



Long-Term Services and Supports Quality Review 2012

**As Required by
2012-13 General Appropriations Act (Article II, Department of Aging
and Disability Services, Rider 13, House Bill 1, 82nd
Legislature, Regular Session, 2011)**

Texas Department of Aging and Disability Services

January 2013

Acknowledgements

Learning about how Texans experience long-term services and supports and their quality of life would not be possible without the thousands of individuals who volunteered their time to be interviewed or complete a participant survey. The state uses this information to identify opportunities for improving services and supports and quality of life and areas where positive experiences were reported. Thank you for providing valuable information to help DADS achieve its mission to “Work in partnership with consumers, develop and improve service options that are responsive to individual needs and preferences, and ensuring and protecting self-determination, consumer rights, and safety.”

Table of Contents

Introduction	1
Performance Indicators	1
Methods	2
Adults Surveyed.....	2
Children and Families Surveyed.....	2
Findings	3
Adults.....	3
<i>Access to Services</i>	3
<i>Decision-Making</i>	5
<i>Control over Transportation</i>	6
<i>Respect</i>	7
<i>Relationships</i>	10
<i>Employment</i>	11
<i>Barriers to Employment</i>	12
<i>Helpfulness of Long-Term Services and Supports</i>	13
Children and Families	14
<i>Access to Services</i>	14
<i>Outcomes</i>	14
<i>Respect</i>	15
<i>Choice</i>	15
<i>Service Delivery</i>	16
<i>Community Connections</i>	17
Summary of Findings	18
Recommendations for Improving Quality of LTSS and Quality of Life	18

List of Tables and Figures

Table 1–Shared Performance Indicators across Adults and Children and Families Survey.....	1
Figure 1–Adults: Access to Services, SSLC Only.....	3
Figure 2–Adults: Access to Services	4
Figure 3–Adults: Decision-Making	5
Figure 4–Adults: Decision Making, SSLC only.....	6
Figure 5–Adults: Control over Transportation	6
Figure 6–Adults: Paid Staff who Help Individual Listened Carefully	7
Figure 7–Adults: Paid Staff were Respectful.....	8
Figure 8–Adults: Individual and Individual’s Things were Safe with Paid Staff.....	9
Figure 9–Adults: Relationships.....	10
Figure 10–Adults: Employment.....	11
Figure 11–Adults: Barriers to Employment.....	12
Figure 12–Adults: Helpfulness of Long-Term Services and Supports.....	13
Figure 13–Children and Families: Access to Services	14
Figure 14–Children and Families: Outcomes	14
Figure 15–Children and Families: Respect.....	15
Figure 16–Children and Families: Choice	15
Figure 17–Children and Families: Service Delivery	16
Figure 18–Children and Families: Community Connections	17

Introduction

The Long-Term Services and Supports Quality Review (LTSSQR) report is mandated by the Texas Legislature (2012-2013 General Appropriations Act (Article II, Department of Aging and Disability Services, Rider 13, House Bill 1, 82nd Legislature, Regular Session, 2011). The purpose of the report is to inform the Texas Legislature, Texas Health and Human Services Commission, Department of Aging and Disability Services (DADS), and stakeholders about individuals' experiences with long-term services and supports (LTSS) administered by the state. The report also includes data about quality of life, which encompasses aspects of a person's life that are not necessarily related to the direct delivery of services or supports (e.g. whether a person has relationships or friends), but helps with understanding how people feel about their quality of life. DADS has published the LTSSQR report since 2005.

Performance Indicators

The LTSSQR uses three different surveys to learn about an individual's experience with LTSS and quality of life.¹ The surveys share five common performance indicators: access to and delivery of services and supports; choice and control; respect/dignity; community integration/inclusion; and outcomes (Table 1). Responses from representative questions for each performance indicator are reported by the two primary groups surveyed in 2010: adults who received LTSS and families of children who received LTSS.

Table 1–Shared Performance Indicators across Adults and Children and Families Surveys

Performance Indicator	Performance Indicator Description	Adults	Children and Families
Access to and delivery of services and supports	Services are accessible and meet the individual's needs	<ul style="list-style-type: none"> • Access to services 	<ul style="list-style-type: none"> • Access to services • Service delivery
Choice and control	Individuals have input into and choices about their services and supports	<ul style="list-style-type: none"> • Decision-making • Control over transportation 	<ul style="list-style-type: none"> • Choice
Respect/Dignity	Individuals are treated with respect by providers	<ul style="list-style-type: none"> • Respect 	<ul style="list-style-type: none"> • Respect
Community Integration/Inclusion	Individuals take part in activities outside their home	<ul style="list-style-type: none"> • Relationships • Employment 	<ul style="list-style-type: none"> • Community connections
Outcomes	Services and supports are helpful and individuals experience beneficial outcomes	<ul style="list-style-type: none"> • Helpfulness of services and supports 	<ul style="list-style-type: none"> • Outcomes

¹ National Core Indicators Adult Consumer Survey (all Adult programs except Community-Based Alternatives program), Participant Experience Survey (Elderly/Disabled) (Community-Based Alternatives only), National Core Indicators Children/Family Survey (Children and Families)

Methods

Adults Surveyed

DADS contracted with an independent organization to collect data about the quality of services and quality of life from October 2009 to March 2010. Interviewers conducted 4,352 face-to-face interviews with adults who receive LTSS through programs DADS administers. Individuals with physical or intellectual/developmental disabilities who need help with housework and light chores, individuals who need continuous nursing care, and individuals who reside in institutional settings were surveyed. Representative samples were drawn from each program so that findings can be generalized to all individuals in a program.

Individuals enrolled in the following programs were interviewed:

- Adult Foster Care (AFC)
- Community Attendant Services (CAS)
- Consumer Managed Personal Attendant Services (CMPAS)
- Family Care
- Primary Home Care (PHC)
- Programs of All-Inclusive Care for the Elderly (PACE)
- Residential Care
- Special Services to Persons with Disabilities (SSPD)
- SSPD with 24-hour Shared Attendant Care (SSPD SAC)
- State Supported Living Centers (SSLC)

Children and Families Surveyed

DADS mailed surveys to families of children who receive services through DADS-administered programs. Like the adult programs, representative samples were drawn from each program so that findings can be generalized to all individuals in a program.

Responses were received from 617 families of children enrolled in the following programs:

- Community Living Assistance and Support (CLASS)
- CLASS using Consumer Directed Services (CDS) option
- Home and Community-based Services (HCS)
- Medically Dependent Children Program (MDCP)
- Texas Home Living Waiver (TxHmL)

Findings

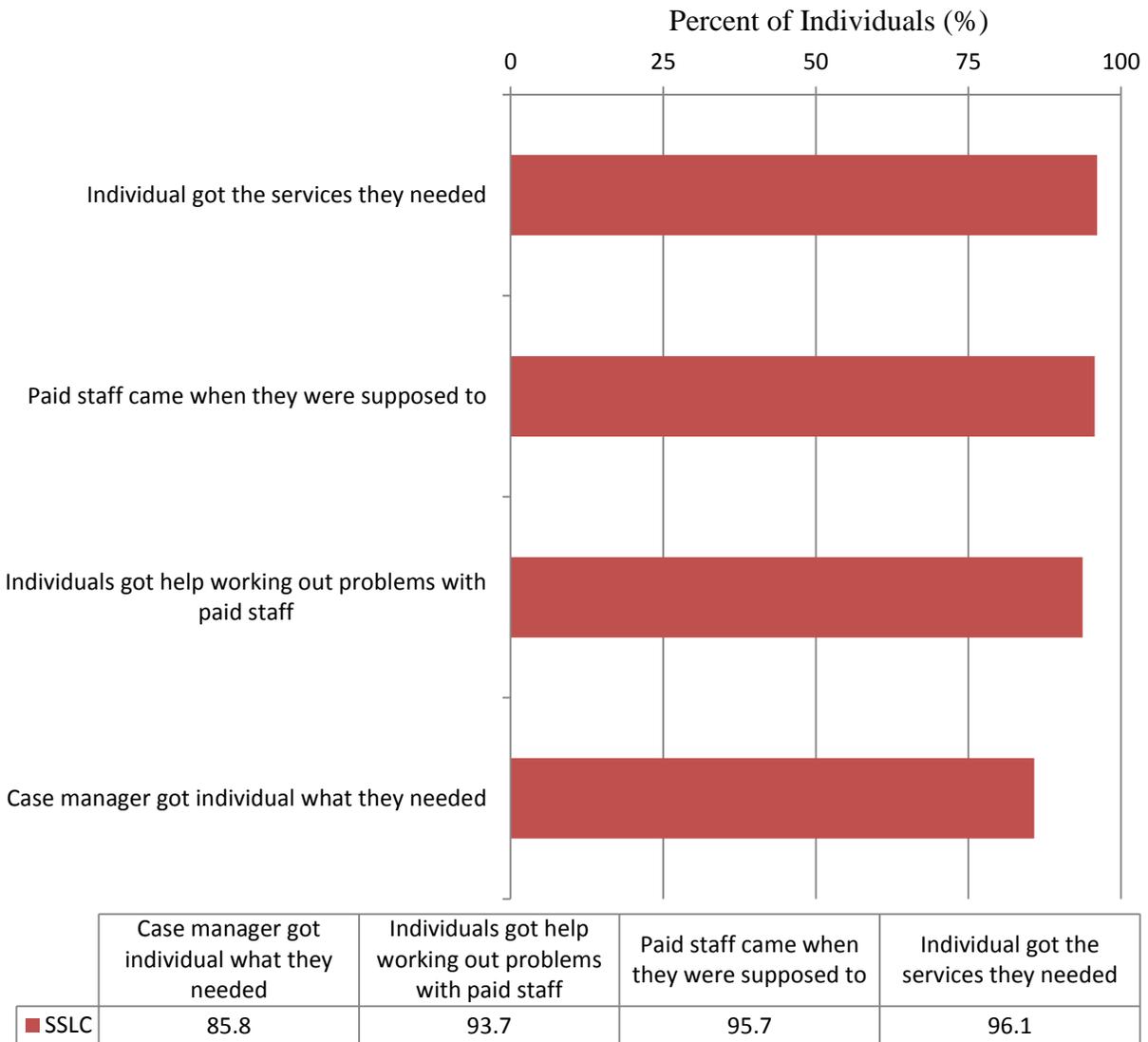
Adults

Access to Services

Findings:

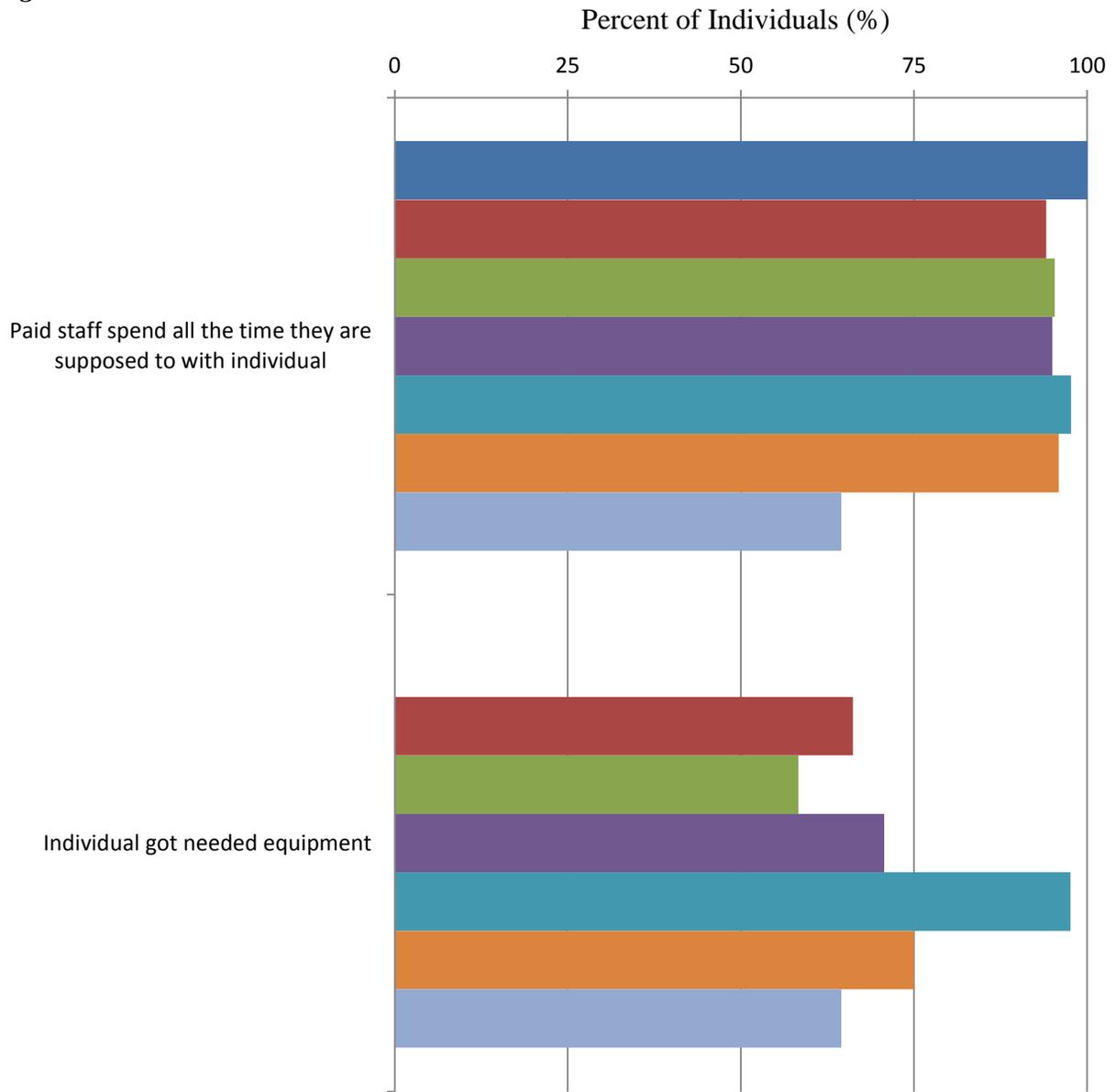
- Most people reported having access to services and supports with the help of staff paid to help them and their case manager.
- Some people had trouble getting equipment they needed to help them with everyday activities.

Figure 1—Adults: Access to Services, SSLC Only²



² Data are only available for SSLCs because these questions were only asked on the National Core Indicators Adult Consumer survey, which was used for people who reside in SSLCs.

Figure 2—Adults: Access to Services



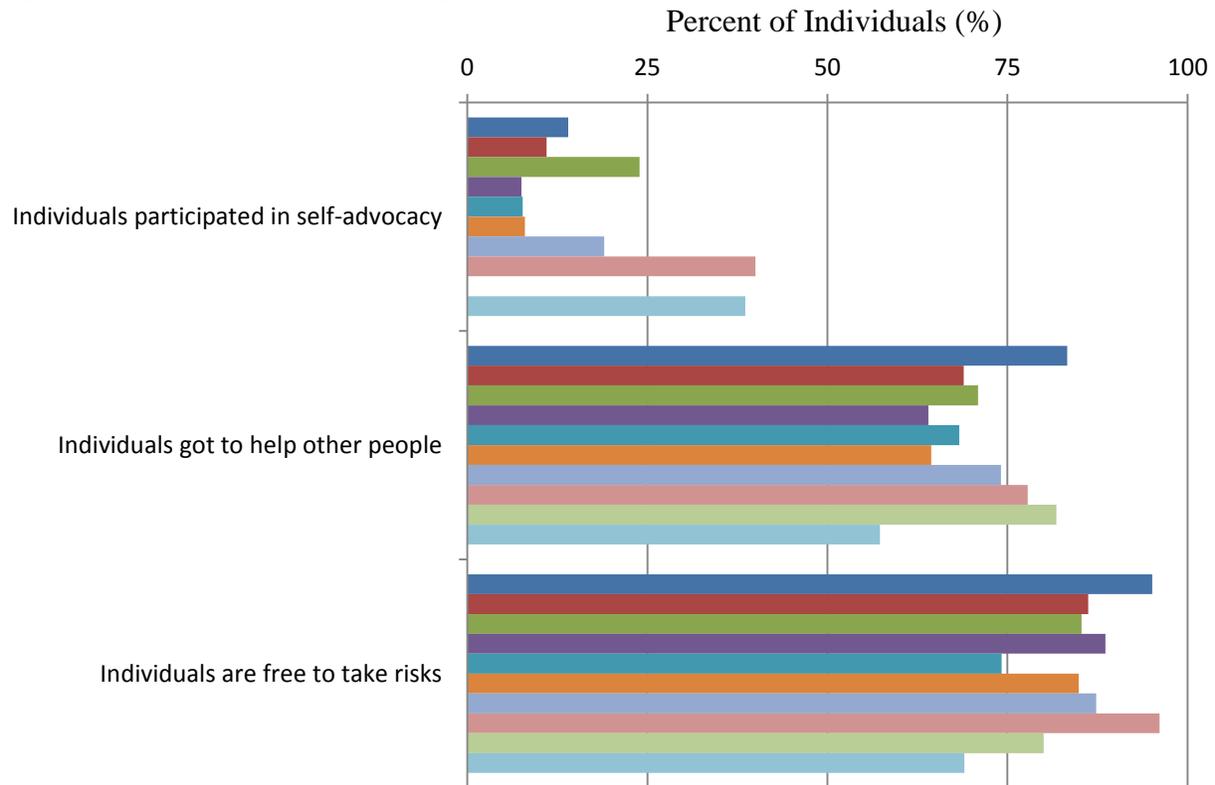
	Individual got needed equipment	Paid staff spend all the time they are supposed to with individual
■ AFC		100.0
■ CAS	66.2	94.1
■ CMPAS	58.3	95.3
■ Family Care	70.7	95.0
■ PACE	97.6	97.7
■ PHC	75.0	95.9
■ Residential Care	64.5	64.5

Decision-Making

Findings:

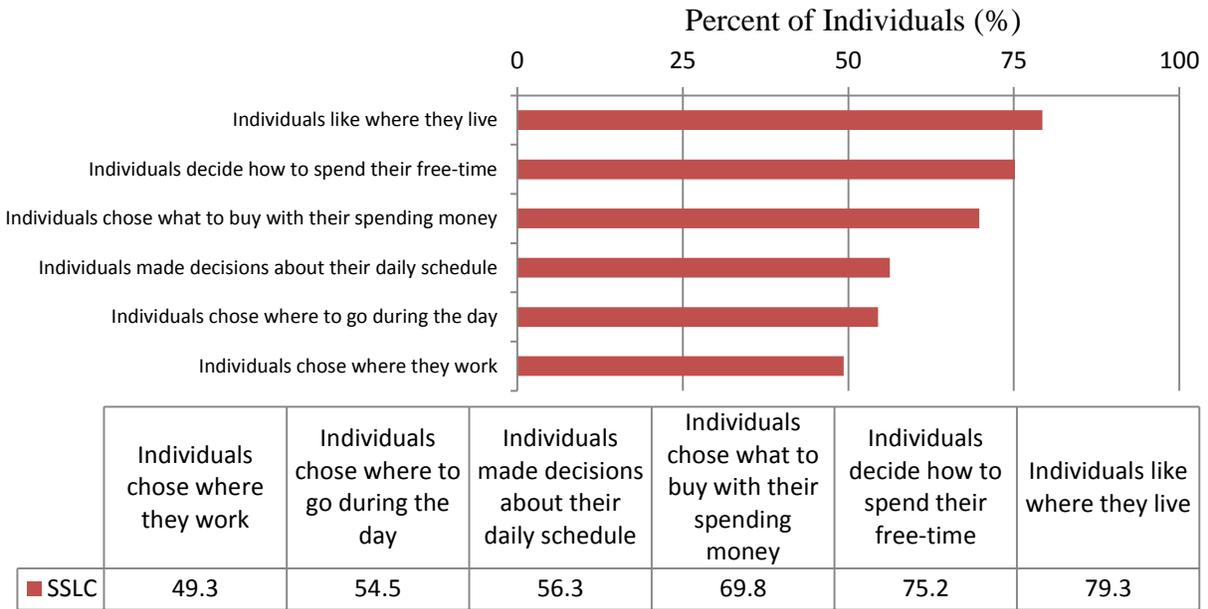
- Most people felt like they could make decisions about taking risks and helping other people.
- About one in four individuals participated in self-advocacy activities.
- Among people who reside in SSLCs, most people made decisions about where they live and how they spend their free-time and spending money. About half made decisions about their daily schedule and where they go during the day.

Figure 3—Adults: Decision-Making



	Individuals are free to take risks	Individuals got to help other people	Individuals participated in self-advocacy
■ AFC	95.1	83.3	14.0
■ CAS	86.2	68.9	11.0
■ CMPAS	85.3	70.9	23.9
■ Family Care	88.6	64.0	7.5
■ PACE	74.2	68.3	7.7
■ PHC	84.9	64.4	8.0
■ Residential Care	87.3	74.1	19.0
■ SSPD	96.1	77.8	40.0
■ SSPD SAC	80.0	81.8	
■ SSLC	69.0	57.3	38.6

Figure 4—Adults: Decision Making, SSLC only³

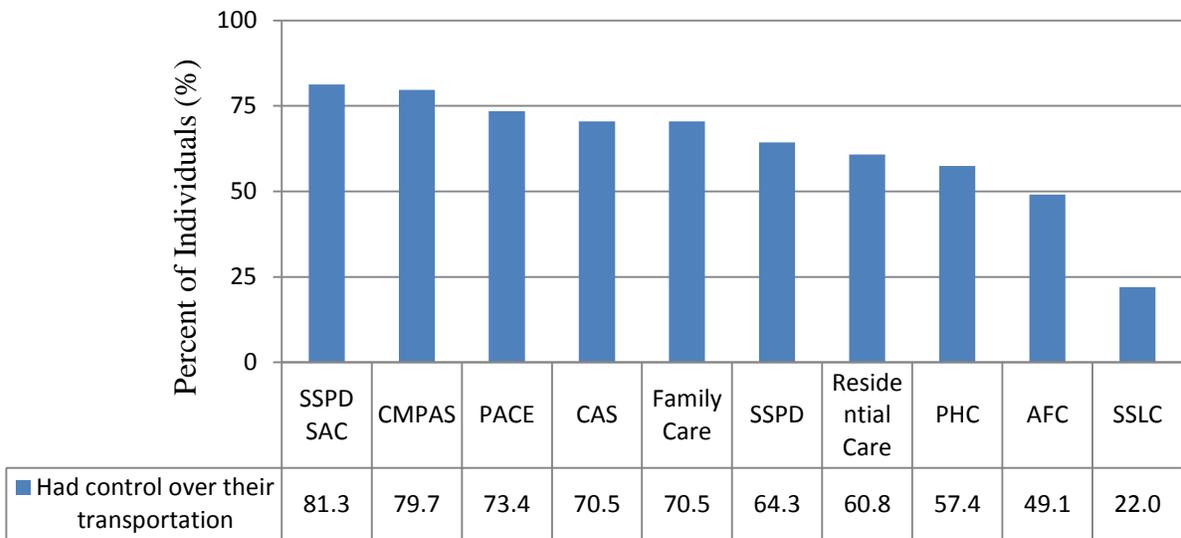


Control over Transportation

Findings:

- While individuals in some programs had control over their transportation, less than half in other programs reported having control over their transportation.

Figure 5—Adults: Control over Transportation



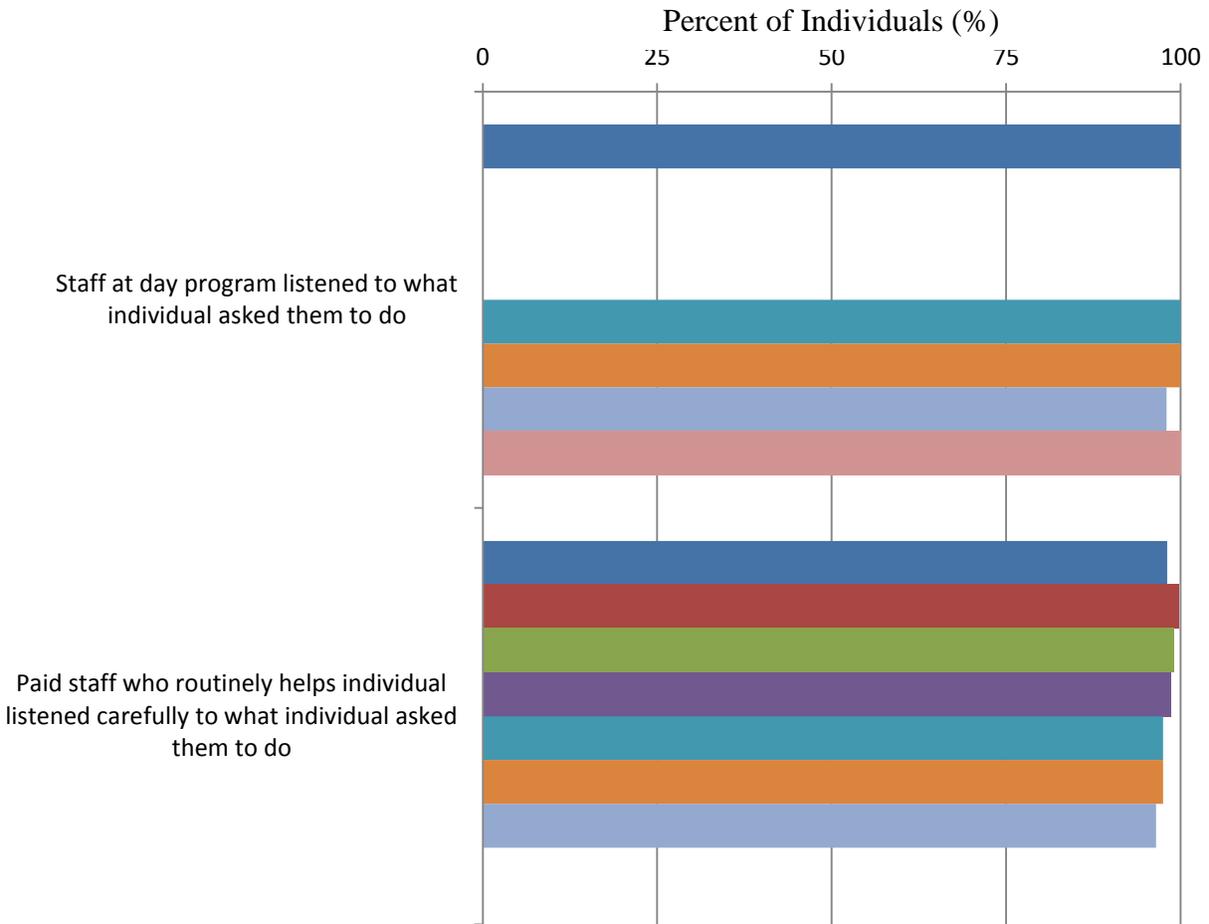
³ Data are only available for SSLCs because these questions were only asked on the National Core Indicators Adult Consumer Survey, which was used for people who reside in SSLCs.

