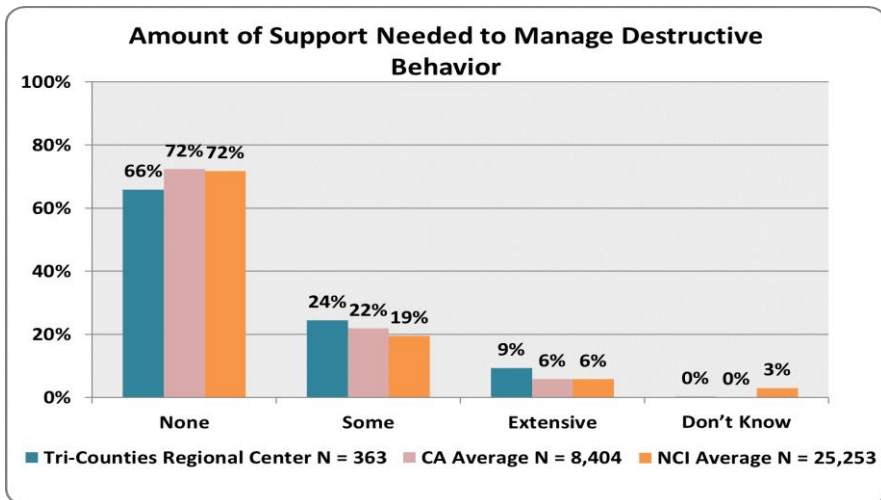
GRAPH 13. SUPPORT NEEDED FOR SELF INJURIOUS BEHAVIOR



GRAPH 14. SUPPORT NEEDED FOR DISRUPTIVE BEHAVIOR



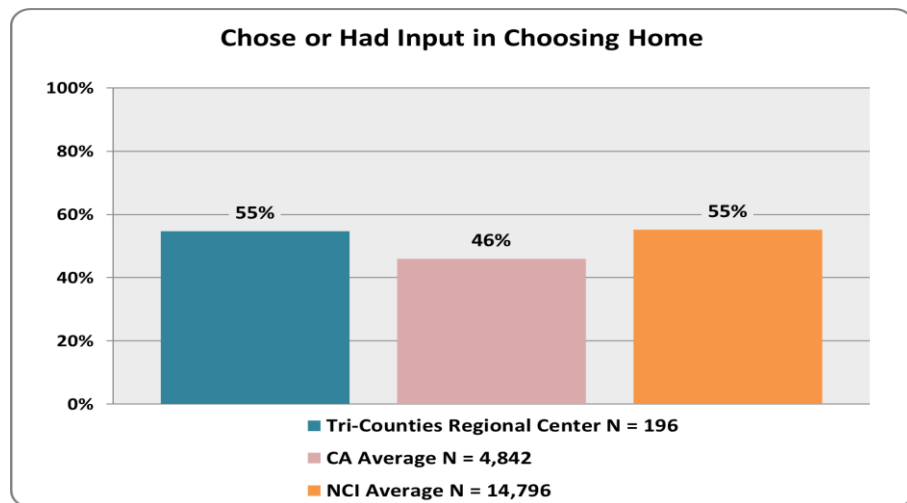
GRAPH 15. SUPPORT NEEDED FOR DESTRUCTIVE BEHAVIOR



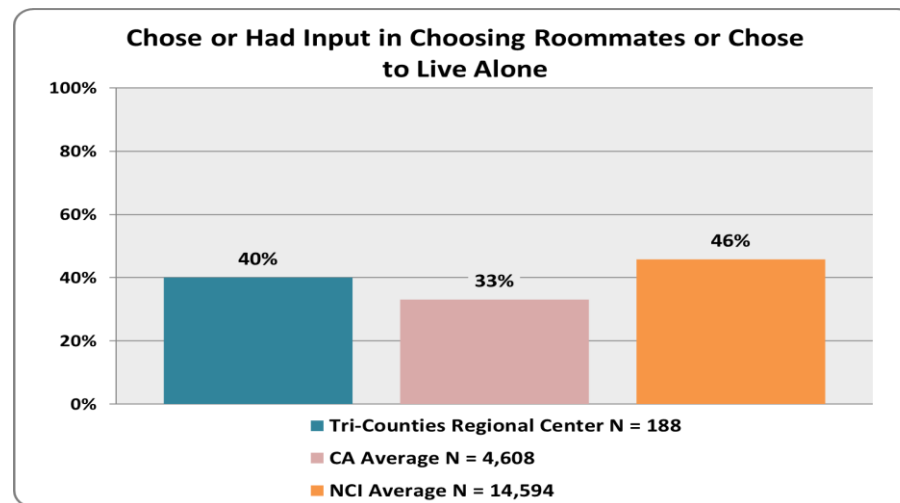
Choice

People make choices about their lives and are actively engaged in planning their services and supports.

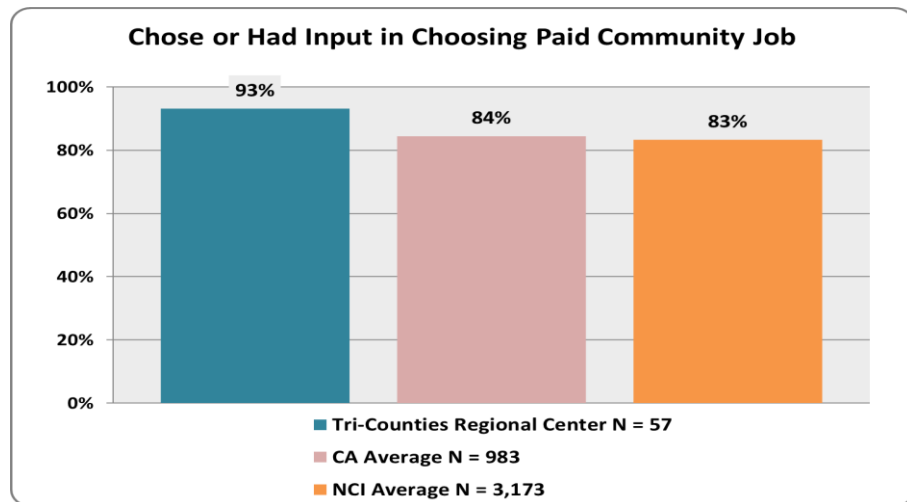
GRAPH 16. CHOSE OR HAD INPUT IN CHOOSING HOME



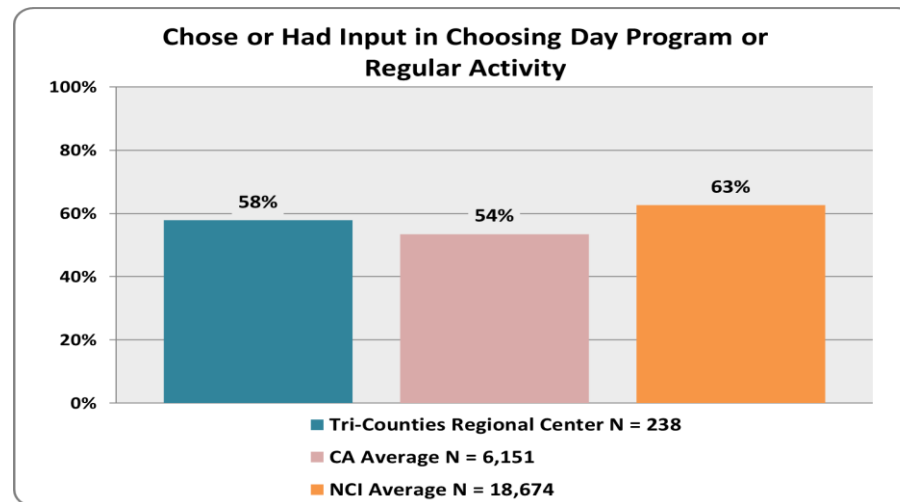
GRAPH 17. CHOSE OR HAD INPUT IN CHOOSING ROOMMATES OR TO LIVE ALONE



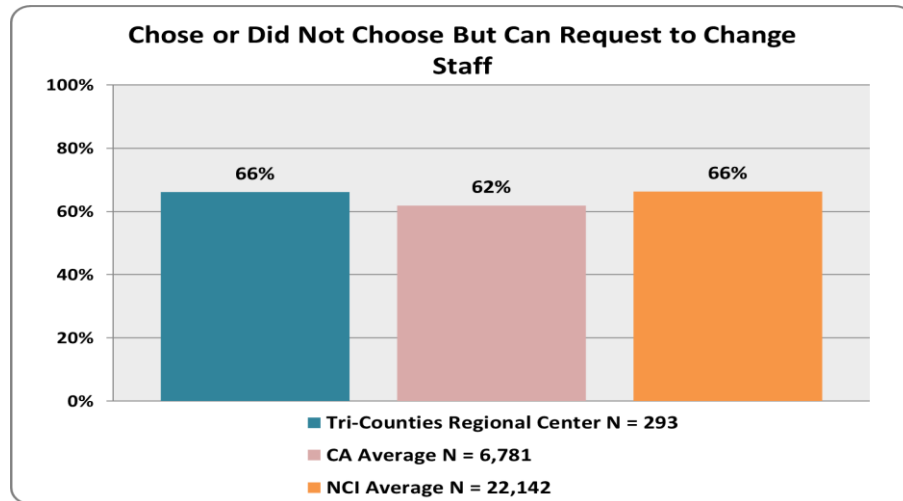
GRAPH 18. CHOSE OR HAD INPUT IN CHOOSING PAID COMMUNITY JOB



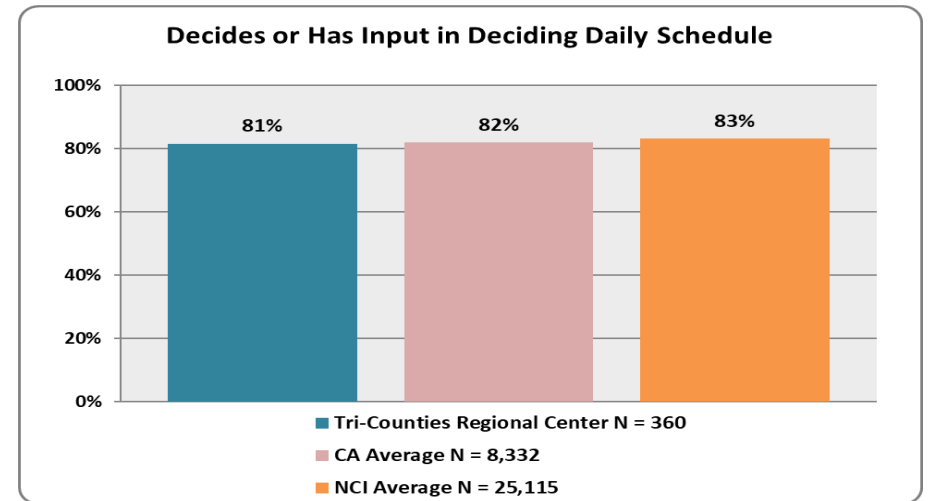
GRAPH 19. CHOSE OR HAD INPUT IN CHOOSING DAY PROGRAM OR REGULAR ACTIVITY



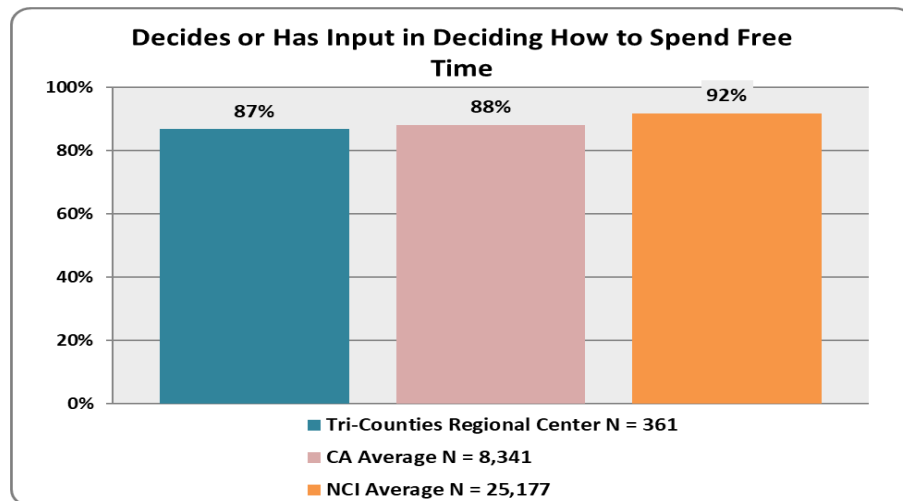
GRAPH 20. CHOSE OR DID NOT CHOOSE BUT CAN REQUEST TO CHANGE STAFF



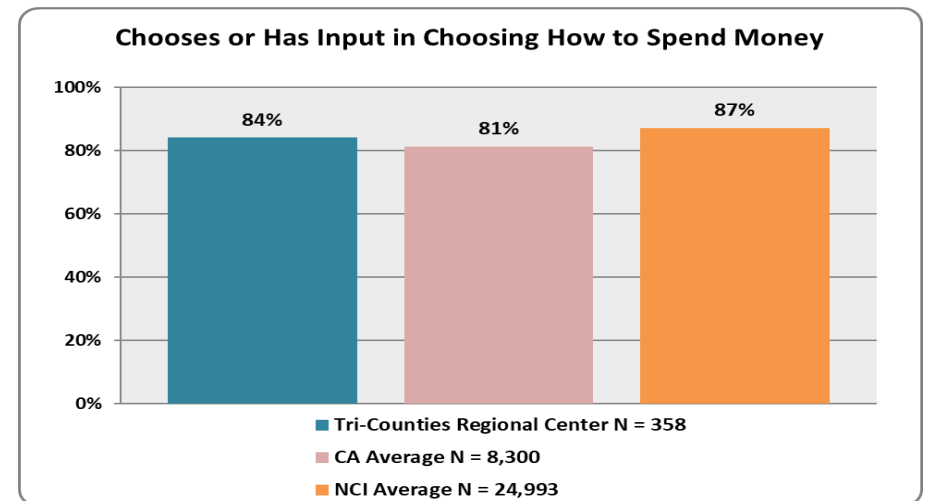
GRAPH 21. DECIDES OR HAS INPUT IN DECIDING DAILY SCHEDULE



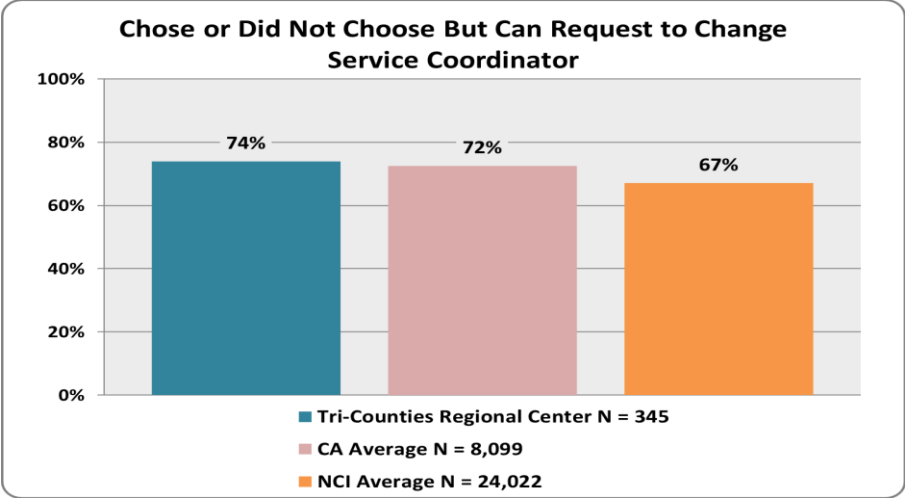
GRAPH 22. DECIDES OR HAS INPUT IN DECIDING HOW TO SPEND FREE TIME



GRAPH 23. CHOOSES OR HAS INPUT IN CHOOSING HOW TO SPEND MONEY



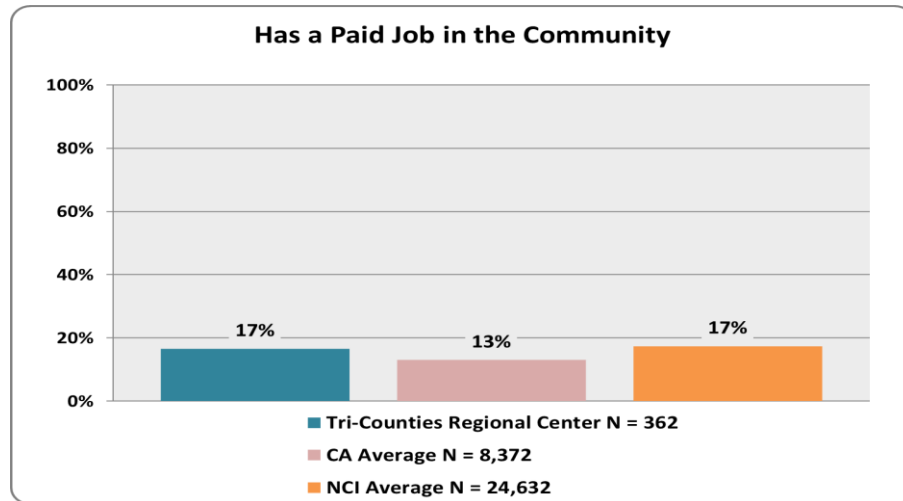
GRAPH 24. CHOSE OR DID NOT CHOOSE BUT CAN REQUEST TO CHANGE CASE
MANAGER/SERVICE COORDINATOR



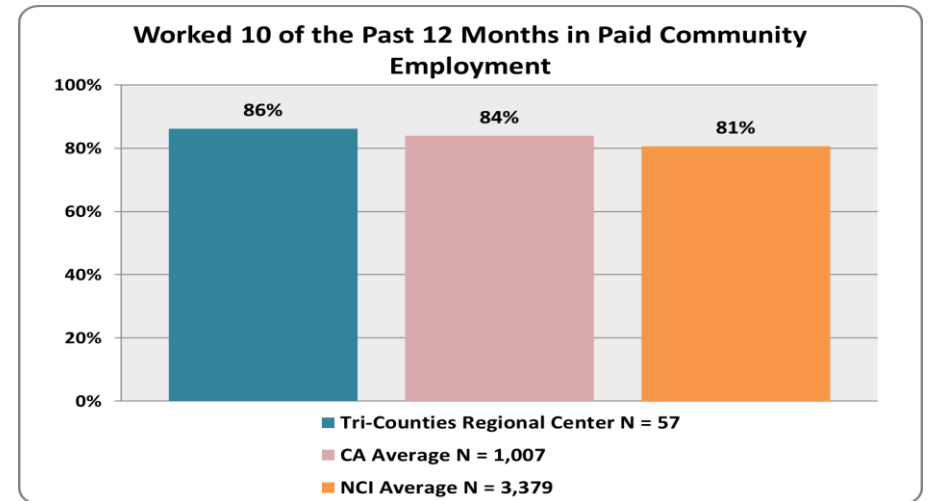
Work

People have support to find and maintain community integrated employment.

