

2011 Program Report Card: Community Training Homes (CTH) Department of Developmental Services (DDS)

Quality of Life Result: All individuals with intellectual disabilities experience quality of life in a natural home setting.

Contribution to the Result: Individuals with intellectual disabilities benefit from being supported in the natural family setting of a CTH by experiencing relationships with the licensee's extended family, friends and community connections.

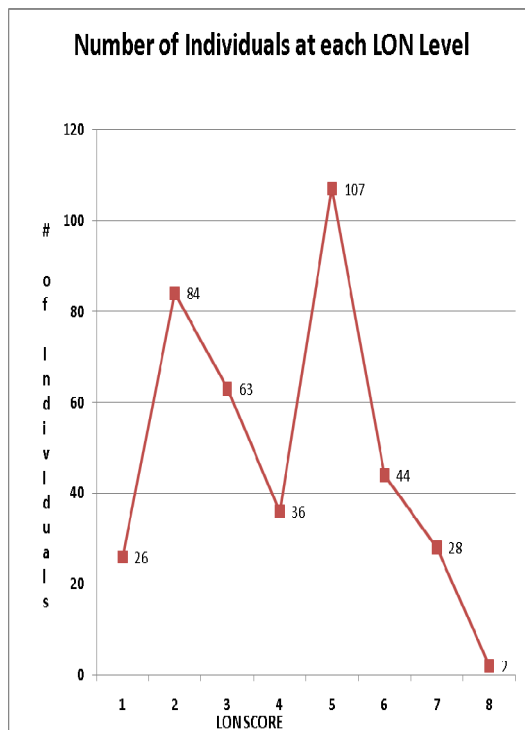
Actual SFY 10 Total Program Expenditures: \$9,538,330. **State Funding:** \$9,538,330. **Federal Funding:** \$0 **Other Funding:** \$0

Estimated SFY 11 Total Program Expenditures: \$12,421,982. **State Funding:** \$ 12,421,982. **Federal Funding:** \$0 **Other Funding:** \$0

Note: All individuals 18 years of age and older may receive social security benefits that are applied to their cost of care (room & board).

Partners: Individuals supported in homes, their families or guardians; CTH licensees and their families and friends; members of the community; Qualified Providers who administer CTH programs; DDS CTH support staff; vocational and day support agencies; employers.

Performance Measure 1: Numbers of individuals in CTHs at varying levels of need.



Story behind the baseline: The Level of Need score (LON) is an indicator of the amount of support an individual requires to live successfully. The higher the LON score the greater the support needs. The data shows that 81 % of individuals currently living in CTHs have LON scores between 1 and 5. Thus, for LON levels 1 through 5, a CTH is a viable alternative to higher cost placements. Individuals who reside in a CTH have lived with their caregivers from 1 month to 42 years. The average number of years for all placements in CTH is 8.9 years.

Individuals in a community training home experience long term relationships with one core caregiver and benefit from relationships with the caregiver's extended family, friends and the community. Individuals have stayed with one licensee regardless of their LON score.

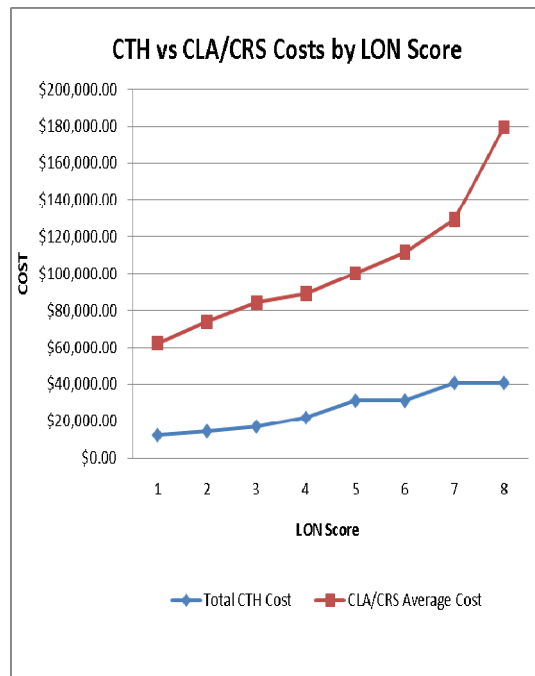
Proposed actions to turn the curve: DDS has identified a number of individuals with LON

