

NCI Child Family Survey State Outcomes

Texas Report

2015-16 Data

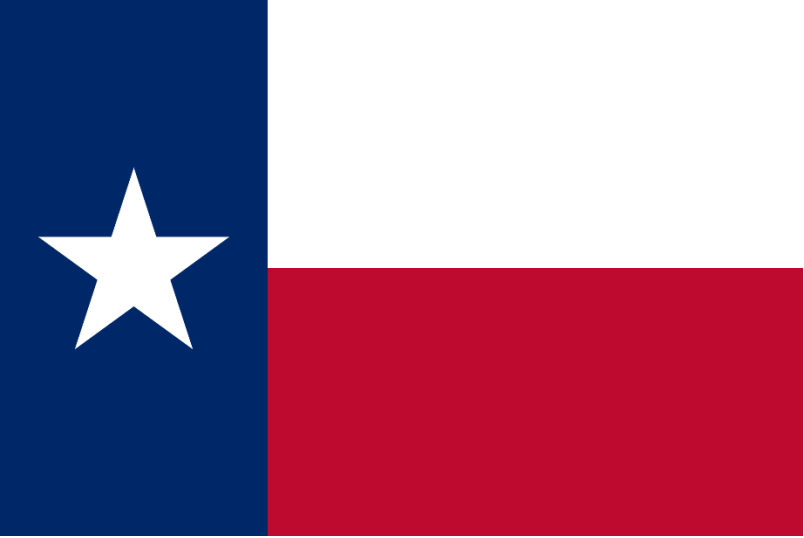


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What is NCI?

The National Core Indicators (NCI) program is a voluntary effort by state developmental disability agencies to track their performance using a standardized set of consumer and family/guardian surveys with nationally validated measures. The effort is coordinated by the National Association of State Directors of Developmental Disabilities Services (NASDDDS) and the Human Services Research Institute (HSRI).

NCI has developed more than 100 standard performance measures (or ‘indicators’) that states use to assess the outcomes of services for individuals and families, including outcomes in the areas of employment, rights, service planning, community inclusion, choice, health, and safety. In 2015-16 a total of 45 states, the District of Columbia, and 22 sub-state entities were participating in NCI.

What is the NCI Child Family Survey?

The NCI Child Family Survey is used to gather data on family outcomes. It is mailed to families who have a child in the family home who receives services from the State DD Agency.¹ The survey collects demographic information on both the child and the person who fills out the survey (the ‘respondent’; usually a parent) as well as information on services and supports received. The survey is continually refined and tested to ensure that it is valid and reliable.

In 2015-16, a total of 16,999 Child Family Surveys were completed across eight states.² The survey contained six groupings of questions (“sub-domains”) that probe specific areas of quality service provision: information and planning, access and delivery of services, choice and control, community connections, satisfaction, and outcomes (see Table 1 on the following page). Respondents also had the option of writing open-ended comments concerning their family’s participation in the service system.

¹ Some states include families with a child up to age 22 if s/he receives services as a child through the state.

² States that conducted the CFS in 2015-16 were: CA, IN, NC, OR, SD, TX, UT, and VA.

Table 1. NCI Family Survey – sub-Domains and concern statements

Sub-Domain	Concern
Information and Planning	Families/family members with disabilities have the information and support necessary to plan for their services and supports.
Access & Support Delivery	Families/family members with disabilities get the services and supports they need.
Choice, Decision Making & Control	Families/family members with disabilities determine the services and supports they receive and the individuals or agencies who provide them.
Involvement in the Community	Family members with disabilities use integrated community services and participate in everyday community activities.
Satisfaction	Families/family members with disabilities receive adequate and satisfactory supports.
Outcomes	Individual and family supports make a positive difference in the lives of families.

How were people selected to participate?

States were asked to administer the Child Family Survey by selecting a random sample of at least 1,200 families, all of whom had a child³ with a developmental disability living at home and receiving at least one direct service or support other than service coordination.

All states mailed out a paper survey to families selected in their sample. A sample size of 1,200 was recommended with the expectation of a 40% return rate or greater (yielding 400 or more usable responses per state). However, most states decided to sample more than 1,200 families, expecting a lower response rate than 40%. A final sample size of 400 would guarantee a +/- 5% margin of error and a 95% confidence level when interpreting the results. Both the confidence interval and margin of error used are widely acceptable standards for reviewing results, regardless of population size. States with fewer than 1,200 potential respondent families were

³ In some states, up to age 22 if receiving services as a child.

instructed to send surveys to all eligible families. With response rates lower than expected, we also included in our national reports those states that submitted fewer than 400 surveys up to a margin of error of no greater than +/- 7%.

Limitations of the data

The NCI Child Family Survey is a tool for assessing system-wide performance. It is not intended to be used to monitor individuals or providers. The NCI Statewide Average should not be interpreted as defining or providing a benchmark for “acceptable” levels of performance or satisfaction. Instead, it describes average levels of performance or satisfaction across the State; it is up to public managers, policy-makers, and other stakeholders to use the data to determine programmatic and policy-related priorities.

Note on Texas Analysis

Weighting was performed for one state’s estimates – TX. Texas selected a representative sample of the programs in their state so that each program could be examined individually. Applying statistical weights adjusted for the fact that some programs were over-represented in the sample and some were under-represented. Weights were developed using the sample proportions and the true population proportions of each program. The programs in question are: a.) CLASS b.) HCS c.) MDCP d.) TXHML Texas’ estimates throughout the report are thus weighted estimates. The counts (Ns) are unweighted. For more information on Texas’ mode of survey administration, see section entitled: “Sampling & Administration” in this report.

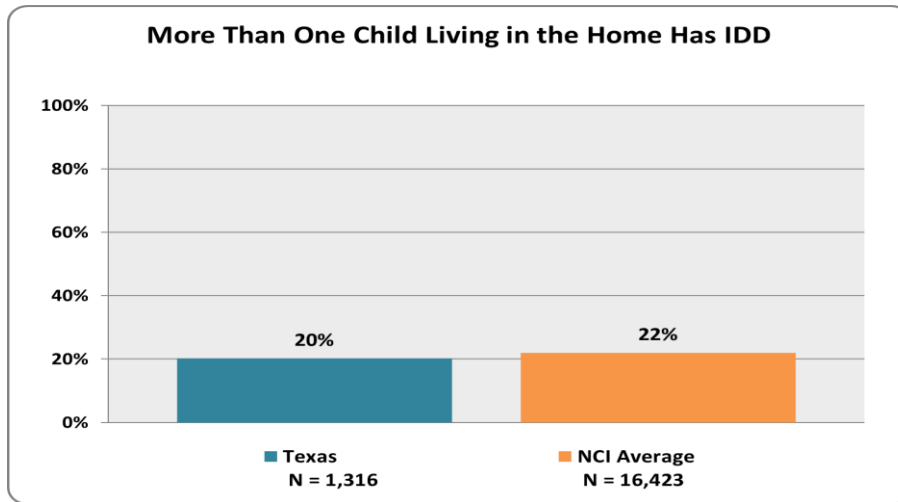
What is contained in this report?

This report illustrates 2015-16 NCI Child Family Survey demographic and outcome results from Texas compared to the NCI Average (the average of all other state averages). All results are shown in chart form. States with less than 20 responses to a particular question were excluded from analysis for that question. The number of responses per each question by state and across NCI states are included in each chart. All state and national data results for this survey can be found online at <http://www.nationalcoreindicators.org/resources/reports/>.

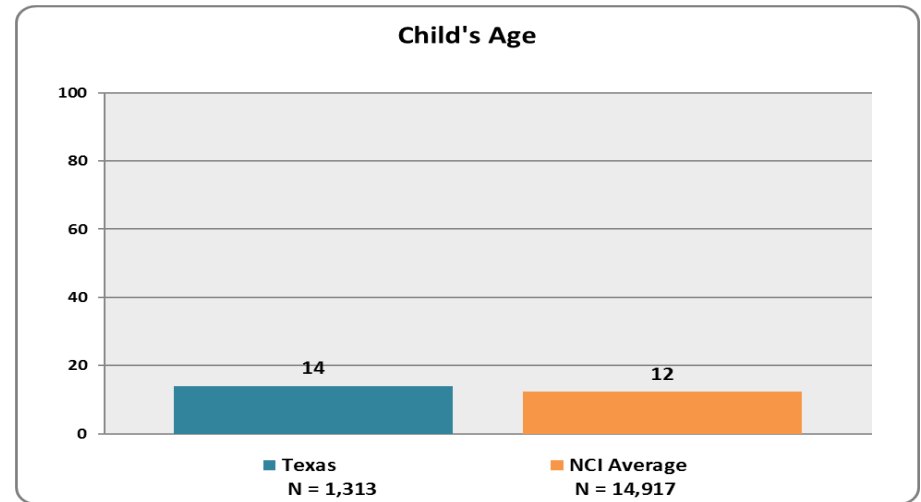
Results: Demographics of the Child

ILLUSTRATES THE DEMOGRAPHIC PROFILE OF CHILDREN RECEIVING SERVICES FROM THE STATE

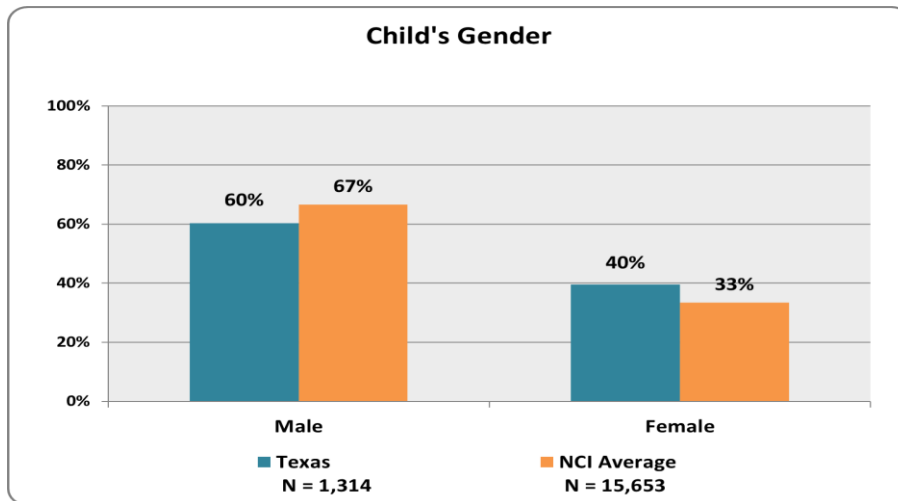
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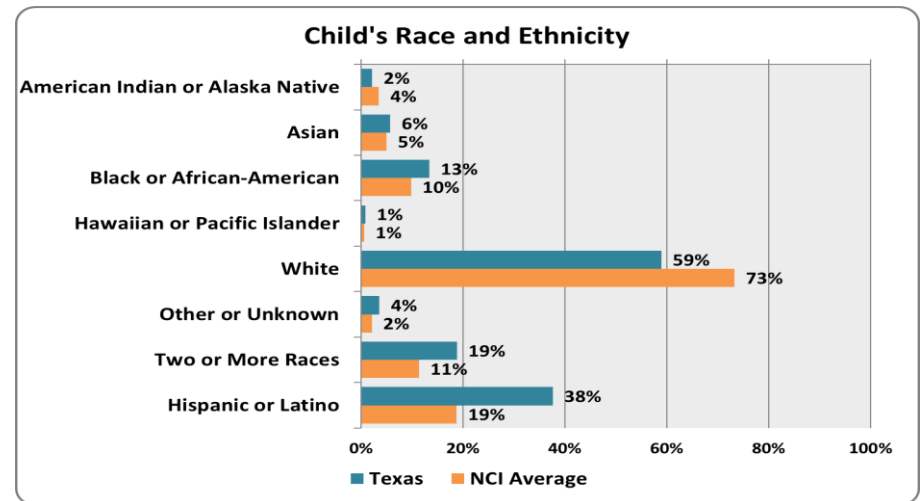
GRAPH 2.



GRAPH 3.

