

# 2016 Centers for Independent Living (CIL) Transition & Diversion Services Survey Study

## Summary of Findings: Institutional Diversion

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## 2016 CIL Transition & Diversion Services Survey Study Summary of Findings: Institutional Diversion

### **Background for the study:**

On November 16, 2015, the Administration for Community Living proposed a rule change to section 7(17) of the Rehabilitation Act as part of its implementation of the Workforce Innovation and Opportunity Act (WIOA) (enacted July 22, 2014) that amended the definition of independent living core services provided by Centers for Independent Living (CILs) to include three new core services: 1) facilitate the transition of individuals with significant disabilities from nursing homes and other institutions to home and community-based residences, with requisite supports and services, 2) provide assistance to individuals who are at risk of entering institutions so that the individuals remain in the community; and 3) facilitate the transition of youth who are individuals with significant disabilities, who were eligible for individualized education programs (IEPs) under Section 614(d) of the Individuals with Disabilities Education Act, and who have completed their secondary education or otherwise left school to postsecondary life.

In its proposal, ACL indicated that no additional funding would be provided to CILs to support the development or implementation of the three new core services. ACL also proposed through WIOA implementation rule changes the requirement that CILs demonstrate minimum compliance with Section 725 for a wide range of CIL activities including provision of IL core services, efforts to increase the availability of quality community options for IL, and resource development activities to secure other funding sources. The regulations implementing the three new core services and new accountability requirements went into full effect November 28, 2016.

### **Study purpose:**

This study was developed and fielded in the months just prior to the WIOA implementation guidelines going into full effect. The purpose of the 2016 CIL Transition & Diversion Services Survey Study was to gain a better understanding of whether CILs were already providing the three new core services as part of their current work, and if so, to whom and to what extent. The survey also collected data on what resources CILs thought would be required to fully implement the three new core services: 1) transition-related services to people with disabilities moving from institutional to community-based living settings, 2) services that help divert individuals with disabilities from entering institutions, and 3) services that assist youth with disabilities in transition from school to life after post-secondary education. The aim of obtaining this information was to gain a better understanding of the resources and assistance needs CILs may have with the new WIOA implementation guidelines in effect.

### **Study team:**

The study represents a collaborative effort. Richard Petty and Darrell Jones at ILRU, TIRR Memorial assisted with identifying the sample and participated in the development

of the survey and interpreting its results. Michelle Putnam, Simmons College School of Social Work, led the study and participated in all aspects of the study process including fielding the survey and analyzing and interpreting survey data. Caitlin Coyle, University of Massachusetts, Boston served as a statistical consultant, participating in data analysis and interpretation. All team members participated in writing this report.

### **Study methodology:**

This study uses an electronic survey delivered through SurveyMonkey. SurveyMonkey is recognized for being highly accessible to persons with disabilities, including those with low-vision, and for providing multiple levels of confidentiality and anonymity to survey respondents. Very few respondents reported difficulty in using SurveyMonkey.

The study was approved by the Institutional Review Boards (IRB) of Simmons College and the University of Texas Health Sciences Center (which serves as the IRB for ILRU at TIRR Memorial Hermann). All required IRB information was provided to sample members on the first electronic pages of the survey. Consent to participate was obtained from all respondents by active agreement, through clicking an “I agree” button prior to starting the survey. All data collected are confidential.

### **Survey sample:**

The survey sample was CILs, with invitations to participate sent to CIL executive directors. Active CILs were identified from the administration records of IL-NET, ILRU’s technical assistance program for CILs. IL-NET is funded by a grant from ACL. These CILs were believed to have either federal or state funding, or both, to support IL service delivery. The initial list was verified against ACL’s list of recently funded CIL awardees to validate their operational status and contact information, including working email addresses of CIL directors, the target sample for this survey. CILs not on ACL’s list were verified by reviewing the CILs website and/or contacting the CIL by email or telephone to ascertain operational and contact status. CILs that could not be verified were removed from the list and noted as inactive. This sample list development and review process increased the reliability of the initial sample list, but a possibility remained that some CIL operational and contact information reported on CIL websites was inaccurate.

The initial survey sample included 386 CILs identified as in active operation through the process described above. All 386 CILs were emailed invitations to the survey (see below). Of the 386 emails sent, 6% (n=23) bounced back as invalid email addresses. We obtained alternate email addresses for 20 of these bounced emails by reviewing CIL websites for alternate contacts and calling CILs primary telephone numbers. We were unable to reach 3 CILs by this approach, and later identified these 3 as no longer being in operation. The final survey sample, N=366, includes only those CILs that were verified as being operational and that had active email addresses.

### **Survey content:**

A 100-item electronic web-based survey was developed between June and July of

2016. The survey contained three sections of about equal length and a short set of descriptive questions about the CIL at the end of the survey. Each section focused on one of the three new core services: institutional transition to community-based settings, diversion from institutional care, and youth transition from school to life after post-secondary education. Some questions were drawn from prior ILRU IL-NET surveys and modified for this survey. Other questions were new, specific to this survey. A pilot test of the final electronic draft of the survey was conducted with experienced independent living specialists and former CIL staff to receive feedback on both the survey questions and on the electronic formatting of the survey. Based on this feedback, small changes in wording and format were made and a second pilot test conducted, which resulted in the final, approved survey that was sent to CILs.

### **Data collection:**

Simmons College fielded the survey and managed data collection. In mid-August 2016, an invitation to participate in the online survey through SurveyMonkey was sent to 366 active CILs by email addressed to the executive director. Respondents were offered the chance to win free admission to an ILRU online training course as an incentive for survey completion. The survey was open and available for CILs to complete for a period of about 8 weeks, from mid-August to early October. A series of reminder emails were sent during this time, with the majority of respondents completing the survey in the first 4 weeks.

A total of 168 CILs (N=168) responded (46% of the CILs identified as being in active operation). This a strong response rate based on current analysis of electronic survey response rates among health care and practice professionals which averages around 35-38%<sup>1,2</sup> and ongoing discussions regarding the decline of survey response rates since the mid-2000's.<sup>3</sup> Not all respondents completed the entire survey, likely due to its length. However, in our discussions about the number of survey items, we decided we would like to try to obtain the most comprehensive data set possible given the importance of the topic and the lack of research into CILs and their service provision. We were not entirely surprised that some participants did not complete the survey given their own time constraints. We believe that enough participants completed the entire survey (36%) that the response rate falls within acceptable norms of response rates from health and professional service providers.

Using Halbesleben and Whitman's 2013 framework for evaluating survey quality to assess non-response bias<sup>4</sup>, we hypothesize that a majority of non-respondents likely

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<sup>1</sup> Cunningham, C. T., Quan, H., Hemmelgarn, B., Noseworthy, T., Beck, C. A., Dixon, E., ... Jetté, N. (2015). Exploring physician specialist response rates to web-based surveys. *BMC Medical Research Methodology*, 15, 32. <http://doi.org/10.1186/s12874-015-0016-z>

<sup>2</sup> Cho, Y. I., Johnson, T. P., & VanGeest, J. B. (2013). Enhancing surveys of health care professionals: a meta-analysis of techniques to improve response. *Evaluation & the health professions*, 36(3), 382-407.

<sup>3</sup> Klabunde, C. N., Willis, G. B., & Casalino, L. P. (2013). Facilitators and barriers to survey participation by physicians: a call to action for researchers. *Evaluation & the health professions*, 36(3), 279-295.

<sup>4</sup> Halbesleben, J. R., & Whitman, M. V. (2013). Evaluating survey quality in health services research: a decision framework for assessing nonresponse bias. *Health Services Research*, 48(3), 913-930.

had interest in the topic of the survey, but were passive, not actively deciding not to participate but that personality, work demands or other factors inhibited their participation. Only 5 CILs actively opted-out of our email invitations and reminders, which may support this notion. We also note that very few published studies of CIL services or that sample CIL staff exist, so limited benchmarks for survey response among CIL staff is not available for comparison. Halbesleben and Whitman recommend replication of the survey method in future research to help norm survey response on unique sample populations.

### **Survey results:**

Survey results are presented in three separate reports: institutional transitions, institutional diversions, and transitions of youth. Tests of statistical significance are not reported, but may be requested.

### Survey respondents:

#### ***Respondents were experienced and knowledgeable.***

Of the respondents who provided information about their organization, a majority indicated they were Executive Directors or CEOs/Presidents of their CIL (81%). Other respondents included program managers, independent living specialists or other administrators. These respondents had long-term experience and high levels of formal education. More than half (57%) had worked at their CIL 11 years or more. Another 21% had worked at their CIL between 6 and 10 years. Forty-percent reported having a graduate degree, another 40% reported a bachelor's degree as their highest level of education. Most of these respondents (84%) indicated they identified as a person with a disability.