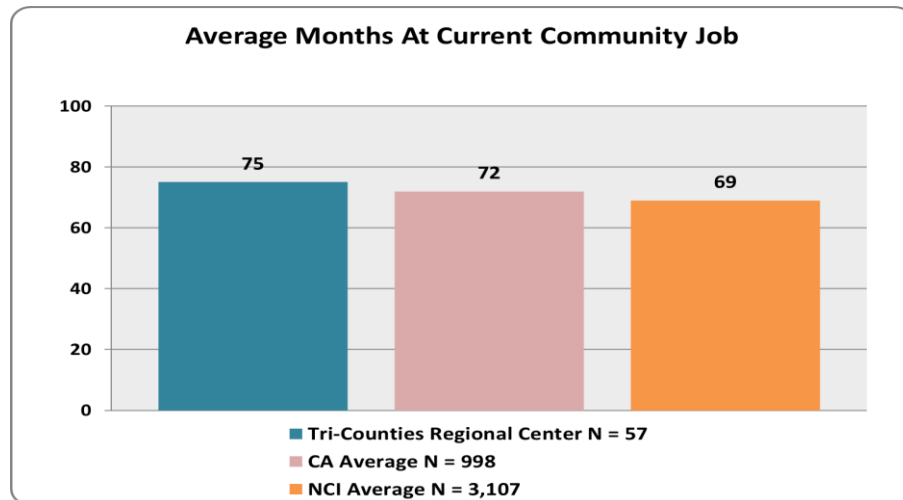
GRAPH 25. HAS A PAID JOB IN THE COMMUNITY



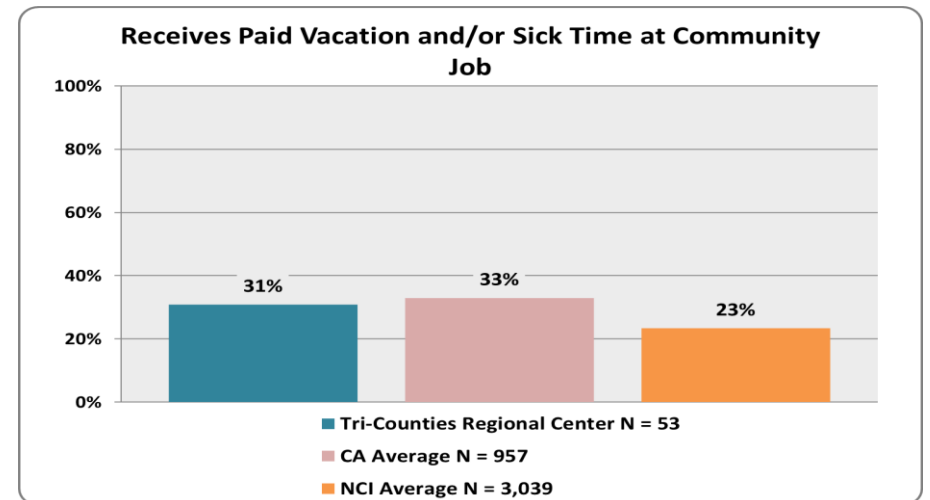
GRAPH 26. WORKED 10 OF THE LAST 12 MONTHS IN PAID COMMUNITY EMPLOYMENT



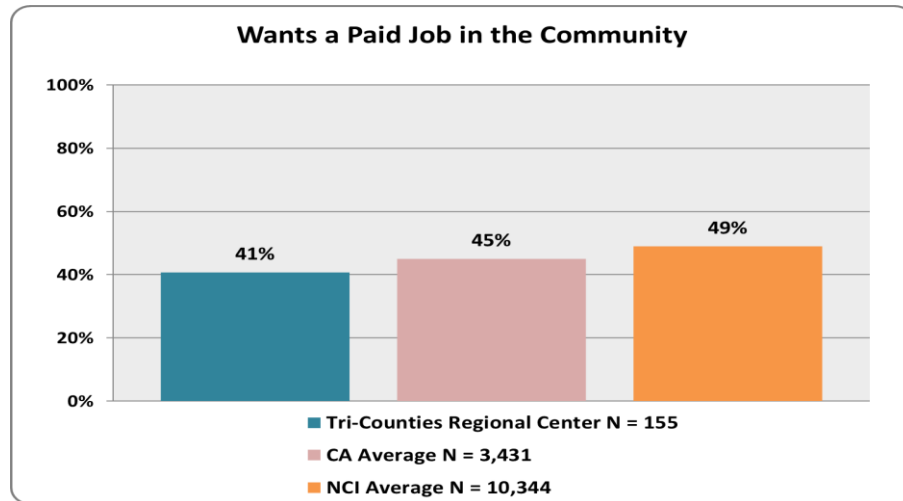
GRAPH 27. AVERAGE MONTHS OF EMPLOYMENT AT CURRENT PAID COMMUNITY JOB



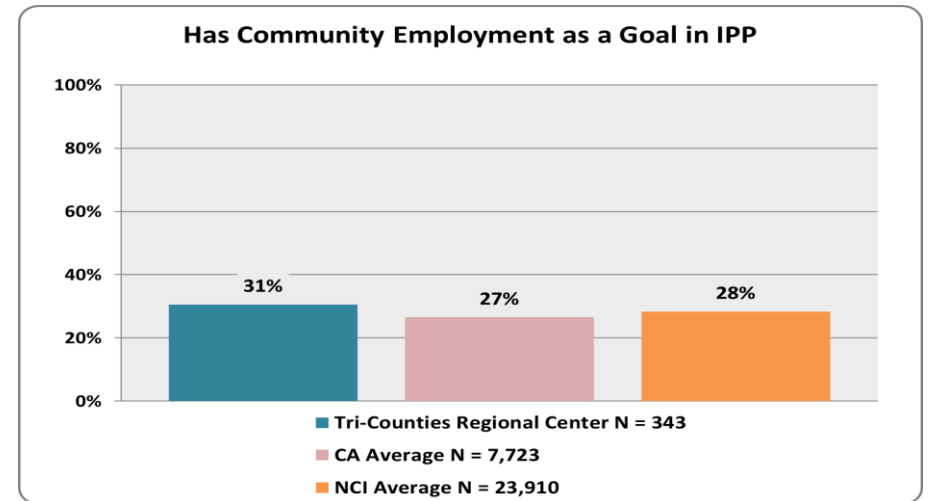
GRAPH 28. RECEIVES PAID VACATION AND/OR SICK TIME AT PAID COMMUNITY JOB



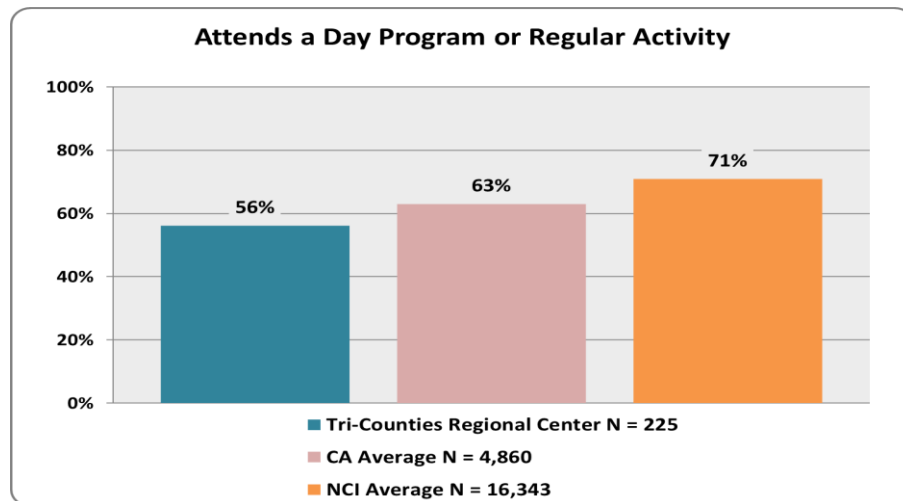
GRAPH 29. WANTS A PAID JOB IN THE COMMUNITY



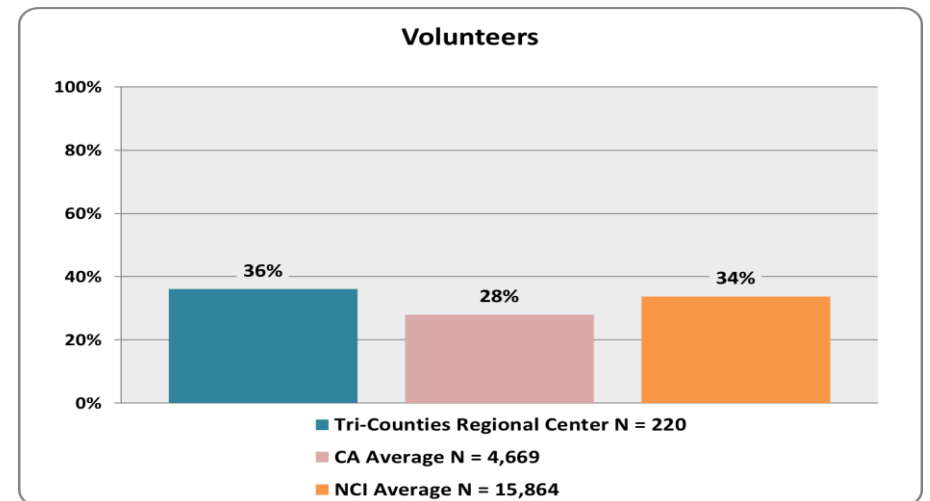
GRAPH 30. HAS COMMUNITY EMPLOYMENT AS A GOAL IN IPP



GRAPH 31. ATTENDS A DAY PROGRAM OR REGULAR ACTIVITY



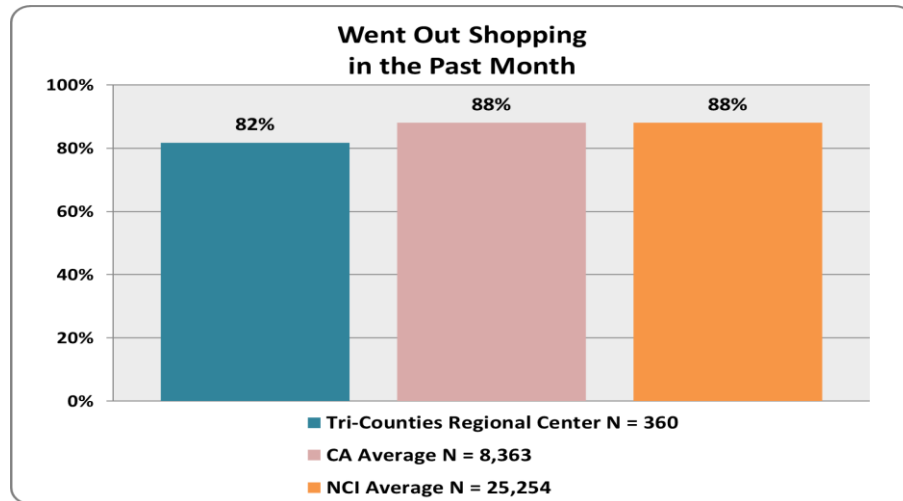
GRAPH 32. VOLUNTEERS



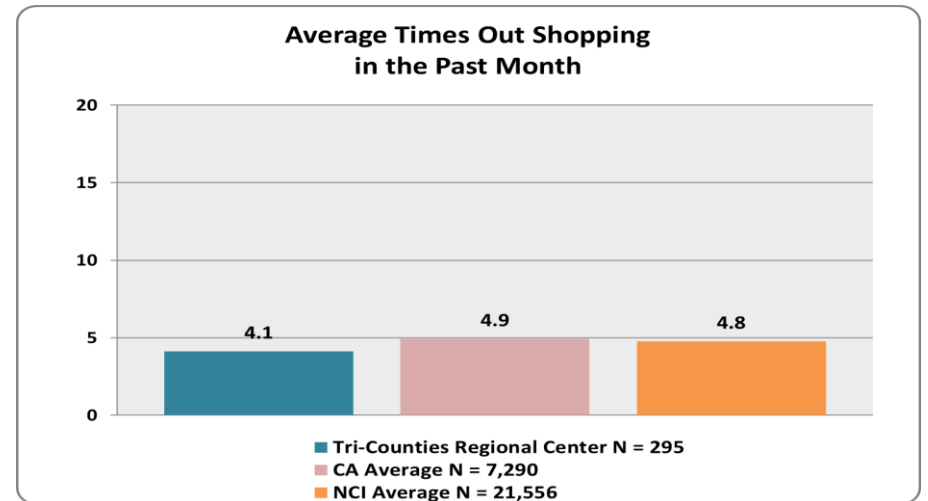
Community Inclusion

People have support to participate in everyday community activities.