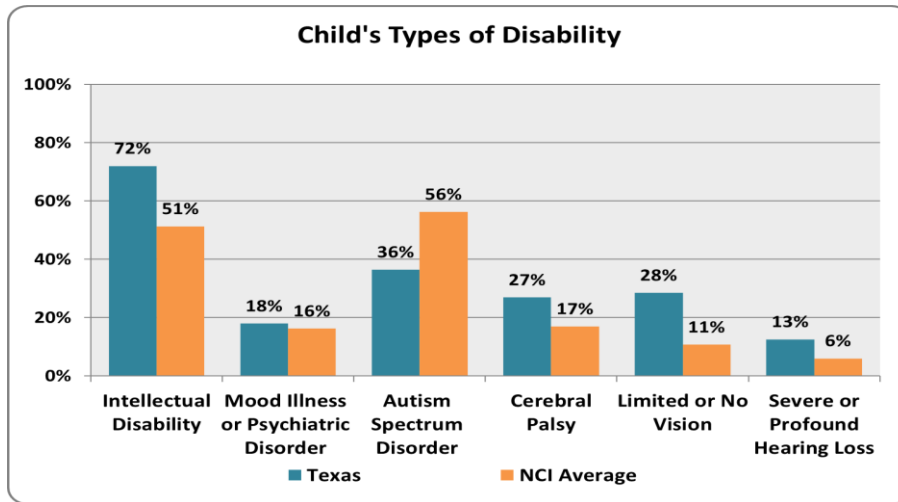


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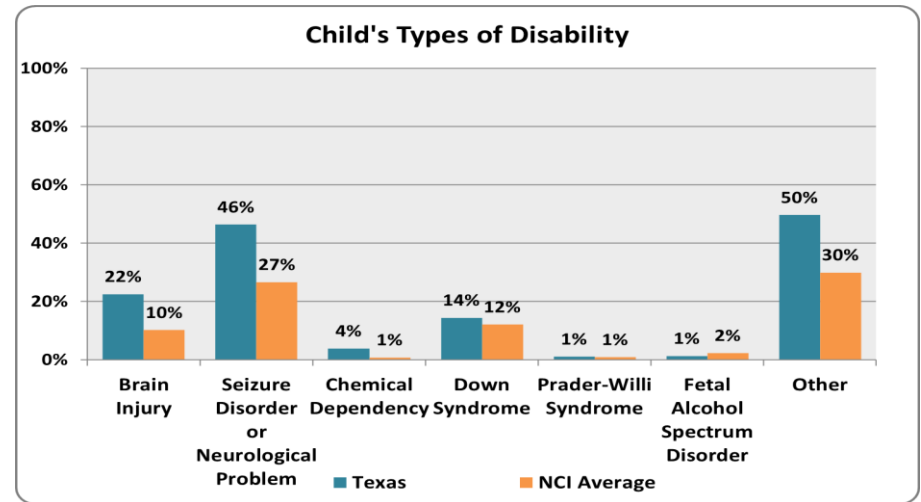


*Race and Ethnicity groups are not mutually exclusive; two or more races category indicates the percentage of cases in which the respondent selected two or more races/ethnicities. The results from this column are not excluded from the results on specific race/ethnicities

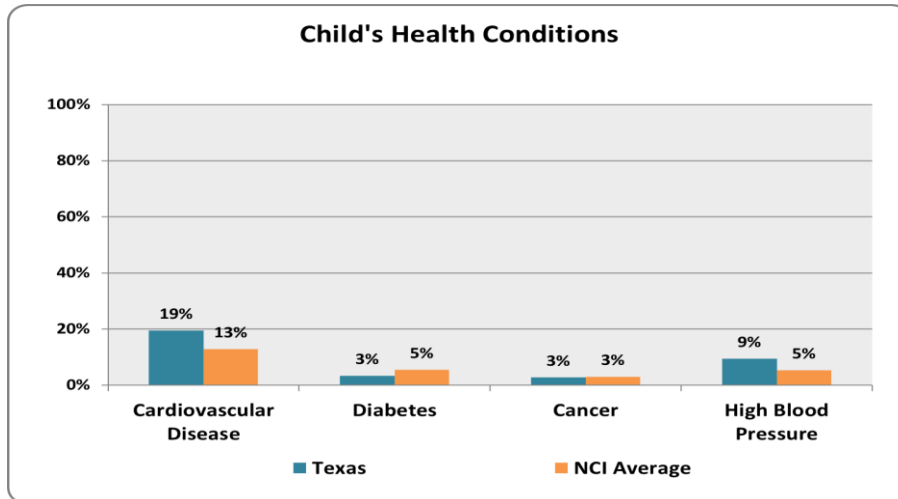
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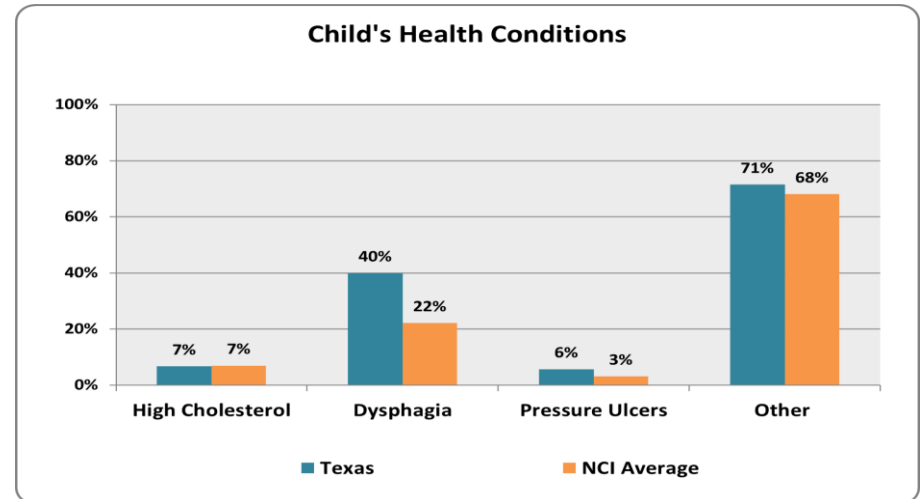
GRAPH 6.*



GRAPH 7.**



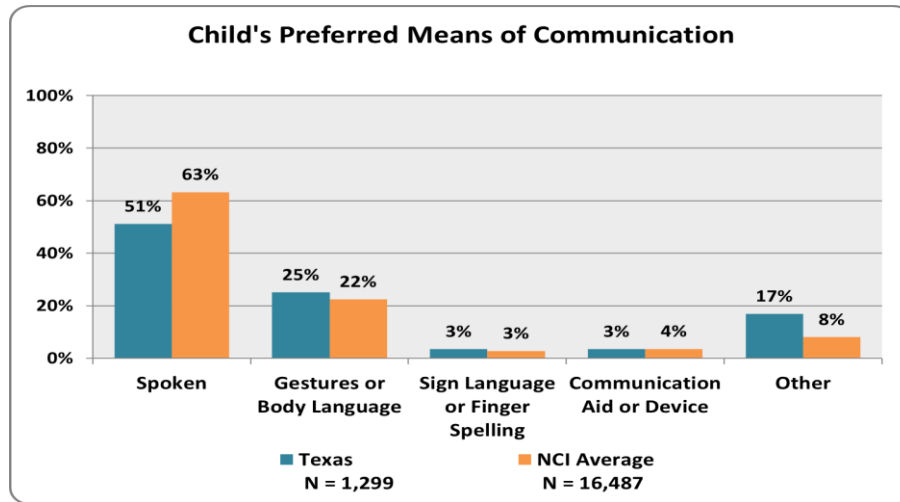
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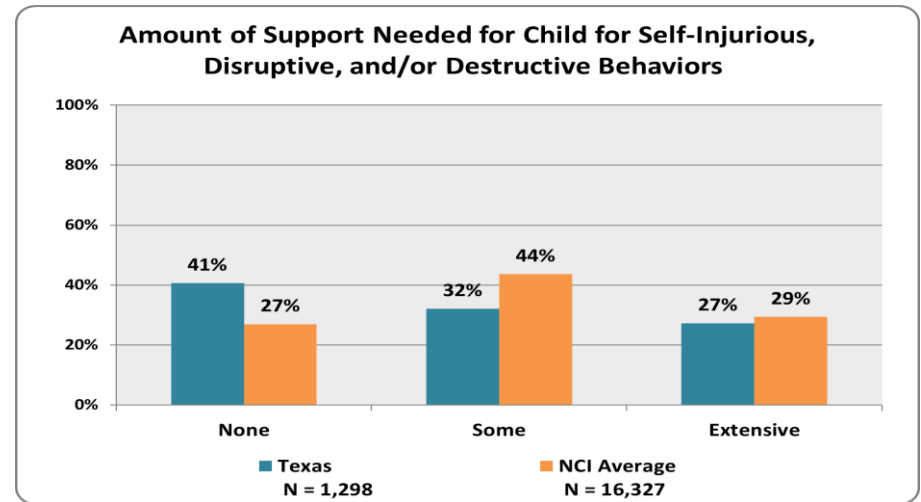
*Disability categories from Chart 5 and Chart 6 are not mutually exclusive; N's are not displayed as they may vary by disability type

**Health Conditions from Chart 7 and Chart 8 are not mutually exclusive; N's are not displayed as they may vary by health condition

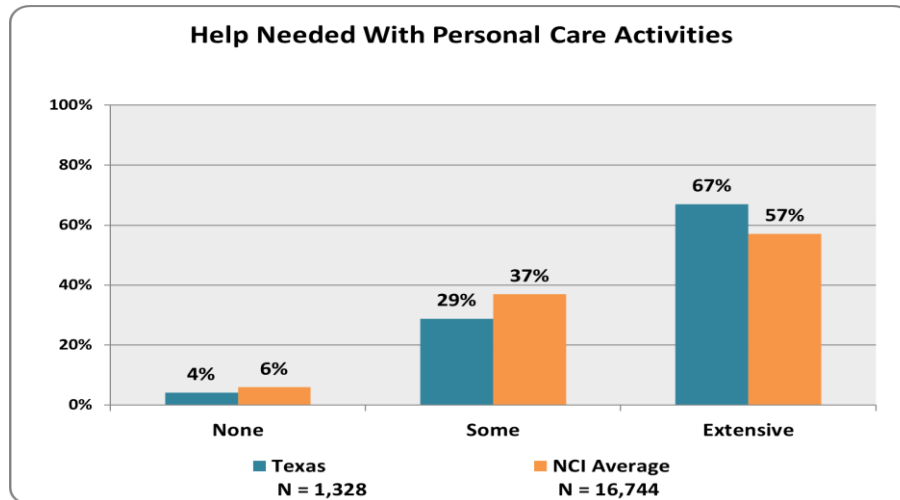
GRAPH 9.



GRAPH 10.



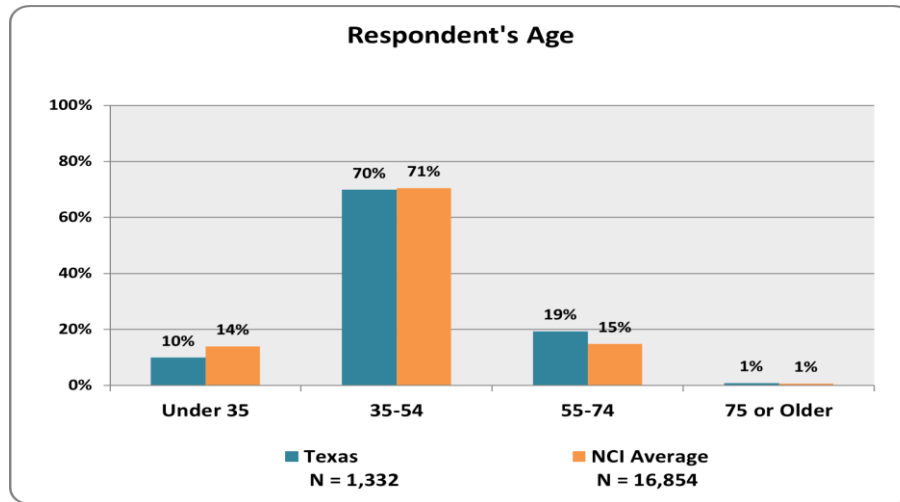
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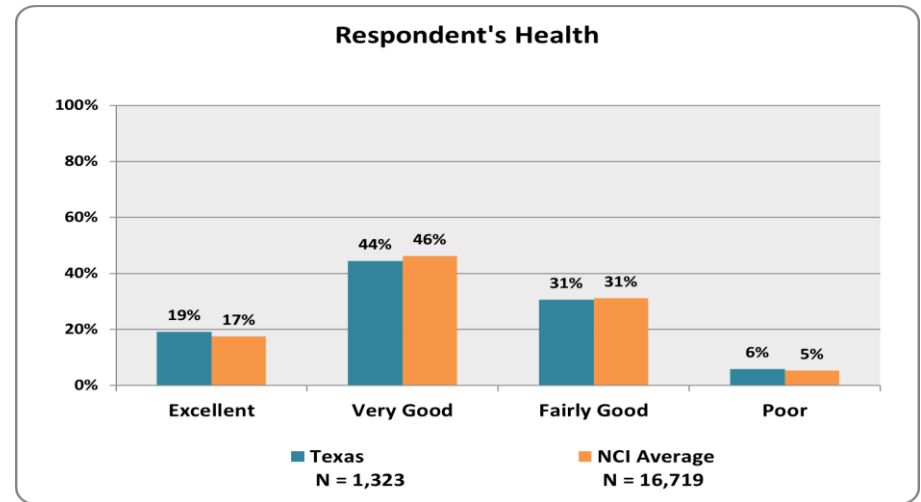
Results: Demographics of Respondent