Respect

Findings:

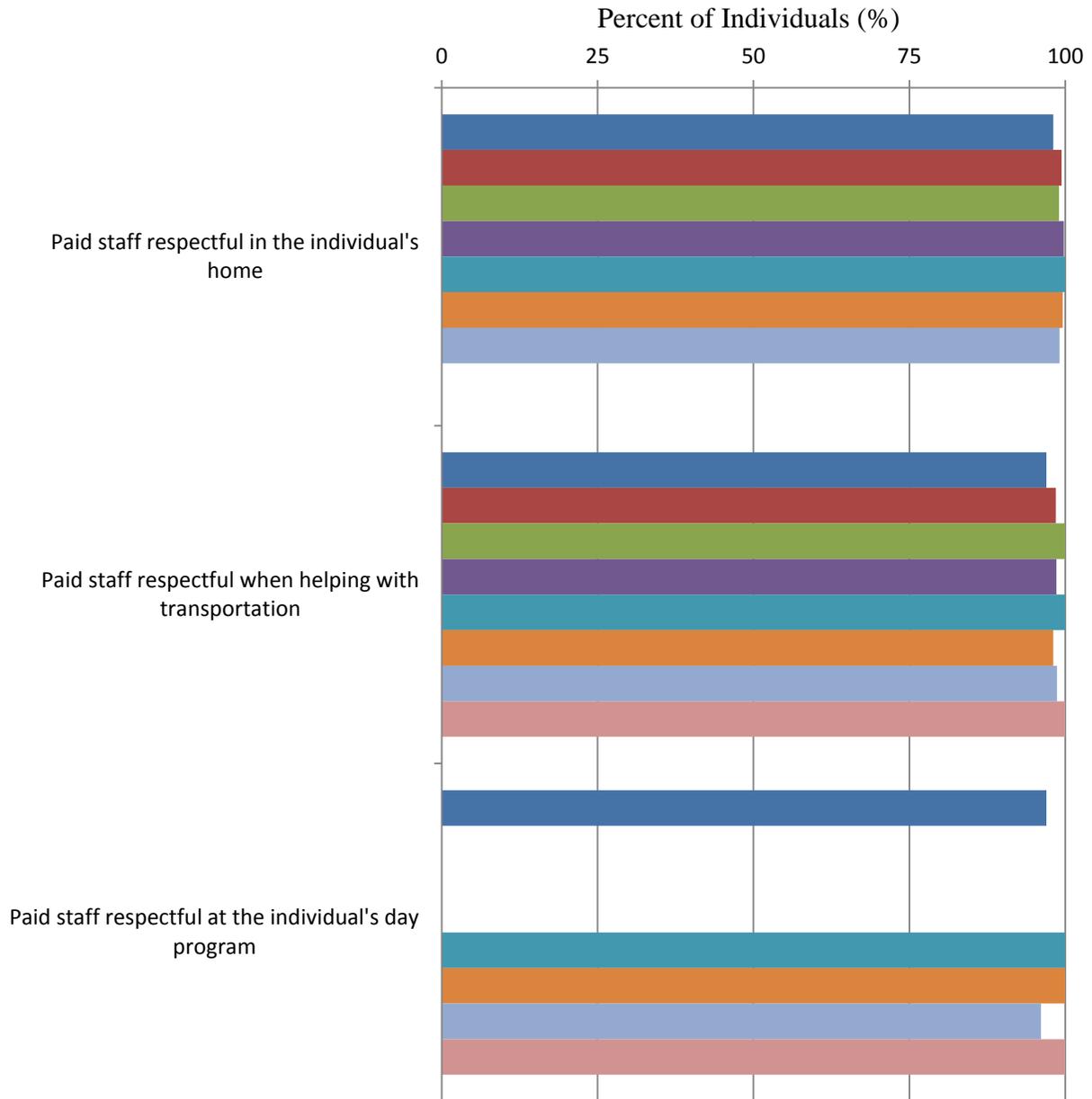
- Most people reported that staff paid to help them listened to what they asked staff to do, were respectful, and had never hurt them or taken their things without asking.

Figure 6—Adults: Paid Staff who Help Individual Listened Carefully



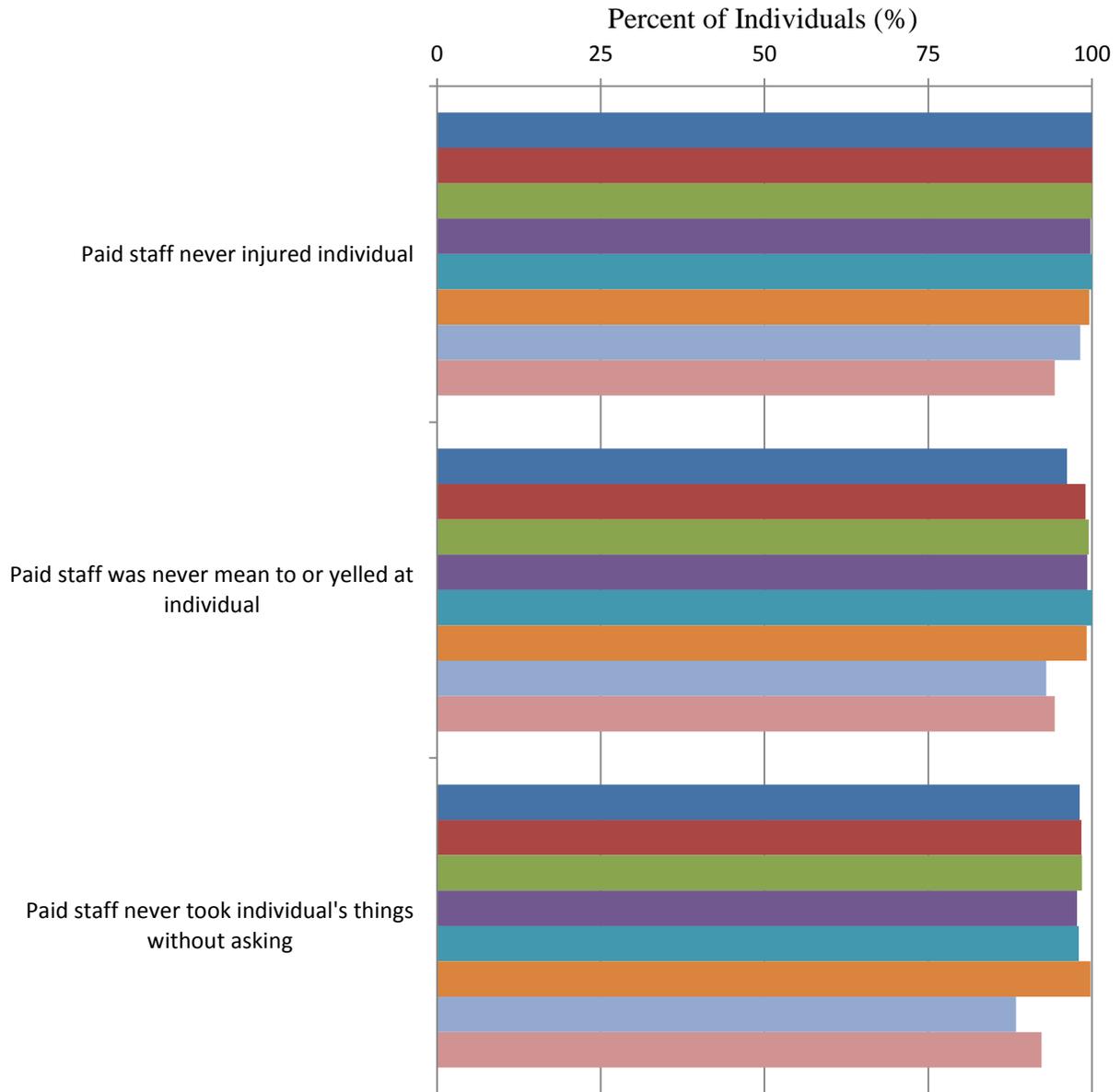
	Paid staff who routinely helps individual listened carefully to what individual asked them to do	Staff at day program listened to what individual asked them to do
■ AFC	98.1	100.0
■ CAS	99.8	
■ CMPAS	99.0	
■ Family Care	98.6	
■ PACE	97.5	100.0
■ PHC	97.5	100.0
■ Residential Care	96.5	98.0
■ SSPD		100.0

Figure 7—Adults: Paid Staff were Respectful



	Paid staff respectful at the individual's day program	Paid staff respectful when helping with transportation	Paid staff respectful in the individual's home
■ AFC	97.0	97.0	98.1
■ CAS		98.5	99.4
■ CMPAS		100.0	99.0
■ Family Care		98.6	99.8
■ PACE	100.0	100.0	100.0
■ PHC	100.0	98.1	99.6
■ Residential Care	96.1	98.7	99.1
■ SSPD	100.0	100.0	