Eighty-five percent of respondents reported having either a lot (40%) or some (45%) knowledge about how to contract with other organizations like managed care organizations or other community-based organizations to provide transition services. Just over half (56%) of respondents said they had seen their CILs budget decrease over the past 3 years; another quarter (25%) report the budget had stayed about the same over that period of time.

#### ***Respondents represented geographically diverse CILs.***

Three-quarters (74%) of respondents worked at only one CIL that had one location. One-quarter of respondents worked at a CIL with multiple regional sites. Respondents represented CILs across an array of geographic regions. Most (67%) had between 6 and 20 staff members.

## Key findings about Institutional diversion

### **1) Most CILs (66%) said they do not have a specific process or approach for determining whether or not someone with a disability is at risk for entering an institution.**

Of those CILs that did report having a specific process or approach (29%), nearly half (48%) said their CIL developed its own risk determination process or approach from scratch while 29% said they adopted a process or approach fully developed elsewhere and 21% said they modified an existing process or approach to meet their own needs. Sources for adopted and modified processes or approaches included state Medicaid agencies, other CILs, other state agencies and Aging and Disability Resource Centers.

### **2) CILs had strong agreement on what key indicators of being at risk for institutionalization are.**

The highest consensus items responding CILs agreed upon included:

- A person self-identifies as being at-risk for institutional placement (95%)
- A medical referral is in process for an institutional placement for a person (93%)
- A person receiving HCBS through Medicaid but is not allocated enough hours to meet their support needs (92%)
- A Medicaid ineligible person needs supports and services but cannot afford to pay for them privately and does not have insurance coverage to pay for them (91%)
- A person with a disabling condition who is experiencing recurring serious health problems (89%)
- A person who needs supports and services is put on a Medicaid waiver's waiting list for HCBS (87%)
- A person who needs IL assistance or services and supports and does not have adequate, affordable and/or accessible housing (85%)

While 29% of CIL respondents agreed that all persons with disabilities who need IL assistance or supports or services are at-risk to be institutionalized, 62% said it was not an indicator of risk and 9% said they did not know.

### **3) A majority of CILs (68%) said that the new core service of providing assistance to individuals with significant disabilities who are at risk of entering institutions so that they can remain in the community is the same type of work their CIL already does.**

Of those CILs indicating it was different – at least in some ways – than the work their CIL already does, a higher proportion of CILs in urban areas said the work was different than CILs in suburban, rural or mixed density areas.

**4) CILs reported offering an extensive and wide range of services as part of the assistance provided to individuals with significant disabilities who are at risk of entering institutions so that the individuals may remain in the community.**

Services most universally reported included the original 4 core services (99%); providing information and referrals to HCBS (97%) and community-based mental health services and resources (89%); providing information and assistance about transportation (96%); providing assistance in locating and securing affordable housing (94%) and in applying for in-home services and supports (94%). CILs also provided services in areas ranging from applying for income benefits (87%) to providing assistance in finding health care providers in the community (77%) to helping transitioned individuals make friends and build and/or sustain social networks (56%).

**5) CILs fund institutional diversion-related services primarily through Rehab Act funds and state program funds.**

Of the CILs responding to this survey, 65% reported using Rehab Act Title VII, Part C funds and 51% reported using Title VII Part B funds for assisting individuals with significant disabilities who are at risk of entering institutions to remain in the community.

47% reported using funds from State agencies, 35% from Money Follows the Person funds, and 27% other Medicaid funds. A small percentage reported using funds from managed care organizations (12%) or the Veteran's Administration (7%).

**6) CILs reported partnering and/or collaborating with a range of organizations to provide diversion-related services.**

Organizations included other service providers such as Area Agencies on Aging (52%), other CILs (50%), and Aging and Disability Resource Centers (49%) as well as rehabilitation facilities (36%), hospitals (37%), and developmental disability organizations (35%) among others.

CILs that report having a lot of knowledge about how to contract with organizations, and CILs that say institutional transition is a regular part of their work, tend to report higher frequencies of partnerships across the organizations identified in this survey.

**7) Most CILs (56%) do not have specific IL specialists dedicated to assisting individuals with significant disabilities who are at risk of entering institutions to remain in the community.**

However, 43% of CILs responding to this survey say they do have specific IL specialists dedicated to this activity. A higher percent of CILs that have the largest staff sizes, 41 full-time paid staff or more, report having these IL specialists.

**8) Nearly all respondents (93%) said they do not believe their CIL has sufficient funding to adequately provide this new core service – assistance to individuals with significant disabilities who are at risk of entering institutions so that the individuals may remain in the community.**

32% indicated they would require up to a 20% increase to their current CIL budget, 27% said they would need a 21-30% increase, and the remaining stated they would need more than a 30% budget increase.

**9) A majority of CILs indicated that affordable and accessible housing, access to good public transportation, and cost and availability of community-based service providers are challenges in the region in which they provide services.**

The vast majority of CILs who responded to questions about the context services are provided in agreed that finding accessible (97%) and affordable (91%) housing is a challenge. Sixty-three percent disagreed that there is good public transportation in the region their CIL services for most people with disabilities. Ninety percent agreed that community-based services are too expensive for persons who do not qualify for Medicaid, and 83% disagreed that Medicaid pays for enough community-based service hours to meet people's needs.

Seventy-seven percent disagreed with the statement that there are enough community-based providers available in their CIL's region to respond to consumer demand. More than half (60%) of CIL respondents agreed that Medicaid income eligibility criteria are too restrictive, making it hard for people with disabilities to qualify for Medicaid's community-based services. A large number (70%) agreed that there is a lack of affordable attendant care services in their area.

Additionally, 81% of CILs responding agreed that social isolation is a problem for persons their CIL assists. Only 36% agreed that the level of physical accessibility in their CIL's community is fairly high.

### **Limitations:**

To our knowledge, this is the first national survey of CILs on the institutional transition services they provide for adults with significant disabilities. Limitations of the survey include the response rate, which although sufficient within the parameters of social science research as noted earlier, could be stronger. The number of respondents limits the range of data analysis options as small cell sizes limit tests for significance in cross-sectional analysis and sample size overall precludes robust predictive analysis.

There is also the possibility of response bias in that ACL provides a significant portion of the annual budget to CILs and therefore CIL responses may be more aspirational to some questions rather than actual. However, we have no evidence of this and therefore use these findings as a baseline for future research on CIL institutional transition and diversion services.



## Conclusions:

Findings from the survey suggest that:

- A substantial majority of CILs are already engaged in diversion-related work. Most believe the new core service is no different than the work they already do as part of delivering the 4 original core services. Only a small percentage have specialists working in this area.
- CILs report that they do not have adequate funding to provide the new diversion-related core service to consumers who need assistance.
- CILs report they have ongoing relationships with other community organizations such as AAAs and ADRCs, but additional investigation is needed to determine whether these are business relationships and the extent to which CILs can generate additional income to expand services beyond the limitations of their WIOA funding.
- The community and regional context that CILs provide transition services within has substantial challenges beyond the scope of what CILs can individually address that may influence institutional diversion, ability to live in the community and successful diversion for low-income and Medicaid-eligible and/or Medicaid insured individuals with disabilities in particular.

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

### SECTION 1: CIL ASSESSMENT OF INDIVIDUALS AT RISK FOR INSTITUTIONALIZATION

#### Survey Question

**Question 25, Table A.** At this time, ACL has not described the difference between someone who is “at risk of entering institutions” and needs assistance to avoid institutionalization and someone who needs independent living and/or community-based services in general.

Does your CIL have a specific process or approach for determining whether or not someone is at risk of entering an institution? (For example, a specific risk assessment tool or a referral process from other community-based organizations or acute care facilities that flags a person who may need assistance to remain in the community.)

a) Yes	29% (N=40)
b) No	66% (N=93)
c) I don't know	5% (N=7)
	100% (N=140)

#### Additional analysis for Question 25

**Question 25, Table B.** Frequency of having a specific process for determining risk by CIL based on regional location (N=131)

	% of CILs in <b>Urban</b> areas that say	% of CILs in <b>Suburban</b> areas that say	% of CILs in <b>Rural</b> areas that say	% of CILs in <b>Urban/Rural mix*</b> areas that say
a) Yes	14% (N=3)	36% (N=8)	42% (N=23)	12% (N=4)
b) No	11.5% (N=16)	55% (N=12)	53% (N=29)	88% (N=29)
c) I don't know	1.5% (N=2)	9% (N=2)	5% (N=3)	0% (N=0)
	100% (N=21)	100% (N=22)	100% (N=55)	100% (N=33)

Note: N=131 is the number of respondents who answered Questions 25 and 96, *In what type of area would you describe your CIL as being located?* \*Urban/rural mix written in by respondents as other for Question 96.