ILLUSTRATES THE DEMOGRAPHIC PROFILE OF THE SURVEY RESPONDENTS

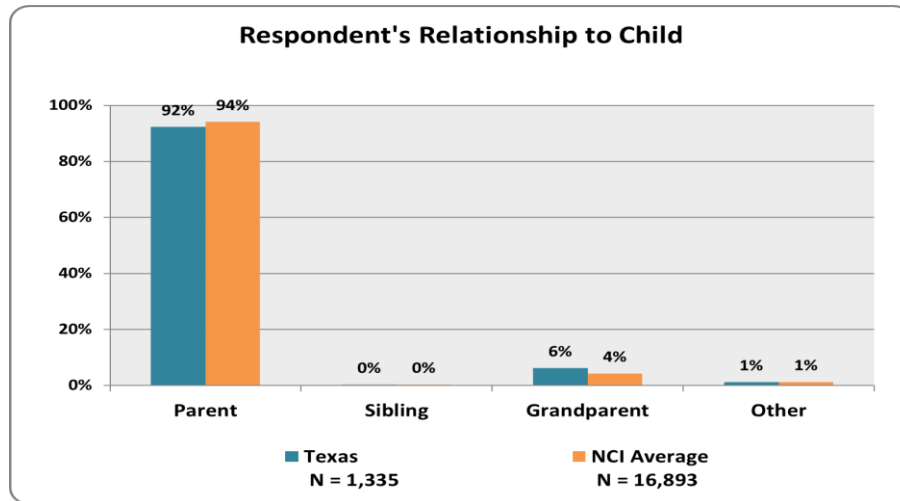
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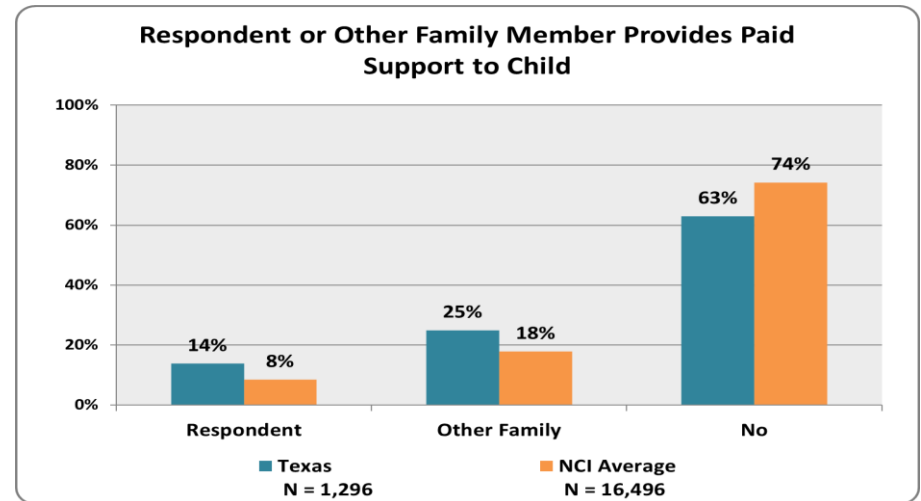
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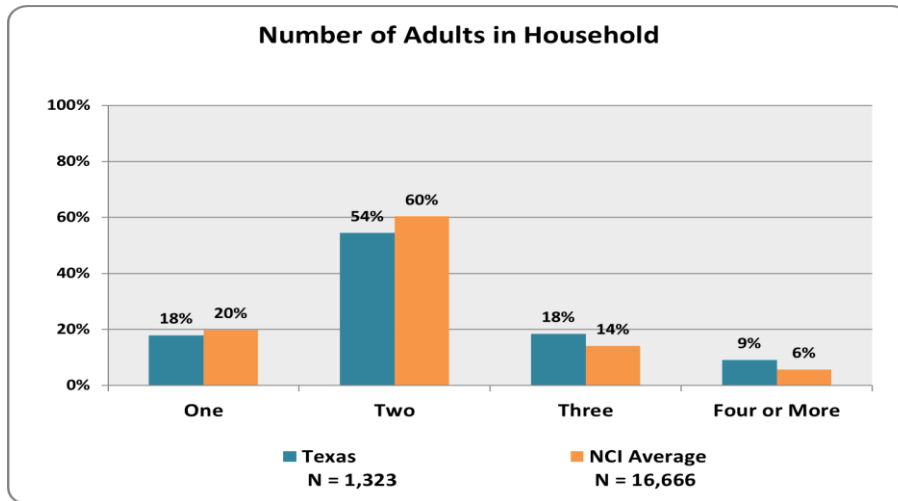
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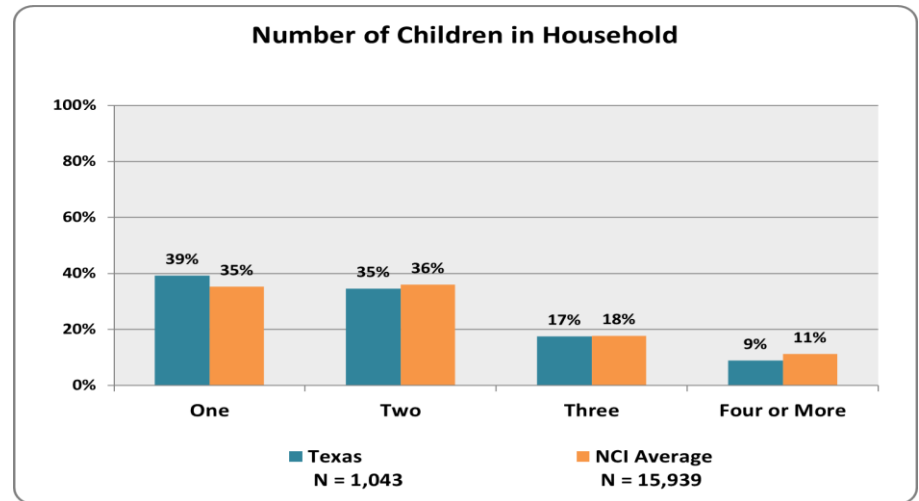
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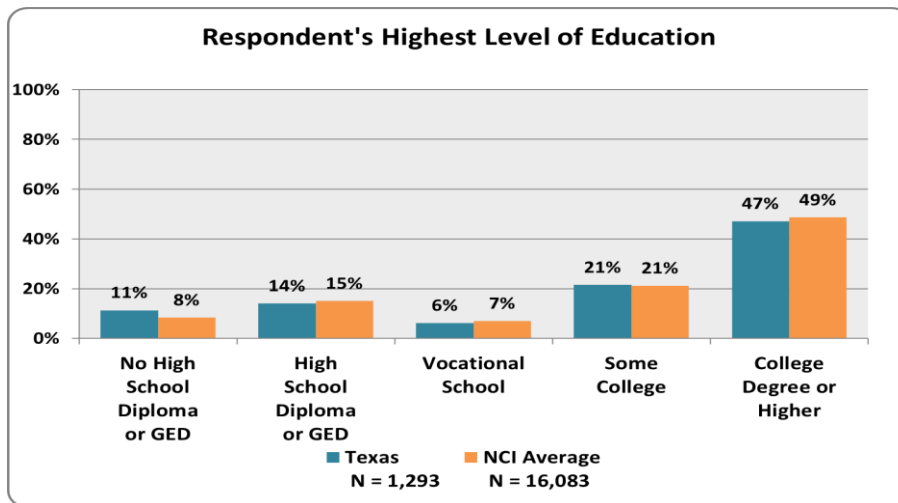
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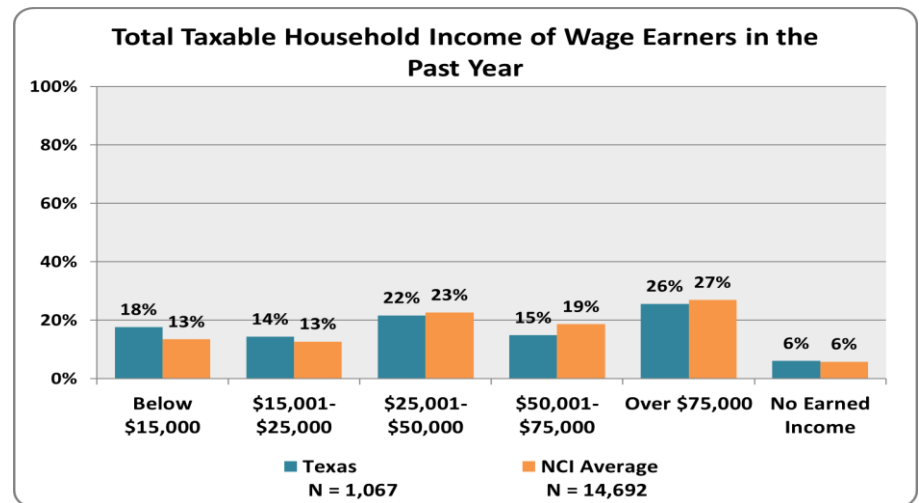
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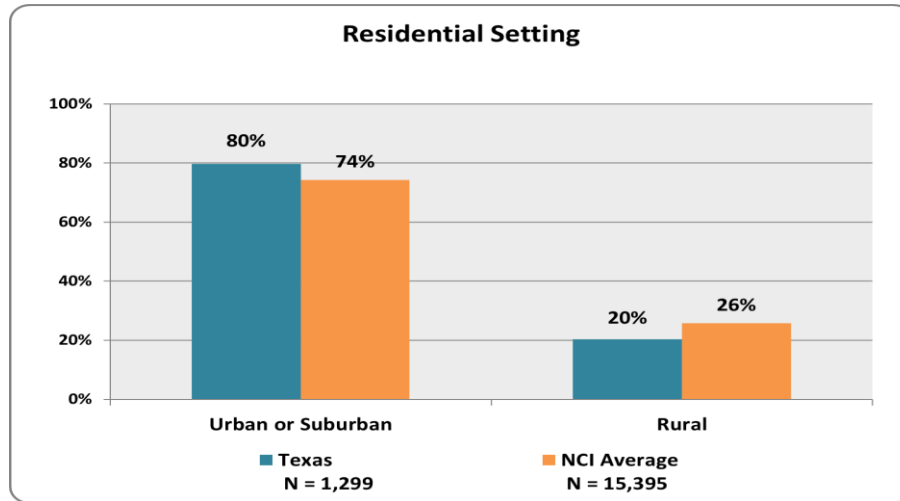
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GRAPH 19.



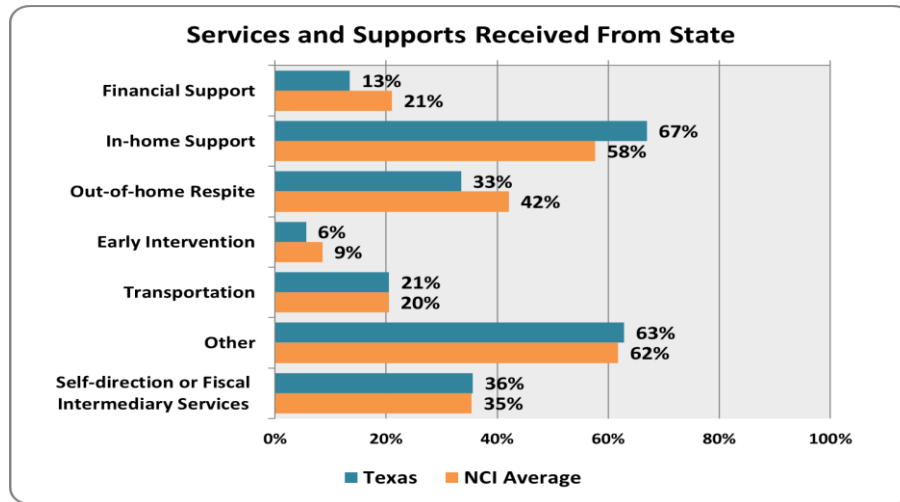
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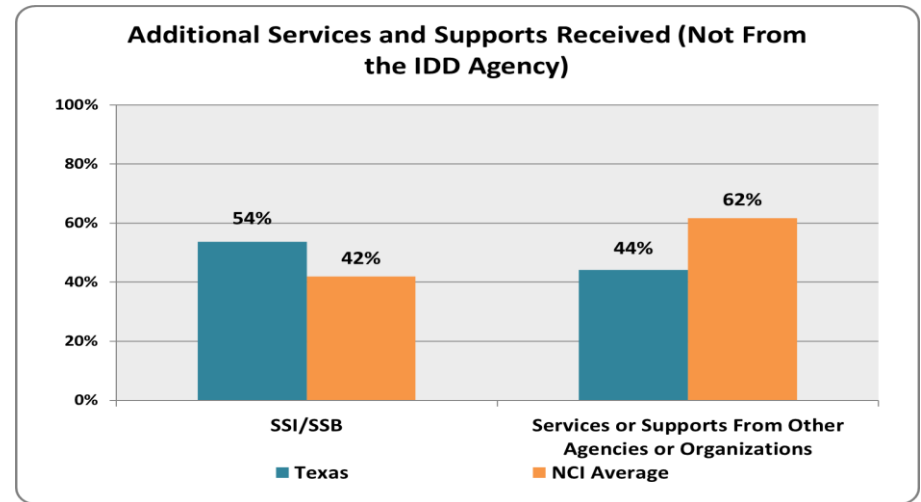
Services and Supports Received

ILLUSTRATES THE SERVICES AND SUPPORTS RECEIVED BY CHILDREN AND THEIR FAMILIES

GRAPH 21.*



GRAPH 22.*

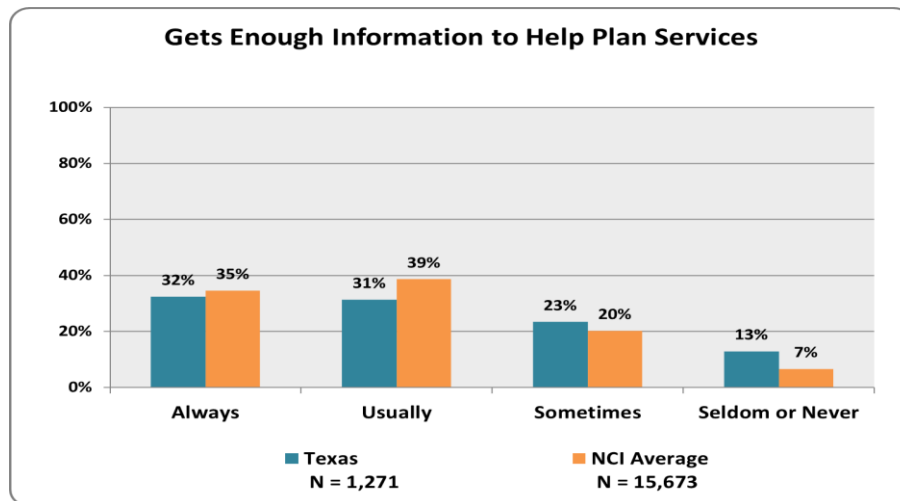


*Categories are not mutually exclusive; N's are not displayed as they may vary by service type

