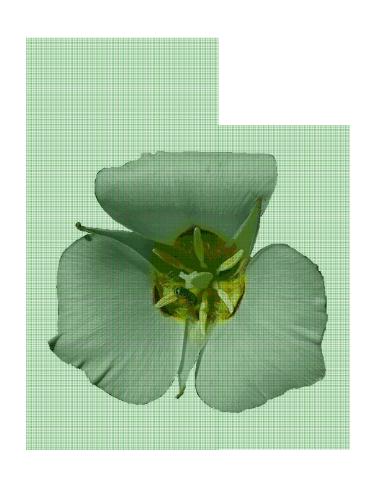
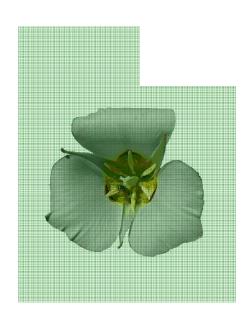
Division of Services for People with Disabilities Utah Department of Human Services Fiscal Year 2011 Annual Report





Division of Services for People with Disabilities Utah Department of Human Services Fiscal Year 2011 Annual Report

Table of Contents:

Director's Message	2
Executive Summary	3
Mission, Values, and Vision	
Historical Highlights	5-8
People Served and Waiting	
Budget Overview	
Demographics	
Diagnoses	
Continuum of Services	
Waiting List	14
Privatizing Support Coordination	
Division Reorganization	16
Supports Intensity Scale	
Performance	

Director's Message

The dedicated team at the Division of Services for People with Disabilities is pleased to present the 2011 fiscal year report. This report is designed to illustrate how many people utilize the services provided by the Division, describe the services being used, and highlight the historical and current need for these services.

The past fiscal year has brought many changes, challenges, and opportunities for improvement for the Division of Services for People with Disabilities. During this year we implemented budget cuts enacted during the last legislative session, reduced staff and changed management, and began focusing on collaboration, accountability, and improvement of the critical services we provide to the people of Utah

Although the general economic outlook for Utah seems to be improving, the Division, like many other agencies, has had to make some painful decisions in the last year in order to meet its budget appropriation. The Division received a ten percent cut in administration, a one percent general fund cut, and a forty-three thousand dollar cut for State-owned group home rent fees. In order to meet these cuts, the Division has continued to severely curtail all administrative costs that are not absolutely necessary or that can be delayed temporarily. The Division has worked to develop agreements with other Departments to improve processes that will provide more Federal matching dollars, and has implemented targeted retirement programs and hiring freezes to reduce personnel costs. The Division continues to analyze how to best meet the needs of the people of Utah with our remaining resources.

Despite the budget challenges, the Division has kept its mission in the forefront: to promote opportunities and provide supports for persons with disabilities to lead self-determined lives. The DSPD team is excited about the focus on employment for people with disabilities and is grateful to be one of the agencies working on the 'Employment First' initiative passed by the Legislature last session. The Division received an ongoing appropriation this year to re-ignite its 'Supported Employment' program, and we are dedicated to ensuring its success.

The Division employees consider it an honor to work for the people of Utah and I am impressed every day by their hard work and dedication. I hope that you find this annual report a useful tool in understanding how services are delivered to people with disabilities in Utah.

R.L.7.Silh

Paul T. Smith, Director Division of Services for People with Disabilities

Executive Summary

- Met the basic health, safety and service needs for 5,011 Utahns with severe disabilities through three Medicaid Waiver programs, one Non-Medicaid program and through the State Developmental Center
 - 4,476 in the Community Supports Medicaid Waiver for Utahns with Intellectual Disabilities or Related Conditions
 - o 125 in the Medicaid Waiver for Utahns with Physical Disabilities
 - o 110 in the Medicaid Waiver for Utahns with Acquired Brain Injuries
 - 94 in the Non-Medicaid program for Utahns with Disabilities (Including 64
 Utahns with Intellectual Disabilities or related conditions, 25 Utahns with
 Physical Disabilities, and 5 Utahns with Acquired Brain Injuries)
 - 206 Utahns received 24 hour support at the Utah State Developmental Center
- Provided 2,879 Utahns with supervision and training during the day or on the job, 1,730 with around the clock supervision and training in group homes, supervised apartments or home-like settings, 2,925 with intermittent family support or supported living, and 150 with a personal assistant.
- Brought 216 people into services from the waiting list
- Managed waiting list records for 1,825 Utahns with critical need for services
- Contracted with over 150 providers who employed approximately 10,000 Utahns
- Invested State general fund in programs that received a return of two to three dollars for every dollar in state general funds.
- Demographics:

Disabilities-

- o 76 percent received services due to an intellectual disability.
- 19 percent received services due to a condition related to an intellectual disability.
- o 3 percent received services due to a physical disability.
- o 2 percent received services due to an acquired brain injury.

Ages/Genders-

- o Provided services to Utahns of all ages, average age 33
- o 82 percent adults, 18 percent children
- o 40 percent female, 60 percent male

Mission, Values, and Vision

Our mission is to promote opportunities and provide supports for persons with disabilities to lead self-determined lives.