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

### Additional analysis for Question 25

<b>Question 25, Table B.</b> Frequency of having a specific process for determining risk by CIL based on number of paid staff (N=131)					
	% of CILs that have <b>&lt;5 paid staff</b> that say	% of CILs that have <b>6-10 paid staff</b> that say	% of CILs that have <b>11-20 paid staff</b> that say	% of CILs that have <b>21-40 paid staff</b> that say	% of CILs that have <b>41+ paid staff</b> that say
a) Yes	27% (N=3)	26% (N=10)	28% (N=14)	23% (N=5)	60% (N=6)
b) No	55% (N=6)	68% (N=26)	68% (N=34)	68% (N=15)	50% (N=5)
c) I don't know	9% (N=1)	5% (N=2)	4% (N=2)	9% (N=2)	0% (N=0)
	100% (N=10)	100% (N=38)	100% (N=50)	100% (N=22)	100% (N=10)

Note: N=131 is the number of respondents who answered Question 25 and Question 97, *How many paid staff members does your CIL have?*

### Additional analysis for Question 25

<b>Question 25, Table C.</b> Frequency of having a specific process for determining risk by CIL based on membership in formal network or consortium of community-based organizations that work collaboratively to provide services to people with disabilities. (N=130)			
	% saying <b>Yes</b> , my CIL has a formal process for determining risk of institutionalization	% saying <b>No</b> , my CIL has no formal process for determining risk of institutionalization	% saying <b>I don't know</b> if my CIL has a formal process for determining risk of institutionalization
a) Yes, my CIL is part of a formal network or consortium	28% (N=25)	31% (N=12)	50% (N=1)
b) No, my CIL is not part of a formal network or consortium	66% (N=59)	67% (N=26)	50% (N=1)
c) I don't know if my CIL is part of a formal network or consortium or not	6% (N=5)	2% (N=1)	0 (N=0)
	100% (N=89)	100% (N=39)	100% (N=2)

Note: N=131 is the number of respondents who answered Question 25 and Question 99, *Is your CIL part of a formal network or consortium of community-based organizations that work collaboratively to provide services to persons with disabilities?*

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

### Survey Question

**Question 26, Table A.** Did your CIL develop this process or approach on its own, adopt a fully developed process or approach, or modify a process or approach to suit your CIL's needs?

a) My CIL developed its own risk determination process or approach from scratch.	48% (N=20)
b) My CIL adopted a fully developed risk determination process or approach created elsewhere.	29% (N=12)
c) My CIL modified an existing risk determination process or approach to suit its own needs.	21% (N=9)
d) I don't know where my CILs risk determination process or approach comes from.	2% (N=1)
	100% (N=42)

Note: Asked only of respondents who said yes, their CIL has a specific process for determining risk in Question 25.

### Survey Question

**Question 27, Table A.** Where was the adopted or modified process or approach taken from? Please provide the name of the organization that developed the process or approach, or the name of the process or approach here. We will use this information to understand if similar processes or approaches are being used across CILs nationally. If you do not know, please just write, "I do not know."

a) State Medicaid agency	29% (N=6)
b) Another CIL	24% (N=5)
c) Other State agency	19% (N=4)
d) Aging and Disability Resource Center (ADRC)	10% (N=2)
e) Veteran's Administration	5% (N=1)
f) Managed care organization	5% (N=1)
g) Don't know	10% (N=2)
	100% (N=21)

Note: Asked only of respondents who said they adopted a fully developed or modified an existing risk assessment determination process in Question 26.

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

### Survey Question

**Question 28, Table A.** Where did your CIL hear about the process or approach it decided to adopt or modify? Please mark all that apply.

a) Heard about the process or approach from an organizational partner	57% (N=12)
b) Heard about the process or approach from another CIL	24% (N=5)
c) Heard about the process or approach from ILRU and/or IL-NET	10% (N=2)
d) Heard about the process or approach at a conference or other meeting	10% (N=2)
e) I don't know	10% (N=2)
f) Read about the process or approach	0% (N=0)
g) Other. Please briefly indicate where your CIL got information about the process or approach it adopted or modified.	0% (N=0)
	100% (N=21)

Note: Asked only of respondents who said they adopted a fully developed or modified an existing risk assessment determination process in Question 26.

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

### SECTION 2: CIL PERCEPTIONS OF RISK FOR ENTERING AN INSTITUTION

Survey Questions 29-40, Tables A.

Questions 29-40, Table A. My CIL would consider this as an indicator of being at risk for entering an institution:	Yes	No	I don't know	
<b>Question 29.</b> A person self-identifies as being at risk for institutional placement	95% (N=134)	4% (N=5)	1% (N=2)	100% N=(141)
<b>Question 30.</b> A medical referral is in process for an institutional placement for a person	93% (N=131)	4% (N=6)	3% (N=4)	100% N=(141)
<b>Question 31.</b> A person is being discharged from a rehabilitation facility or acute hospital setting	80% (N=113)	11% (N=16)	9% (N=13)	100% N=(142)
<b>Question 32.</b> A person conducts an assessment with assistance from your CIL and is identified as needing a high level of IL assistance	80% (N=114)	15% (N=21)	5% (N=7)	100% N=(142)
<b>Question 33.</b> A person who needs supports and services is put on a Medicaid waiver's waiting list for home and community-based services	87% (N=122)	9% (N=13)	4% (N=6)	100% N=(142)
<b>Question 34.</b> A person who receives home and community-based services through Medicaid but is not allocated enough assistance hours to meet their support needs	92% (N=130)	4% (N=6)	4% (N=5)	100% N=(141)
<b>Question 35.</b> A Medicaid-ineligible person needs supports and services but cannot afford to pay for them privately and does not have insurance coverage to pay for them	91% (N=129)	4% (N=5)	6% (N=8)	100% N=(142)
<b>Question 36.</b> A person who needs IL assistance or services and supports who is isolated in the community	68% (N=96)	14% (N=20)	18% (N=26)	100% N=(142)
<b>Question 37.</b> A person who needs IL assistance or services and supports who needs but does not have good informal help and support from family and/or friends	75% (N=105)	13% (N=18)	13% (N=18)	100% N=(141)
<b>Question 38.</b> A person with a disabling condition who is experiencing recurring serious health problems	89% (N=126)	3% (N=4)	8% (N=12)	100% N=(142)
<b>Question 39.</b> A person who needs IL assistance or services and supports and does not have adequate, affordable and/or accessible housing	85% (121)	9% (13)	6% (8)	100% N=(142)
<b>Question 40.</b> All persons with disabilities who need IL assistance or supports or services are considered to be at risk of institutionalization	29% (40)	62% (87)	9% (13)	100% N=(140)

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

### SECTION 3: DIVERSION SERVICES CILS CURRENTLY PROVIDE

#### Survey Question

**Question 41, Table A.** In your opinion, does your CIL consider this portion of the 5th core service, providing assistance to individuals with significant disabilities who are at risk of entering institutions so that the individuals may remain in the community, as being different work than your CIL already does?

a) Yes, this work is different - at least in some ways - than the work my CIL already does.	32% (N=45)
b) No. This is the same type of work my CIL already does.	68% (N=97)
c) I don't know	0% (N=0)
d) Other (please specify)	0% (N=0)
	100% (N=142)

#### Additional analysis for Question 41

**Question 41, Table B.** Percentages of CILs by region saying that providing assistance to individuals with significant disabilities who are at risk of entering institutions so that the individuals may remain in the community, as being different work than your CIL already does (N=133)

	% of CILs in <b>Urban</b> areas that say	% of CILs in <b>Suburban</b> areas that say	% of CILs in <b>Rural</b> areas that say	% of CILs in <b>Urban/Rural mix*</b> areas that say
a) Yes, this work is different - at least in some ways - than the work my CIL already does.	48% (N=10)	22% (N=5)	29% (N=16)	39% (N=13)
b) No. This is the same type of work my CIL already does.	52% (N=11)	78% (N=18)	71% (N=40)	61% (N=20)
	100% (N=21)	100% (N=23)	100% (N=56)	100% (N=33)

Note: N=133 is the number of respondents who answered Questions 41 and 96, *In what type of area would you describe your CIL as being located?* \*Urban/rural mix written in by respondents as other for Question 96.