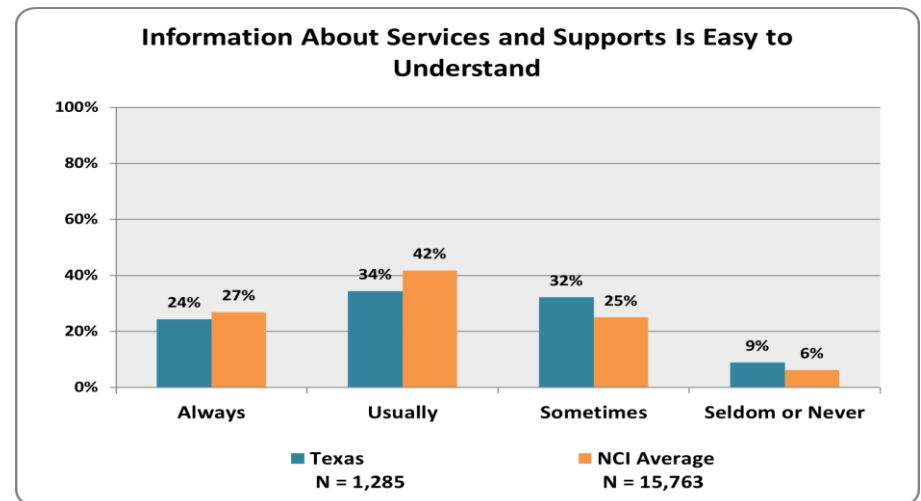
Information and Planning

FAMILIES HAVE THE INFORMATION AND SUPPORT NECESSARY TO PLAN FOR THEIR CHILD'S SERVICES AND SUPPORTS

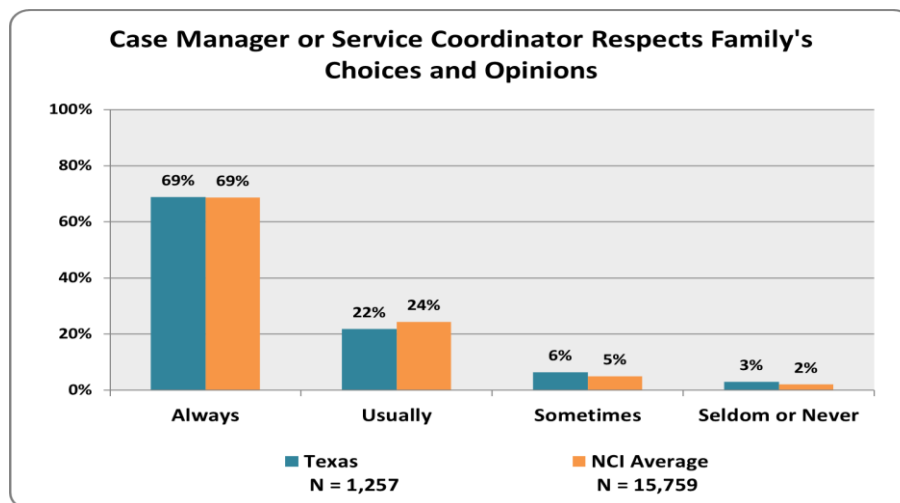
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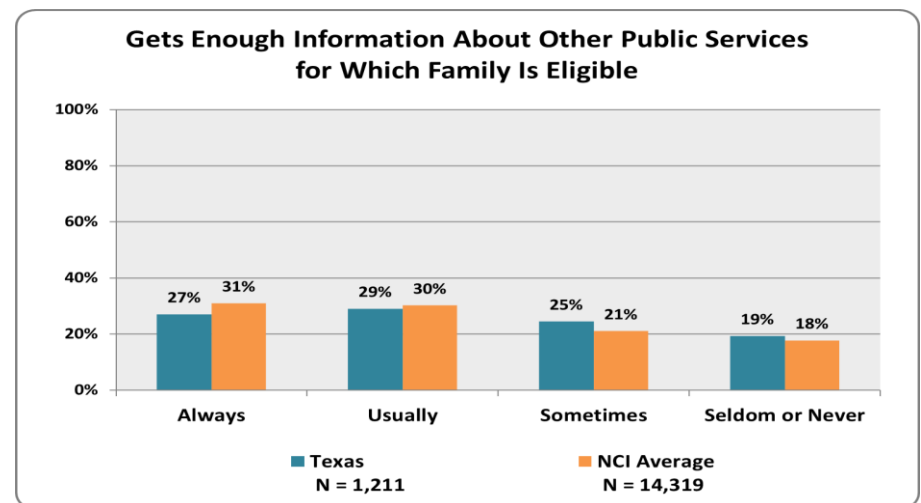
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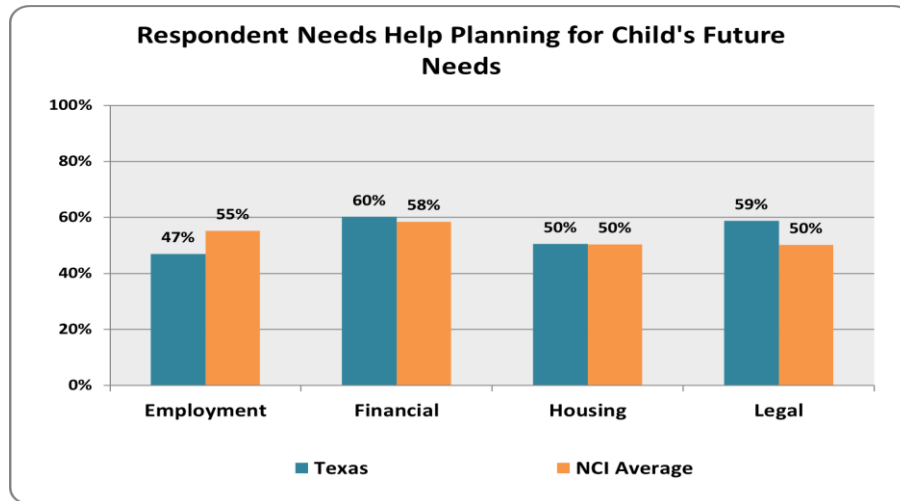
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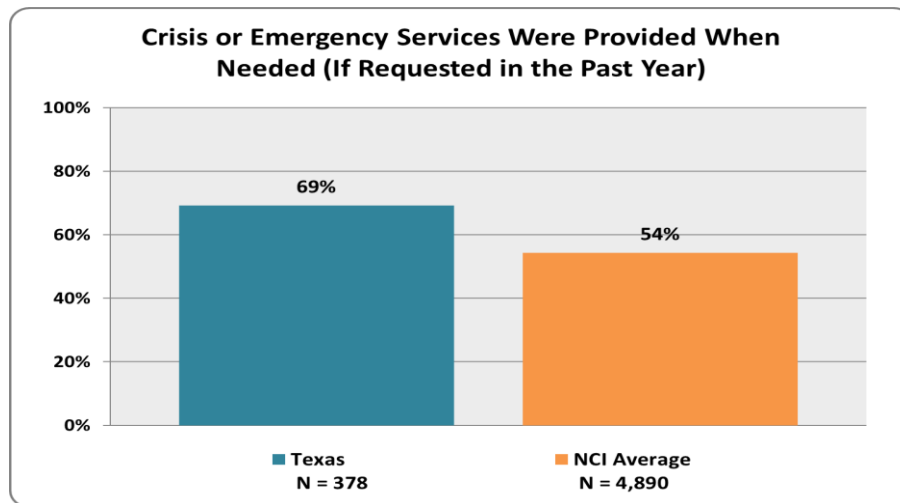
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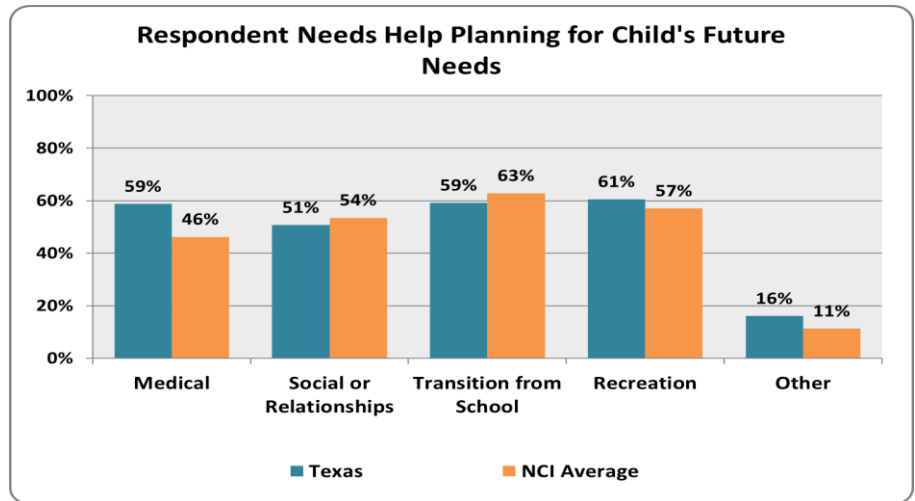
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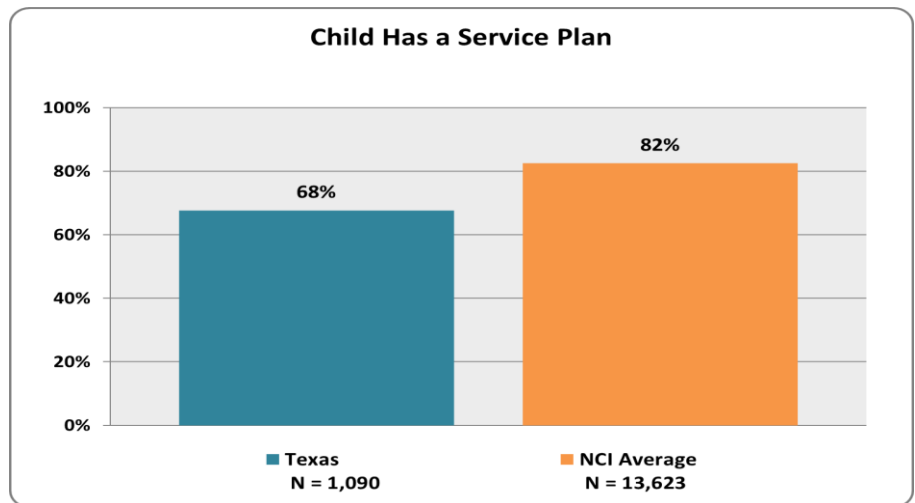
GRAPH 29.



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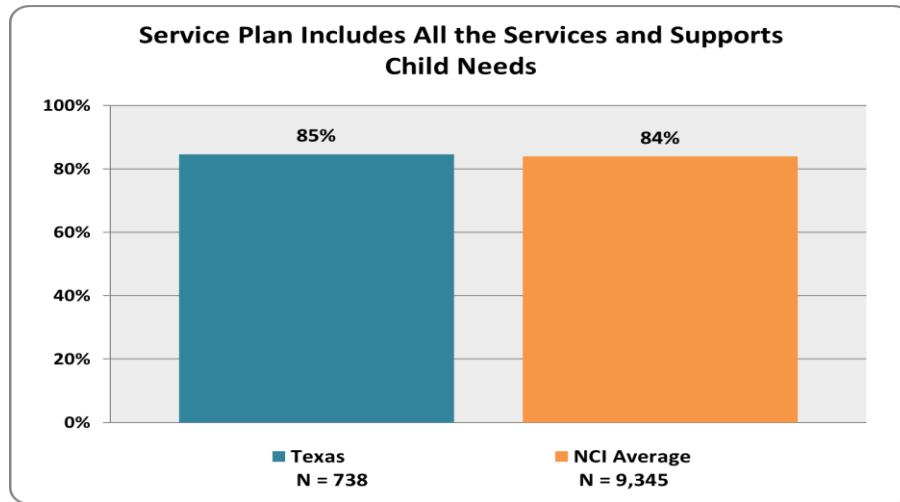


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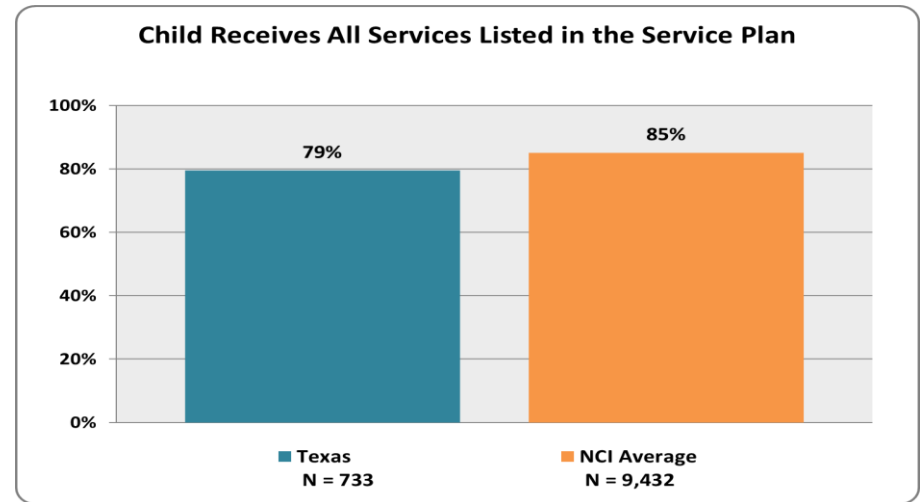