scores between 1 and 3 who are in higher cost settings. DDS and the private agency CTH support teams will work to develop more available CTHs with a variety of support capacities to offer these individuals choices and make stable, long-lasting matches.

Performance Measure 2: The cost of a CTH is less than other 24-hour staffed settings, such as community living arrangements (CLA) or continuous residential supports (CRS).

LON Score	Total CTH Cost	CLA/CRS Average Cost	Cost Savings
1	\$12,522.91	\$62,262.46	\$49,739.55
2	\$14,653.57	\$73,980.87	\$59,327.30
3	\$17,227.23	\$84,227.28	\$67,000.05
4	\$22,057.00	\$88,934.78	\$66,877.78
5	\$31,195.04	\$100,166.65	\$68,971.61
6	\$31,195.04	\$111,764.26	\$80,569.22
7	\$40,633.00	\$129,239.63	\$88,606.63
8	\$40,633.00	\$179,337.04	\$138,704.04

Program Report Card: Community Training Homes (CTH), Department of Developmental Services (DDS)
Quality of Life Result: All individuals with intellectual disabilities experience quality of life in a natural home setting.



Story behind the baseline: DDS allocates funding based upon LON score. The chart shows the per person cost of a placement in a CTH by each LON score as compared to the average cost in an alternative 24-hour CLA or CRS setting. The last column depicts the cost savings per person for each LON score when placed in a CTH. In July 2010, DDS established the current CTH payment method which uses the LON assessment to set funding levels. This method allows a fair and equitable distribution of resources and is designed to attract additional qualified licensees. This method supports people to

age in place with existing licensees as their needs increase.

Proposed actions to turn the curve: DDS is developing a plan to expand the CTH program. DDS will work with qualified provider agencies to develop a variety of CTHs with the capacity to serve more individuals with unique support needs such as hearing impairments, specific language or cultural backgrounds, challenging emotional or behavioral support needs, and medical or physical support needs. These actions will divert individuals from requiring placement in other more costly settings.

Performance Measure 3: Individuals residing in CTHs report high satisfaction.

	Satisfied with CTH	Satisfied with Life Choices	Directing Life Plan
Met #	114	108.33	111
Met %	94.67%	90.00%	92.50%
N/A #	1.67	1.67	1.5
N/A %	1.33%	1.33%	1.00%
Not Met #	1.67	1	1
Not Met %	1.33%	0.33%	1.00%
Not Rated #	3.33	10	6.5
Not Rated %	2.67%	8.33%	5.50%

Story behind the baseline: DDS uses the Quality Assurance (QA) survey to measure

CTH consumers' satisfaction. Of the 390 individuals placed in a CTH, 120 were surveyed as part of the QA sampling for fiscal year 2010. The data collected demonstrates both the number and the percent of individuals who; (1) are satisfied with the CTH, (2) are satisfied with their ability to make their own choices, and (3) report that they are able to direct their own life plans. Individuals report an almost 95 % satisfaction rate with their CTH, a 90% satisfaction rate with life choices and an almost 93% satisfaction rate in directing their life plan.

Proposed actions to turn the curve: DDS plans to perform the QA surveys for all of the individuals in a CTH to provide DDS with more comprehensive data from which to determine satisfaction outcomes. Individuals' support teams will review the QA data and address the reported deficits in satisfaction to remediate issues and improve scores. DDS will develop and implement a satisfaction survey for CTH licensees and families or guardians to direct the development and growth of the CTH program.