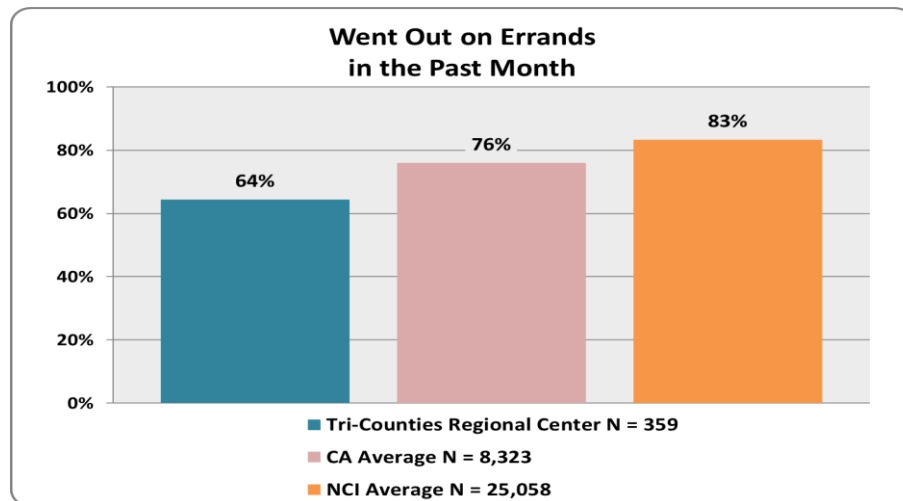
GRAPH 33. WENT OUT SHOPPING IN THE PAST MONTH



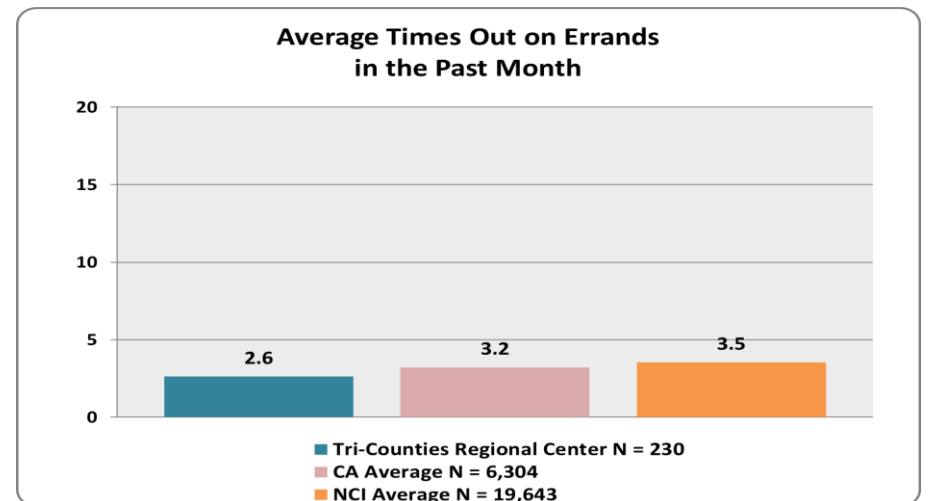
GRAPH 34. AVERAGE TIMES WENT OUT SHOPPING IN THE PAST MONTH



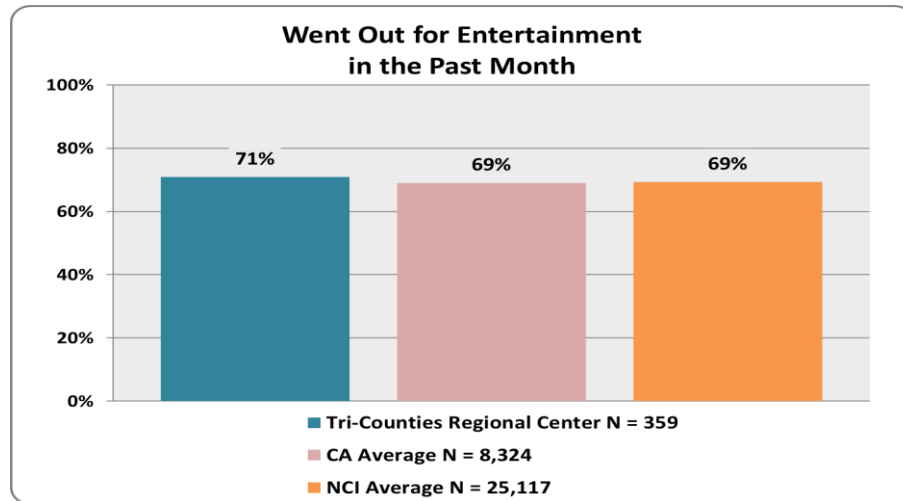
GRAPH 35. WENT OUT ON ERRANDS IN THE PAST MONTH



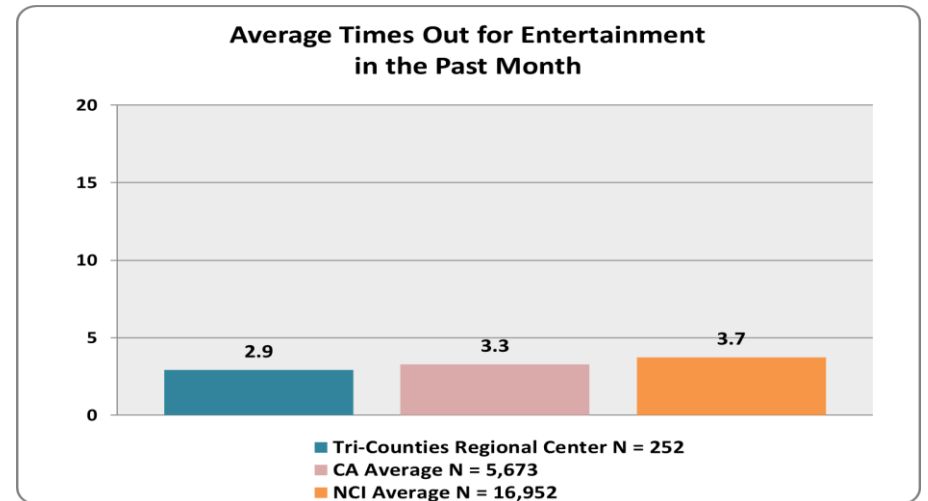
GRAPH 36. AVERAGE TIMES WENT OUT ON ERRANDS IN THE PAST MONTH



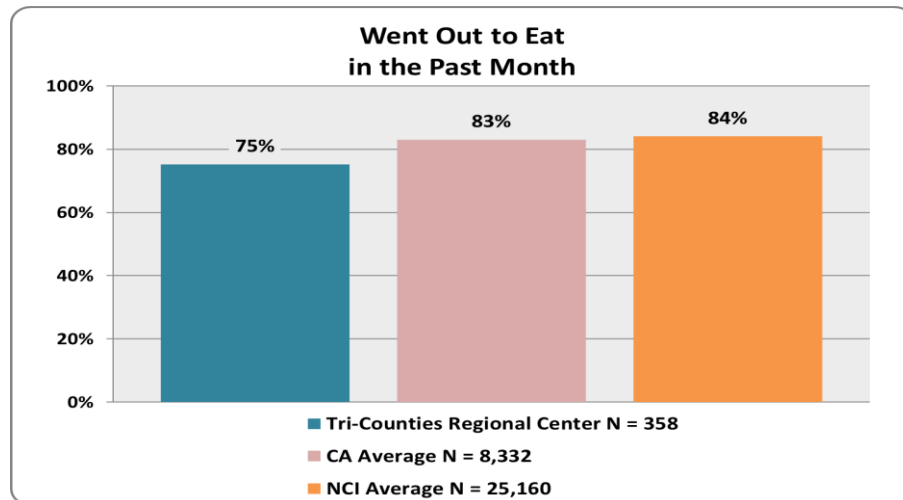
GRAPH 37. WENT OUT FOR ENTERTAINMENT IN THE PAST MONTH



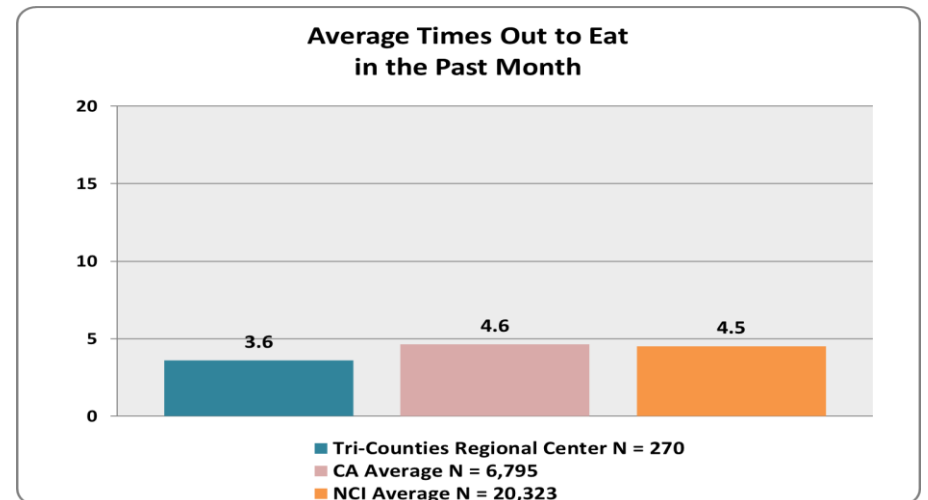
GRAPH 38. AVERAGE TIMES WENT OUT FOR ENTERTAINMENT IN THE PAST MONTH



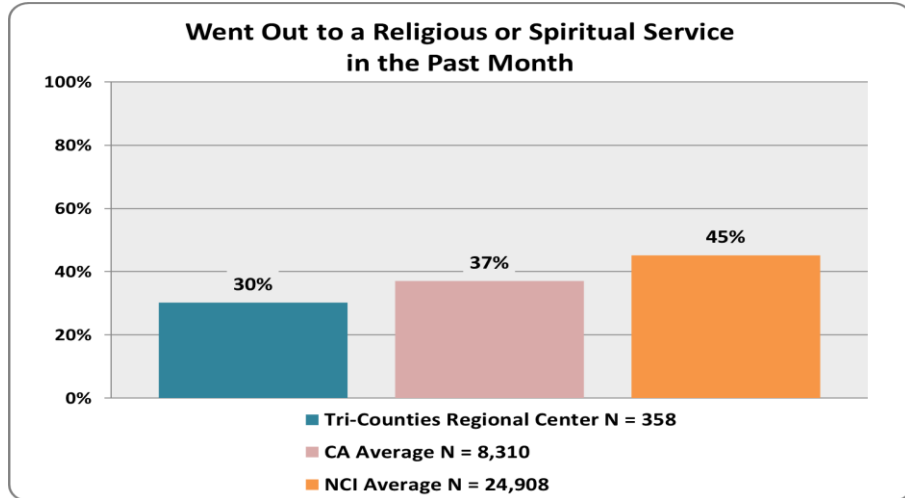
GRAPH 39. WENT OUT TO EAT IN THE PAST MONTH



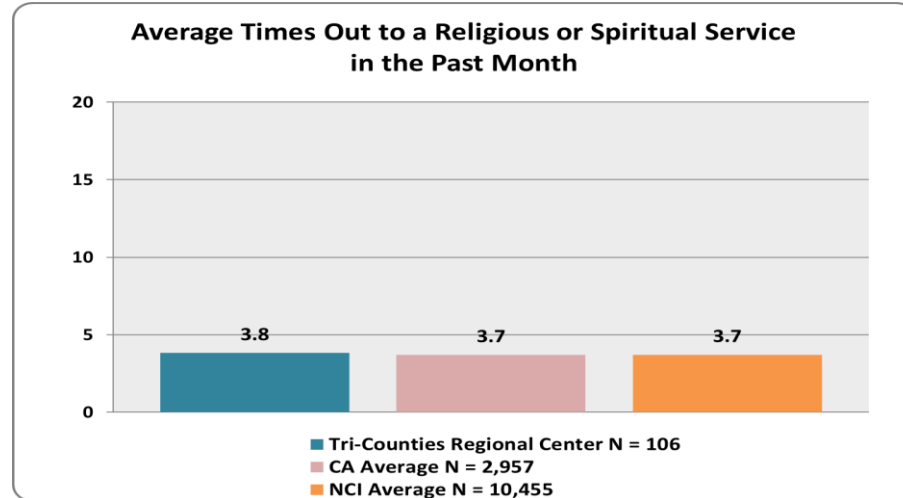
GRAPH 40. AVERAGE TIMES WENT OUT TO EAT IN THE PAST MONTH



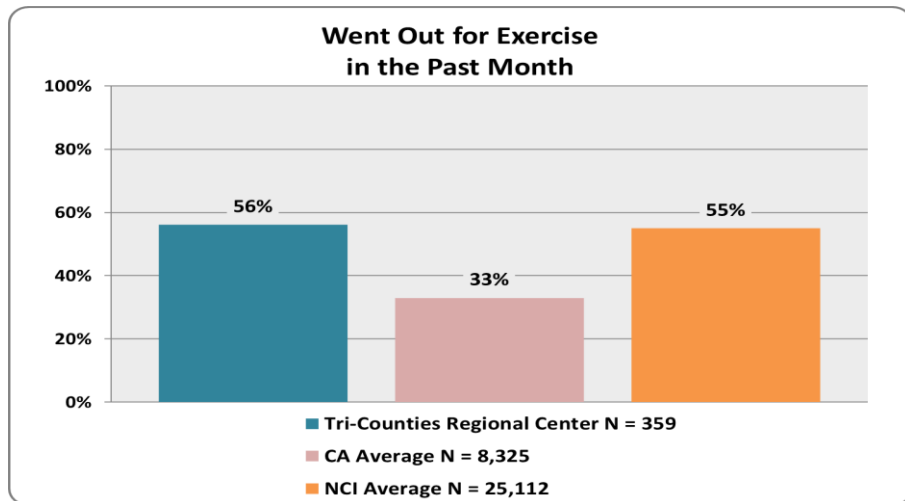
GRAPH 41. WENT OUT TO A RELIGIOUS OR SPIRITUAL SERVICE IN THE PAST MONTH



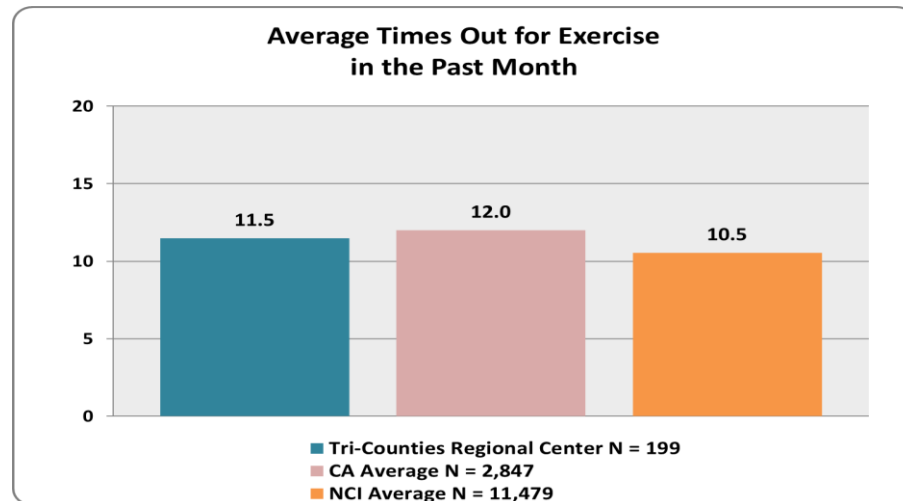
GRAPH 42. AVERAGE TIMES WENT OUT TO RELIGIOUS OR SPIRITUAL SERVICE IN THE PAST MONTH



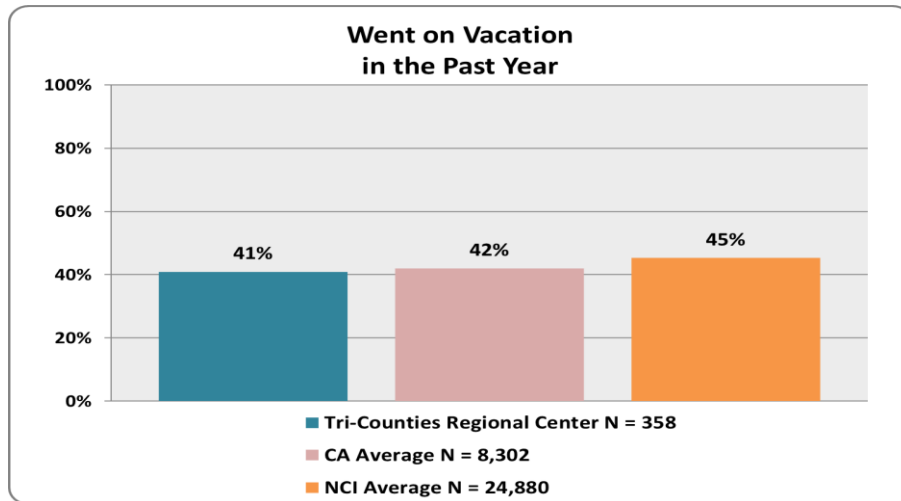
GRAPH 43. WENT OUT FOR EXERCISE IN THE PAST MONTH