*Categories in Graph 27 and Graph 28 are not mutually exclusive

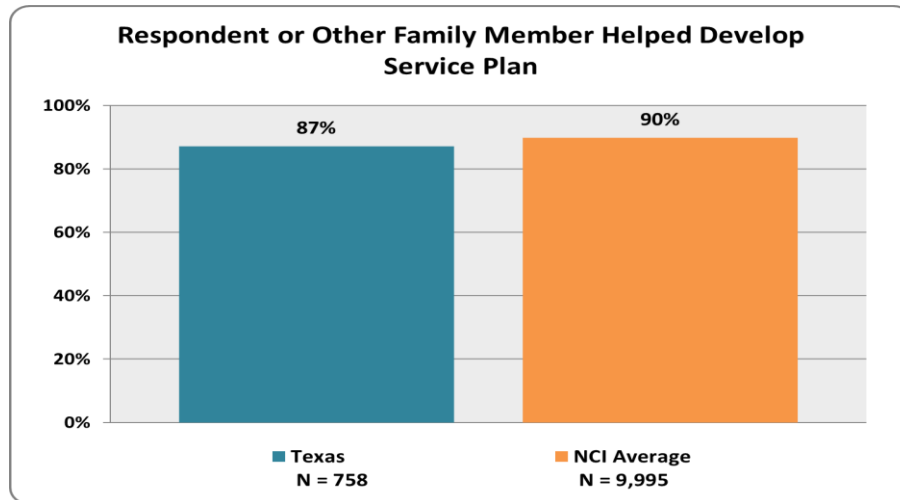
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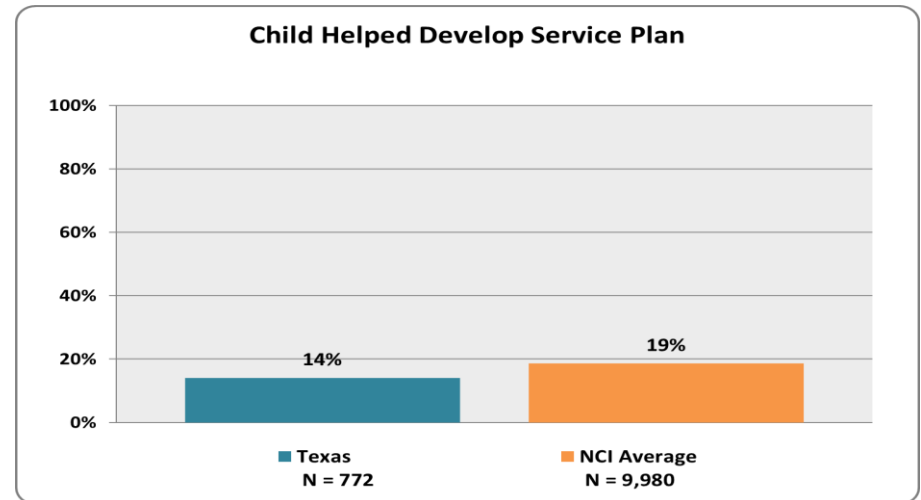
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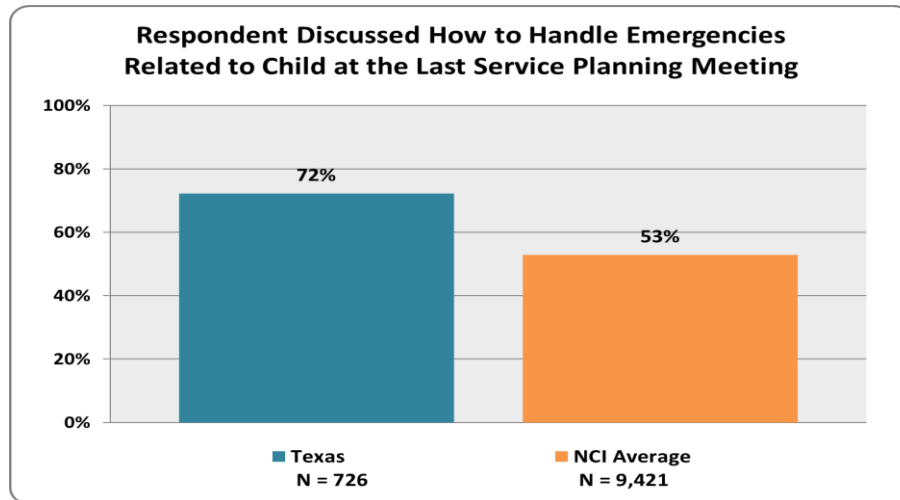
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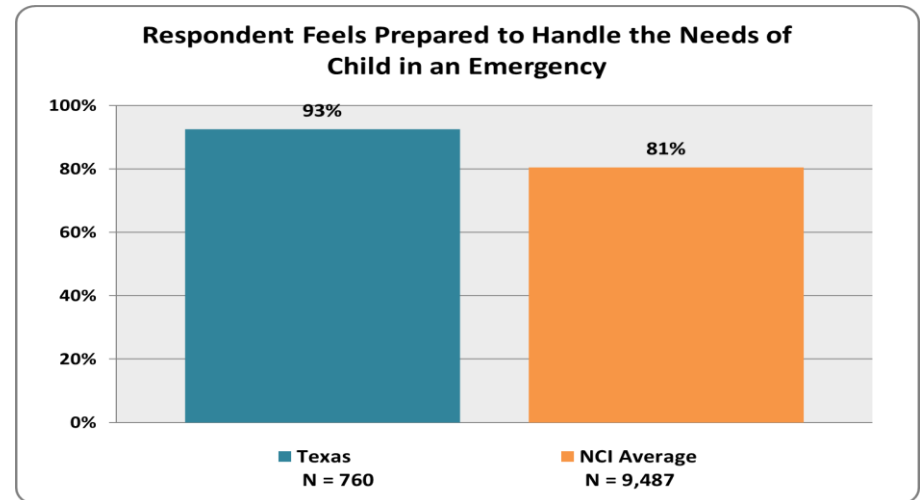
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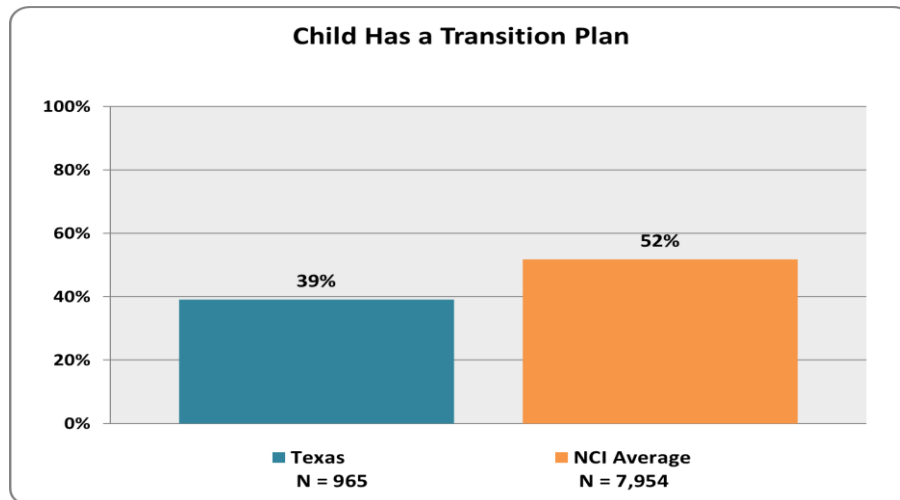
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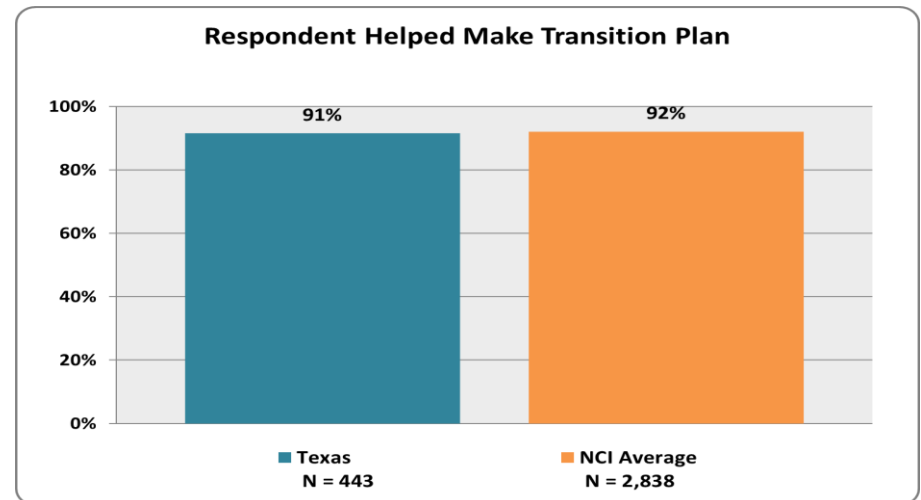
GRAPH 36.



GRAPH 37.



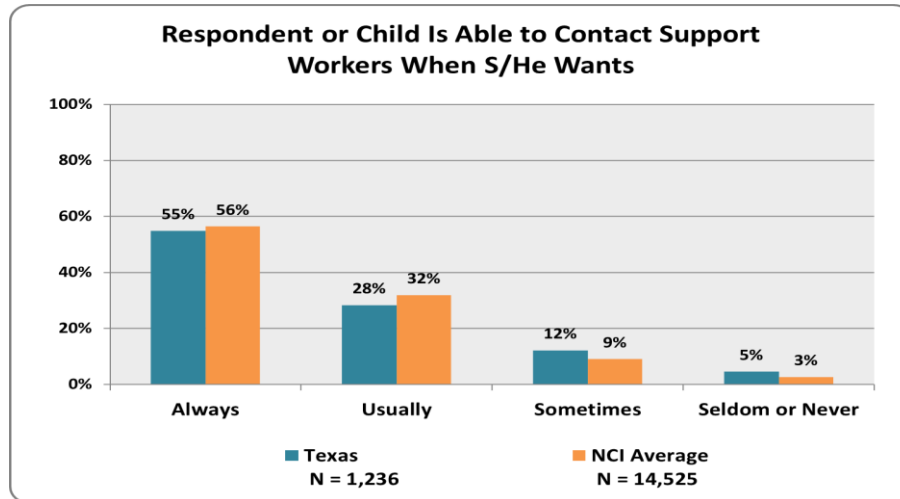
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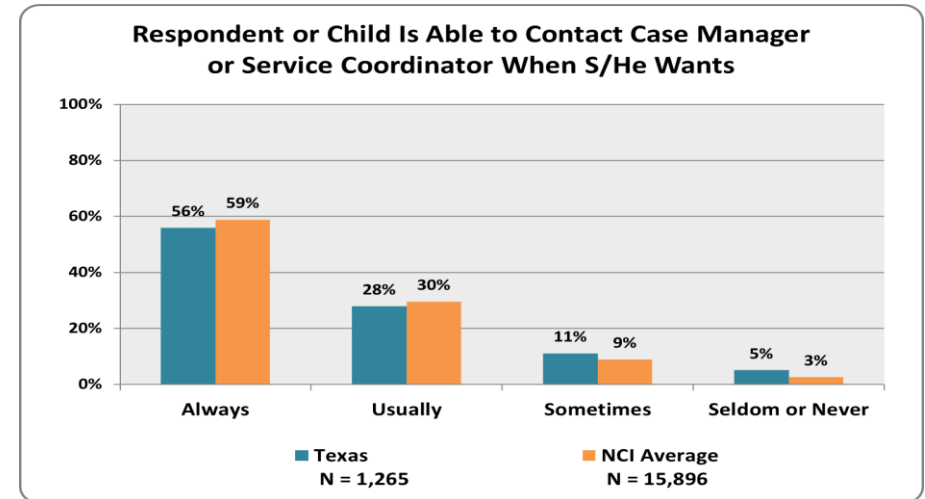
Access and Delivery

CHILDREN WITH DISABILITIES AND THEIR FAMILIES GET THE SERVICES AND SUPPORTS THEY NEED

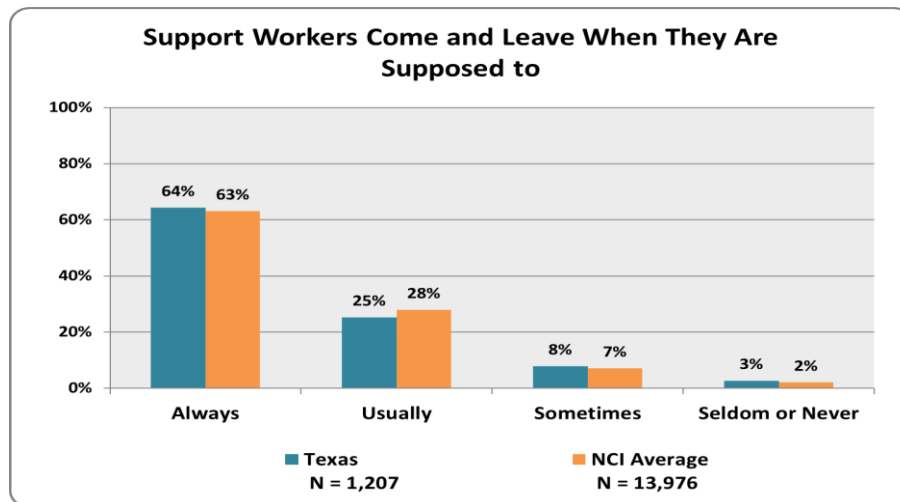
GRAPH 39.