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

### Survey Questions 42-44

**Questions 42, 43, 44, Table A.** On this (first, second, final) page of services, which of the following does your CIL provide as part of its assistance to individuals with significant disabilities who are at risk of entering institutions so that the individuals may remain in the community? Please mark all that apply. (N=141, N=138, N=137)

a) The original 4 core services*	99% (N=140)
b) Providing information and referrals to other home and community-based services**	97% (N=133)
c) Providing information and assistance about transportation**	96% (N=132)
d) Assisting the individual in learning, re-learning, or improving the skills needed to successfully live independently**	96% (N=131)
e) Assistance with locating and securing affordable housing***	94% (N=129)
f) Independent living skill building services*	94% (N=133)
g) Applying for in-home services and supports**	94% (N=129)
h) Assistance of the individual in developing self-advocacy skills*	93% (N=131)
i) Providing peer-counseling to transitioned individuals***	90% (N=123)
j) Making referrals to community-based mental health services and resources**	89% (N=122)
k) Assistance in obtaining and maintaining assistive technology*	89% (N=126)
l) Assistance applying for income benefits***	87% (N=119)
m) Working with families of individuals with disabilities***	85% (N=116)
n) Assessment of service need*	82% (N=116)
o) Assistance in making home modifications***	80% (N=110)
p) Providing assistance with health care providers in the community**	77% (N=106)
q) Providing information about safety, including neglect and abuse, weather extremes, and disasters**	77% (N=106)
r) Assisting the individual in building self-esteem***	76% (N=105)
s) Providing regular follow-up with individuals who seek or have sought assistance**	76% (N=104)
t) Benefits counseling*	72% (N=101)
u) Providing assistance with utilities including applying for utility benefit programs**	69% (N=95)
v) Helping transitioned individuals get involved in meaningful and productive activities in the community***	65% (N=89)
w) Helping transitioned individuals make friends, build and/or sustain social networks***	56% (N=77)
x) Case management or case coordination services*	52% (N=73)
y) Job search and placement*	40% (N=57)
z) Other services. Please describe the other type of service your CIL provides here: 1) Recreation, educational classes (computers, health care, etc.), 2) Low vision/Blind service for qualified individuals age 55+	2% (N=2)

Note: \*N=141, \*\*N=138, \*\*\*N=137. N's vary because these questions were split across several SurveyMonkey screens. N is based each specific question screen.



## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

### Additional analysis for Questions 42-44

**Questions 42, 43, 44, Table B.** Percent of CILs providing different counts of services provided as part of its assistance to individuals with significant disabilities who are at risk of entering institutions so that the individuals may remain in the community. (N=141)

a) Provides < 10 services	4% (N=6)
b) Provides 11-20 services	40% (N=57)
c) Provides 21-25 services	56% (N=78)

## SECTION 4: FUNDING FOR DIVERSION SERVICES

### Survey Question

**Question 45, Table A.** Based on your current knowledge, what would you estimate is the percentage age break-down of the people that your CIL helps who are at risk of entering institutions so that the individuals may remain in the community? (For example: 30% are ages 65 and older, 70% are adults aged 18-64.) Estimated percentages should add up to 100%.

a) Children & youth age 17 and under	Average % of transition clients who fall into this age range: 6% Range of client %'s reported: 0%-45% (N=47)
b) Adults age 18-64	Average % of transition clients who fall into this age range: 57% Range of client %'s reported: 0%-100% (N=63)
c) Adults age 65 and older	Average % of transition clients who fall into this age range: 38% Range of client %'s reported: 0%-95% (N=60)
d) I don't know	0% (N=0)

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

### Survey Question

**Question 46, Table A.** What are the current sources of any funding your CIL has to provide assistance to individuals with significant disabilities who are at risk of entering institutions so that the individuals may remain in the community? Please mark all that apply. (N=133)

a) Title VII, Part C	65% (N=87)
b) Title VII, Part B	51% (N=68)
c) State Agency(ies)	47% (N=63)
d) Money Follows the Person	35% (N=47)
e) Medicaid	27% (N=36)
f) Managed Care Organization	12% (N=16)
g) Veteran's Administration	7% (N=9)
h) <i>Philanthropic*</i>	4% (N=6)
i) <i>Other grants or contracts*</i>	3% (N=4)
j) <i>Fund raising – development*</i>	2% (N=3)
k) <i>Fee for service*</i>	2% (N=2)
l) I don't know	5% (N=7)
m) Other	0% (N=0)

Note: \*Written in by respondent

### Additional analysis for Question 46

**Question 46, Table B.** Percent of CILs providing different counts of current sources to provide assistance to individuals with significant disabilities who are at risk of entering institutions so that the individuals may remain in the community.

a) One source of funding	25% (N=33)
b) Two sources of funding	32% (N=43)
c) Three sources of funding	20% (N=27)
d) Four sources of funding	16% (N=21)
e) Five or more sources of funding	7% (N=9)
	100% (N=133)

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

### Additional analysis for Question 46

**Question 46, Table C.** Percent of CILs with a lot, some, and little or no knowledge about how to contract with organizations and funding your CIL has to provide assistance to individuals with significant disabilities who are at risk of entering institutions so that the individuals may remain in the community.

	% of CILS saying they have <b>“a lot of knowledge”</b> about how to contract with organizations	% of CILS saying they have <b>“some knowledge”</b> about how to contract with organizations	% of CILS saying they have <b>“a little or no knowledge”</b> about how contract with organizations	
<i>Of CILs that have this funding source</i>				
a) Title VII, Part C	38% (N=32)	48% (N=41)	14% (N=12)	100% (N=85)
b) Title VII, Part B	40% (N=26)	45% (N=29)	15% (N=10)	100% (N=65)
c) State Agency(ies)	43% (N=26)	43% (N=26)	14% (N=9)	100% (N=61)
d) Money Follows the Person	43% (N=19)	45% (N=20)	11% (N=5)	100% (N=44)
e) Medicaid	50% (N=18)	47% (N=17)	3% (N=1)	100% (N=36)
f) Managed Care Organization	44% (N=7)	50% (N=8)	6% (N=1)	100% (N=16)
g) Veteran’s Administration	55% (N=5)	44% (N=4)	0% (N=0)	100% (N=9)
h) I don’t know	14% (N=1)	57% (N=4)	29% (N=2)	100% (N=7)

Note: Question 95 is the cross-referenced question, *How would you rate your level of knowledge about contracting with other organizations (like managed care organizations or other community-based organizations) to provide services to persons with disabilities transitioning from institutions, persons who are at risk of entering institutions, and youth with disabilities who are transitioning to post-secondary life?*

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

*Additional analysis for Question 46*

**Question 46, Table D.** Percent of CILs by region and source of funding to provide assistance to individuals with significant disabilities who are at risk of entering institutions so that the individuals may remain in the community.

	% of CILs in <b>Urban</b> areas	% of CILs in <b>Suburban</b> areas	% of CILs in <b>Rural</b> areas	% of CILs in <b>Urban/ Rural mix*</b> areas	
<i>Of CILs that have this funding source</i>					
a) Title VII, Part C	16% (N=19)	13% (N=11)	40% (N=34)	27% (N=23)	100% (N=84)
b) Title VII, Part B	12% (N=8)	17% (N=11)	47% (N=31)	24% (N=16)	100% (N=66)
c) State Agency(ies)	6% (N=4)	18% (N=11)	45% (N=28)	31% (N=19)	100% (N=62)
d) Money Follows the Person	13% (N=6)	15% (N=7)	46% (N=21)	26% (N=12)	100% (N=46)
e) Medicaid	14% (N=5)	17% (N=6)	53% (N=19)	17% (N=6)	100% (N=36)
f) Managed Care Organization	12% (N=2)	19% (N=3)	38% (N=6)	31% (N=5)	100% (N=16)
g) Veteran's Administration	11% (N=1)	0% (N=0)	56% (N=5)	33% (N=3)	100% (N=9)

Note: Question 96 is the cross-referenced question, *In what type of area would you describe your CIL as being located?* \*Urban/rural mix written in by respondents as other for Question 96.

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

### Additional analysis for Question 46

**Question 46, Table E.** Percent of CILs by paid staff size and funding your CIL has to provide assistance to individuals with significant disabilities who are at risk of entering institutions so that the individuals may remain in the community.

	% of CILs that have <b>&lt;5 paid staff</b> that say	% of CILs that have <b>6-10 paid staff</b> that say	% of CILs that have <b>11-20 paid staff</b> that say	% of CILs that have <b>21- 40 paid staff</b> that say	% of CILs that have <b>41+ paid staff</b> that say	
<i>Of CILs that have this funding source</i>						
a) Title VII, Part C	8% (N=7)	28% (N=24)	38% (N=32)	16% (N=14)	9% (N=8)	99% (N=85)
b) Title VII, Part B	10% (N=7)	30% (N=20)	38% (N=25)	14% (N=9)	8% (N=5)	100% (N=66)
c) State Agency(ies)	6% (N=4)	34% (N=21)	35% (N=22)	13% (N=8)	11% (N=7)	99% (N=62)
d) Money Follows the Person	4% (N=2)	33% (N=15)	36% (N=16)	16% (N=7)	11% (N=5)	100% (N=45)
e) Medicaid	8% (N=3)	17% (N=6)	33% (N=12)	14% (N=5)	28% (N=10)	100% (N=36)
f) Managed Care Organization	6% (N=1)	31% (N=5)	44% (N=7)	13% (N=2)	6% (N=1)	100% (N=16)
g) Veteran's Administration	0% (N=0)	22% (N=2)	44% (N=4)	0% (N=0)	33% (N=3)	99% (N=9)

Note: Question 97 is the cross-referenced question, *How many paid staff members does your CIL have?*

\*Does not add to 100% due to rounding.