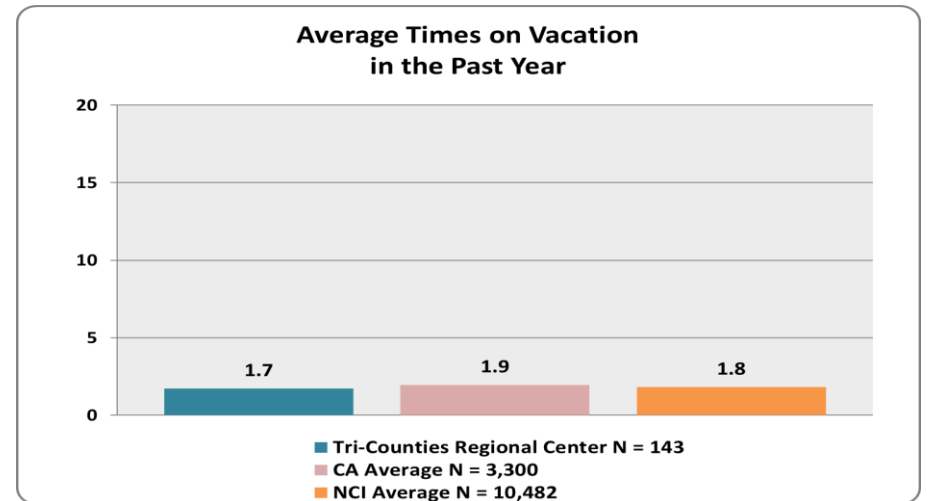
GRAPH 44. AVERAGE TIMES WENT OUT FOR EXERCISE IN THE PAST MONTH



GRAPH 45. WENT ON VACATION IN THE PAST YEAR



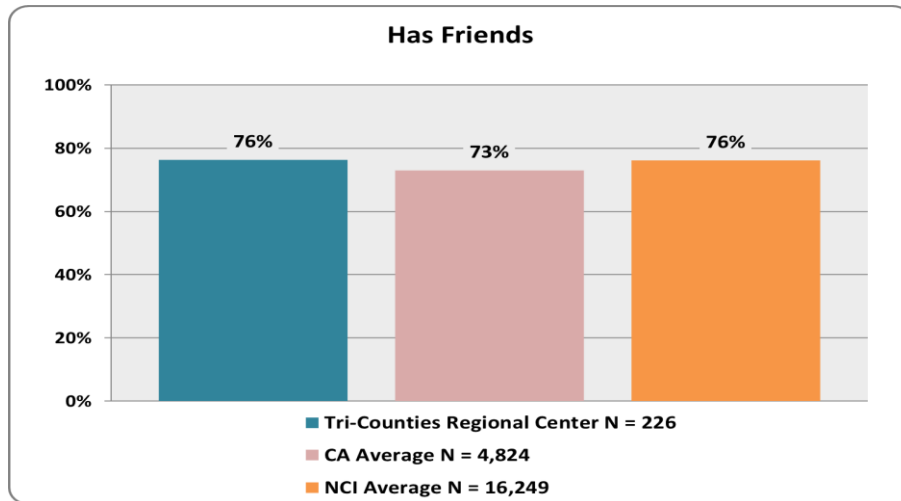
GRAPH 46. AVERAGE TIMES WENT ON VACATION IN THE PAST YEAR



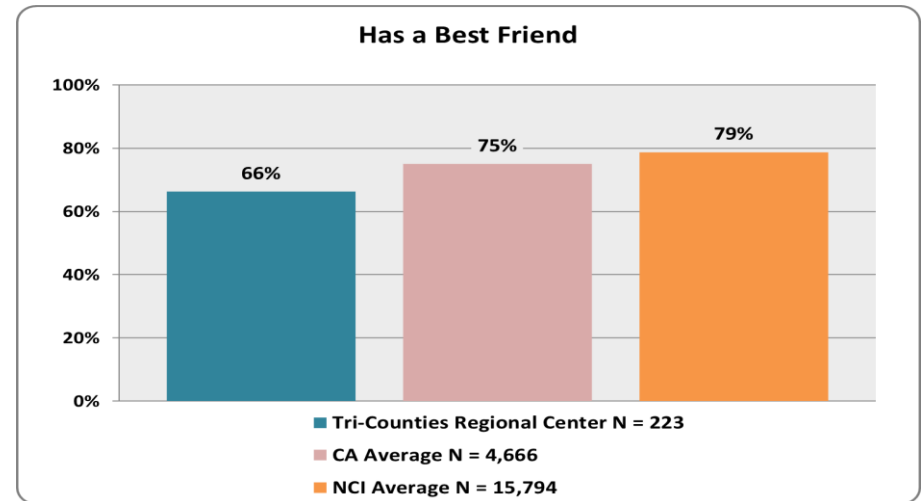
Relationships

People have friends and relationships.

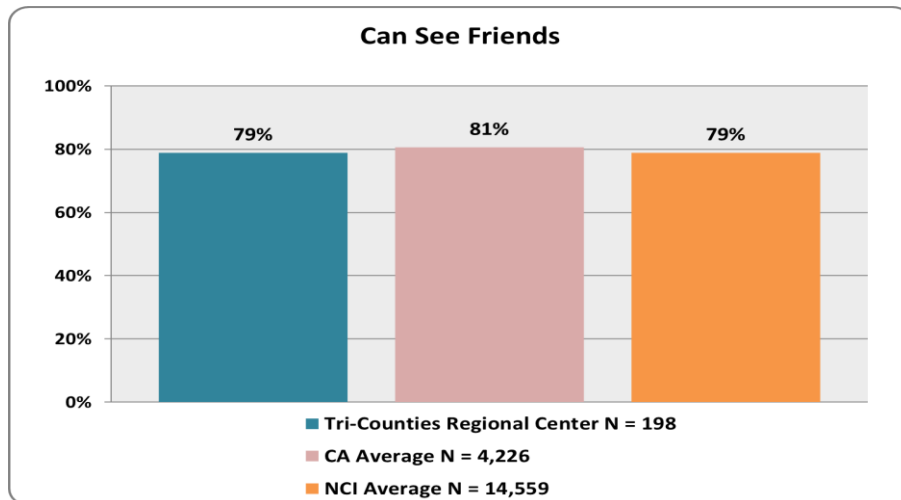
GRAPH 47. HAS FRIENDS



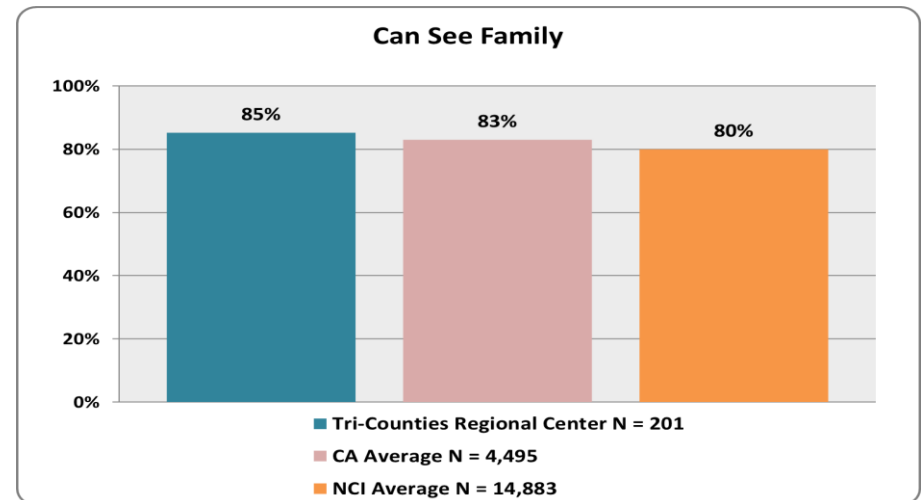
GRAPH 48. HAS A BEST FRIEND



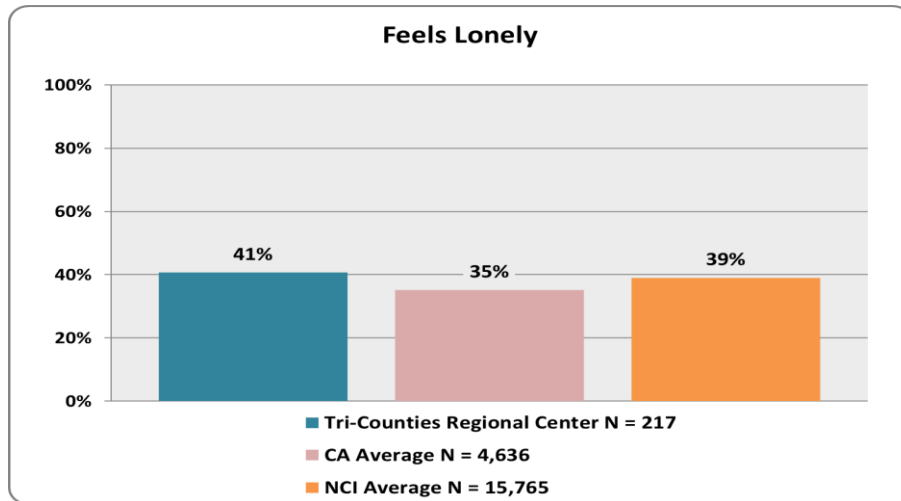
GRAPH 49. CAN SEE FRIENDS



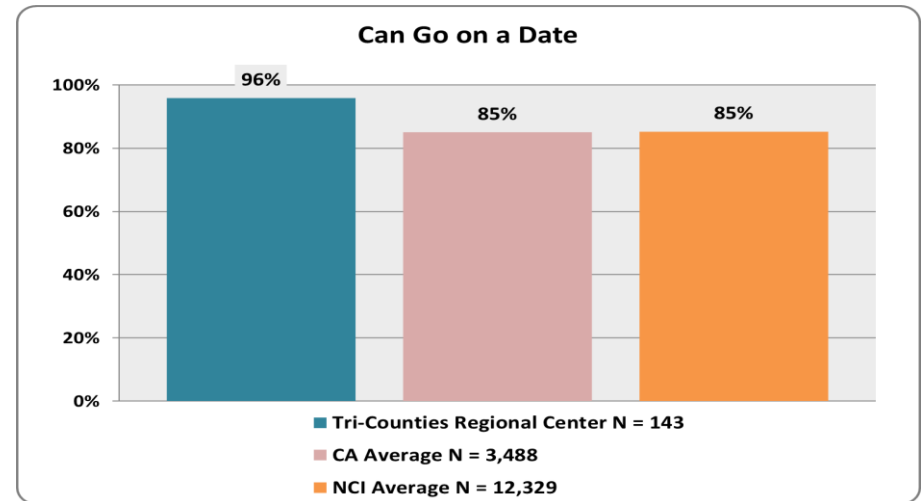
GRAPH 50. CAN SEE FAMILY



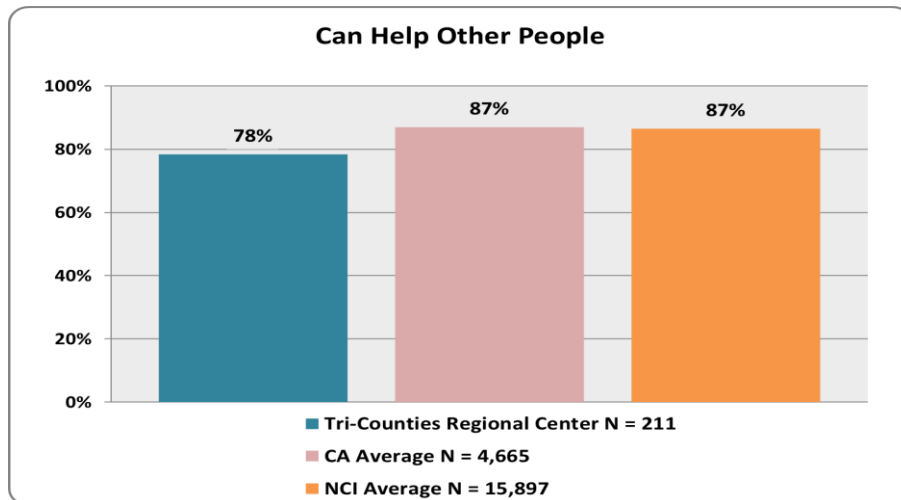
GRAPH 51. FEELS LONELY



GRAPH 52. CAN GO ON A DATE



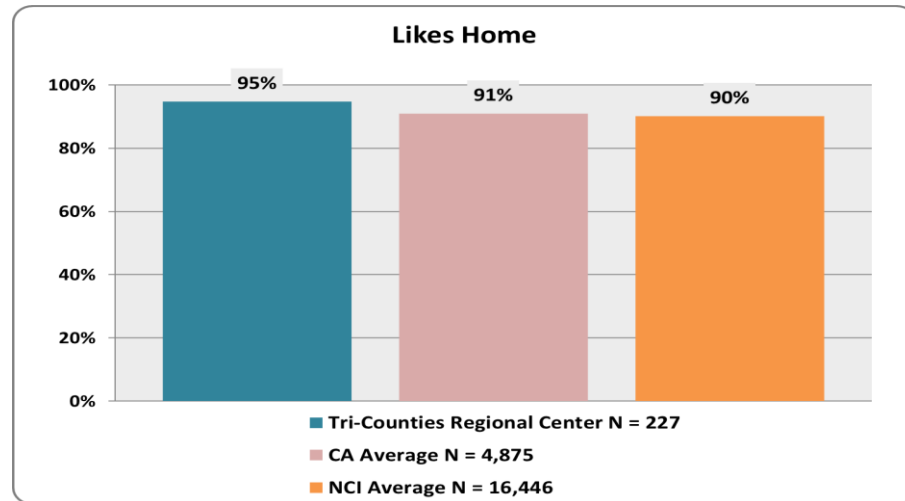
GRAPH 53. CAN HELP OTHER PEOPLE



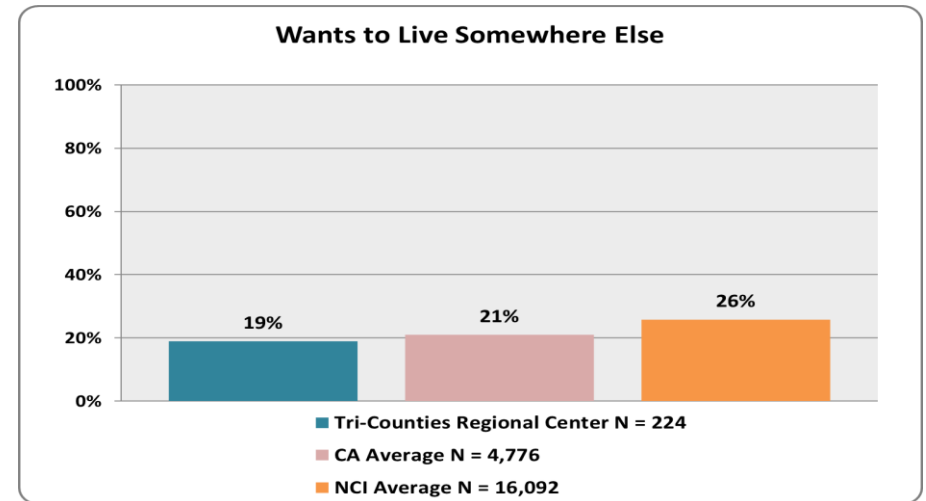
Satisfaction

People are satisfied with the services and supports they receive.