Figure 8—Adults: Individual and Individual’s Things were Safe with Paid Staff



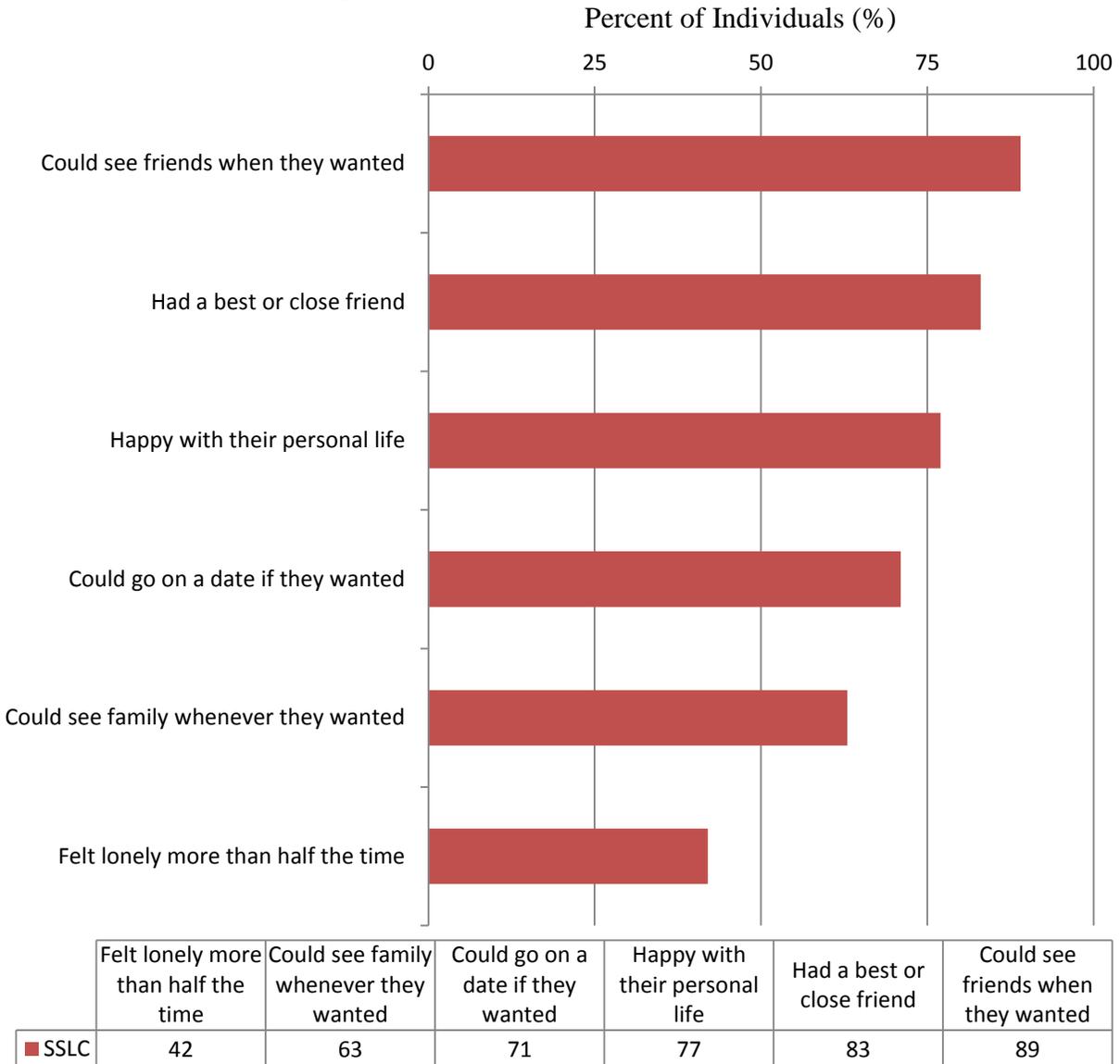
	Paid staff never took individual's things without asking	Paid staff was never mean to or yelled at individual	Paid staff never injured individual
■ AFC	98.1	96.2	100.0
■ CAS	98.4	99.0	100.0
■ CMPAS	98.5	99.5	100.0
■ Family Care	97.7	99.3	99.8
■ PACE	98.0	100.0	100.0
■ PHC	99.8	99.2	99.6
■ Residential Care	88.4	93.0	98.2
■ SSPD	92.3	94.3	94.3

Relationships

Findings

- Most individuals had close relationships and could see their friends whenever they wanted. Fewer people reported being able to see their family whenever they wanted.
- About 3 of every 4 individuals were happy with their personal life.
- Just under half of the people who reside in SSLCs reported feeling lonely.

Figure 9—Adults: Relationships⁴



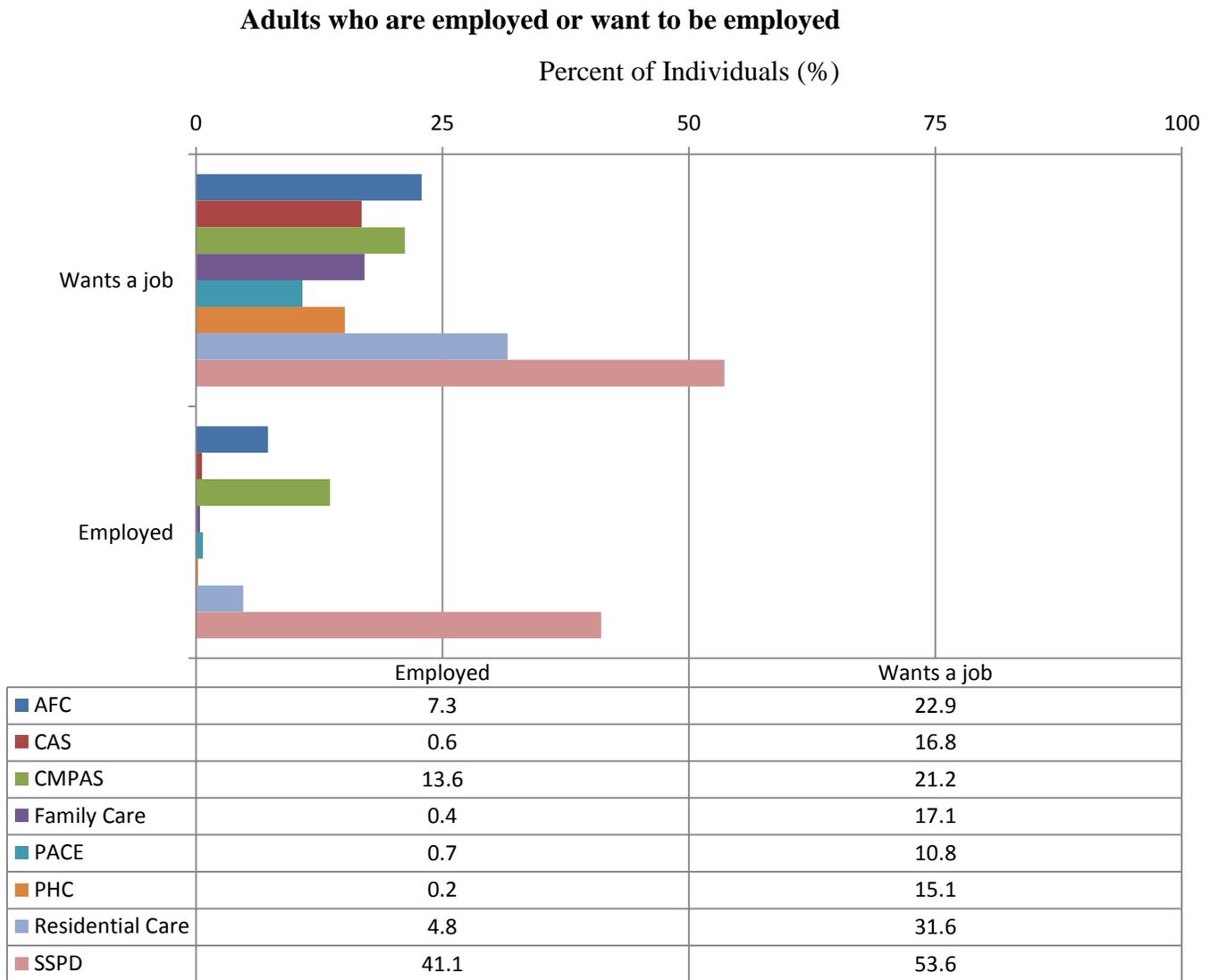
⁴ Data are only available for SSLCs because these questions were only asked on the National Core Indicators Adult Consumer survey, which was used for people who reside in SSLCs.