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

Additional analysis for Question 46

**Question 46, Table F.** Percent of CILs by paid staff size and change in budget over the past 3 years.

	% of CILs saying their <b>budget increased</b> over the past 3 years	% of CILs saying their <b>budget decreased</b> over the past 3 years	% of CILs saying their <b>budget stayed about the same</b> over the past 3 years	% of CILs saying they <b>don't know</b> about budget trends	
<i>Of CILs that have this funding source</i>					
a) Title VII, Part C	15% (N=13)	58% (N=49)	23% (N=19)	4% (N=3)	99% (N=84)
b) Title VII, Part B	11% (N=7)	60% (N=39)	26% (N=17)	3% (N=2)	100% (N=65)
c) State Agency(ies)	21% (N=13)	56% (N=34)	20% (N=12)	3% (N=2)	100% (N=61)
d) Money Follows the Person	20% (N=9)	52% (N=24)	26% (N=12)	2% (N=1)	101% (N=46)
e) Medicaid	25% (N=9)	50% (N=18)	19% (N=7)	6% (N=2)	101% (N=36)
f) Managed Care Organization	38% (N=6)	44% (N=7)	12% (N=2)	6% (N=1)	100% (N=16)
g) Veteran's Administration	33% (N=3)	66% (N=6)	0% (N=0)	0% (N=0)	99% (N=9)
h) I don't know	0% (N=0)	57% (N=4)	29% (N=2)	14% (N=1)	100% (N=7)

Note: Question 100 is the cross-referenced question, *Over the past 3 years, have you seen your CIL's annual budget increase, decrease, or stay about the same.* The response "I prefer not to disclose" is not included in this table, but can be found in Question 100, Table A. Note: \*Does not add to 100% due to rounding.

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

### SECTION 5: COLLABORATIONS AND PARTNERSHIPS FOR DIVERSION SERVICES

#### Survey Question

**Question 47, Table A.** Does your CIL formally partner or collaborate with any of these organizations to provide assistance to individuals with significant disabilities who are at risk of entering institutions so that the individuals may remain in the community? (This may include contracts, memorandums of understanding, consortium agreements, or other formalized relationships.) Please mark all that apply. (N=132)

a) Area Agencies on Aging	52% (N=70)
b) Other CILs	50% (N=66)
c) Aging and Disability Resource Centers (ADRC)	49% (N=65)
d) Housing organizations	49% (N=65)
e) State agency on aging	40% (N=53)
f) Rehabilitation facilities	36% (N=48)
g) Hospitals	37% (N=49)
h) Nursing home/long-term care facilities	36% (N=48)
i) Developmental disability organizations	35% (N=46)
j) Mental health organizations	34% (N=45)
k) State Medicaid agency	33% (N=46)
l) State agency on intellectual/ developmental disability	29% (N=38)
m) Veteran's Administration	28% (N=38)
n) <i>State Vocational Rehabilitation department*</i>	2% (N=2)
o) Other community-based organizations	2% (N=2)
p) Correctional facilities	7% (N=2)
q) I don't know	1% (N=2)
r) Other	3% (N=4)

Note: \*Written in by respondent

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

### Additional analysis for Question 47

**Question 47, Table B.** Percentage of CILs by region and formal partnership or collaborations with any of these organizations to provide assistance to individuals with significant disabilities who are at risk of entering institutions so that the individuals may remain in the community?

	% of CILs in <b>Urban</b> areas	% of CILs in <b>Suburban</b> areas	% of CILs in <b>Rural</b> areas	% of CILs in <b>Urban/ Rural mix*</b> areas	
<i>Of the CILs that partner with</i>					
a) Area Agencies on Aging	14% (N=10)	13% (N=9)	40% (N=28)	33% (N=23)	100% (N=70)
b) Nursing home/long-term care facilities	4% (N=2)	17% (N=8)	52% (N=25)	27% (N=13)	100% (N=48)
c) State Medicaid agency	16% (N=7)	16% (N=7)	52% (N=24)	16% (N=7)	100% (N=45)
d) Housing organizations	11% (N=7)	11% (N=7)	49% (N=31)	29% (N=18)	100% (N=63)
e) Other CILs	14% (N=9)	13% (N=8)	47% (N=30)	27% (N=17)	101% (N=64)
f) Aging and Disability Resource Centers (ADRCs)	14% (N=9)	14% (N=9)	41% (N=26)	31% (N=20)	100% (N=64)
g) Mental health organizations	11% (N=5)	16% (N=7)	47% (N=21)	26% (N=12)	100% (N=45)
h) State agency on aging	12% (N=6)	15% (N=8)	40% (N=21)	33% (N=17)	100% (N=52)
i) Hospitals	8% (N=4)	12% (N=6)	53% (N=26)	27% (N=13)	100% (N=49)
j) Developmental disability organizations	13% (N=6)	13% (N=6)	48% (N=22)	26% (N=12)	100% (N=46)
k) Rehabilitation facilities	6% (N=3)	17% (N=8)	51% (N=25)	25% (N=12)	99% (N=48)
l) Veteran's Administration	13% (N=5)	13% (N=5)	55% (N=21)	18% (N=7)	99% (N=38)
m) State agency on intellectual/developmental disability	19% (N=6)	16% (N=5)	59% (N=19)	25% (N=8)	100% (N=32)
n) Correctional facilities	33% (N=3)	22% (N=2)	33% (N=3)	11% (N=1)	100% (N=9)
o) <i>State Vocational Rehabilitation department**</i>	100% (N=0)	100% (N=0)	100% (N=0)	100% (N=2)	100% (N=2)
p) County or other local organization**	100% (N=0)	100% (N=0)	100% (N=1)	100% (N=0)	100% (N=1)

Note: Question 96 is the cross-referenced question, *In what type of area would you describe your CIL as being located?* \*Urban/rural mix written in by respondents as other for Question 96. \*\*Written in by respondent



## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

### Additional analysis for Question 47

**Question 47, Table C.** Percentage of CILs with a lot, some, and little or no knowledge about how to contract with organizations and formal partnership or collaborations with any of these organizations to provide assistance to individuals with significant disabilities who are at risk of entering institutions so that the individuals may remain in the community.

	% of CILS saying they have <b>“a lot of knowledge”</b> about how to contract with organizations	% of CILS saying they have <b>“some knowledge”</b> about how to contract with organizations	% of CILS saying they have <b>“a little or no knowledge”</b> about how contract with organizations	
<i>Of CILs that have this funding source</i>				
a) Area Agencies on Aging	42% (N=29)	43% (N=30)	14% (N=10)	99% (N=69)
b) Nursing home/long-term care facilities	49% (N=23)	38% (N=18)	13% (N=6)	100% (N=47)
c) State Medicaid agency	53% (N=24)	40% (N=18)	7% (N=3)	100% (N=45)
d) Housing organizations	48% (N=30)	41% (N=26)	10% (N=6)	99% (N=63)
e) Other CILs	46% (N=29)	46% (N=29)	8% (N=5)	100% (N=63)
f) Aging and Disability Resource Centers(ADRCs)	46% (N=29)	41% (N=26)	13% (N=8)	100% (N=63)
g) Mental health organizations	50% (N=22)	39% (N=17)	11% (N=5)	100% (N=44)
h) State agency on aging	52% (N=26)	34% (N=17)	14% (N=7)	100% (N=50)
i) Hospitals	42% (N=20)	44% (N=21)	14% (N=7)	100% (N=48)
j) Developmental disability organizations	56% (N=25)	31% (N=14)	13% (N=6)	100% (N=45)
k) Rehabilitation facilities	45% (N=21)	45% (N=21)	10% (N=5)	100% (N=47)
l) Veteran’s Administration	45% (N=17)	42% (N=16)	13% (N=5)	100% (N=38)
m) State agency on intellectual/developmental disability	55% (N=21)	32% (N=12)	13% (N=5)	100% (N=38)
n) Correctional facilities	44% (N=4)	44% (N=4)	11% (N=1)	99% (N=9)

Note: Question 95 is cross-referenced question, *How would you rate your level of knowledge about contracting with other organizations (like managed care organizations or other community-based organizations) to provide services to persons with disabilities transitioning from institutions, persons who are at risk of entering institutions, and youth with disabilities who are transitioning to post-secondary life?*