Values

- We value the preservation of family and other natural supports
- We believe in stewardship and wise use of public resources
- We value coordination and cooperation
- We respect and support personal choice and personal responsibility
- We respect personal and cultural diversity
- We believe people deserve high quality supports and services
- We believe funding should be needs based and should follow the person

We Will...

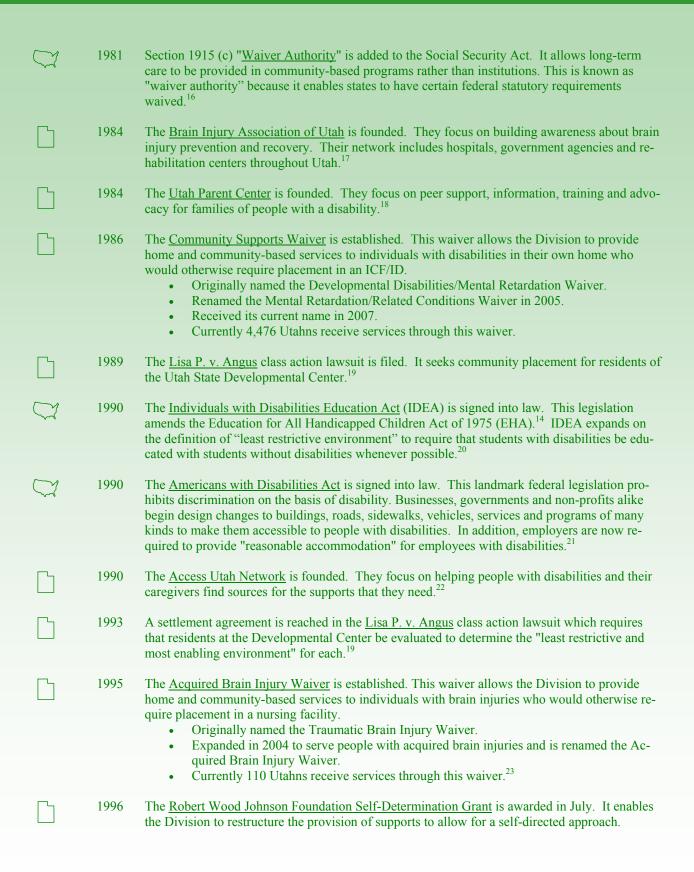
- Promote and recognize excellence
- Continue a person-centered philosophy
- Promote public awareness of disability issues
- Work collaboratively to dissolve barriers to quality service
- Support a full spectrum of service options
- Support self-determination by assisting persons to exercise and develop their ability to make
 choices and experience a) freedom to make informed choices from among available options
 of services and supports, b) authority to control a defined amount of dollars to purchase
 only what is needed and valued, c) support to nurture informal relationships that might augment, if not replace, some purchased services, and d) responsibility to give back to the community

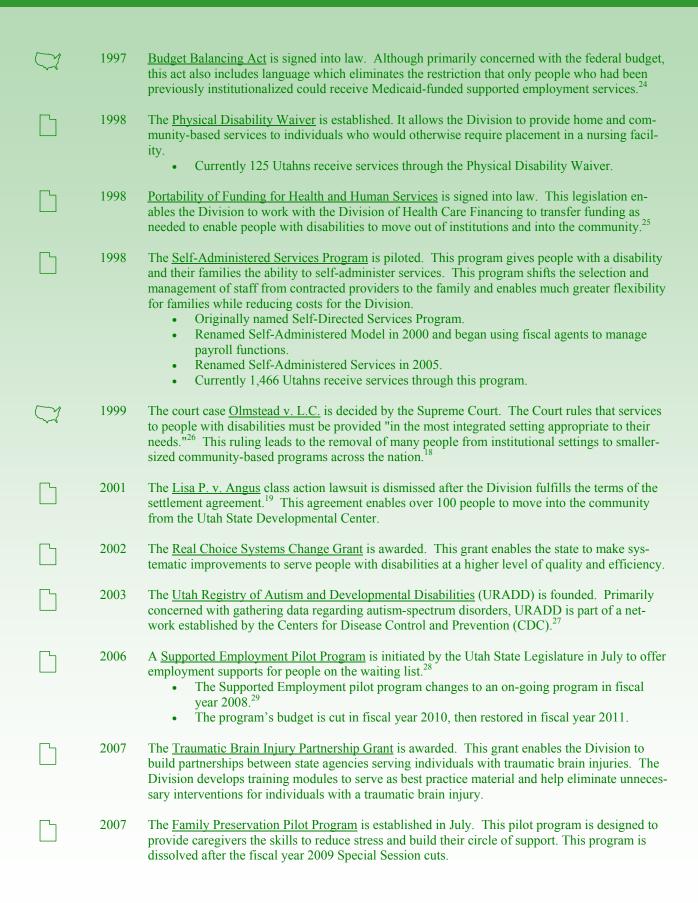
Vision

The Division is working toward a system that:

- Serves Utahns with severe intellectual and physical disabilities and acquired brain injuries who are carefully assessed and determined eligible
- Is fully person-centered, recognizing and building upon a person's strengths
- Values, enhances, reinforces and strengthens a person's natural supports whenever possible
- Establishes services and budgets with an objective, strengths-based assessment tool applied uniformly across the state
- Continually assesses utilization of services to ensure that needs and services match up at every given point in time
- Strives to maximize resources and attempts to eliminate the waiting list
- Creates high quality standards and is diligent in consistently enforcing those standards
- Uses objective data to drive decision making
- Acknowledges and preserves the strengths of our provider network but is constantly pushing for higher quality
- Is responsive to the concerns of parents, advocates and other stakeholders

	1929	 The <u>Utah State Developmental Center</u> is established by the Utah State Legislature.¹ Originally named the Utah State Training School. Received its current name in 1991.² Today it is a state operated Intermediate Care Facility for People with Intellectual Dis-
		abilities (ICF/ID) that serves 206 people with complex disabilities. ³
	1948	MRAU is founded. The volunteers at MRAU are focused on increasing choice through education, support and advocacy on behalf of people with intellectual and developmental disabilities throughout Utah. ⁴
\Box	1963	Mental Retardation Facilities and Community Mental Health Centers Construction Act is signed into law. This legislation funds construction of facilities, research centers, councils and programs for people with developmental disabilities. ⁵
\Box	1965	Medicaid is created with the passage of Title XIX of the Social Security Act. 6
	1967	 The <u>Department of Human Services</u> is organized. Originally named the Department of Health and Welfare. Renamed the Department of Social Services in 1971.² Received its current name in 1990.⁷
	1970	The <u>Developmental Disabilities Services and Construction Act</u> is signed into law. ⁸ This act requires that each state have a planning and advisory council which creates and implements the state's plan for addressing the needs of people with developmental disabilities.
	1971	 The <u>Utah Developmental Disabilities Council</u> is created as a result of the Developmental Disabilities Services and Construction Act.⁹ This council is tasked with advising the governor and legislature on issues affecting Utahns with disabilities. Originally named the Utah Advisory Council for Handicapped and Developmentally Disabled Children. Renamed the Utah Council for Handicapped and Developmentally Disabled Persons in 1976.¹⁰ Renamed the Utah Governor's Council for People with Disabilities in 1994.¹¹ Received its current name in 2006.¹²
	1971	<u>Utah Association of Community Services</u> (UACS) is founded. UACS member businesses contract with the state to provide community-based supports to people with disabilities. ¹³
	1975	The <u>Education for All Handicapped Children Act</u> (EHA) is signed into law. ¹⁴ Schools are no longer allowed to turn away students with disabilities. Instead, they are to design a customized education plan which provides a "free appropriate public education" for each individual student to be provided in the "least restrictive environment" appropriate.
	1978	The <u>Utah Disability Law Center</u> is founded. They focus on advocating for the rights of people with disabilities throughout Utah. 15
	1979	 The <u>Division of Services for People with Disabilities</u> is created. Initially begins as the Office of Handicapped Services at the Division of Health. In 1981, the Department of Social Services creates the Division of Developmental Disabilities and Mental Retardation. These two agencies are merged in 1983 to form the Division of Handicapped Services at the Department of Social Services. Received its current name in 1991.





2008	The <u>Medicaid Infrastructure Grant</u> is awarded. This grant enables the Division to add a staff member dedicated to evaluations and recommendations for customized employment options.
2008	The <u>Respite Pilot Program</u> is established in July. This pilot program is funded by the legislature with one-time funding to provide respite services to 250 families. Entry is frozen after the fiscal year 2009 Special Session cuts.
2008	Independent Support Coordinator Association (ISCA) is organized. Its members include support coordination companies who contract with DSPD.
2010	Two years of budget cuts result in service rate cuts, personnel cuts, privatization of case management functions, and internal reorganization.
2011	The legislature made <u>additional cuts</u> to DSPD administration. The Division receives funding for people to enter services from the waiting list. The supported employment program for people on the waiting list receives ongoing funding.

Footnotes:

- 1. S.B. 51, An Act to Provide for the Establishment, Building and Equipping of the Utah State Training School from the 1929 General Session of the Utah State Legislature.
- 2. H.B. 313, Omnibus Disability Service Act from the 1991 General Session of the Utah State Legislature.
- 3. Department of Human Services. (2006). Utah State Developmental Center. Retrieved September 27, 2010 from http://usdc.utah.gov/
- 4. MRAU. (n.d.). About MRAU. Retrieved September 27, 2010 from http://www.mrau.org/about_mrau.htm
- 5. Mental Retardation Facilities and Community Mental Health Centers Construction Act, 20 U.S.C.A. 611, 612, 613, 617, 618, 676 and 42 U.S.C.A. 291(k), 295-295(e), 2661-2665, 2671-2677, 2681-2687, 2691-2696.
- 6. Social Security Act, Title XIX, 42 U.S.C.A. § 1396 et. seq.
- 7. Division of Archives and Records Services. (2003). Dept. of Human Services Agency History #1116. Retrieved September 27, 2010 from http://archives.utah.gov/research/agencyhistories/1116.html
- 8. Developmental Disabilities Services and Construction Act, 42 U.S.C.A. 2661-2666.
- 9. Executive Order. Governor Calvin Rampton (February 2, 1971).
- 10. Executive Order. Governor Calvin Rampton (July 1, 1976).
- 11. Executive Order. Governor Michael O. Leavitt (February 4, 1994).
- 12. Executive Order. Governor Jon M. Huntsman, Jr. (April 5, 2006).
- 13. Utah Association of Community Services. (2008). Celebrating Our 35 Year History. Retrieved September 27, 2010 from http://www.uacs.org/about.php
- 14. Education for All Handicapped Children Act of 1975, 20 U.S.C.A. § 1401 et seq.
- 15. Disability Law Center. (2010). A Brief History of the Disability Rights Movement. Retrieved September 27, 2010 from http://www.disabilitylawcenter.org/about/a_brief_history_of_dr_movement.html
- 16. U.S. Department of Health and Human Services. (2000). Understanding Medicaid Home and Community Services: A Primer. Retrieved September 27, 2010 from http://aspe.hhs.gov/daltcp/reports/primer.htm
- 17. Brain Injury Association of Utah. (n.d.) Who is BIAU? Retrieved September 27, 2010 from http://www.biau.org/who/who.html
- 18. Utah Parent Center. (2010). About The Utah Parent Center. Retrieved September 27, 2010 from http://www.utahparentcenter.org/ about us.htm
- 19. Utah State Legislature. (2001). Lisa P Settlement Agreement Costs. Retrieved September 27, 2010 from http://www.le.state.ut.us/ audit/01 05ilr.pdf
- 20. Individuals with Disabilities Education Act of 1990, 20 U.S.C.A. § 1401 et seq.
- 21. Americans with Disabilities Act of 1990, 42 U.S.C.A. § 12101 et seq. 22. Access Utah Network. (2010). Retrieved September 27, 2010 from http://www.accessut.state.ut.us/
- 23. Division of Services to People with Disabilities. (2009). Application for a §1915 (c) HCBS Waiver. Retrieved September 27, 2010 from http://dspd.utah.gov/docs/ABI%2016.18.09.pdf
- 24. Budget Balancing Act of 1997. (1997). 105th Congress Public Law 33. Retrieved September 28, 2010 from http://www.gpo.gov/fdsys/pkg/ PLAW-105publ33/html/PLAW-105publ33.htm
- 25. H. B. 372, Portability of Funding for Health and Human Services from the 1998 General Session of the Utah State Legislature.
- 26. State of Utah. (2002). Comprehensive Plan For Public Services in the Most Appropriate Integrated Setting. Retrieved September 27, 2010 from http://www.dhs.utah.gov/pdf/TheOlmstead-Plan.pdf
- 27. Utah Department of Health. (2007). Utah Registry of Autism and Developmental Disabilities. Retrieved September 27, 2010 from http://www.health.utah.gov/autism/
- 28. H.B. 31, Pilot Program for the Provision of Services for People with Disabilities from the 2006 General Session of the Utah State
- 29. H.B. 45, Supported Employment Services to a Person with a Disability from the 2008 General Session of the Utah State Legislature.

People Served and Waiting

<u>People Served Fiscal Year 2011:</u>
--

Home and Community Based Services (HCBS)	
Medicaid Funded	
Acquired Brain Injury Waiver	110
Community Supports Waiver	4,476
Physical Disabilities Waiver	125
Total Medicaid Funded	4,711
Non-Medicaid Funded	
Acquired Brain Injury	5
Community Supports	64
Physical Disabilities	25
Total Non-Medicaid Funded	94
Total HCBS	4,805

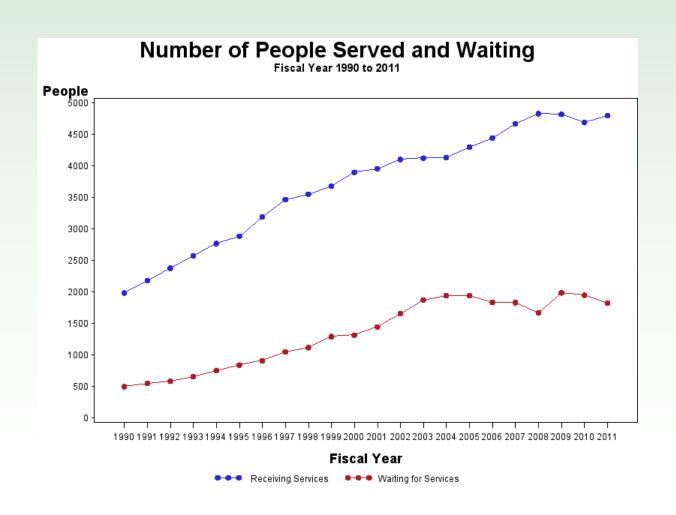
Utah State Developmental Center 206	
-------------------------------------	--

Total Served Fiscal Year 2011: 5,011

People Waiting Fiscal Year 2011:

Waiting List	
Acquired Brain Injury	70
Intellectual Disabilities/ Related Conditions	1,715
Physical Disabilities	40