Employment

Findings:

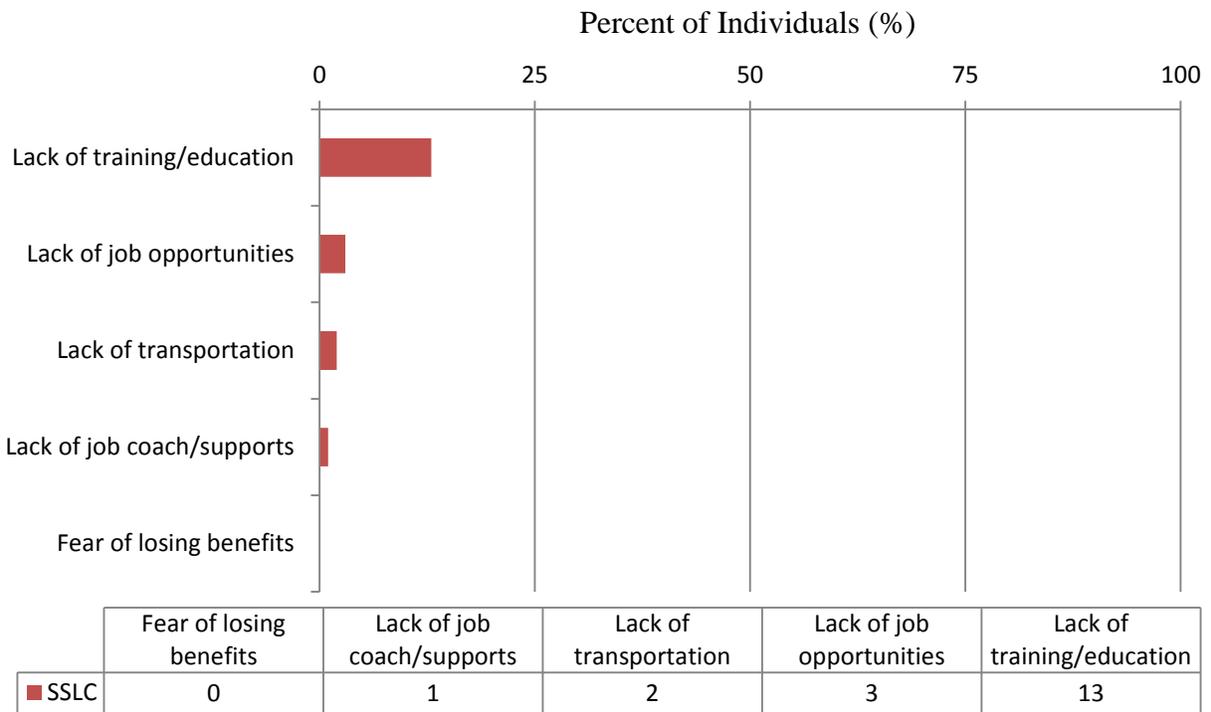
- Most individuals were unemployed.
- Individuals want to work.
- Lack of training or education and lack of job opportunities are the greatest barriers to employment.
- Lack of transportation and job supports are also barriers to employment.

Figure 10—Adults: Employment



Barriers to employment

Figure 11—Adults: Barriers to Employment

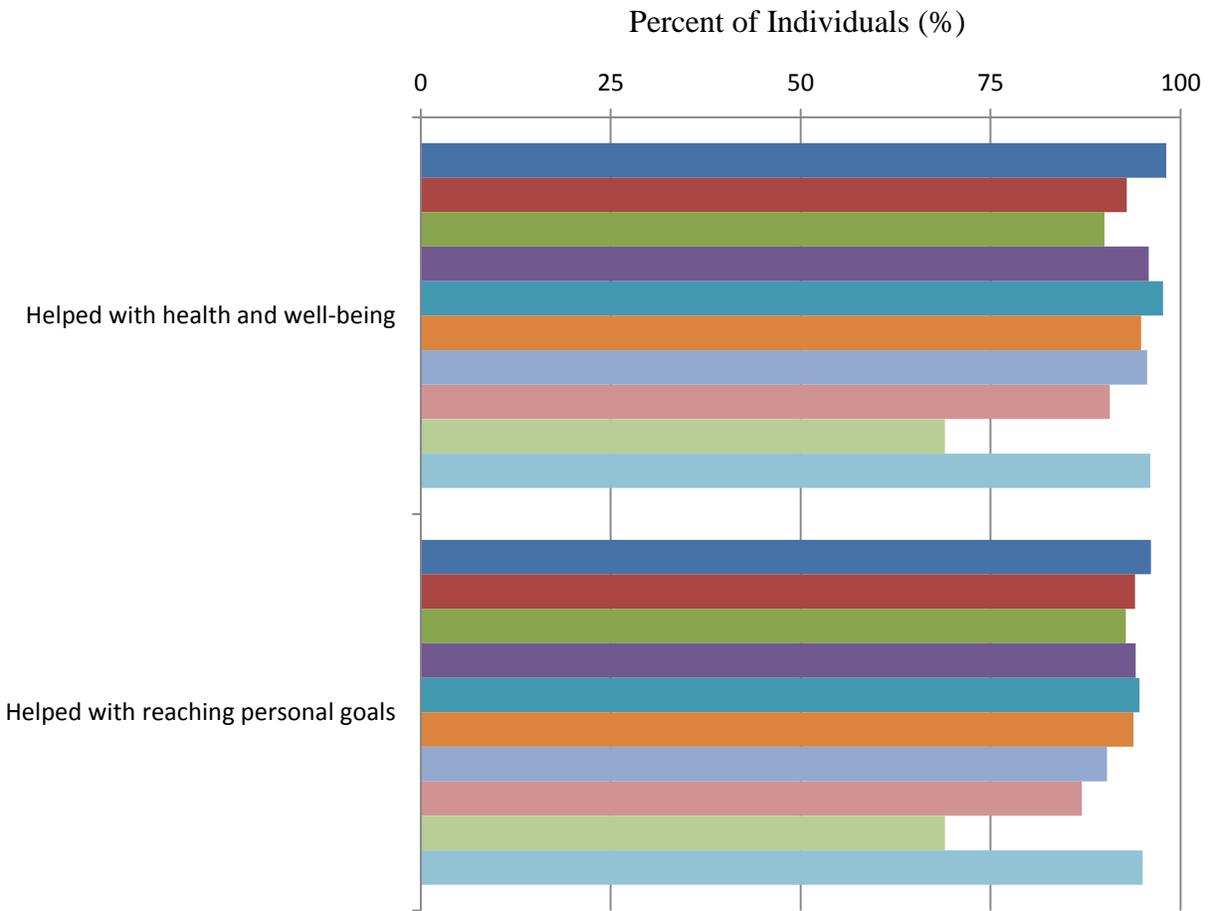


Helpfulness of Long-Term Services and Supports

Findings:

- Most people reported that their long-term services and supports helped with their health and well-being and reaching their personal goals.

Figure 12—Adults: Helpfulness of Long-Term Services and Supports



	Helped with reaching personal goals	Helped with health and well-being
■ AFC	96.1	98.1
■ CAS	94.0	92.9
■ CMPAS	92.8	90.0
■ Family Care	94.1	95.8
■ PACE	94.6	97.7
■ PHC	93.8	94.8
■ Residential Care	90.3	95.6
■ SSPD	87.0	90.7
■ SSPD SAC	69.0	69.0
■ SSLC	95.0	96.0

Children and Families

Findings:

- Most families reported that their children always or usually could access services, had good outcomes, and were treated with respect by providers, and had some choice about their services and supports.
- Most families reported that services and information were only sometimes delivered.
- Helping children and families make connections in the community is an area with opportunities to improve quality of life.