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

### SECTION 6: COLLABORATIONS AND PARTNERSHIPS FOR DIVERSION SERVICES

#### Survey Question

<b>Question 48, Table A.</b> Does your CIL have specific IL specialists dedicated to providing assistance to individuals with significant disabilities who are at risk of entering institutions so that the individuals may remain in the community?	
a) Yes	43% (N=59)
b) No	56% (N=78)
c) I don't know	1% (N=1)
	100% (N=135)

#### Additional analysis for Question 48

<b>Question 48, Table B.</b> Percent of CILs by region saying they have specific IL specialists dedicated to providing assistance to individuals with significant disabilities who are at risk of entering institutions so that the individuals may remain in the community? (N=133)				
	% of CILs in <b>Urban</b> areas saying	% of CILs in <b>Suburban</b> areas saying	% of CILs in <b>Rural</b> areas saying	% of CILs in <b>Urban/ Rural</b> <b>mix*</b> areas saying
a) Yes	19% (N=4)	48% (N=11)	48% (N=27)	45% (N=15)
b) No	81% (N=17)	52% (N=12)	50% (N=28)	58% (N=19)
c) I don't know	0% (N=0)	0% (N=0)	2% (N=1)	0% (N=0)
	100% (N=21)	100% (N=23)	100% (N=56)	100% (N=33)

Note: Question 96 is the cross-referenced question, *In what type of area would you describe your CIL as being located?* \*Urban/rural mix written in by respondents as other for Question 96.

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

*Additional analysis for Question 48*

**Question 48, Table C.** Percent of CILs by number of paid staff saying they have specific IL specialists dedicated to providing assistance to individuals with significant disabilities who are at risk of entering institutions so that the individuals may remain in the community? (N=133)

	% of CILs that have <b>&lt;5 paid staff</b> that say	% of CILs that have <b>6-10 paid staff</b> that say	% of CILs that have <b>11-20 paid staff</b> that say	% of CILs that have <b>21-40 paid staff</b> that say	% of CILs that have <b>41+ paid staff</b> that say
a) Yes	36% (N=4)	38% (N=15)	36% (N=18)	45% (N=10)	91% (N=10)
b) No	64% (N=7)	62% (N=24)	64% (N=32)	50% (N=11)	1% (N=1)
c) I don't know	0% (N=0)	0% (N=0)	0% (N=0)	5% (N=1)	0% (N=0)
	100% (N=11)	100% (N=39)	100% (N=50)	100% (N=22)	100% (N=11)

Note: Question 97 is the cross-referenced question, *How many paid staff members does your CIL have?*

## SECTION 7: ADEQUACY OF FUNDING FOR DIVERSION SERVICES

*Survey Question*

**Question 49, Table A.** Do you believe your CIL currently has sufficient funding to adequately provide this portion of the 5th core service - assistance to individuals with significant disabilities who are at risk of entering institutions so that the individuals may remain in the community?

a) Yes	4% (N=5)
b) No	93% (N=128)
c) I don't know	4% (N=5)
	100% (N=135)

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

### Survey Question

**Question 50, Table A.** Based on your CIL's current budget, what percentage of budget increase do you estimate your CIL would need to adequately provide assistance to individuals with significant disabilities who are at risk of entering institutions so that the individuals may remain in the community? Please fill in % estimate here:

a) 1-10%	12% (N=14)
b) 11-20%	20% (N=24)
c) 21-30%	27% (N=33)
d) 31-40%	10% (N=12)
e) 41-50%	1% (N=1)
f) 50-75%	9% (N=11)
g) 76-100%	2% (N=2)
h) I don't know	17% (N=20)
	100% (N=121)

*End of institutional diversion questions. See Institutional Transition and Youth Transition reports for findings for questions 1-24 and 50-72. Service context findings and respondent characteristics are reported on the following pages and repeated in each report.*

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

### SECTION 8: CONTEXT OF CIL SERVICE PROVISION

*Survey Questions 73-87, Tables A.*

In this section, we will ask several questions about the State and region your CIL operates in so that we can better understand the context in which your CIL will be providing the 5th core services. For the questions in this section, we will ask you to rate on a scale how much you agree or disagree with each statement.

	% of CILs saying <b>strongly disagree</b> <b>e</b>	% of CILs saying <b>disagree</b>	% of CILs saying <b>neither agree nor disagree</b> <b>e</b>	% of CILs saying <b>agree</b>	% of CILs saying <b>strongl y agree</b>	100%
<b>Question 73.</b> In my State, Medicaid income eligibility criteria are too restrictive, making it hard for people with disabilities to qualify for Medicaid's community-based services.	6% (N=8)	14% (N=18)	30% (N=39)	35% (N=46)	15% (N=20)	100% (N=131)
<b>Question 74.</b> There are enough community-based service providers available in my CIL's region to respond to consumer demand.	33% (N=44)	34% (N=45)	14% (N=19)	14% (N=19)	5% (N=6)	100% (N=133)
<b>Question 75.</b> In my State, people with disabilities in nursing homes and other institutions have to wait a long time to transition to the community because there are long wait lists for Medicaid's community-based services.	7% (N=9)	17% (N=23)	20% (N=27)	33% (N=43)	23% (N=30)	100% (N=132)
<b>Question 76.</b> In my State, Medicaid pays for enough community-based service hours to meet people's	40% (N=53)	43% (N=57)	11% (N=14)	6% (N=8)	0% (N=0)	100% (N=132)

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

needs.

*Survey Questions 73-87, Tables A (continued)*

(Continued) In this section, we will ask several questions about the State and region your CIL operates in so that we can better understand the context in which your CIL will be providing the 5th core services. For the questions in this section, we will ask you to rate on a scale how much you agree or disagree with each statement.

	% of CILs saying <b>strongly disagree</b> <b>e</b>	% of CILs saying <b>disagree</b>	% of CILs saying <b>neither agree nor disagree</b> <b>e</b>	% of CILs saying <b>agree</b>	% of CILs saying <b>strongly agree</b>	
<b>Question 77.</b> Most individuals living in the community are able to obtain the accessible technology and/or equipment services they need.	20% (N=27)	50% (N=67)	18% (N=24)	11% (N=15)	0% (N=0)	100% (N=133)
<b>Question 78.</b> Community-based services are too expensive for persons with disabilities who do not qualify for Medicaid in my state.	2% (N=3)	3% (N=4)	5% (N=7)	45% (N=59)	45% (N=59)	100% (N=132)
<b>Question 79.</b> Finding affordable housing is a challenge in the region my CIL serves.	2% (N=3)	1% (N=1)	5% (N=7)	10% (N=14)	81% (N=109)	100% (N=134)
<b>Question 80.</b> Finding accessible housing is a challenge in the region my CIL serves.	2% (N=2)	0% (N=0)	2% (N=2)	18% (N=23)	79% (N=103)	100% (N=130)
<b>Question 81.</b> In the region that my CIL serves, there is good accessible public transportation for most persons with disabilities.	35% (N=47)	28% (N=37)	11% (N=15)	22% (N=29)	4% (N=5)	100% (N=133)
<b>Question 82.</b> Social isolation is a common problem for persons that	2% (N=2)	5% (N=6)	13% (N=17)	51% (N=67)	30% (N=40)	100% (N=132)

## ***DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS***

my CIL assists.

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## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

Survey Questions 73-87, Tables A (continued)

(Continued) In this section, we will ask several questions about the State and region your CIL operates in so that we can better understand the context in which your CIL will be providing the 5th core services. For the questions in this section, we will ask you to rate on a scale how much you agree or disagree with each statement.