Total People Waiting Fiscal Year 2011: 1,825



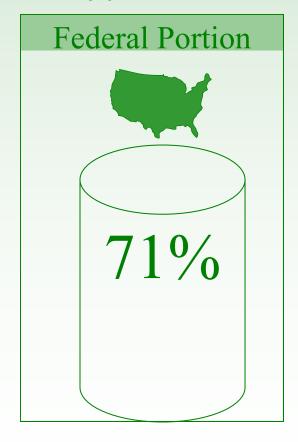
Budget Overview

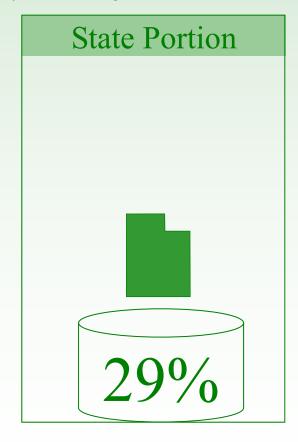
\sim		D 1	
()1	nerating	Rud	oets
\sim	perating	Dud	500

Category	Actual 2010	Actual 2011	Authorized 2012
Administration	\$ 3,779,900	\$ 2,967,500	\$ 3,132,400
Service Delivery	\$ 9,161,700	\$ 6,988,400	\$ 6,396,700
Utah State Developmental Center	\$ 38,532,400	\$ 32,015,600	\$ 34,002,600
Community Supports Waiver	\$140,075,700	\$151,270,400	\$146,877,400
Acquired Brain Injury Waiver	\$ 2,385,200	\$ 2,793,900	\$ 2,947,700
Physical Disabilities Waiver	\$ 2,027,200	\$ 1,920,300	\$ 1,850,900
Non-Medicaid Waiver Services	\$ 2,493,000	\$ 1,424,700	\$ 1,559,400
Total	\$206,168,900	\$199,380,800	\$196,767,100

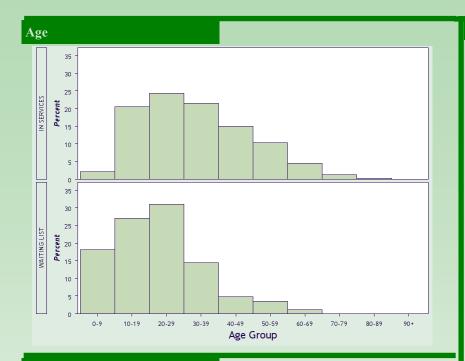
Federal Medical Assistance Percentage (FMAP)

For the majority of DSPD services, state dollars receive matching Federal funds. Payments for Medicaid waiver participants are made at a ratio of roughly 2.4: 1 Federal: State. That means, that for every dollar Utah invests in services for people with disabilities, Medicaid contributes roughly \$2.40 in matching Federal dollars.





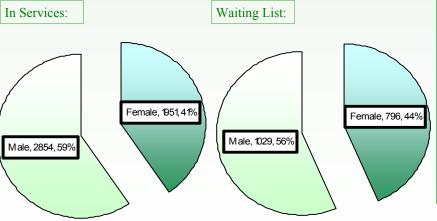
Demographics



Race/Ethnicity

Race/Ethnicity	IN SERVICES	WAITING LIST	Total
White	4,073 (84.77%)	1,377 (75.45%)	5,450
Hispanic/Latino	450 (9.37%)	158 (8.66%)	608
Other/Unknown	87 (1.81%)	237 (12.99%)	324
Asian/Pacific Islander	62 (1.29%)	25 (1.37%)	87
Black/African American	60 (1.25%)	22 (1.21%)	82
American Indian	73 (1.52%)	6 (0.33%)	79
Total	4,805	1,825	6,630

Gender



Functional Limitations

To be eligible for DSPD services, people aged seven years and older must have at least three documented functional limitations in seven designated areas. Twenty five people were under age seven, considered too young to have functional limitations determined.

Acquired Brain Injury

Functional Limitation	People
Memory or cognition	110
Activities of daily life	96
Judgment and self-protection	107
Control of emotion	77
Communication	53
Physical health	52
Employment	113

People receiving services due to an acquired brain injury most commonly have 5 functional limitations. (n = 115)

Community Supports

Community Supports	
Functional Limitation	People
Self-care	3,101
Language	2,372
Learning	4,190
Mobility	1,076
Self-direction	4,283
Capacity for independent living	4,440
Economic self-sufficiency	3,478

People receiving services due to an intellectual disability or related condition most commonly have 4 functional limitations. (n = 4,515)

Physical Disabilities

Functional Limitation	People
Self-care	150
Language	11
Learning	1
Mobility	150
Self-direction	4
Capacity for independent living	145
Economic self-sufficiency	28

People receiving services due to a physical disability most commonly have 3 functional limitations. (n = 150)