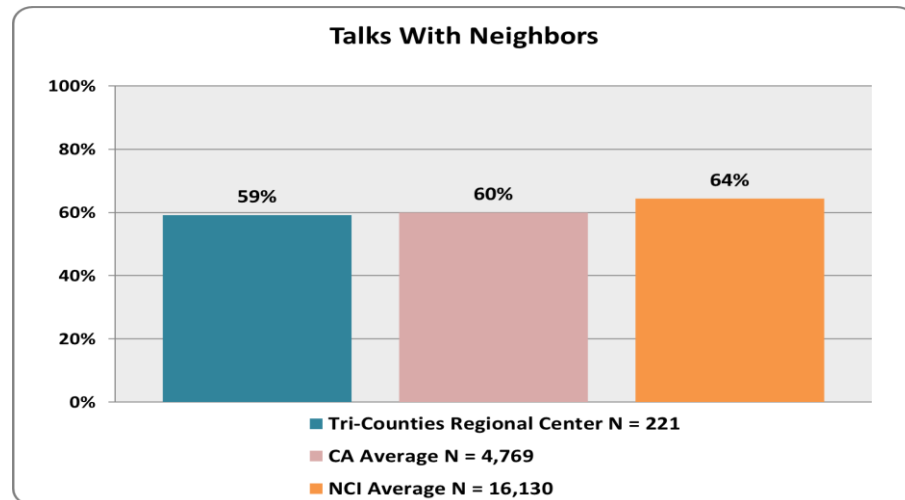
GRAPH 54. LIKES HOME



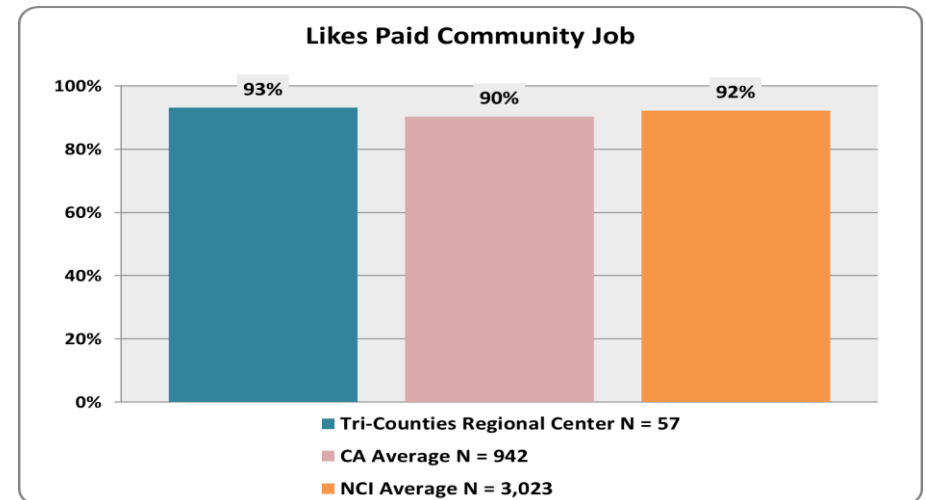
GRAPH 55. WANTS TO LIVE SOMEWHERE ELSE



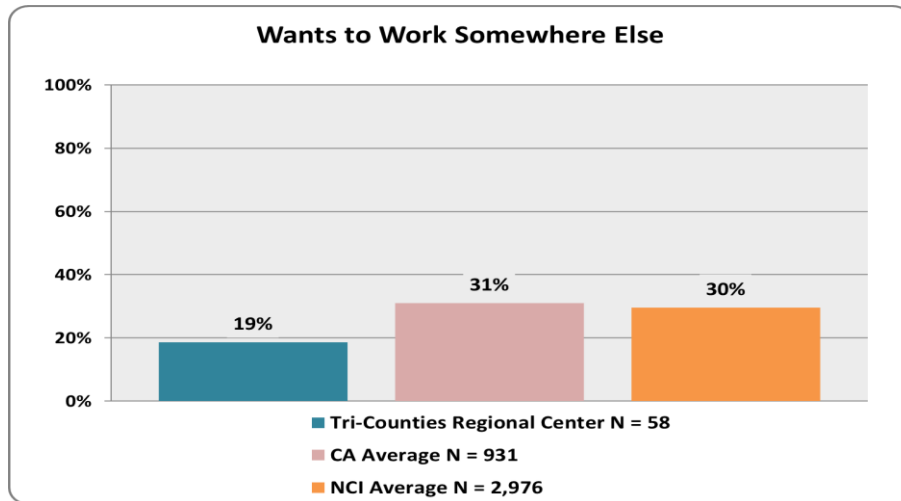
GRAPH 56. TALKS WITH NEIGHBORS



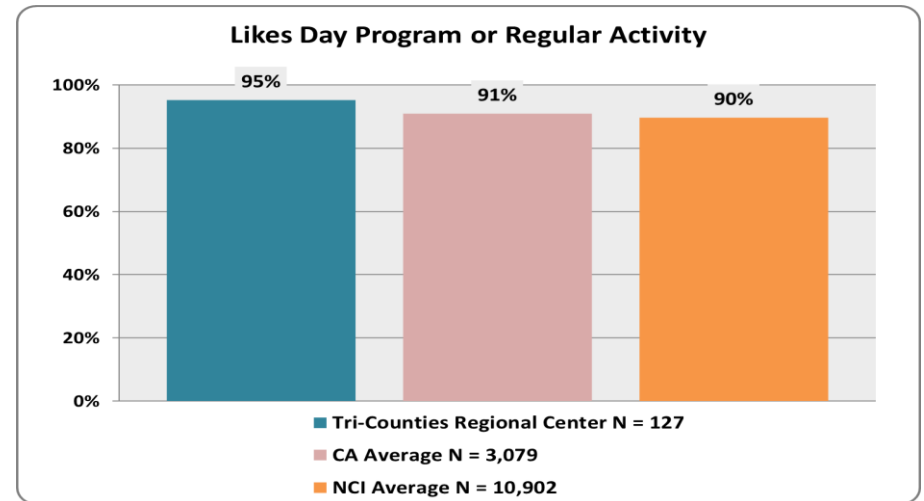
GRAPH 57. LIKES PAID COMMUNITY JOB



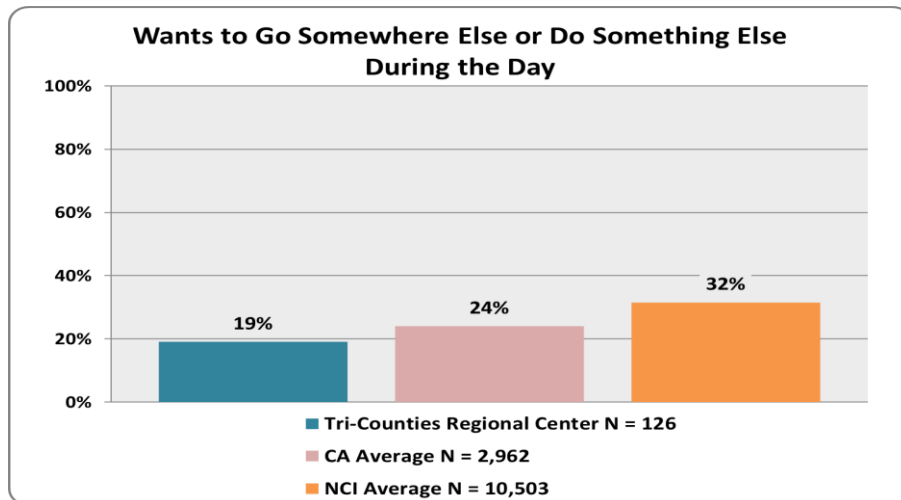
GRAPH 58. WANTS TO WORK SOMEWHERE ELSE



GRAPH 59. LIKES DAY PROGRAM OR REGULAR ACTIVITY



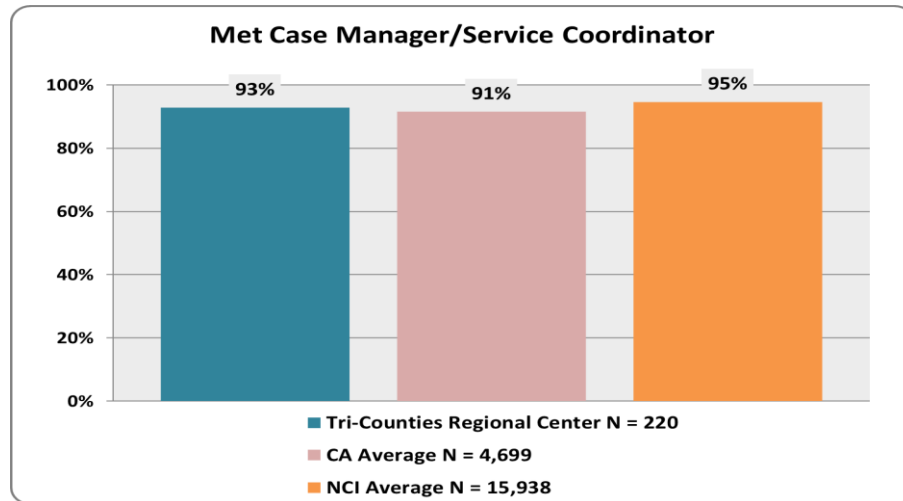
GRAPH 60. WANTS TO GO SOMEWHERE ELSE OR DO SOMETHING ELSE DURING THE DAY



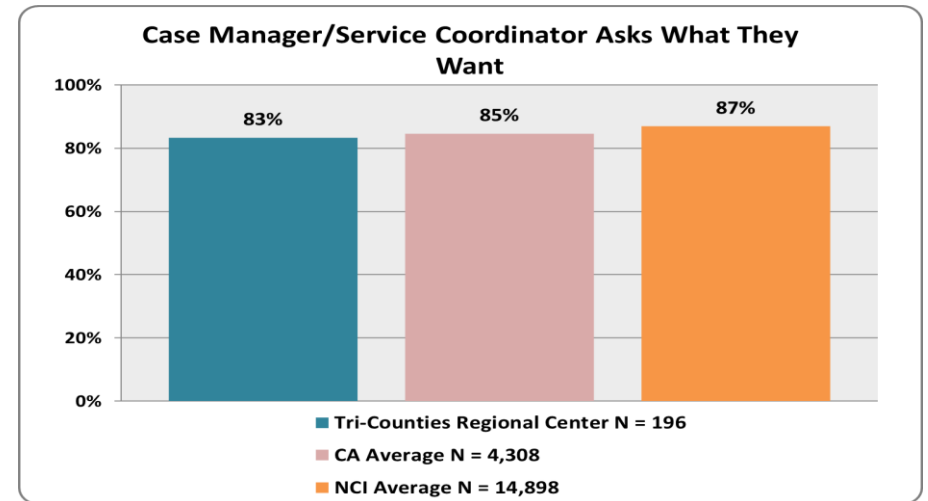
Service Coordination

Case Managers/Service Coordinators are accessible, responsive, and support the person's participation in service planning.

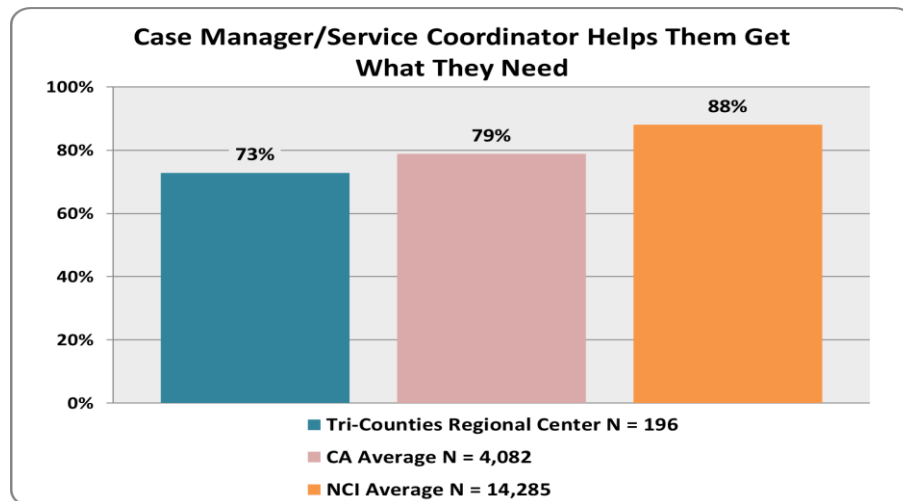
GRAPH 61. MET CASE MANAGER/SERVICE COORDINATOR



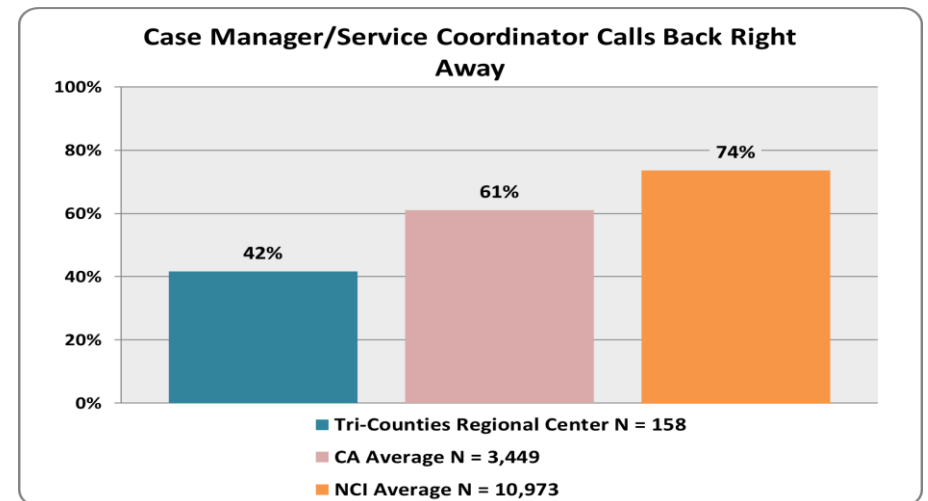
GRAPH 62. CASE MANAGER/SERVICE COORDINATOR ASKS WHAT THEY WANT



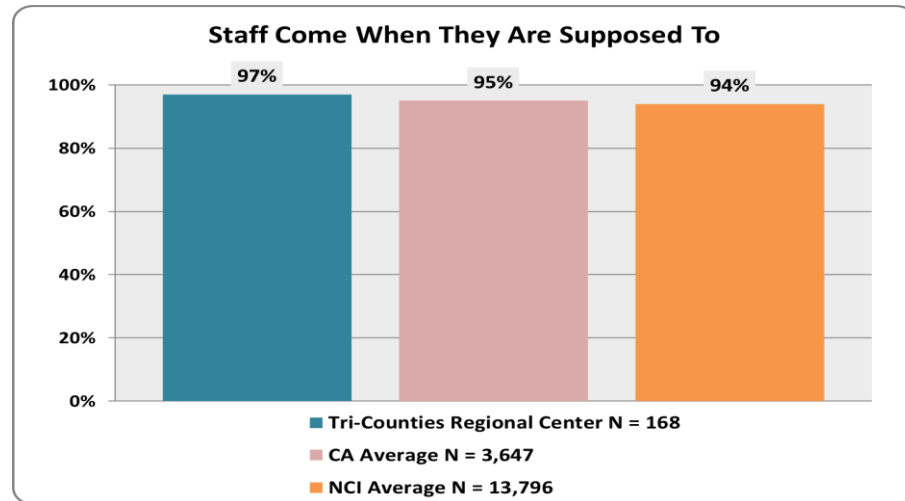
GRAPH 63. CASE MANAGER/SERVICE COORDINATOR HELPS GET WHAT THEY NEED



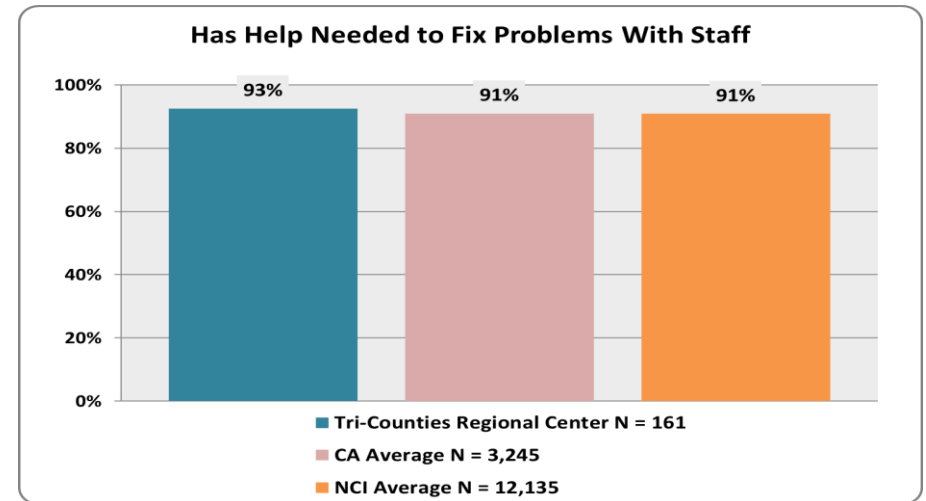
GRAPH 64. CASE MANAGER/SERVICE COORDINATOR CALLS BACK RIGHT AWAY



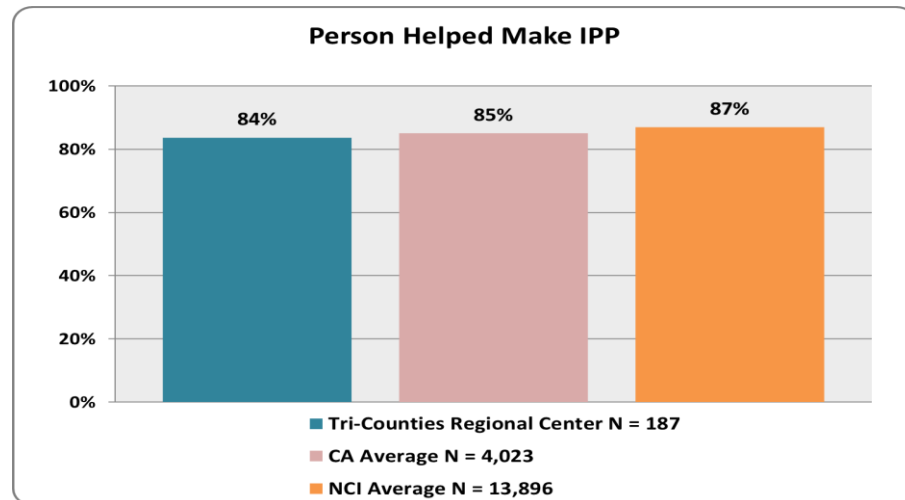
GRAPH 65. STAFF COME WHEN THEY ARE SUPPOSED TO



GRAPH 66. HAS HELP NEEDED TO FIX PROBLEMS WITH STAFF



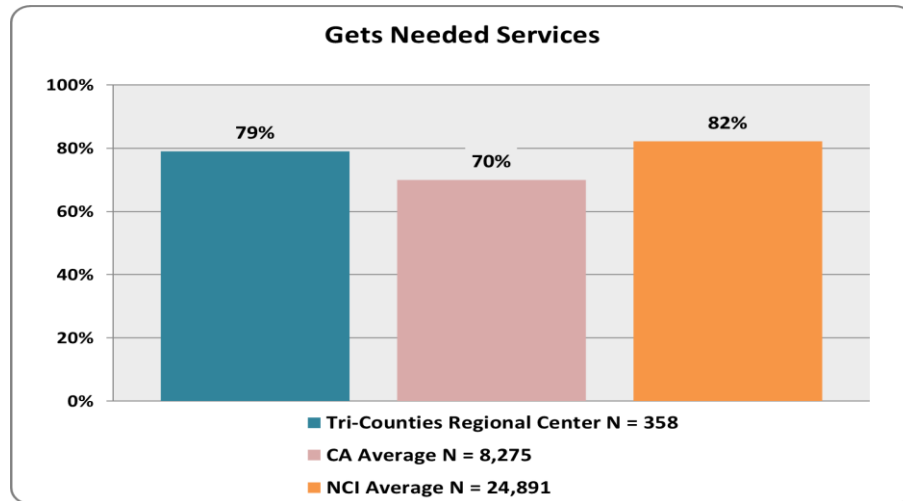
GRAPH 67. PERSON HELPED MAKE IPP



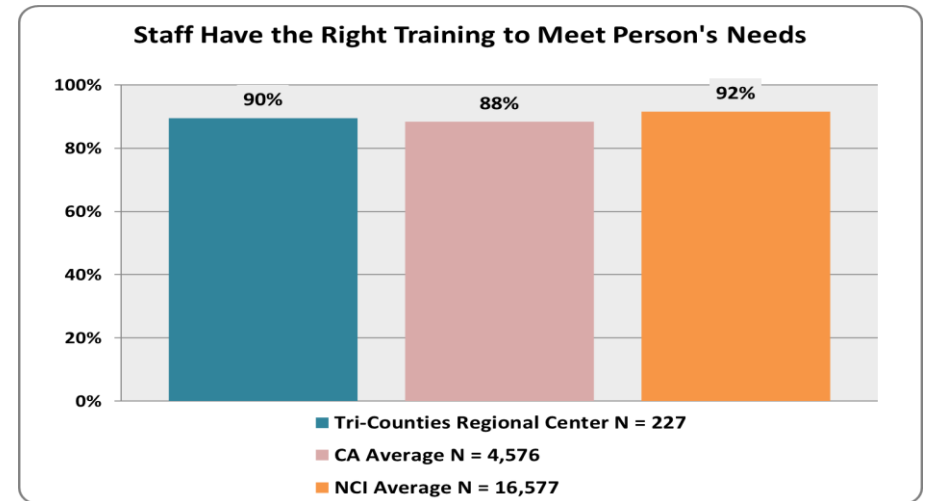
Access

Publicly-funded services are readily available to individuals who need and qualify for them.