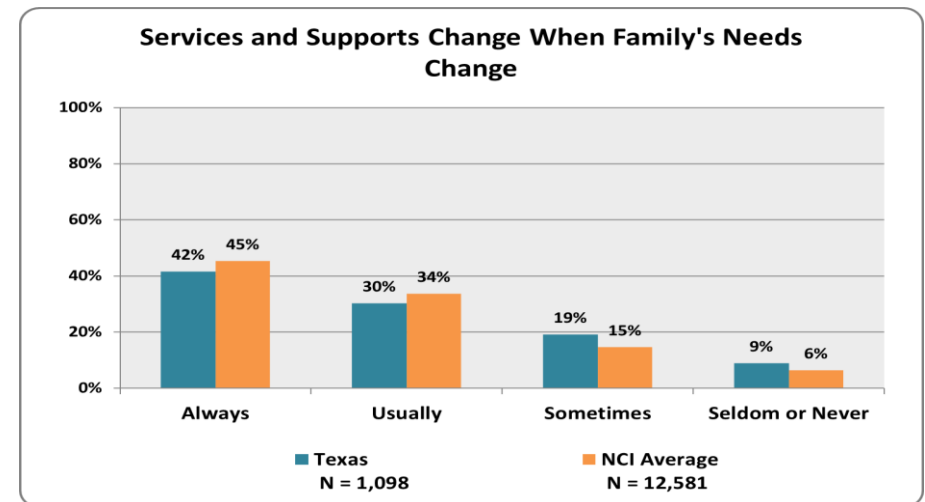
GRAPH 40.



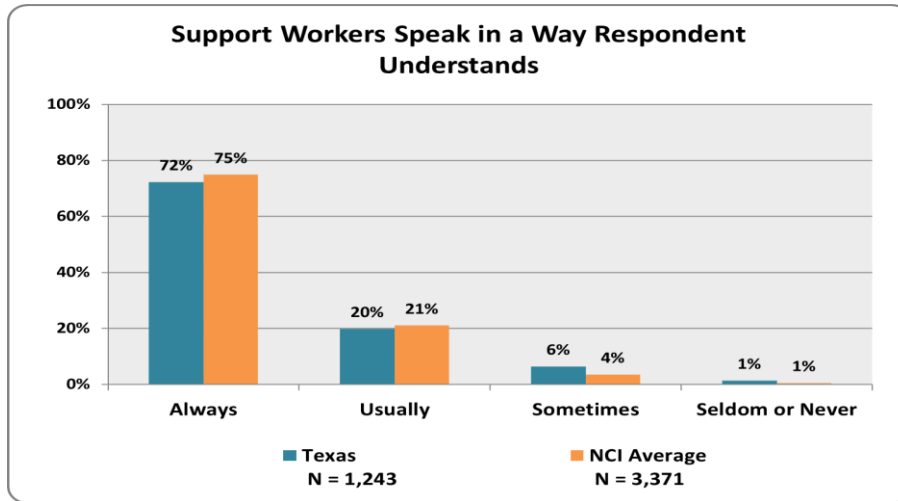
GRAPH 41.



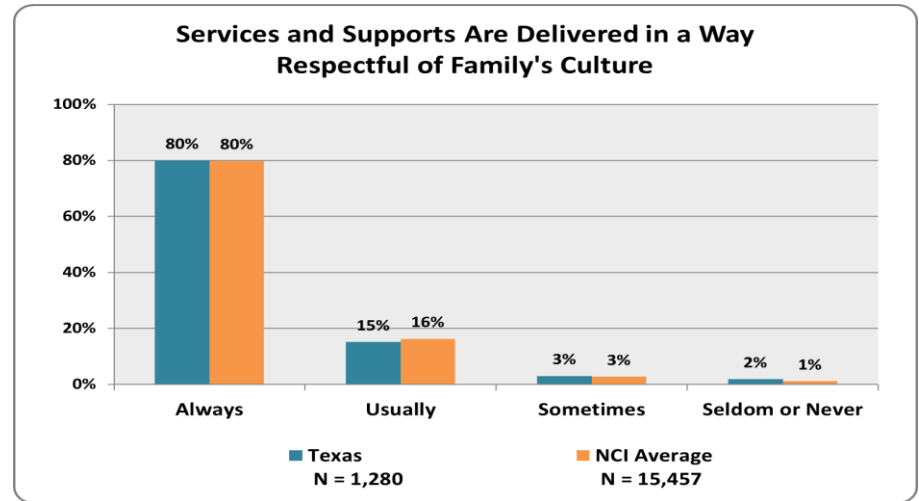
GRAPH 42.



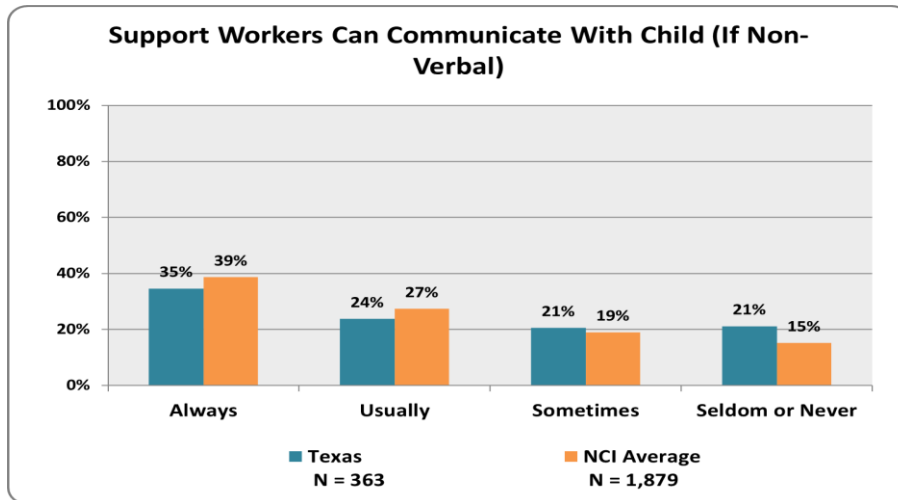
GRAPH 43.



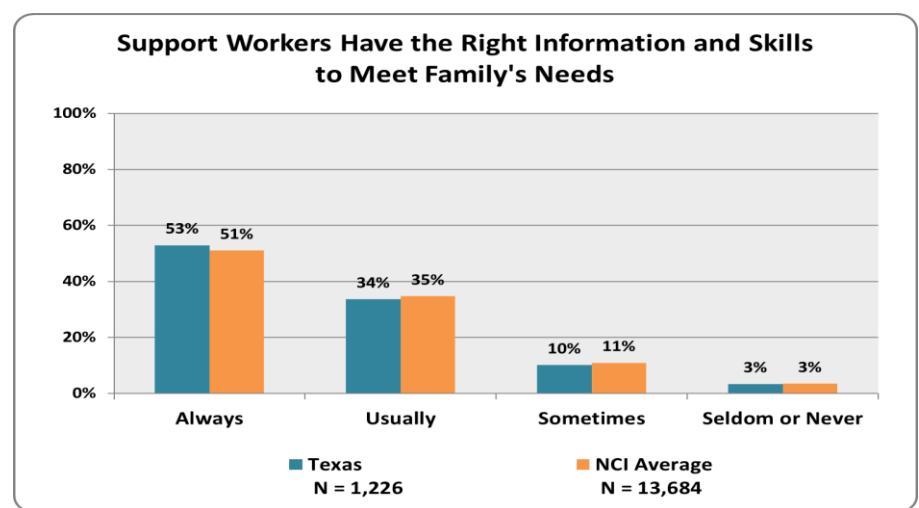
GRAPH 44.



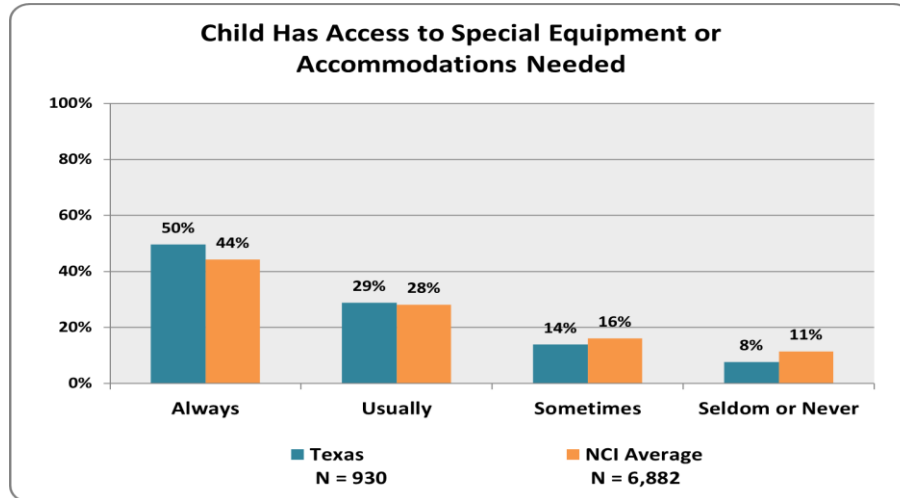
GRAPH 45.



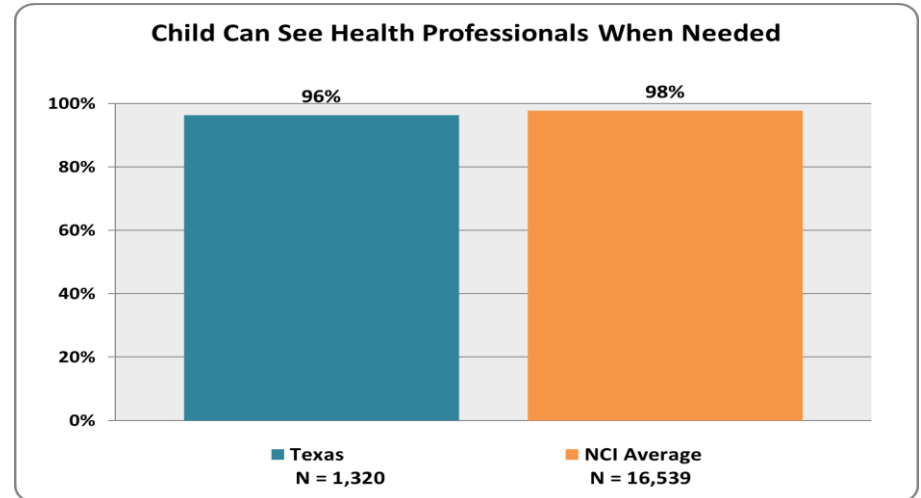
GRAPH 46.



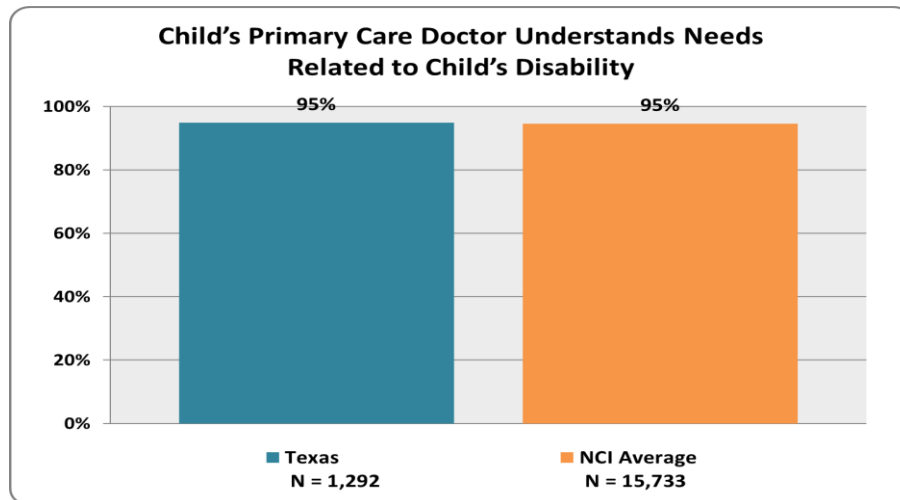
GRAPH 47.



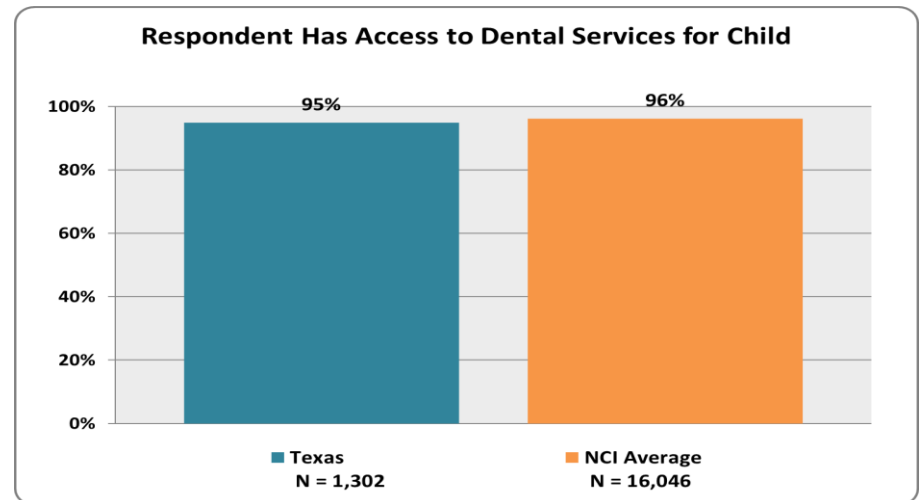
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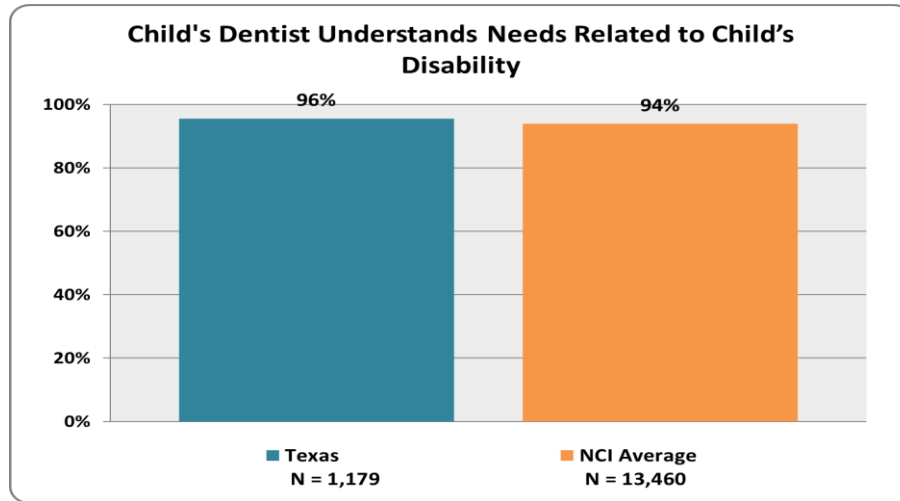
GRAPH 49.