	% of CILs saying <b>strongly disagree</b> <b>e</b>	% of CILs saying <b>disagree</b>	% of CILs saying <b>neither agree nor disagree</b> <b>e</b>	% of CILs saying <b>agree</b>	% of CILs saying <b>strongly agree</b>	
<b>Question 83.</b> The level of physical accessibility in my CIL's community is fairly high.	8% (N=11)	31% (N=41)	24% (N=31)	31% (N=41)	(5%) (N=7)	100% (N=131)
<b>Question 84.</b> There is a lack of affordable attendant care services in the area my CIL serves.	2% (N=2)	7% (N=9)	21% (N=28)	40% (N=53)	30% (N=39)	100% (N=131)
<b>Question 85.</b> There is a lack of participant-directed attendant care services in the region my CIL serves.	3% (N=4)	17% (N=22)	18% (N=23)	40% (N=53)	22% (N=29)	100% (N=131)
<b>Question 86.</b> In the area my CIL serves, there are good job training programs for persons with disabilities, including youth transitioning to post-secondary life.	16% (N=21)	44% (N=58)	20% (N=27)	18% (N=24)	2% (N=2)	100% (N=132)
<b>Question 87.</b> In the area my CIL serves, there are colleges and universities that offer good support to persons with disabilities, including youth with disabilities.	5% (N=6)	17% (N=22)	26% (N=34)	47% (N=63)	6% (N=8)	100% (N=133)



**DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS**

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

*Additional analysis for Survey Questions 73-87, Tables B*

**Question 73, Table B.** In my State, Medicaid income eligibility criteria are too restrictive, making it hard for people with disabilities to qualify for Medicaid's community-based services: response by region (N=130)

	% of CILs saying <b>strongly disagree/ disagree</b>	% of CILs saying <b>neither agree nor disagree</b>	% of CILs saying <b>strongly agree/agree</b>	
CILs in <b>urban areas</b>	29% (N=6)	29% (N=6)	42% (N=9)	100% (N=21)
CILs in <b>suburban areas</b>	23% (N=5)	27% (N=6)	50% (N=11)	100% (N=22)
CILs in <b>rural areas</b>	18% (N=10)	29% (N=16)	53% (N=29)	100% (N=55)
CILs in mixed <b>urban/rural*</b> areas	16% (N=5)	34% (N=11)	50% (N=16)	100% (N=32)

Note: \*Urban/rural mix written in by respondents as other for Question 96.

**Question 74, Table B.** There are enough community-based service providers available in my CIL's region to respond to consumer demand: response by region (N=132)

	% of CILs saying <b>strongly disagree/ disagree</b>	% of CILs saying <b>neither agree nor disagree</b>	% of CILs saying <b>strongly agree/agree</b>	
CILs in <b>urban areas</b>	48% (N=10)	24% (N=5)	28% (N=6)	100% (N=21)
CILs in <b>suburban areas</b>	59% (N=13)	18% (N=4)	23% (N=5)	100% (N=22)
CILs in <b>rural areas</b>	68% (N=38)	14% (N=8)	18% (N=10)	100% (N=56)
CILs in mixed <b>urban/rural*</b> areas	85% (N=28)	6% (N=2)	9% (N=3)	100% (N=33)

Note: \*Urban/rural mix written in by respondents as other for Question 96.

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

**Question 75, Table B.** In my State, people with disabilities in nursing homes and other institutions have to wait a long time to transition to the community because there are long wait lists for Medicaid's community-based services: response by region (N=131)

	% of CILs saying <b>strongly disagree/ disagree</b>	% of CILs saying <b>neither agree nor disagree</b>	% of CILs saying <b>strongly agree/agree</b>	
CILs in <b>urban areas</b>	19% (N=4)	24% (N=5)	57% (N=12)	100% (N=21)
CILs in <b>suburban areas</b>	14% (N=3)	18% (N=4)	68% (N=15)	100% (N=22)
CILs in <b>rural areas</b>	31% (N=17)	25% (N=14)	44% (N=24)	100% (N=55)
CILs in mixed <b>urban/rural*</b> areas	24% (N=8)	12% (N=4)	64% (N=21)	100% (N=33)

Note: \*Urban/rural mix written in by respondents as other for Question 96.

**Question 76, Table B.** In my State, Medicaid pays for enough community-based service hours to meet people's needs: response by region (N=131)

	% of CILs saying <b>strongly disagree/ disagree</b>	% of CILs saying <b>neither agree nor disagree</b>	% of CILs saying <b>strongly agree/agree</b>	
CILs in <b>urban areas</b>	71% (N=15)	19% (N=4)	10% (N=2)	100% (N=21)
CILs in <b>suburban areas</b>	91% (N=20)	9% (N=2)	0% (N=0)	100% (N=22)
CILs in <b>rural areas</b>	82% (N=45)	13% (N=7)	5% (N=3)	100% (N=55)
CILs in mixed <b>urban/rural*</b> areas	88% (N=29)	3% (N=1)	9% (N=3)	100% (N=33)

Note: \*Urban/rural mix written in by respondents as other for Question 96.

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

**Question 77, Table B.** Most individuals living in the community are able to obtain the accessible technology and/or equipment services they need: response by region (N=132)

	% of CILs saying <b>strongly disagree/ disagree</b>	% of CILs saying <b>neither agree nor disagree</b>	% of CILs saying <b>strongly agree/agree</b>	
CILs in <b>urban areas</b>	55% (N=11)	30% (N=6)	15% (N=3)	100% (N=20)
CILs in <b>suburban areas</b>	61% (N=14)	22% (N=5)	17% (N=4)	100% (N=23)
CILs in <b>rural areas</b>	77% (N=43)	14% (N=8)	9% (N=5)	100% (N=56)
CILs in mixed <b>urban/rural*</b> areas	76% (N=25)	15% (N=5)	9% (N=3)	100% (N=33)

Note: \*Urban/rural mix written in by respondents as other for Question 96.

**Question 78, Table B.** Community-based services are too expensive for persons with disabilities who do not qualify for Medicaid in my state: response by region (N=131)

	% of CILs saying <b>strongly disagree/ disagree</b>	% of CILs saying <b>neither agree nor disagree</b>	% of CILs saying <b>strongly agree/agree</b>	
CILs in <b>urban areas</b>	5% (N=1)	10% (N=2)	85% (N=18)	100% (N=21)
CILs in <b>suburban areas</b>	5% (N=1)	9% (N=2)	86% (N=19)	100% (N=22)
CILs in <b>rural areas</b>	4% (N=2)	4% (N=2)	91% (N=51)	99% (N=56)
CILs in mixed <b>urban/rural*</b> areas	6% (N=2)	3% (N=1)	91% (N=30)	100% (N=33)

Note: \*Urban/rural mix written in by respondents as other for Question 96.

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

**Question 79, Table B.** Finding affordable housing is a challenge in the region my CIL serves: response by region (N=133)

	% of CILs saying <b>strongly disagree/ disagree</b>	% of CILs saying <b>neither agree nor disagree</b>	% of CILs saying <b>strongly agree/agree</b>	
CILs in <b>urban areas</b>	0% (N=0)	5% (N=1)	95% (N=20)	100% (N=21)
CILs in <b>suburban areas</b>	4% (N=1)	0% (N=0)	96% (N=22)	100% (N=23)
CILs in <b>rural areas</b>	2% (N=1)	7% (N=4)	91% (N=51)	99% (N=56)
CILs in mixed <b>urban/rural*</b> areas	6% (N=2)	6% (N=2)	88% (N=29)	100% (N=33)

Note: \*Urban/rural mix written in by respondents as other for Question 96.

**Question 80, Table B.** Finding accessible housing is a challenge in the region my CIL serves: response by region (N=129)

	% of CILs saying <b>strongly disagree/ disagree</b>	% of CILs saying <b>neither agree nor disagree</b>	% of CILs saying <b>strongly agree/agree</b>	
CILs in <b>urban areas</b>	0% (N=0)	14% (N=3)	86% (N=18)	100% (N=21)
CILs in <b>suburban areas</b>	5% (N=1)	23% (N=5)	72% (N=16)	100% (N=22)
CILs in <b>rural areas</b>	2% (N=1)	21% (N=11)	77% (N=41)	99% (N=53)
CILs in mixed <b>urban/rural*</b> areas	6% (N=2)	12% (N=4)	82% (N=27)	100% (N=33)

Note: \*Urban/rural mix written in by respondents as other for Question 96.

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

**Question 81, Table B.** In the region that my CIL serves, there is good accessible public transportation for most persons with disabilities: response by region (N=132)

	% of CILs saying <b>strongly disagree/ disagree</b>	% of CILs saying <b>neither agree nor disagree</b>	% of CILs saying <b>strongly agree/agree</b>	
CILs in <b>urban areas</b>	33% (N=7)	10% (N=2)	57% (N=12)	100% (N=21)
CILs in <b>suburban areas</b>	52% (N=12)	4% (N=1)	43% (N=10)	99% (N=23)
CILs in <b>rural areas</b>	80% (N=44)	11% (N=6)	9% (N=5)	99% (N=55)
CILs in mixed <b>urban/rural*</b> areas	61% (N=20)	18% (N=6)	21% (N=7)	100% (N=33)

Note: \*Urban/rural mix written in by respondents as other for Question 96.

**Question 82, Table B.** Social isolation is a common problem for persons that my CIL assists: response by region (N=131)

	% of CILs saying <b>strongly disagree/ disagree</b>	% of CILs saying <b>neither agree nor disagree</b>	% of CILs saying <b>strongly agree/agree</b>	
CILs in <b>urban areas</b>	5% (N=1)	19% (N=4)	76% (N=16)	100% (N=21)
CILs in <b>suburban areas</b>	18% (N=4)	18% (N=4)	64% (N=14)	99% (N=22)
CILs in <b>rural areas</b>	4% (N=2)	7% (N=4)	89% (N=49)	99% (N=55)
CILs in mixed <b>urban/rural*</b> areas	3% (N=1)	15% (N=5)	82% (N=27)	100% (N=33)

Note: \*Urban/rural mix written in by respondents as other for Question 96.