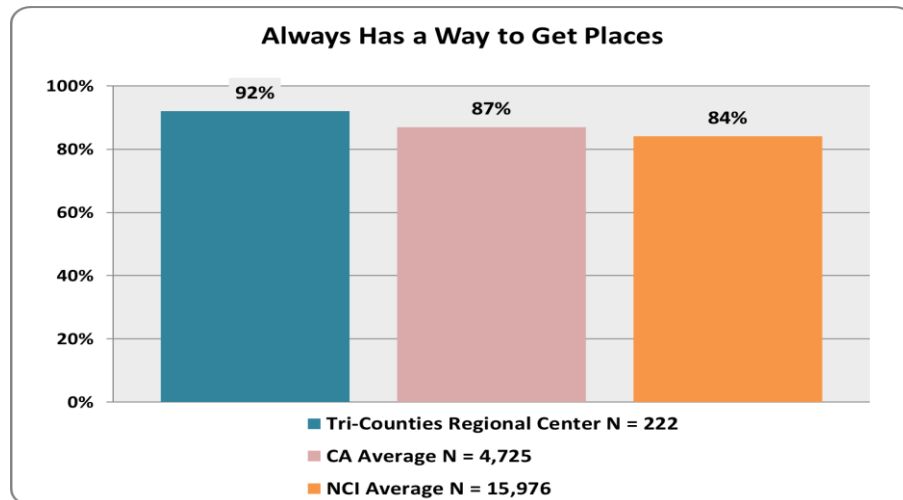
GRAPH 68. GETS NEEDED SERVICES



GRAPH 69. STAFF HAVE RIGHT TRAINING TO MEET PERSON'S NEEDS



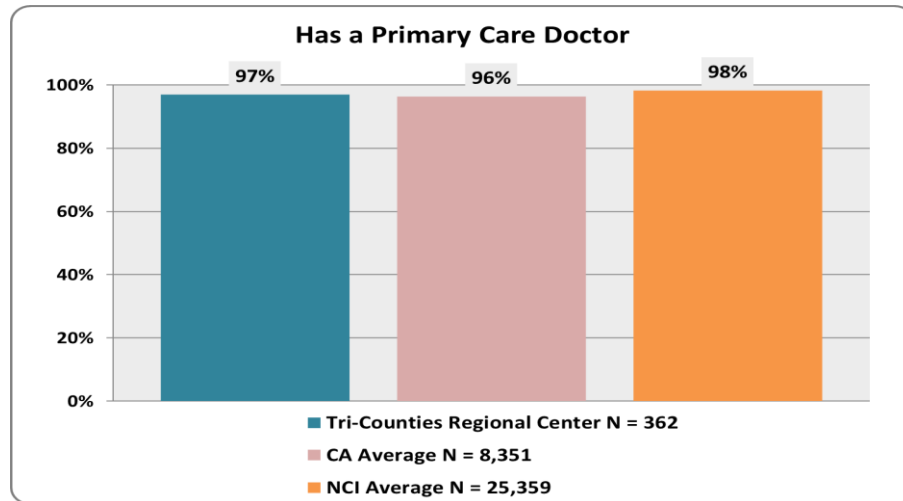
GRAPH 70. ALWAYS HAS A WAY TO GET PLACES



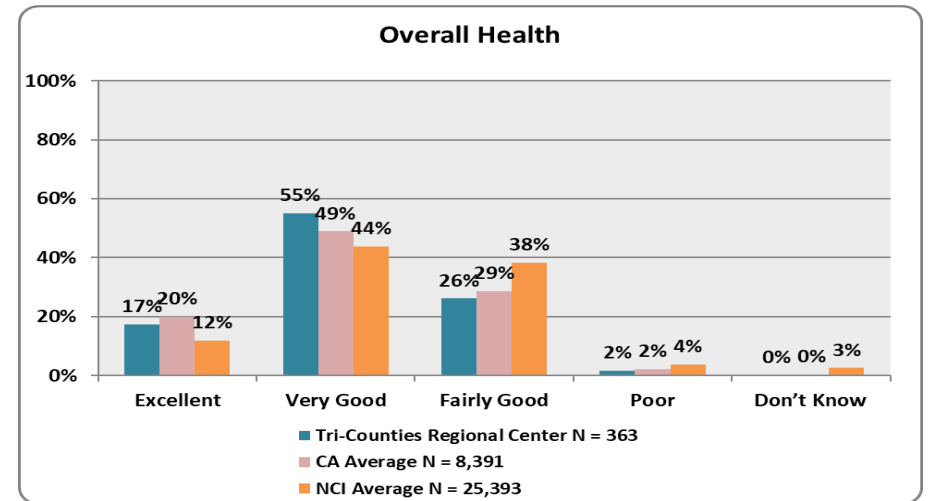
Health

People secure needed health services.

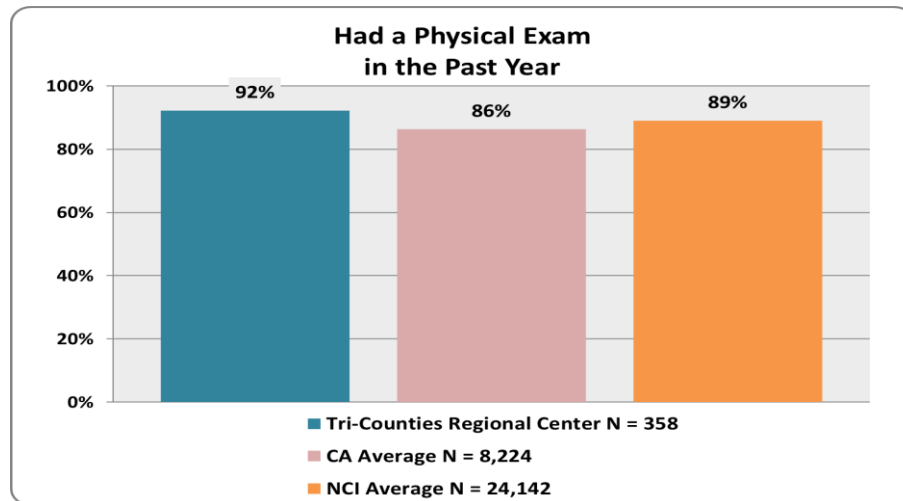
GRAPH 71. HAS A PRIMARY CARE DOCTOR



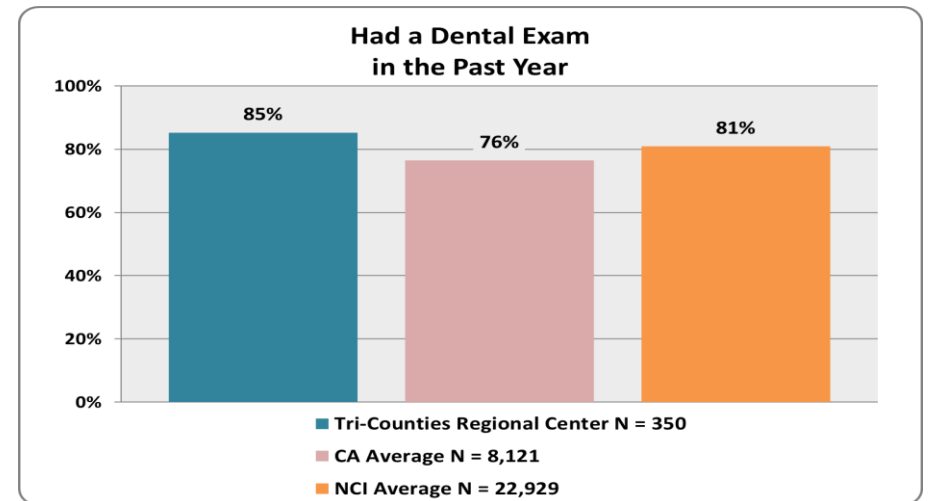
GRAPH 72. OVERALL HEALTH



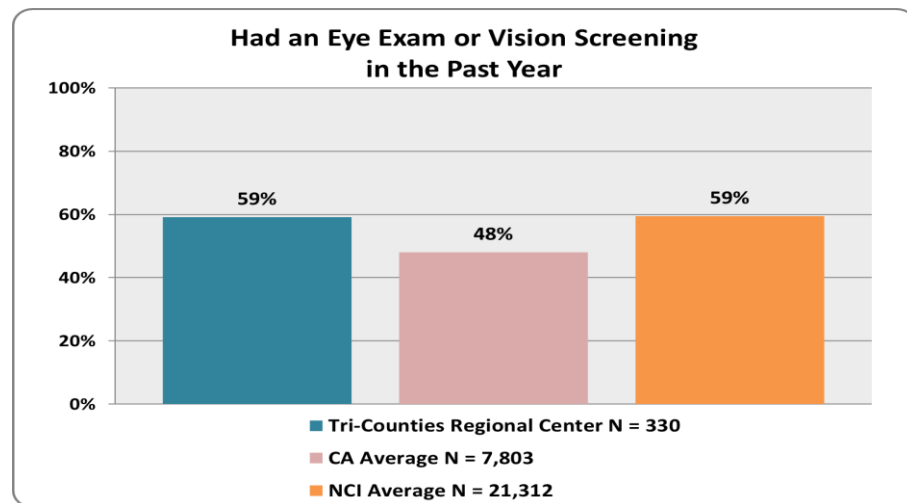
GRAPH 73. HAD AN ANNUAL PHYSICAL EXAM (IN THE PAST YEAR)



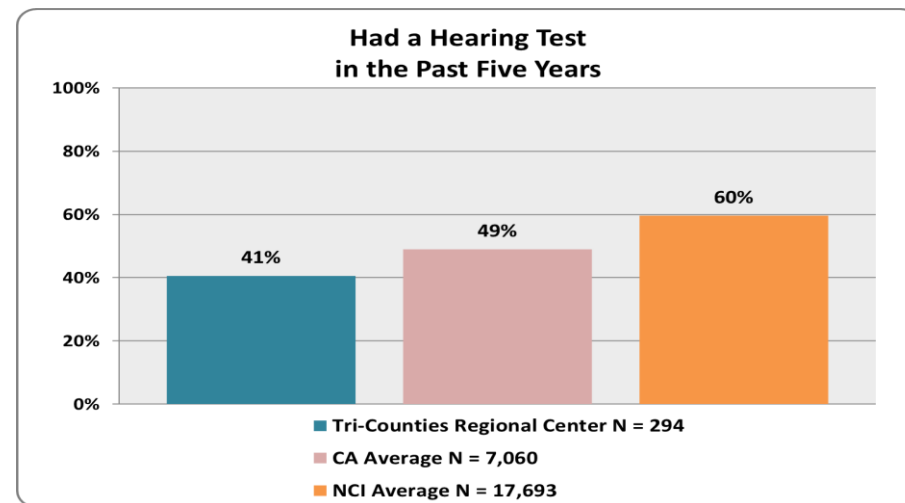
GRAPH 74. HAD A DENTAL EXAM (IN THE PAST YEAR)



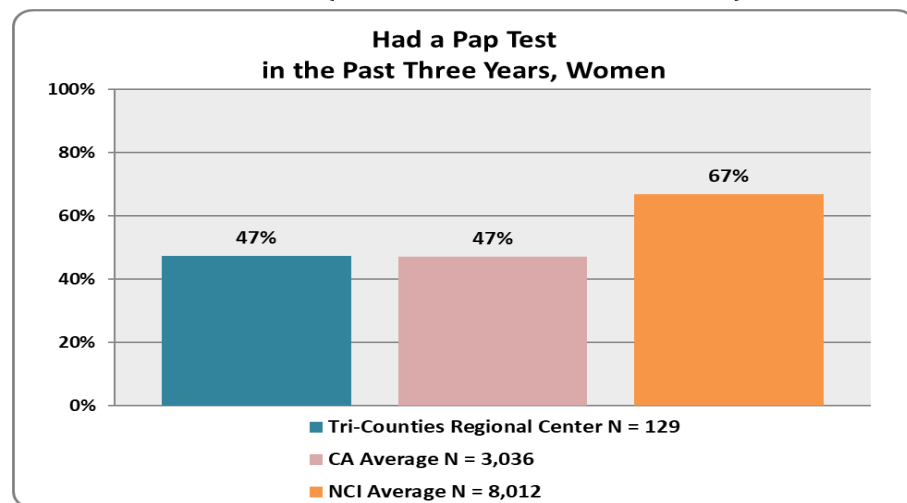
GRAPH 75. HAD AN EYE EXAM OR VISION SCREENING (IN THE PAST YEAR)



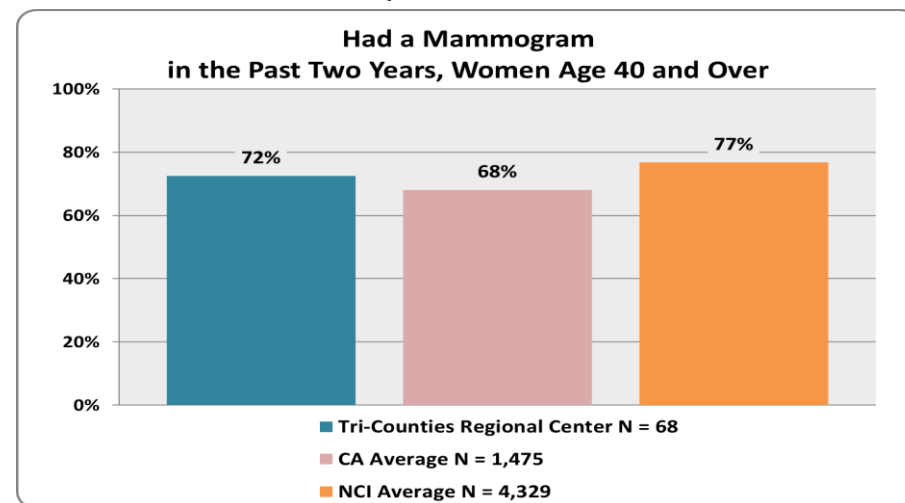
GRAPH 76. HAD A HEARING TEST (IN THE PAST FIVE YEARS)



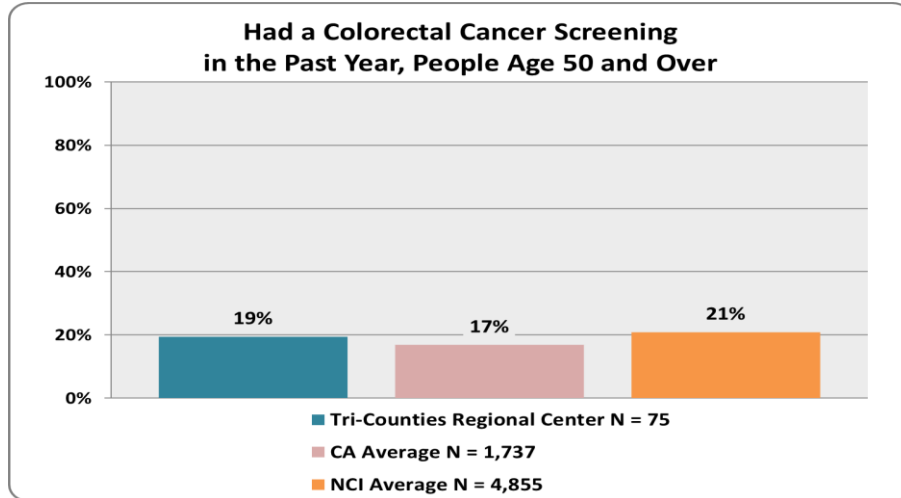
GRAPH 77. HAD A PAP TEST (IN THE PAST THREE YEARS, WOMEN)



