

## 2022-23 DATA AT A GLANCE

### **NEBRASKA**

#### **DESCRIPTION OF THE SAMPLE**

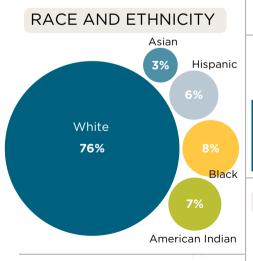
#### INTRODUCTION

The survey data in this summary represent the population of adults with intellectual and developmental disabilities (IDD) receiving at least one service in addition to case management/ service coordination from their state developmental disability service system. For details, visit: https://bit.ly/NCIFAQs

#### SAMPLE SIZE

**420** respondents

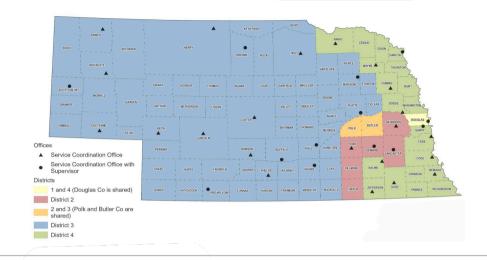
## 42 years old (average) 41% Female 59% Male





#### Human Services HSRI Research Institute

#### NEBRASKA SERVICE COORDINATION DISTRICTS



#### **RESIDENCE TYPE & LOCATION**





**54%** Metropolitan

15% Micropolitan

24% Small town

**6%** Rural

#### LEVEL OF GUARDIANSHIP



#### **DIAGNOSIS**

100%		Intellectual Disability
22%		Autism Spectrum Disorder
23%		Seizure disorder
14%	Cerebral palsy	
10% Down Syndrome		
Note: Diagnoses are not mutually exclusive		

**University of Nebraska** 

Medical Center

# 19%

Moves self with aids or uses wheelchair, while **81%** move without use of aids





## 2022-23 DATA AT A GLANCE

#### NFRRASKA

#### **OUTCOMES\***

#### **EMPLOYMENT**

**Employment is an important outcome** for many services users, and a key signal of how well systems support people to have full access to their communities.

In Nebraska, just 31% of respondents have a paid job in the community. Those who work in paid community jobs spend, on average, less than 10 hours per week in those jobs.

Among those who do not have a paid community job, over one third want a job. However, just 31% of all respondents have a goal for employment in their service plan. These data show systems can make lots of improvements to support service users in obtaining employment and ensuring personcentered plans reflect people's goals.

31% 36% have a paid job in the do not have community a community job, but want one



#### CHOICE AND DECISION-MAKING Person chose or had some input Who chose... Someone else chose 95% Your regular day activities 74% The place you live The people you live with 65% 20 40 60 80 100

74% of respondents chose their staff or their staff are assigned but respondent can request a change

#### RIGHTS AND RESPECT

84%

Report that others ask before coming in their bedroom

38%



Report they can stay home if others go out (for those not living in own home or apartment)

#### SATISFACTION

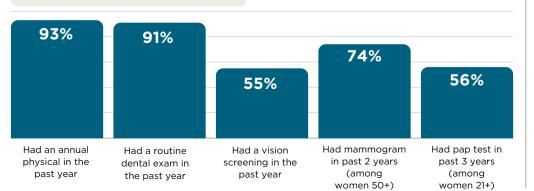
84% Like how they usually spend their time during the day

 $\textbf{54\%} \overset{\text{Have used telehealth and}}{\text{like using it}}$ 



The average respondent says they are satisfied with their level of participation in 5 out of 5 community activities (e.g., go shopping, go out for entertainment).

#### ACCESS TO HEALTH CARE



<sup>\*</sup> Note: NCI includes data on a variety of outcomes of service users. Data from key outcomes are presented here.



## 2022-23 DATA AT A GLANCE

#### NFBRASKA

#### **OUTCOMES\***

#### INCLUSION AND ACCESS TO COMMUNITY



69%

are able to get places when they want to do something fun outside the home



69%

get to do things they like to do in the community as often as they want



80%

has friends (may be staff or family) and can meet with their friends in person when they want



27%

want to be a part of more groups in their community

Access to the community is considered a key feature of home and community-based services. It is also connected to inclusion and belonging for people who use services.

Looking at NCI-IDD outcomes related to access to community and broader feelings of inclusion, more than 2 out of every 3 respondents say they have transportation, can do things in the community as often as they want, and have friends they can meet with.

These data suggest that there is still room to improve community engagement. It is important for LTSS systems to identify barriers to community access and participation.



Scan here for more information about the Nebraska NCI-IDD Survey results.

#### SERVICE COORDINATION SELF-DIRECTION

People who use Medicaid funded HCBS have a right to a person-centered service plan. Several NCI-IDD outcomes examine person-centered planning and service coordination. These data highlight areas of opportunity to strengthen methods for person-centered planning and enhancing opportunities for self-direction.

say their service plan includes things that are important to the person

83%

say they helped make their service

83%

say staff do things the way the person wants them done

56%

say their staff change too often

7%



use a self-directed supports option

#### Who makes decisions about the services that are self-directed?

Person has Input 75%

Someone else decides 14%