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

**Question 83, Table B.** The level of physical accessibility in my CIL's community is fairly high: response by region (N=130)

	% of CILs saying <b>strongly disagree/ disagree</b>	% of CILs saying <b>neither agree nor disagree</b>	% of CILs saying <b>strongly agree/agree</b>	
CILs in <b>urban areas</b>	20% (N=4)	25% (N=5)	55% (N=11)	100% (N=20)
CILs in <b>suburban areas</b>	36% (N=8)	14% (N=3)	50% (N=11)	99% (N=22)
CILs in <b>rural areas</b>	55% (N=30)	18% (N=10)	27% (N=15)	99% (N=55)
CILs in mixed <b>urban/rural*</b> areas	30% (N=10)	39% (N=13)	30% (N=10)	99% (N=33)

Note: \*Urban/rural mix written in by respondents as other for Question 96.

**Question 84, Table B.** There is a lack of affordable attendant care services in the area my CIL serves: response by region (N=130)

	% of CILs saying <b>strongly disagree/ disagree</b>	% of CILs saying <b>neither agree nor disagree</b>	% of CILs saying <b>strongly agree/agree</b>	
CILs in <b>urban areas</b>	19% (N=4)	14% (N=3)	67% (N=14)	100% (N=21)
CILs in <b>suburban areas</b>	9% (N=2)	29% (N=6)	62% (N=13)	99% (N=21)
CILs in <b>rural areas</b>	7% (N=4)	24% (N=13)	69% (N=38)	99% (N=55)
CILs in mixed <b>urban/rural*</b> areas	3% (N=1)	18% (N=6)	79% (N=26)	99% (N=33)

Note: \*Urban/rural mix written in by respondents as other for Question 96.

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

**Question 85, Table B.** There is a lack of participant-directed attendant care services in the region my CIL serves: response by region (N=130)

	% of CILs saying <b>strongly disagree/ disagree</b>	% of CILs saying <b>neither agree nor disagree</b>	% of CILs saying <b>strongly agree/agree</b>	
CILs in <b>urban areas</b>	10% (N=2)	19% (N=4)	71% (N=15)	100% (N=21)
CILs in <b>suburban areas</b>	23% (N=5)	32% (N=7)	45% (N=10)	99% (N=22)
CILs in <b>rural areas</b>	26% (N=14)	15% (N=8)	59% (N=32)	99% (N=54)
CILs in mixed <b>urban/rural*</b> areas	15% (N=5)	12% (N=4)	73% (N=24)	99% (N=33)

Note: \*Urban/rural mix written in by respondents as other for Question 96.

**Question 86, Table B.** In the area my CIL serves, there are good job training programs for persons with disabilities, including youth transitioning to post-secondary life: response by region (N=131)

	% of CILs saying <b>strongly disagree/ disagree</b>	% of CILs saying <b>neither agree nor disagree</b>	% of CILs saying <b>strongly agree/agree</b>	
CILs in <b>urban areas</b>	38% (N=8)	29% (N=6)	33% (N=7)	100% (N=21)
CILs in <b>suburban areas</b>	48% (N=11)	22% (N=5)	30% (N=7)	99% (N=23)
CILs in <b>rural areas</b>	70% (N=38)	17% (N=9)	13% (N=7)	99% (N=54)
CILs in mixed <b>urban/rural*</b> areas	64% (N=21)	21% (N=7)	15% (N=5)	99% (N=33)

Note: \*Urban/rural mix written in by respondents as other for Question 96.



## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

**Question 87, Table B.** In the area my CIL serves, there are colleges and universities that offer good support to persons with disabilities, including youth with disabilities: response by region (N=132)

	% of CILs saying <b>strongly disagree/ disagree</b>	% of CILs saying <b>neither agree nor disagree</b>	% of CILs saying <b>strongly agree/agree</b>	
CILs in <b>urban areas</b>	9% (N=2)	24% (N=5)	67% (N=14)	100% (N=21)
CILs in <b>suburban areas</b>	17% (N=4)	13% (N=3)	69% (N=16)	99% (N=23)
CILs in <b>rural areas</b>	31% (N=17)	27% (N=15)	42% (N=23)	99% (N=55)
CILs in mixed <b>urban/rural*</b> areas	15% (N=5)	33% (N=11)	52% (N=17)	99% (N=33)

Note: \*Urban/rural mix written in by respondents as other for Question 96.

### SECTION 9: RESPONDENT CHARACTERISTICS

**Question 88, Table A.** What is your job title?

a) Executive director	81% (N=107)
b) Program manager	11% (N=15)
c) IL specialist	4% (N=5)
d) Other administrator	4% (N=5)
	100% (N=132)

**Question 89, Table A.** Some CIL staff work at more than one CIL or CIL location as part of their regular work. Do you work for more than one CIL?

a) Yes, I work at one CIL that has multiple regional sites. I also work at those regional sites	25% (N=34)
b) Yes, I work at two or more distinct CIL organizations. Each one is its own non-profit corporation	1% (N=1)
c) No, I work at one CIL only.	74% (N=99)
d) Other. Please provide response here.	0% (N=0)
	100% (N=134)

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

### Question 90, Table A. How long have you worked at this CIL?

a) Less than 1 year	5% (N=7)
b) 1-5 years	17% (N=22)
c) 6-10 years	21% (N=28)
d) 11 or more years	57% (N=76)
	100% (N=133)

### Question 91, Table A. How long have you worked in the IL and/or disability services field?

a) Less than 1 year	0% (N=0)
b) 1-5 years	6% (N=8)
c) 6-10 years	11% (N=14)
d) 11 or more years	83% (N=110)
	100% (N=132)

### Question 92, Table A. What is your gender?

a) Female	62% (N=82)
b) Male	34% (N=45)
c) Transgender	1% (N=1)
d) I would prefer not to disclose this	4% (N=5)
e) Other (please specify)	0% (N=0)
	100% (N=133)

### Question 93, Table A. Do you identify as a person with a disability?

a) Yes	84% (N=111)
b) No	10% (N=13)
c) I would prefer not to disclose this	6% (N=8)
	100% (N=132)

### Question 94, Table A. What is your highest level of education?

a) High school diploma/GED	8% (N=10)
b) Associate's degree	11% (N=14)
c) Bachelor's degree	40% (N=53)
d) Graduate degree	42% (N=56)
e) Other. Please indicate other level of education here:	0% (N=0)
	100% (N=133)

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

**Question 95, Table A.** How would you rate your level of knowledge about contracting with other organizations (like managed care organizations or other community-based organizations) to provide services to persons with disabilities transitioning from institutions, persons who are at risk of entering institutions, and youth with disabilities who are transitioning to post-secondary life?

a) I have a lot of knowledge about how to do this	40% (N=53)
b) I have some knowledge about how to do this	45% (N=59)
c) I have a little bit of knowledge about how to do this	13% (N=17)
d) I have no knowledge about how to do this	2% (N=3)
	100% (N=132)

**Question 96, Table A.** In what type of area would you describe your CIL as being located?

a) Urban area	16% (N=21)
b) Suburban area	17% (N=23)
c) Rural area	42% (N=56)
d) <i>Urban-suburban-rural mix*</i>	25% (N=33)
	100% (N=133)

Note: \*Written in by respondent

**Question 97, Table A.** How many paid staff members does your CIL have?

a) Less than 5	8% (N=11)
b) 6-10	29% (N=39)
c) 11-20	38% (N=50)
d) 21-40	17% (N=22)
e) 41 or more	8% (N=11)
	100% (N=133)

**Question 98, Table A.** How many volunteer staff members does your CIL have?

a) Less than 5	61% (N=80)
b) 6-10	20% (N=26)
c) 11-20	15% (N=19)
d) 21-40	1% (N=1)
e) 41 or more	4% (N=5)
	100% (N=131)

## DETAILED SUMMARY FINDINGS: INSTITUTIONAL DIVERSIONS

**Question 99, Table A.** Is your CIL part of a formal network or consortium of community-based organizations that work collaboratively to provide services to people with disabilities?

a) Yes	68% (N=90)
b) No	30% (N=39)
c) I don't know	2% (N=3)
	100% (N=132)

**Question 100, Table A.** Over the past 3 years, have you seen your CIL's annual budget increase, decrease, or stay about the same?

a) Increase	15% (N=20)
b) Decrease	56% (N=75)
c) Stay about the same	25% (N=34)
d) I don't know	3% (N=4)
e) I would prefer not to disclose this	1% (N=1)
	100% (N=134)