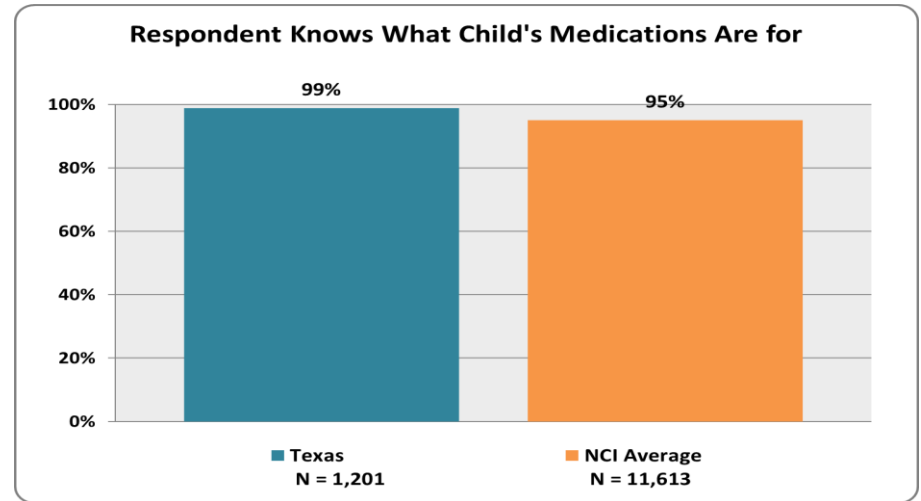
GRAPH 50.



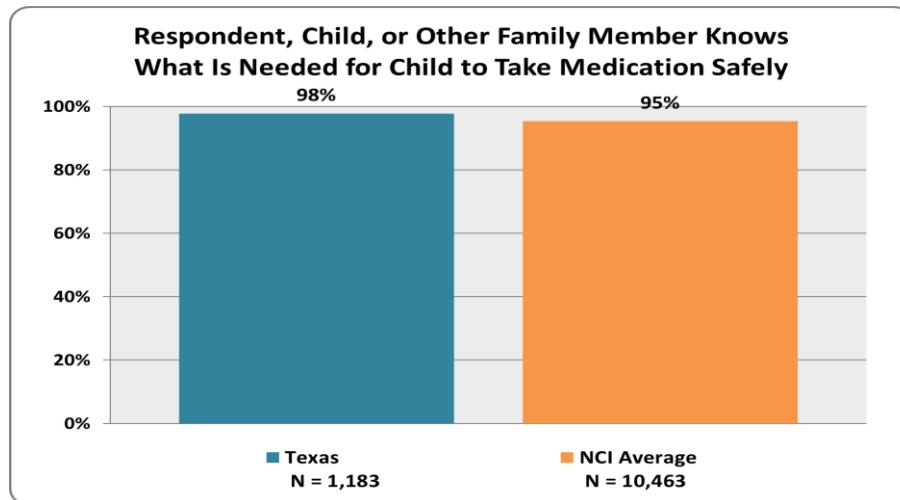
GRAPH 51.



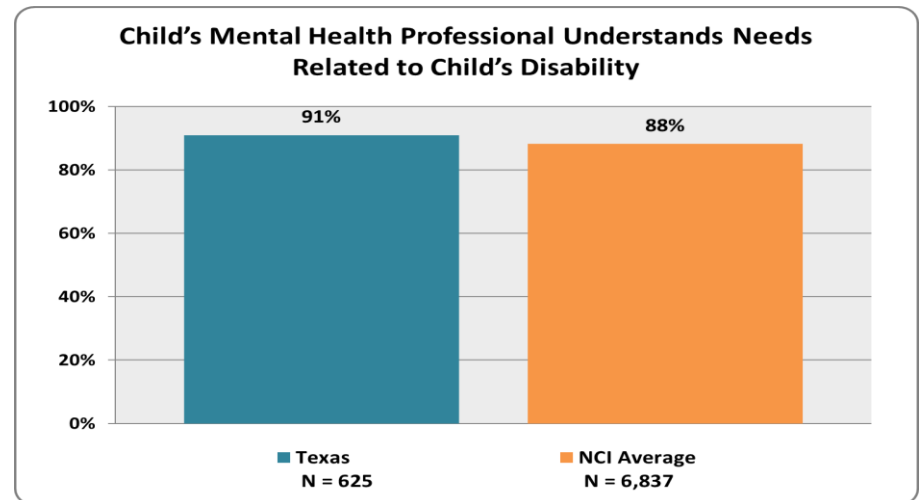
GRAPH 52.



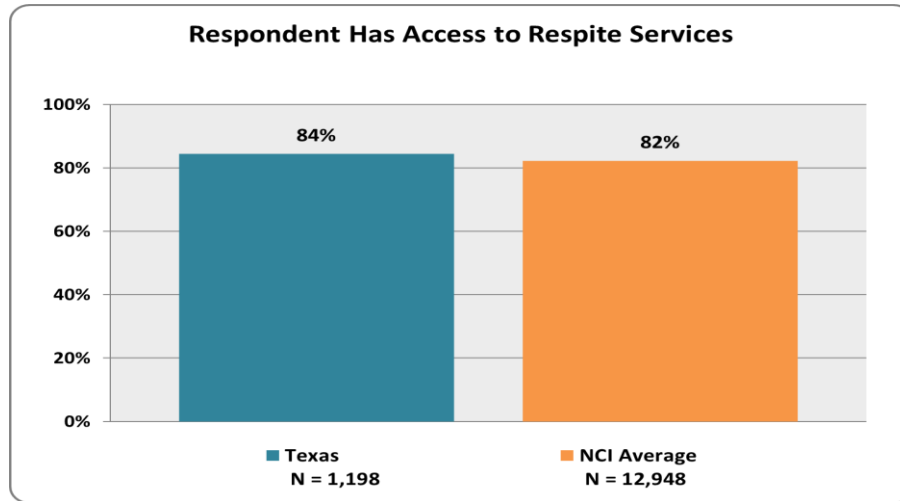
GRAPH 53.



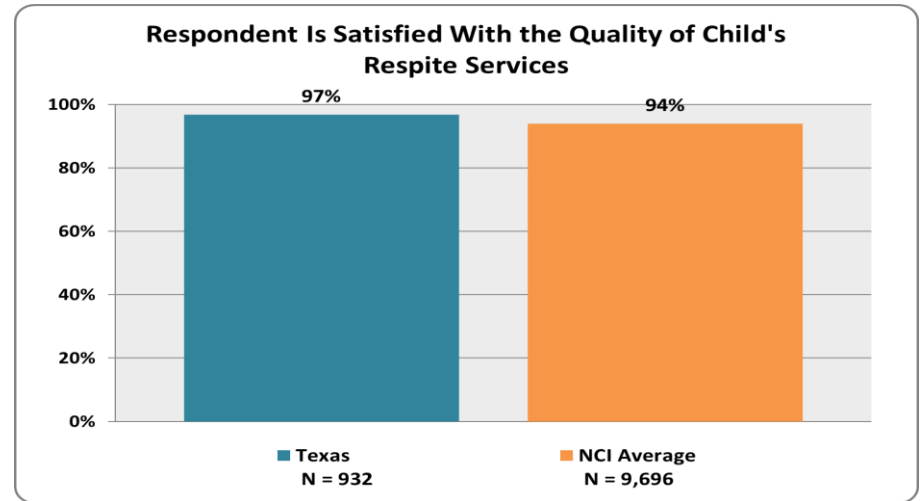
GRAPH 54.



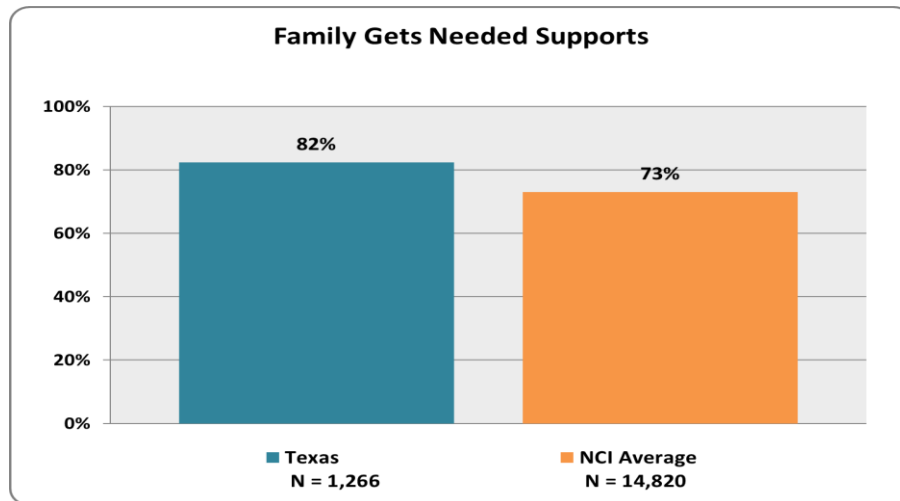
GRAPH 55.



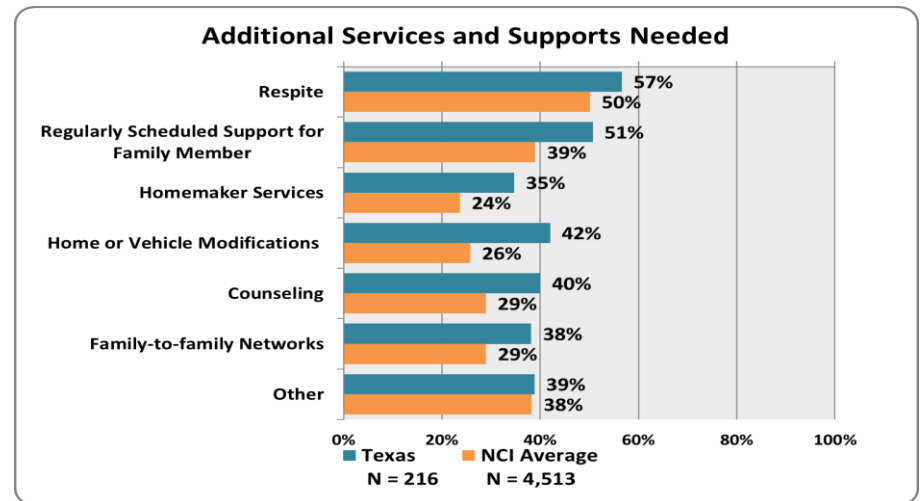
GRAPH 56.



GRAPH 57.