Diagnoses

	Waiting List		In Ser	In Services	
Intellectual Disabilities	#	%	#	%	#
Mild Mental Retardation	464	25.42	1666	34.67	2130
Moderate Mental Retardation	241	13.21	874	18.19	1115
Severe Mental Retardation	46	2.52	525	10.93	571
Profound Mental Retardation	39	2.14	499	10.39	538
Unspecified Mental Retardation	212	11.62	84	1.75	296
Related Conditions					
Infantile Autism, Current Or Active State	200	10.96	410	8.53	610
Infantile Cerebral Palsy, Unspecified	109	5.97	198	4.12	307
Down Syndrome	148	8.11	56	1.17	204
Epilepsy, unspecified, without mention of intractable epilepsy	20	1.1	41	0.85	61
Pervasive Developmental Disorders	19	1.04	27	0.56	46
Chromosomal Anomalies	27	1.48	11	0.23	38
Spina bifida without mention of hydrocephalus, unspecified region	16	0.88	15	0.31	31
Infantile Autism, Residual State	13	0.71	7	0.15	20
Intracranial Injury Of Other And Unspecified Nature	4	0.22	15	0.31	19
Prader-Willi Syndrome	9	0.49	8	0.17	17
Microcephalus	10	0.55	3	0.06	13
Other Specified Infantile Cerebral Palsy	5	0.27	7	0.15	12
Encephalopathy, Not elsewhere classified	7	0.38	4	0.08	11
Other	137	7.26	130	2.61	267
Acquired Brain Injury					
Postconcussion Syndrome	6	0.33	25	0.52	31
Intracranial Injury Of Other And Unspecified Nature, Without	9	0.49	14	0.29	23
Anoxic Brain Damage	7	0.38	14	0.29	21
Personality Change Due To Conditions Classified Elsewhere	2	0.11	10	0.21	12
Other	46	2.43	52	1.04	98
Physical Disability					
Quadriplegia and Quadriparesis	5	0.27	19	0.4	24
Infantile Cerebral Palsy, Unspecified	9	0.49	14	0.29	23
Quadriplegia, C5-C7, incomplete	3	0.16	15	0.31	18
Multiple Sclerosis	4	0.22	13	0.27	17
Quadriplegia, C5-C7, complete	0	0	15	0.31	15
Quadriplegia, unspecified	3	0.16	10	0.21	13
Other	17	0.88	65	1.31	82

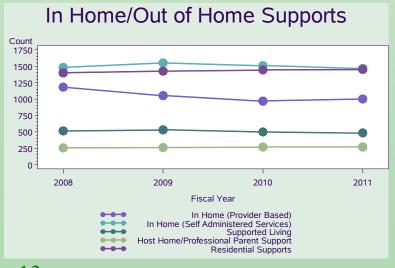
Array of Services

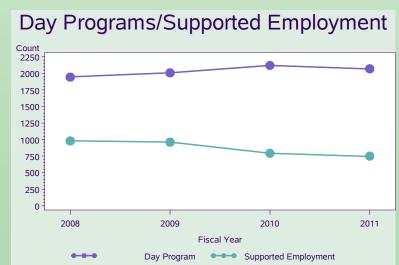
Utilizing which Services?	Supported	Day				
	Employment	Program	Neither	Total		
Case Management Only	0	0	128	128		
In Home (Provider Based)	197	449	356	1002		
In Home (Self Administered Services)	65	316	1085	1466		
Supported Living	197	103	186	486		
Host Home/Professional Parent Support	22	168	80	270		
Residential Supports	268	1034	151	1453		
Total	749	2070	1986	4805		

Average Cost*	Supported Employment	Day Program	Neither**	Overall
Case Management Only	Not Applicable	Not Applicable	\$198.98***	\$198.98
In Home (Provider Based)	\$11,385.88	\$16,011.95	\$7,150.62	\$11,457.96
In Home (Self Administered Services)	\$15,660.51	\$20,126.54	\$11,987.33	\$14,001.57
Supported Living	\$22,277.90	\$27,041.14	\$17,199.35	\$21,401.27
Host Home/Professional Parent Support	\$53,214.42	\$54,061.84	\$48,340.97	\$52,599.77
Residential Supports	\$56,705.48	\$72,609.14	\$66,889.77	\$69,071.91

^{*}Average cost for all supports after classification of people into 5 X 3 different service packages

^{***}Typically one month of supports for people transitioning from waiting list into services. Because service was delivered using existing state resources, no additional costs were incurred.





^{**}Includes children who receive supports from their school or adults who decline to participate in a supported employment or day program.

Waiting List

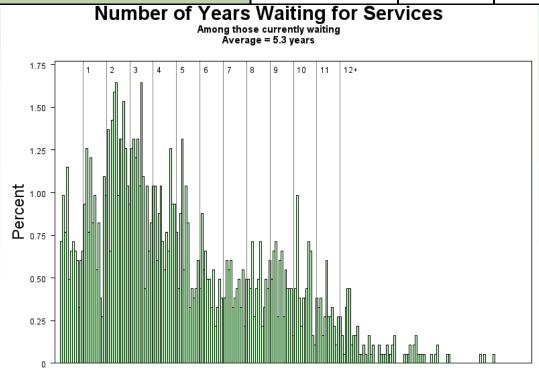
Four Year Historic Waiting List Fluctuation

State Fiscal Year Period	2008	2009	2010	2011
Additions	408	446	269	255
Removals				
Funded	236	110	42	216
Deceased	11	5	7	15
Institutionalized	15	8	12	17
Could Not Locate*	29	54	217	81
No Longer Eligible**	67	31	31	20
No Longer Interested***	83	31	18	23
Other	16	6	8	18
Total Removals	457	245	335	390
Net Change	-49	201	-66	-135