Figure 13—Children and Families: Access to Services

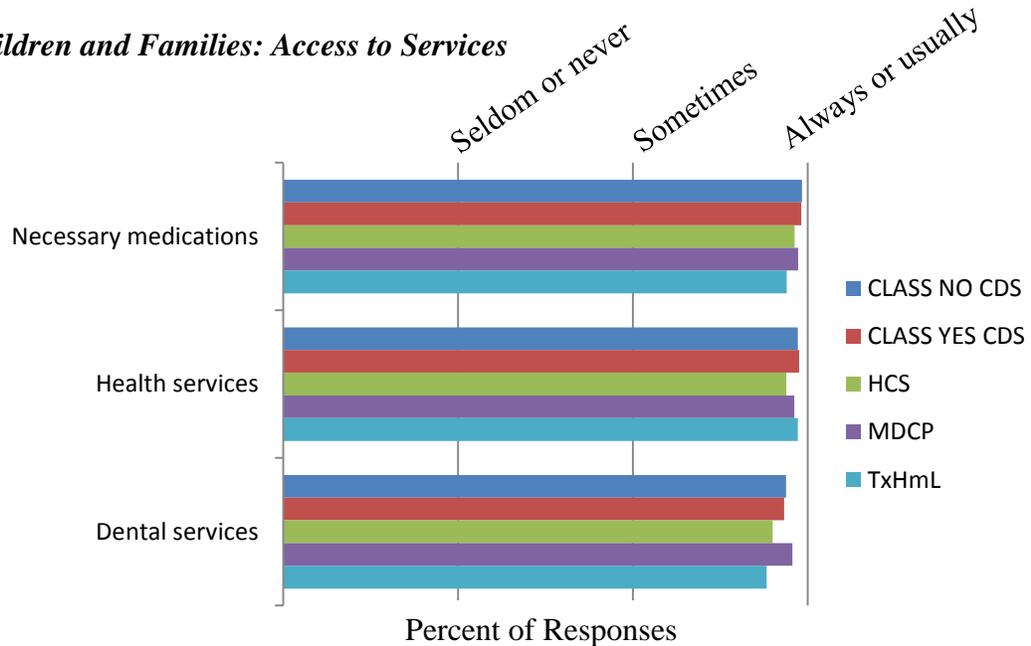


Figure 14—Children and Families: Outcomes

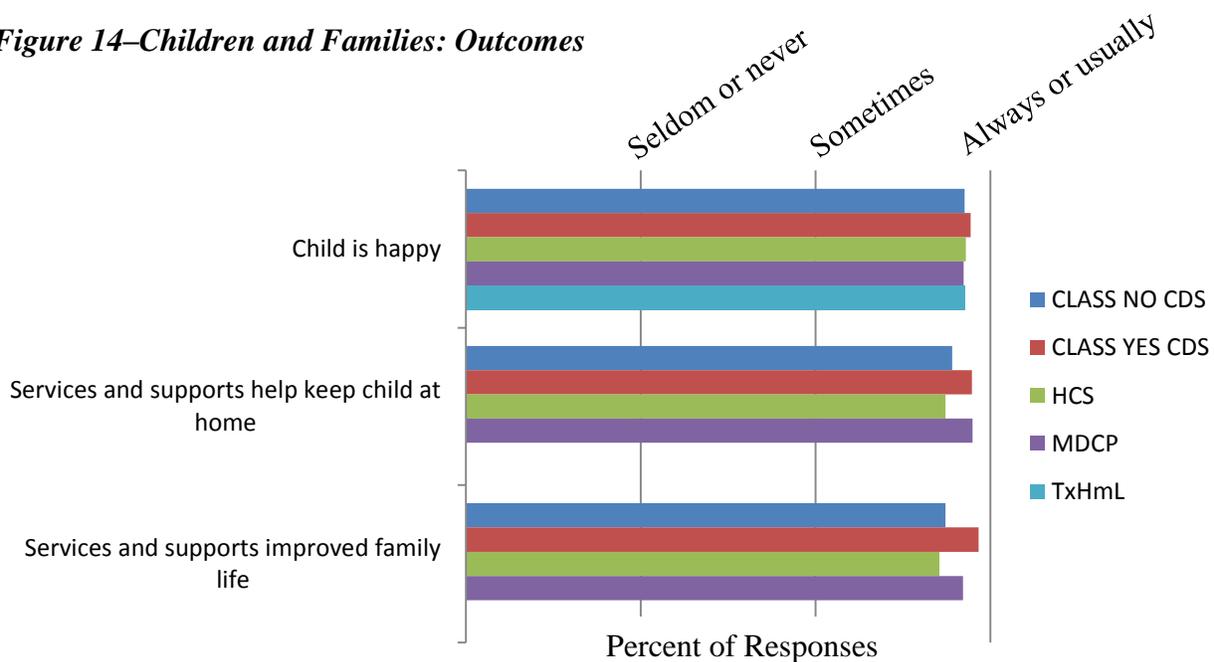


Figure 15—Children and Families: Respect

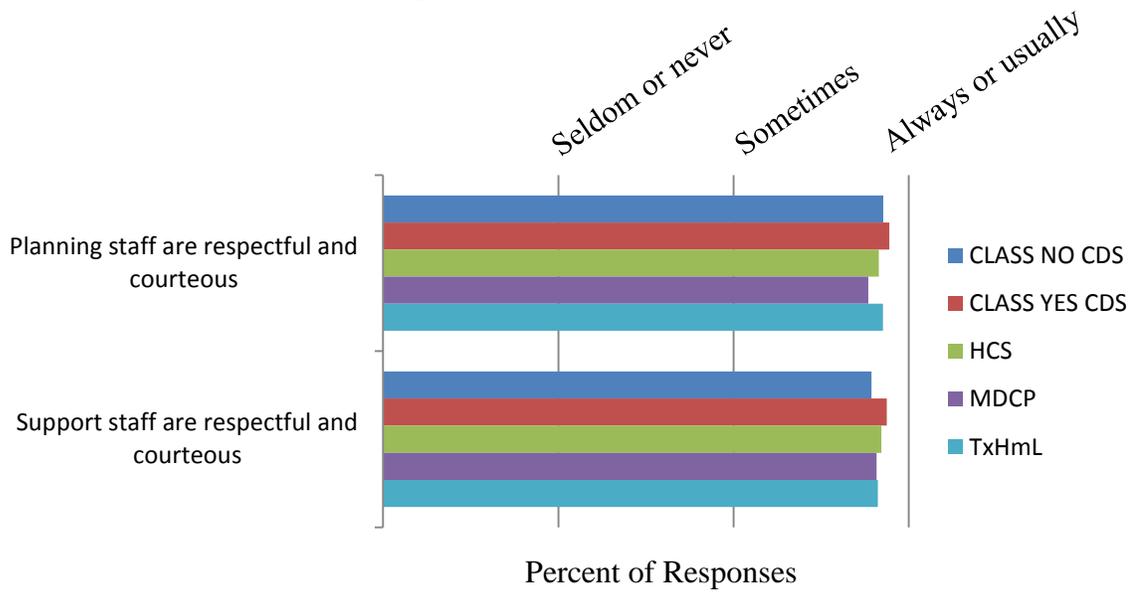


Figure 16—Children and Families: Choice

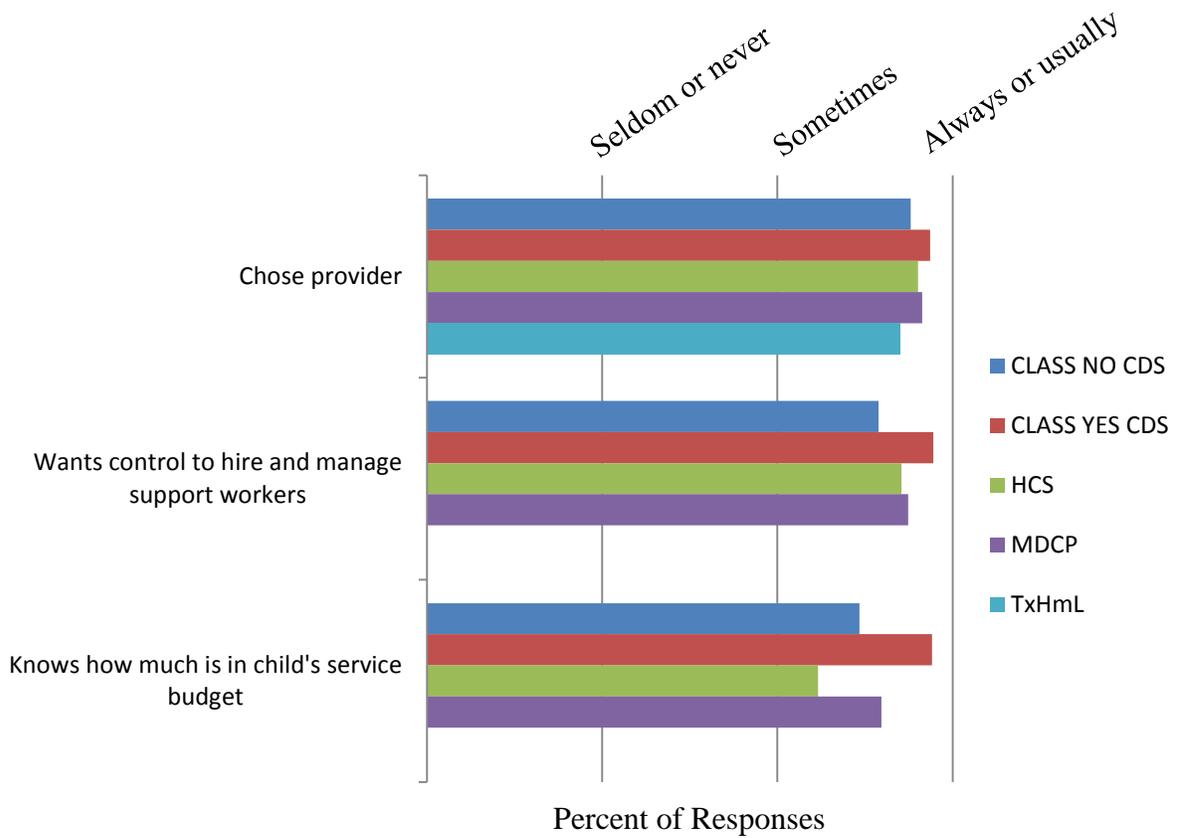


Figure 17—Children and Families: Service Delivery

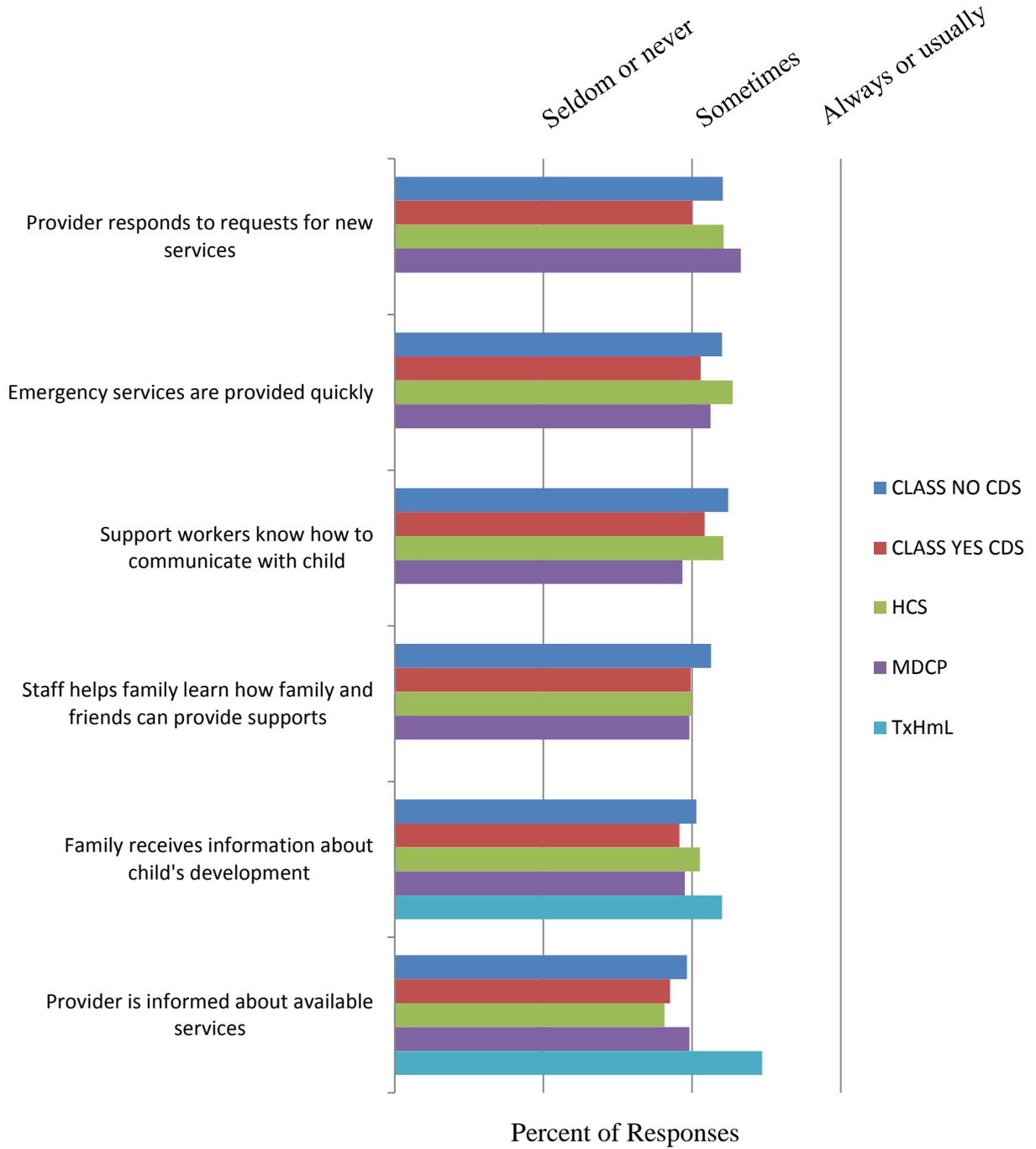
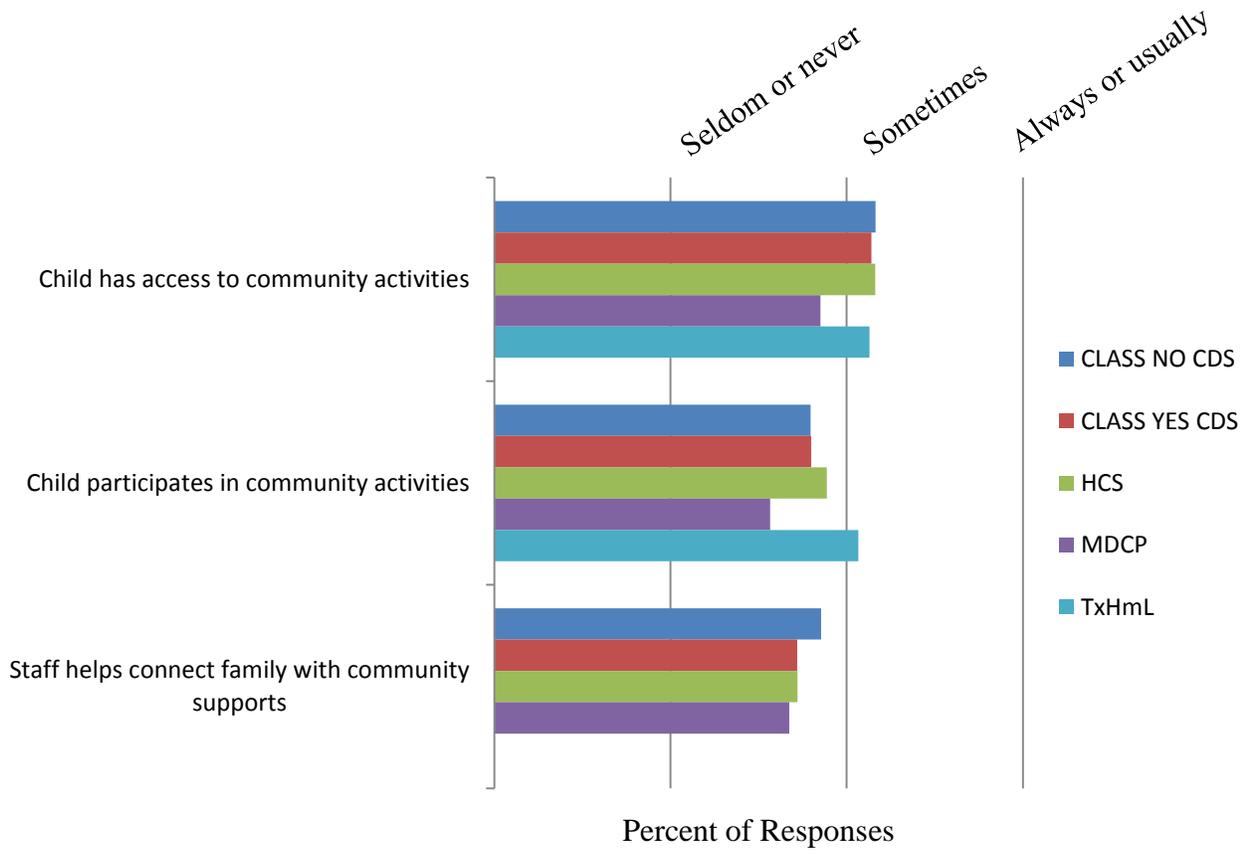


Figure 18—Children and Families: Community Connections



Summary of Findings

- **Individuals had positive experiences with some services**

Adults were able to access services, made decisions about their lives, and were satisfied with their services and supports. Staff paid to help individuals were respectful and listened carefully to what the person asked them to do. Families reported positive experiences in being able to access services, outcomes, respect, and making choices about their provider and people paid to help their children.

- **The findings suggest areas to improve LTSS and quality of life**

Some adults reported having trouble getting equipment they needed for daily activities. Individuals want to work and have control over their transportation. Few participated in self-advocacy activities. People who reside in SSLCs want more choice and control over decisions about their life. Improving service delivery and helping families make connections in the community represent opportunities for improving childrens' quality of life.

- **Improving the quality of LTSS is important for improving quality of life**

Improving services and supports is important because services and supports allow individuals to access care, have relationships with family and friends, and participate in their community. For example, problems with control over transportation could affect getting and keeping a job, being able to visit family and friends, and access to activities in the community.

Recommendations for Improving Quality of LTSS and Quality of Life

- **Focus in on areas for improving LTSS and continue to benchmark progress in these areas**