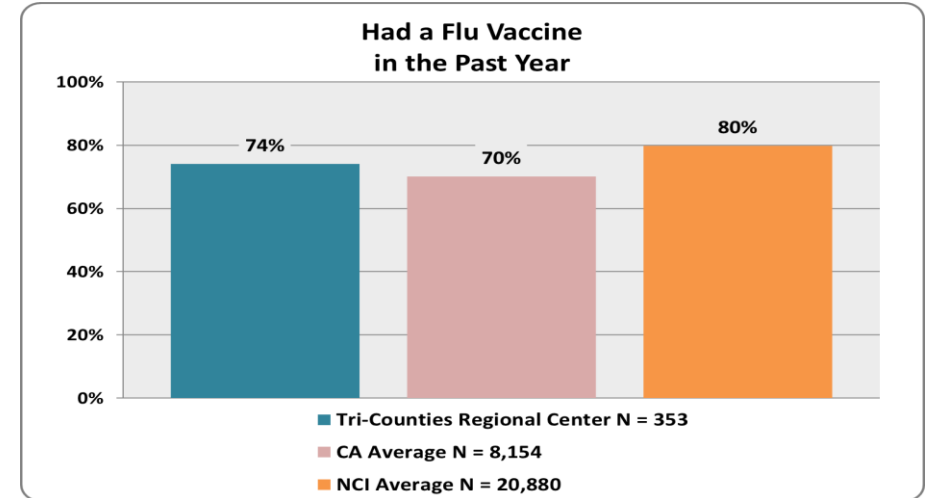
GRAPH 78. HAD A MAMMOGRAM (IN THE PAST TWO YEARS, WOMEN 40 AND OVER)



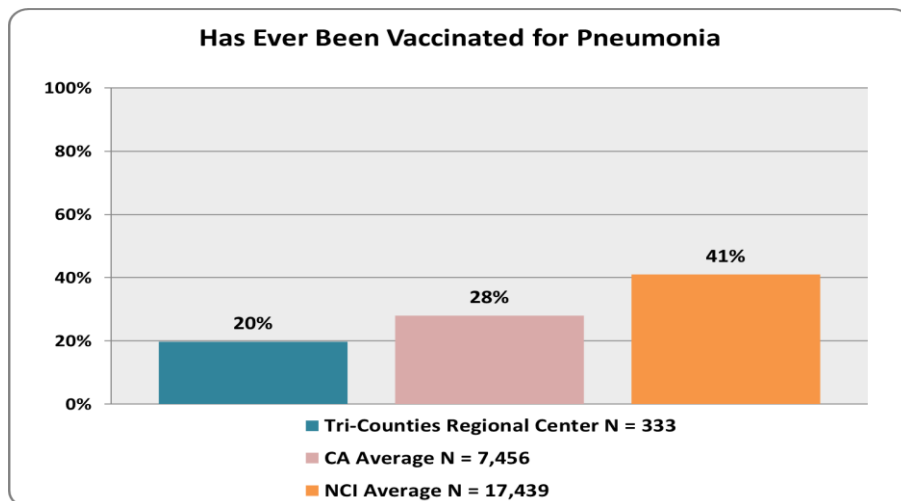
GRAPH 79. HAD A COLORECTAL CANCER SCREENING (IN THE PAST YEAR, AGE 50 AND OVER)



GRAPH 80. HAD A FLU VACCINE (IN THE PAST YEAR)



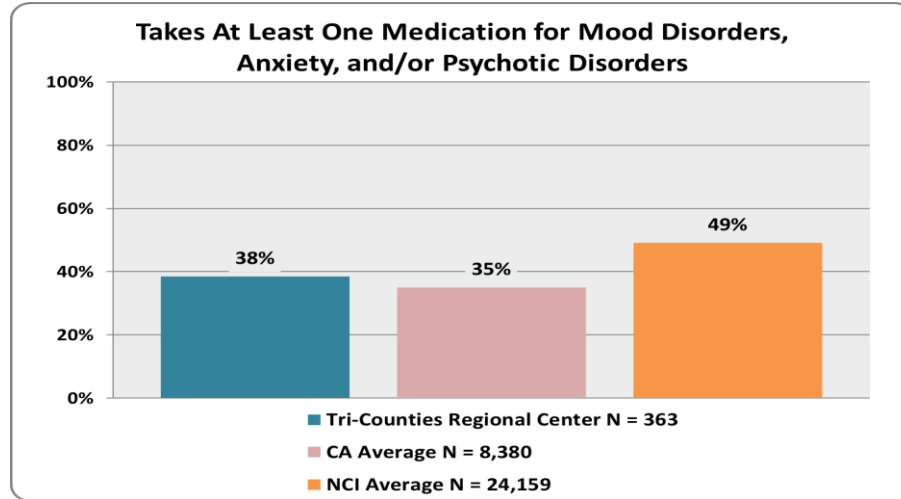
GRAPH 81. HAS EVER BEEN VACCINATED FOR PNEUMONIA



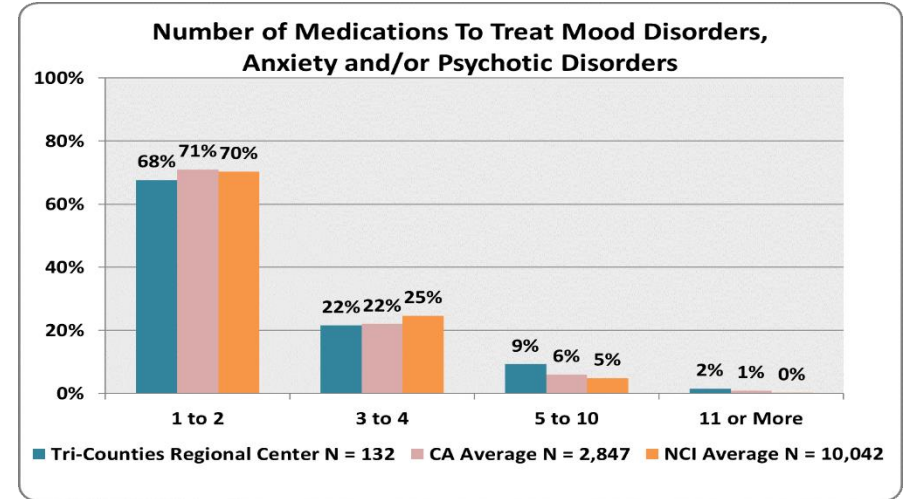
Medication

Medications are managed effectively and appropriately.

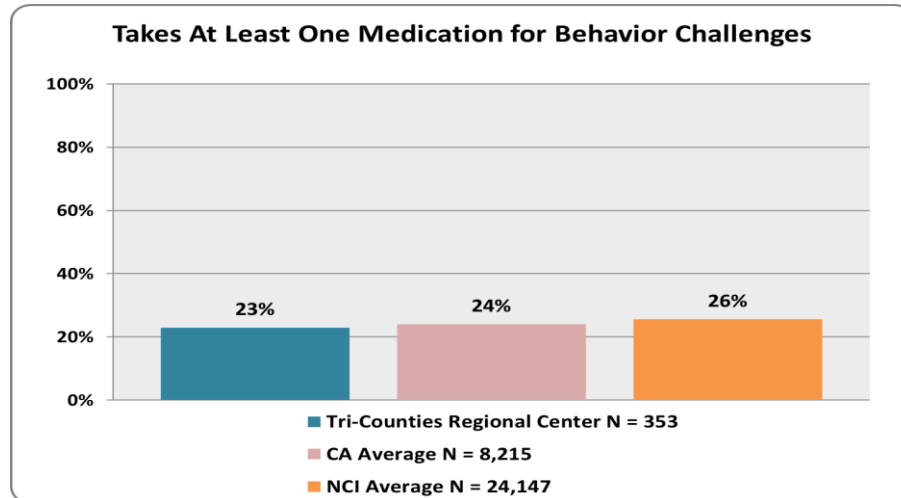
GRAPH 82. TAKES AT LEAST ONE MEDICATION FOR MOOD DISORDERS, ANXIETY, AND/OR PSYCHOTIC DISORDERS



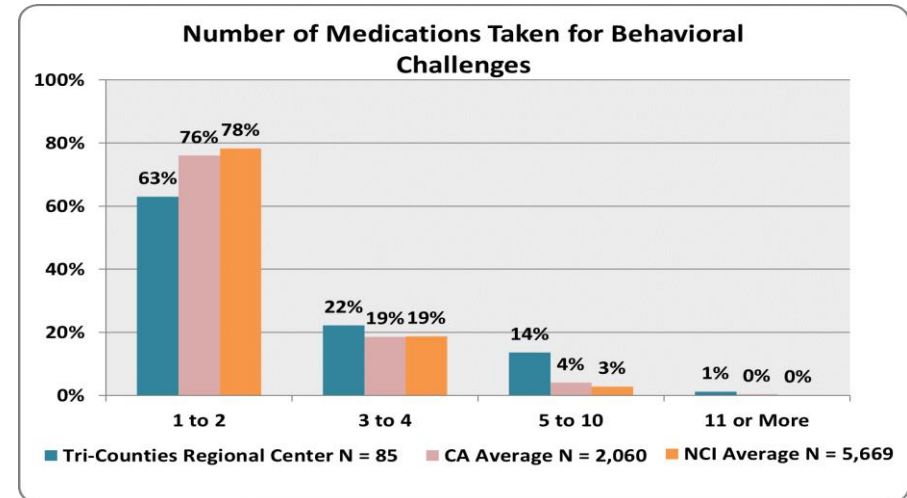
GRAPH 83. HOW MANY MEDICATIONS TO TREAT FOR MOOD DISORDERS, ANXIETY AND/OR PSYCHOTIC DISORDERS DOES THIS PERSON TAKE?



GRAPH 84. TAKES AT LEAST ONE MEDICATION FOR BEHAVIOR CHALLENGES



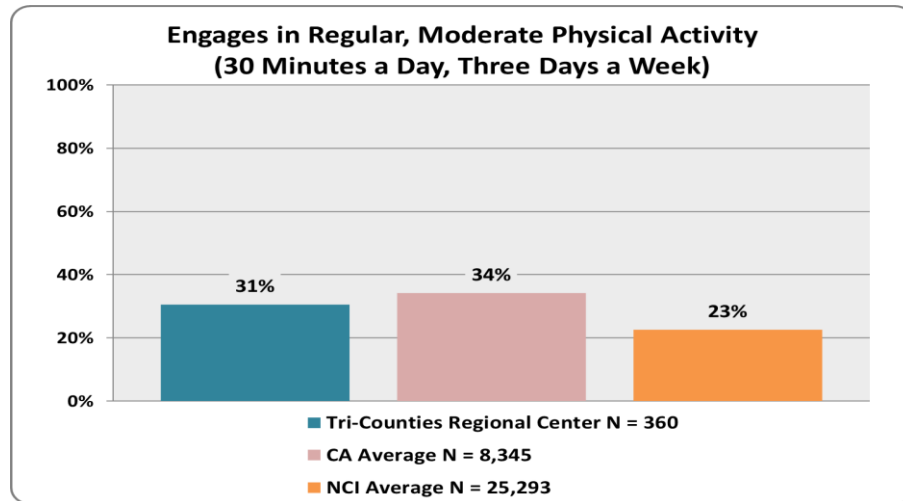
GRAPH 85. HOW MANY MEDICATIONS TO TREAT FOR BEHAVIORAL CHALLENGES DOES THIS PERSON TAKE?



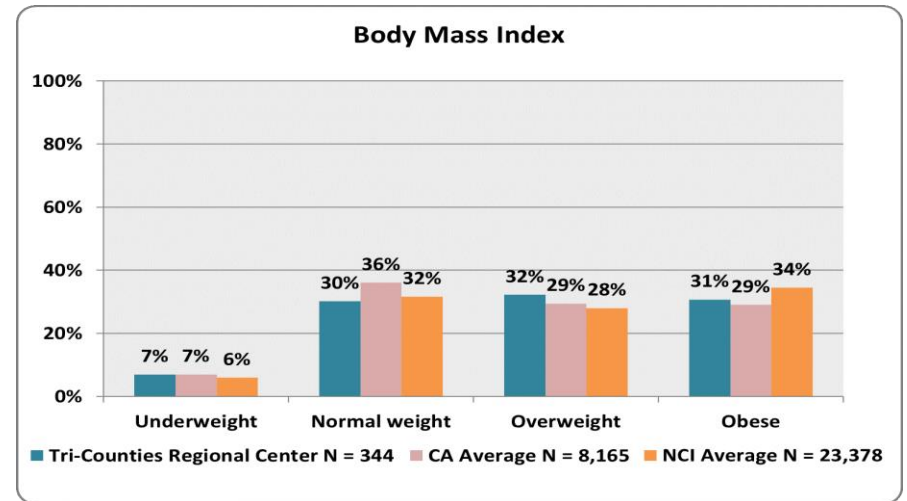
Wellness

People are supported to maintain healthy habits.

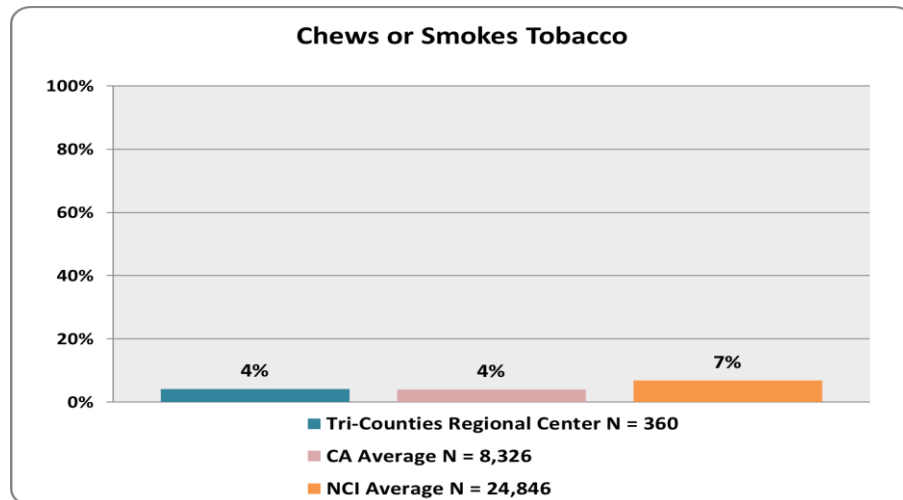
GRAPH 86. ENGAGES IN REGULAR, MODERATE PHYSICAL ACTIVITY



GRAPH 87. BMI (BODY MASS INDEX)



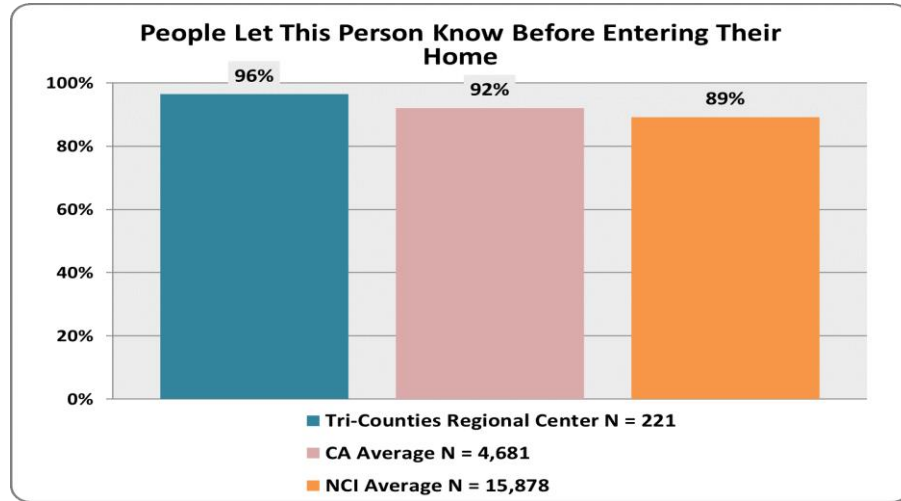
GRAPH 88. CHEWS OR SMOKES TOBACCO



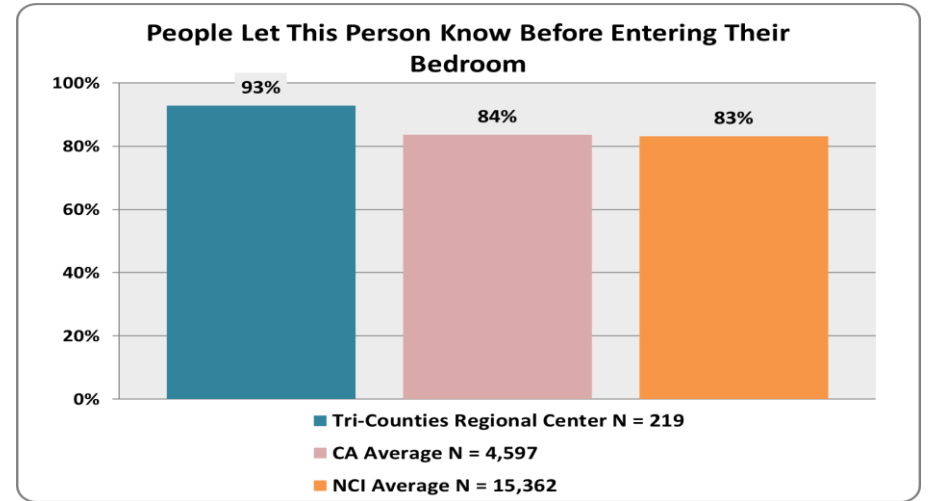
Respect and Rights

People receive the same respect and protections as others in the community.