^{*}Despite three attempts by DSPD employee

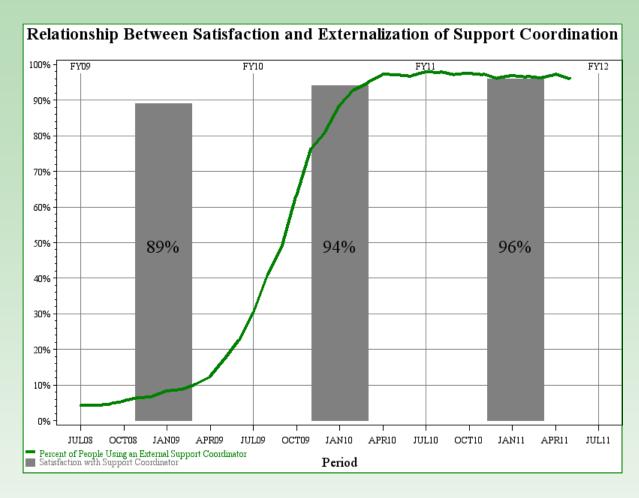
^{***}Due to a change in need or lack of desire to continue waiting

Waiting for which Services?						
	Supported Employment		Neither	Total		
In Home Support/Respite	117	126	183	426		
Personal Assistance/Supported Living	259	132	845	1236		
Host Home/Professional Parent Services	2	2	9	13		
Residential Services	79	42	29	150		
Total	457	302	1066	1825		



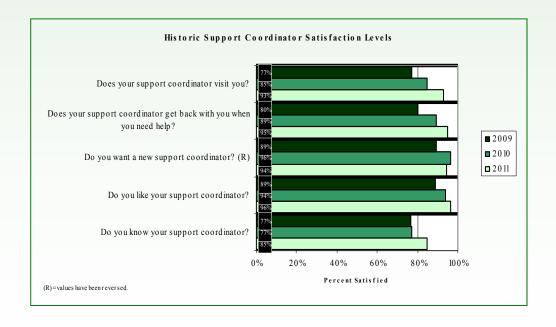
^{**}Due to change in state residency or other eligibility requirement

Privatizing Support Coordination



By far the most dramatic shifts in Division personnel and organizational structure came as a result of the privatization of Support Coordination. Although privatization had already begun, it accelerated dramatically in the first half of fiscal year 2010. The proportion of private support coordinators went from about 4% in July 2008 to over 96% by June 2010. A few State-employed **Support Coordinators** have been retained to manage transition cases and administer objective needs assessments.

Objective measurement of consumer satisfaction interview data were compared before and after the changes were made. Satisfaction with Support Coordination improved in all areas following the switch from state to private support coordination.



Division Reorganization

Administration

Since the end of fiscal year 2005, the Division has gone from seven to two full-time upper-management staff. At the end of fiscal year 2010, the Central Region Director and an Assistant Director announced their retirements. The Division then reorganized under one Assistant Director over programming and one Assistant Director over administration. An assistant director vacancy was left unfilled in April 2011 leaving two upper management positions, a reduction of nearly 25%.

	<u>2005</u>		2006 through 2009		<u>2010</u>		<u>2011</u>
	Eastern Director						
	Western Director	Souther	n Director			_	
	Northern Director	Norther	n Director		North/South Director		
	Central Director	Central	Director		Central Director		
	Assistant Director	Assista	nt Director		Assistant Director		Assistant Director
	Assistant Director	Assista	nt Director		Assistant Director		
	Division Director	Divisio	n Director		Division Director		Division Director
Positions:	7	· · · · · · · · · · · · · · · · · · ·	6	<u> </u>	5		3

Regional Office Closures

When legislative budget cuts led to voluntary externalization of support coordinators, DSPD was able to realize some cost savings in office closures. The map shows all DSPD regional offices at the beginning of fiscal year 2009 and which offices have been vacated to date.

Offices Vacated 2009 (8) American Fork **Brigham City** Bountiful Spanish Fork Holladay Richfield Park City Cedar City ▲ Offices Vacated 2010 (7) Ogden Nephi Tooele Delta Heber Moab Blanding Offices Vacated 2011 (1) Logan Offices Remaining (7) Clearfield Manti Salt Lake St. George Vernal Provo Price



Supports Intensity Scale

Frequently Asked Questions

What is the Supports Intensity Scale?

The Supports Intensity Scale (SIS) is the assessment used by DSPD to measure how much support a person needs. This tool is a product of a national organization, the American Association on Intellectual and Developmental Disabilities (AAIDD). While other assessments emphasize a person's deficits, the SIS is unique in that it measures how much support a person needs in various aspects of their lives. For more information about the SIS visit: http://www.siswebsite.org/

Who administers the SIS?

DSPD currently has state employees who are trained and certified SIS raters that are able to administer the assessment.

How many states are currently using the SIS?

Most recent tallies show 17 states are using the SIS at the state level. An additional 7 are using the SIS at the substate level (county or provider). An additional 5 states are considering using the SIS in the near future.

