

**2012 Program Report Card: Community Companion Home (CCH) Program (formerly Community Training Home)
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 CCH by experiencing relationships with the licensee's extended family, friends and community connections.

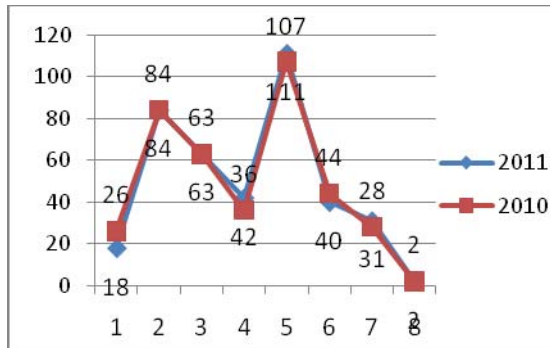
Program Expenditures	Gross State Funding	Federal Funding	Federal Reimbursement (back to General Fund)	Net State Funding
Actual FY 11	\$12,125,746.	0	\$3,612,426.	\$8,513,320.
Estimated FY 12	\$12,779,715.	0	\$3,775,591.	\$9,004,124.

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

How Much Did We Do?

Performance Measure 1: Numbers of individuals in Community Companion Homes (CCHs) at varying levels of need.

**STATEWIDE CCH
Individuals at Various LON Scores**



Story behind the baseline:

The Level of Need (LON) score 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 number of individuals in CCH's at the various LON scores has remained consistent from 2010 to 2011. Currently 406 individuals are served throughout the state in 267 licensed community

companion homes, as compared to 390 individuals served in 269 licensed homes last year.

Future emphasis will be on promoting the CCH option to individuals with low LON scores instead of higher cost residential programs. A long term goal is to develop capacity in the CCH program to accommodate individuals with higher LON scores. In order to have the capacity to place more individuals in CCH homes, there need to be more licensed homes developed from which to choose. DDS issued a Request for Proposals in October 2011 to enlist up to four new CCH provider agencies to take on administration of existing homes and to develop up to 32 new homes over 18 months. The agencies are being selected in January 2012 and are targeted to begin services on March 1, 2012. By expanding our private provider base we will allow the public CCH support teams to focus more closely on CCH development. The recent addition of positions to the public teams will allow more intensive support for our publicly supported homes. Another new initiative is availability of a one-time incentive payment for CCH provider agencies for an initial placement into a newly licensed CCH. This is intended to increase the momentum of new CCH development beyond the current 11 CCH private agencies which are already operating. Through these efforts we are creating the conditions where DDS and provider agencies will develop marketing strategies for attracting new licensees.

Trend: ◀▶

How Well Did We Do It?

Performance Measure 2: Licensees report a high level of satisfaction with becoming a CCH provider. Families and guardians report a high level of satisfaction with the CCH residential model for individuals living in CCH's.

**STATEWIDE
Family Survey 2011**

	Very Unsatisfied	Somewhat Unsatisfied	Satisfied	Somewhat Satisfied	Very Satisfied
AVG Rating	2.81%	2.10%	9.79%	14.15%	71.27%

**STATEWIDE
Licensee Survey 2011**

	Very Unsatisfied	Somewhat Unsatisfied	Satisfied	Somewhat Satisfied	Very Satisfied
AVG Rating	3.40%	4.67%	17.00%	20.72%	54.38%

Story behind the baseline:

As a result of the RBA process a statewide satisfaction survey was developed for both the licensees, families and guardians of individuals who are supported by the CCH program both by DDS directly and by our private agency partners. The eleven question survey was designed to offer opportunities for sharing information using questions among various categories

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to rate the level of satisfaction based on scale of a 1 (*unsatisfied*) to 5 (*very satisfied*).

Of the 370 Family Surveys sent out, 103 (28%) were completed and returned. Of the 275 Licensee Survey's sent out 113 (41%) were completed and returned. Of those licensees who returned the survey the average length of years licensed as a CCH is 10 with a range from 6 months to more than 30 years being licensed.

The surveys indicated an overall positive response; those who replied for the family survey averaged 95.21% in the "Satisfied" or greater columns. The predominant score for most questions answered was in the "Very Satisfied" column at 71.27%. The survey revealed that the most important element to those families who responded was relating to the matter of "safety". Those questions answered most often in the "Very Satisfied" column were family specific questions around safety and level of care in the CCH.

Those who responded for the licensee Survey averaged 92.10% in the "Satisfied" or greater columns. The predominant score for the questions was in the "Very Satisfied" column at 54.38%. In regards to the licensee survey results; it should be noted that the highest response of levels of satisfaction was a license specific question which asked about their decision to become licensed (question 9) and they answered 72.79% in the "Very Satisfied" column. It is impressive that those who responded to the licensee survey averaged 10 years being licensed and that the question answered most often in a positive regard is around the decision to be licensed.

Trend: ▲

Is Anyone Better Off?

Performance Measure 3: Individuals residing in CCHs report high satisfaction

QSR Data Results	Fiscal year	Satisfied with CCH	Satisfied with Life Choices	Directing Life Plan
% Satisfied	2010	98.56%	99.09%	99.11%
% Satisfied	2011	98.97%	99.15%	98.94%
% increase 2010 -2011		37.58%	31.05%	36.34%

Story behind the baseline: To measure their satisfaction with services, DDS uses the Quality Service Review (QSR) survey with each individual placed in a CCH. Last year's data was based on 120 surveys and this year the data is based on 218 new QSR surveys. DDS met the goal to increase the number of individuals for whom a survey was completed. The data consistently shows high individual satisfaction between the two years, even with an increased sample.

Proposed Actions to Turn the Curve:

DDS CCH teams will clarify and improve (1) communication with families and licensees, (2) further explore the meaning of connections to community for families and (3) explore community access as it relates to licensees.

Additional activities to improve satisfaction will include mechanisms for written communications, one face to face CCH forum per region per year, and other educational/training

opportunities being offered. DDS will work to update training manuals and offer refresher training for licensees.

DDS will promote strategies that will encourage individuals who currently live in CCHs to promote and encourage CCH living to other individuals and families seeking residential supports.

Trend: ▲

Data Development Agenda:

CCH Coordinators will collect data on the expansion of CCH services and number of individuals served in these settings as well as the Level of Need scores of the individuals served.

CCH Coordinators will conduct forums in each region for CCH licensees and families to share information and allow for networking.

The Coordinators will conduct a follow up survey to measure satisfaction with regard to improvement in focus areas; communication, connections to community and access to community.

It's the department's goal that QSR surveys will be completed for 100% of individuals receiving CCH services.