While the LTSSQR report provides areas with opportunities to improve services and supports, in order to identify specifically where the gaps lie and how to bridge or close them, a closer look at the issues is recommended. For example, the LTSSQR consistently finds that individuals want more control over their transportation. In-depth research with individuals and providers about barriers to control over transportation would help to identify specific strategies, which, if implemented, could result in greater control over transportation. Using LTSSQR to track whether improvement occurred over time is key to learning whether the strategies implemented actually improved services and supports, and ultimately, a person's quality of life.

- **Share LTSSQR findings with families, providers, state agencies, the Legislature, and others to help them prioritize their activities**

Survey results identified specific areas for improvement among adults (people want more choice and control over their services and supports) and children and families (families want improved service delivery and connection to the community). Positive changes in quality of

services and supports and quality of life can be initiated by the person receiving services, the primary caregiver, the community, the service provider, DADS, the Legislature, and others. Everyone has a role in working cooperatively or independently to make a positive difference for individuals. Findings from LTSSQR recommends areas for improvement, which is helpful for prioritizing activities and allocating human and fiscal resources.

- **Form partnerships to address systems-level issues**

While some changes are relatively easy and simple to implement, most take time and planning to implement correctly. Some issues involve navigating multiple systems, programs, and people. For example, identifying a way to allow people more control over their transportation requires cooperation among multiple state entities, providers, the community and family members. Partnerships between public, private, and non-profit organizations are recommended to address systems-level issues, such as transportation and community inclusion.