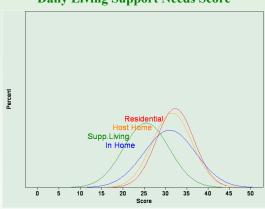
What does DSPD use the SIS for?

The division has been using the SIS to aid in the development of each Person Centered Support Plan (PCSP) since 2006. The SIS is integrated with the division's information system and is a critical component of the planning process. The division has also used the SIS in analysis to explore and understand characteristics of different populations.

SIS Scores

A higher SIS score in these three domains indicates a greater need for more intensive services. The charts below show score frequencies between settings in each of the three domains. A more intensive setting (i.e. residential services) appears to be associated with greater intensity of SIS service needs score, particularly in the domain measuring intensive behaviors.

Daily Living Support Needs Score



Medical Needs Score

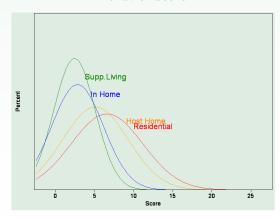
Supp.Living

Residential

Host Home

In Home

Behavior Score



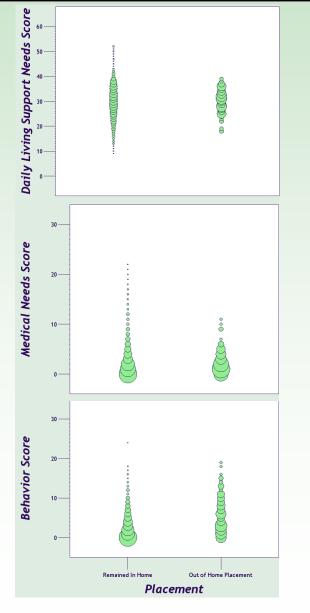
Predicting Support Needs

Out of Home Placements

2,497 people currently over age 16 were receiving in home services in 2008 and were still receiving services in 2011. Those who required out of home placement within the 3 years (164 people), tended to have higher behavior scores on average. This suggests that SIS data can be useful in projecting future service demand.

Mean Scores

Placement	N	Daily Living Needs	Medical	
Remained	2,333	29.88	2	3
In Home				
Out of Home	164	30.26	2	5

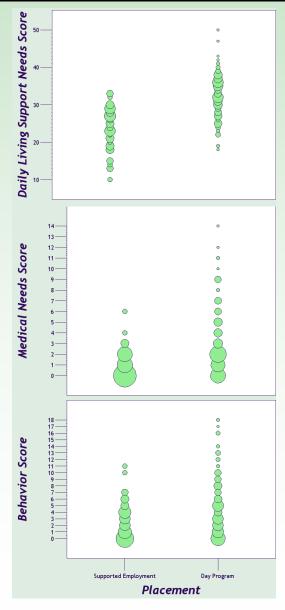


Transitioning from School Supports

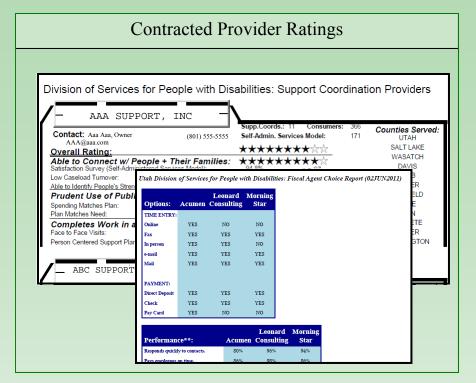
235 people currently over age 16 were receiving neither day nor supported employment services in 2008, and began receiving those services within 3 years. Those who required a day program over supported employment had higher needs scores on average in all three assessed areas. This also suggests that SIS data can be useful in projecting future service demand for these services.

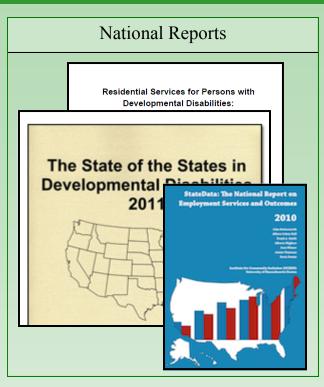
Mean Scores

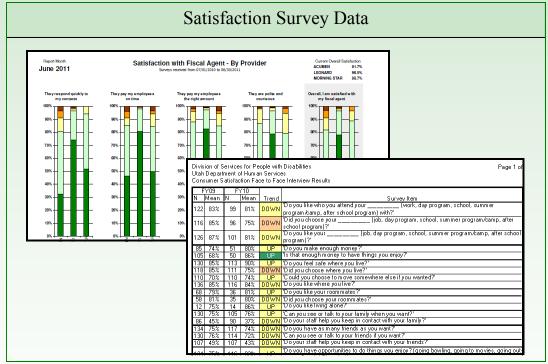
	Placement	N	Daily Living Needs	Medical	
ľ	Supported	50	23.78	1	3
	Employment				
	Day Program	185	32.26	3	5



Comprehensive performance measures available online and updated throughout the year.









Visit:

http://www.dspd.utah.gov/reports_main.htm