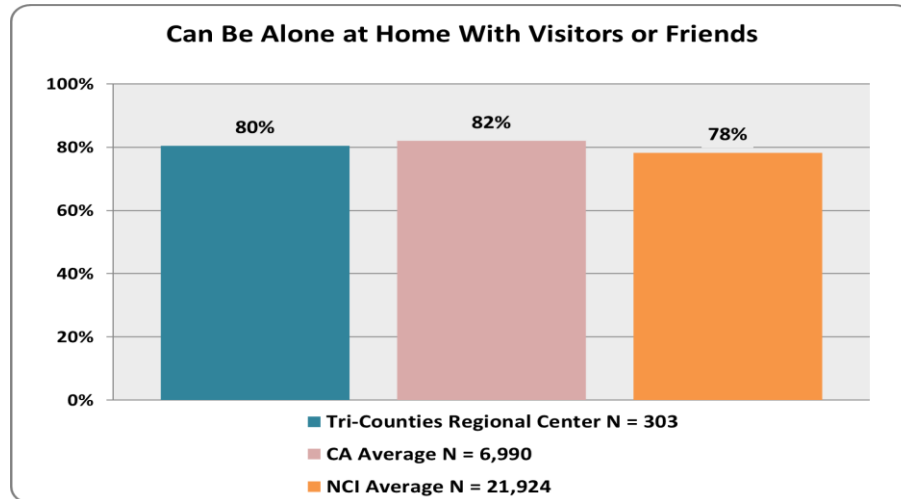
GRAPH 89. PEOPLE LET THIS PERSON KNOW BEFORE ENTERING THEIR HOME



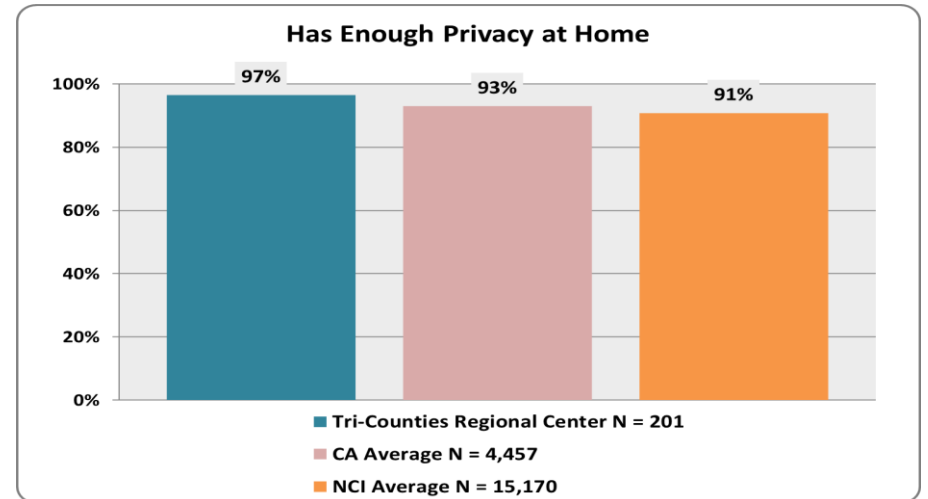
GRAPH 90. PEOPLE LET THIS PERSON KNOW BEFORE ENTERING THEIR BEDROOM



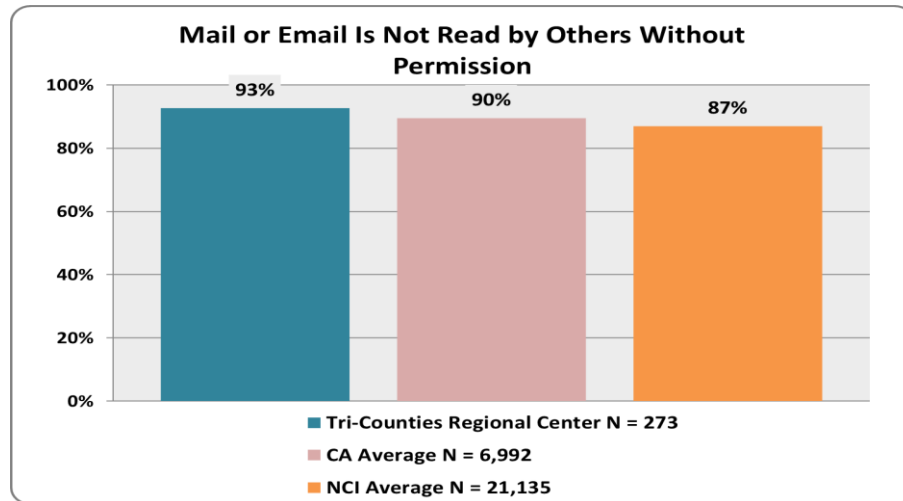
GRAPH 91. CAN BE ALONE AT HOME WITH VISITORS OR FRIENDS



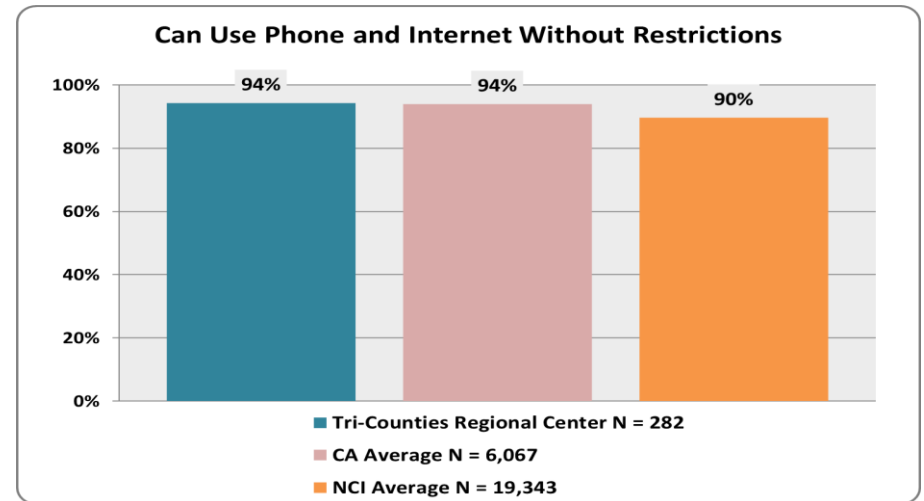
GRAPH 92. HAS ENOUGH PRIVACY AT HOME



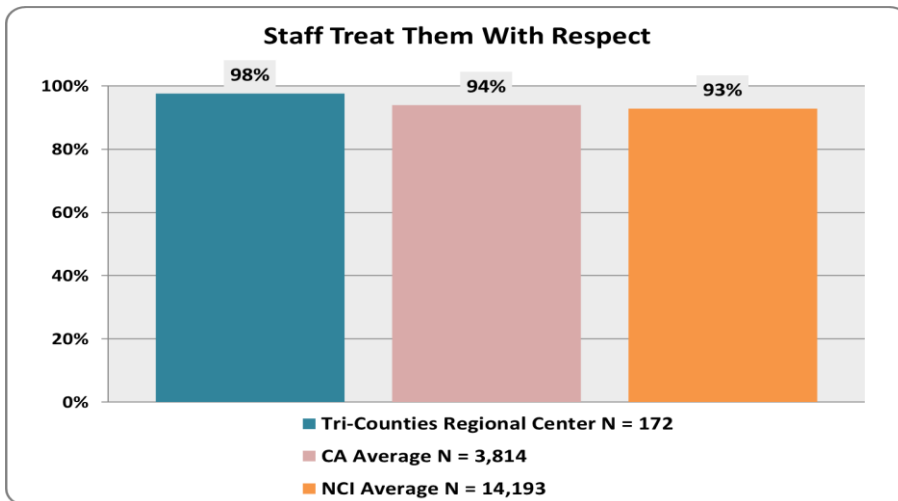
GRAPH 93. MAIL OR EMAIL IS NOT READ BY OTHERS WITHOUT PERMISSION



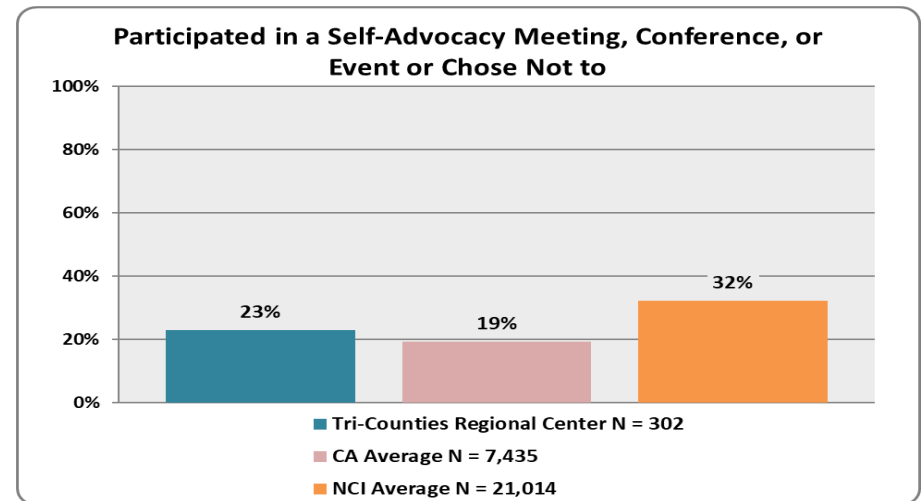
GRAPH 94. CAN USE PHONE AND INTERNET WITHOUT RESTRICTIONS



GRAPH 95. STAFF TREAT THEM WITH RESPECT



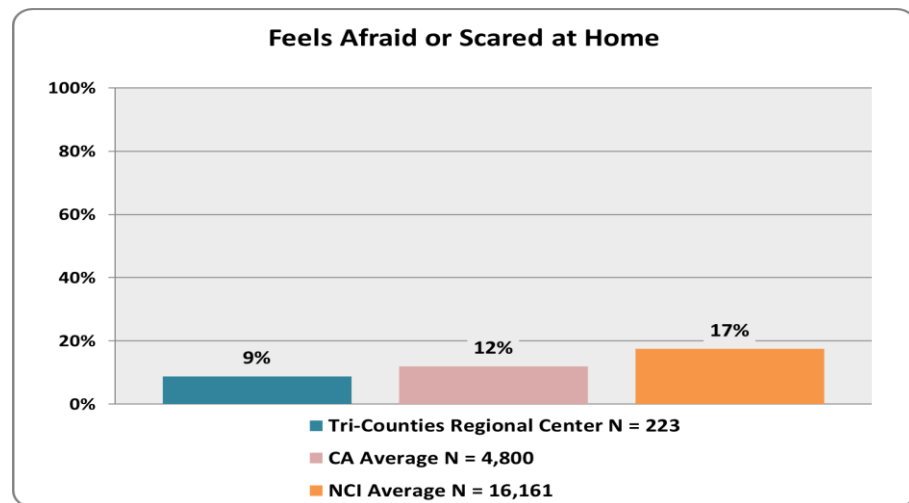
GRAPH 96. PARTICIPATED IN A SELF-ADVOCACY MEETING, CONFERENCE, OR EVENT OR CHOSE NOT TO



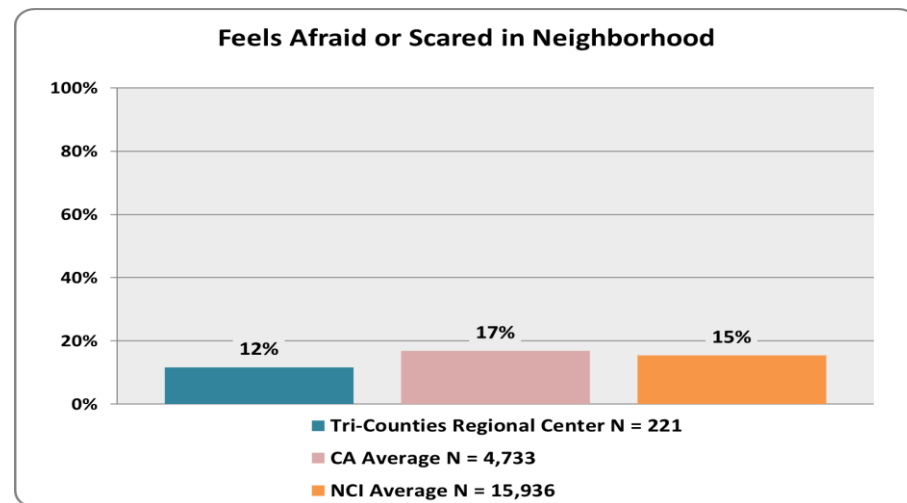
Safety

People are safe from abuse, neglect, and injury.

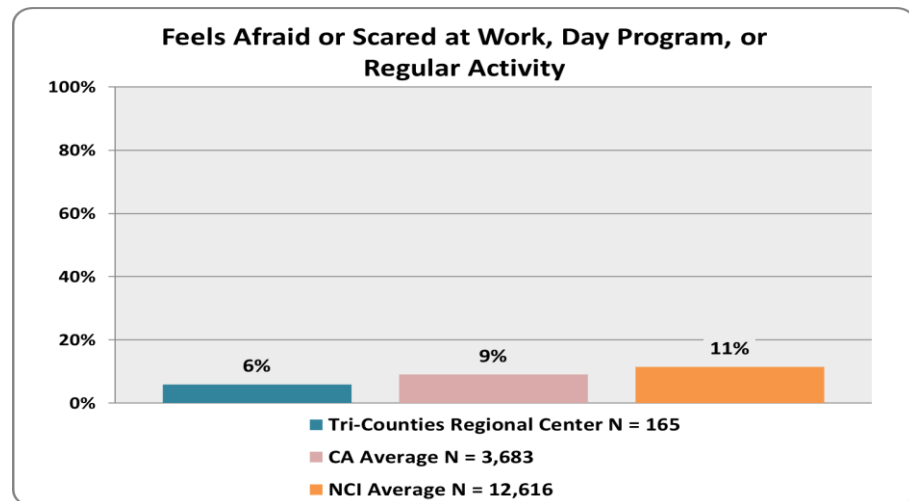
GRAPH 97. FEELS AFRAID OR SCARED AT HOME



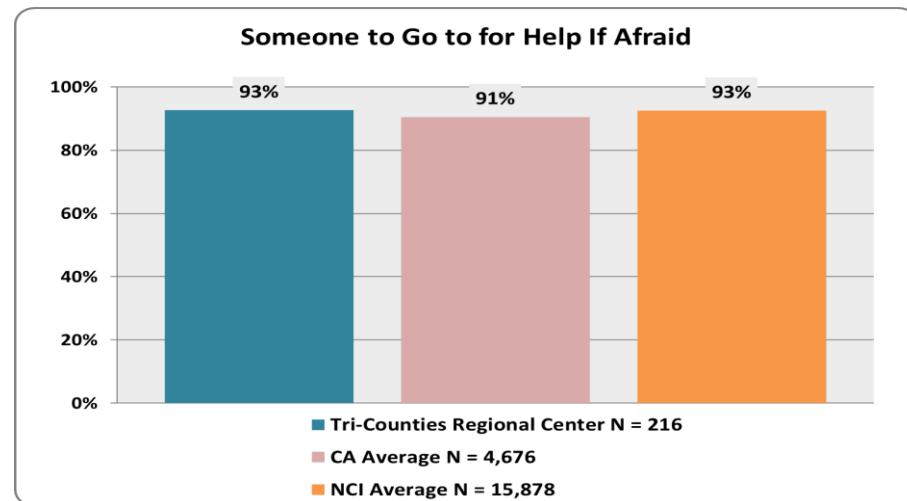
GRAPH 98. FEELS AFRAID OR SCARED IN NEIGHBORHOOD



GRAPH 99. FEELS AFRAID OR SCARED AT WORK, DAY PROGRAM OR REGULAR ACTIVITY



GRAPH 100. SOMEONE TO GO TO FOR HELP IF AFRAID



California-Specific Questions

Cultural Competency

TABLE CA-1. TRI-COUNTIES REGIONAL CENTER CA-SPECIFIC QUESTION OUTCOMES

	Tri-Counties Regional Center		CA Average	
	(%)	(N)	(%)	(N)
There are staff at person's paid community job who speak person's preferred language	98%	62	97%	1,158
There are staff at person's day program or regular activity who speak person's preferred language	99%	127	97%	3,177
There are staff or family at person's home who speak person's preferred language	90%	186	96%	4,379
Person got a copy of his/her IPP in preferred language	92%	180	93%	3,709