GRAPH 58.*

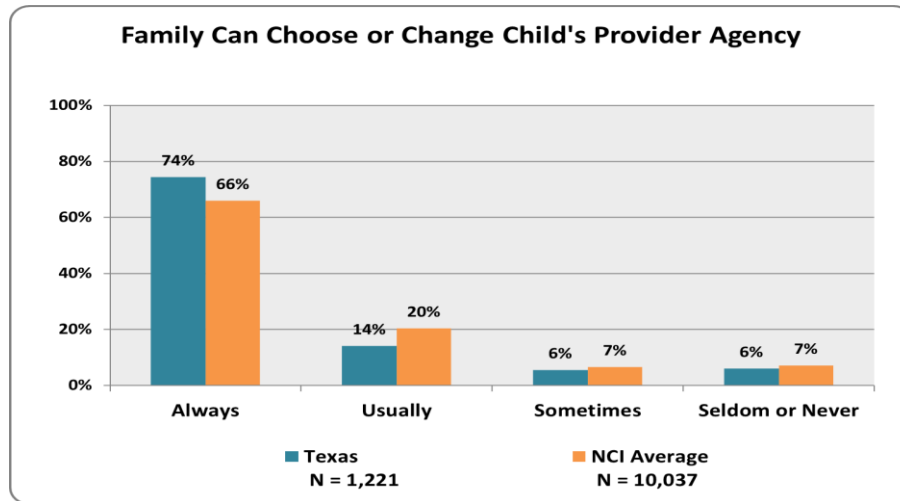


*Categories are not mutually exclusive

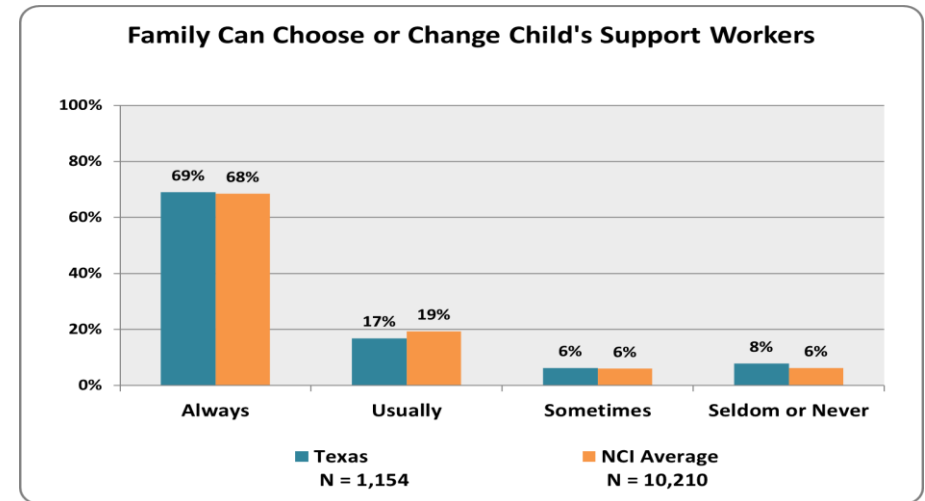
Choice, Decision Making and Control

FAMILIES AND CHILDREN WITH DISABILITIES DETERMINE THE SERVICES AND SUPPORTS THEY RECEIVE AND THE INDIVIDUALS OR AGENCIES WHO PROVIDE THEM

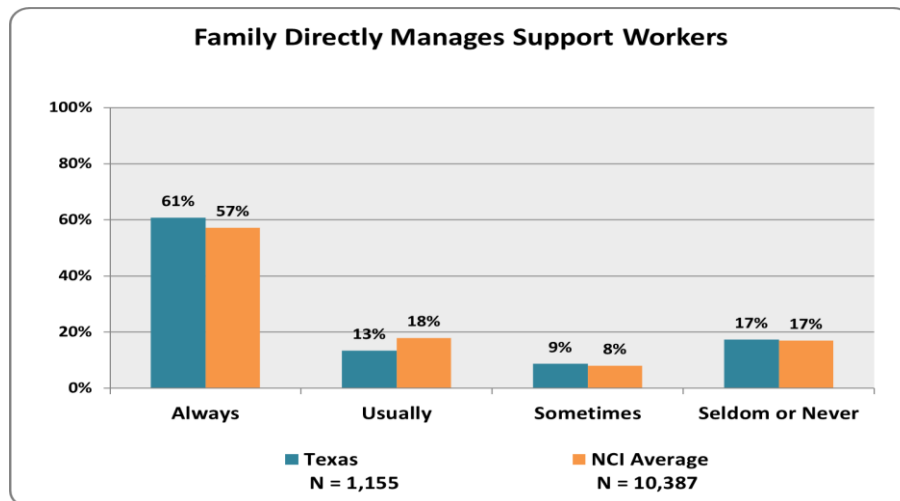
GRAPH 59.



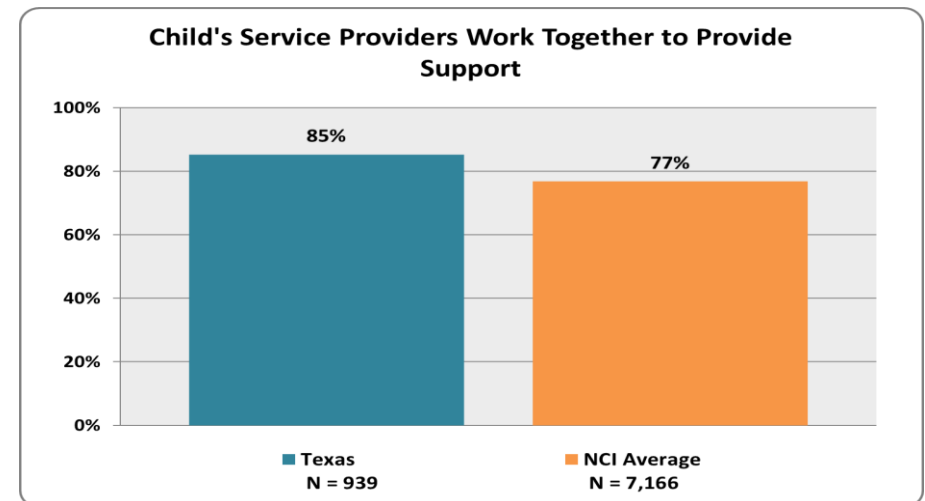
GRAPH 60.



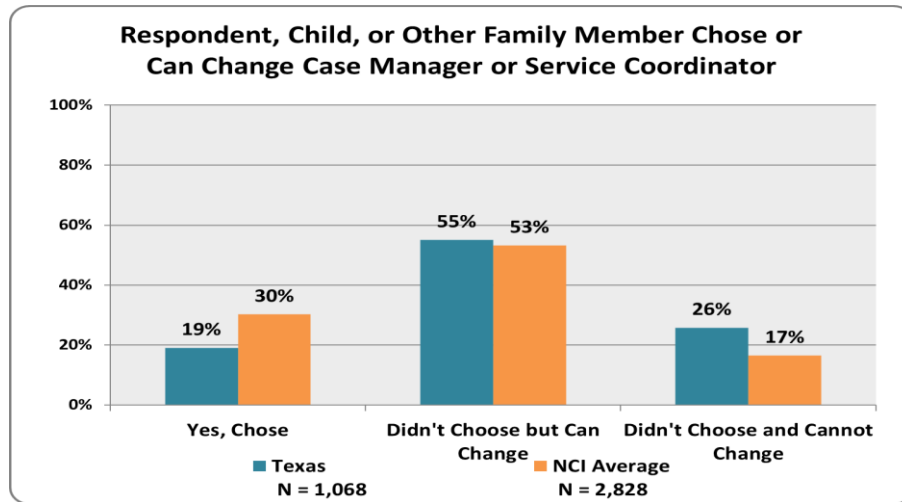
GRAPH 61.



GRAPH 62.



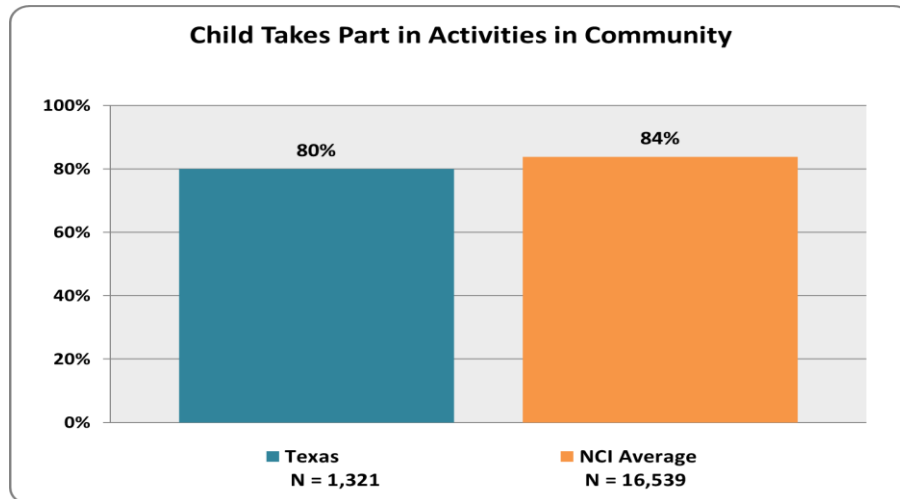
GRAPH 63.



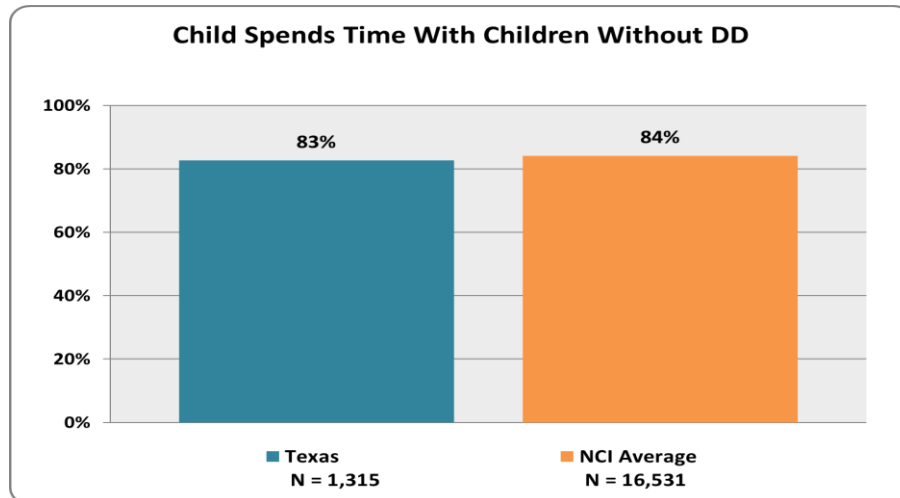
Involvement in the Community

CHILDREN WITH DISABILITIES USE INTEGRATED COMMUNITY SERVICES AND PARTICIPATE IN EVERYDAY COMMUNITY ACTIVITIES

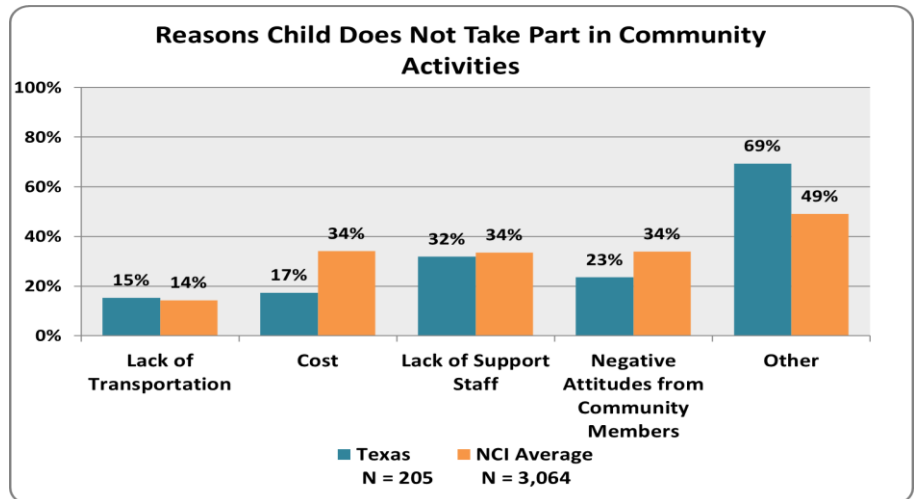
GRAPH 64.



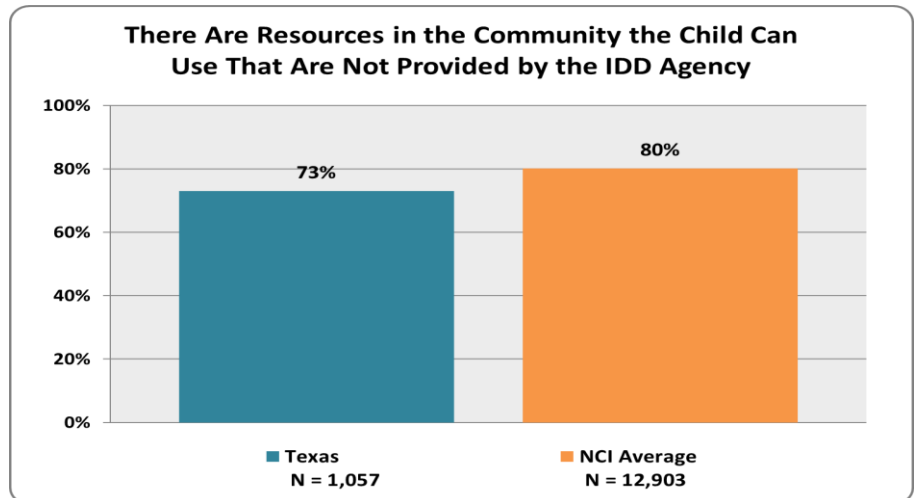
GRAPH 66.



GRAPH 65.*

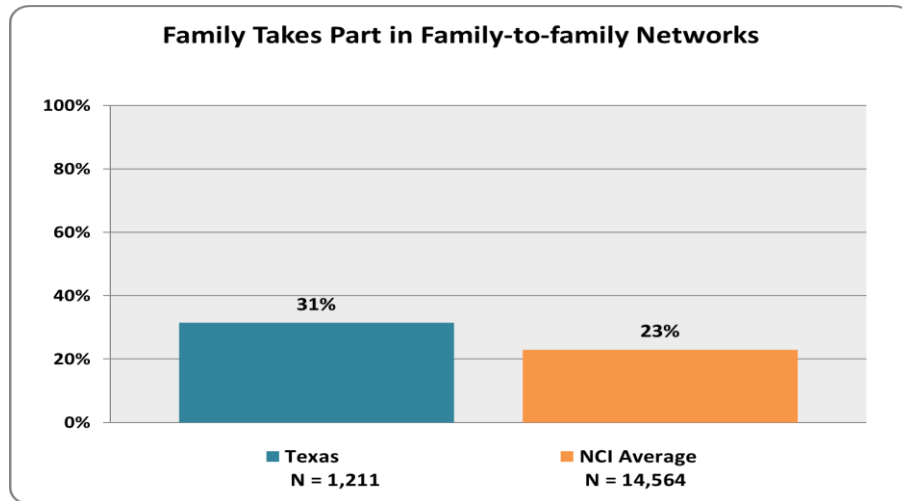


GRAPH 67.



*Categories are not mutually exclusive

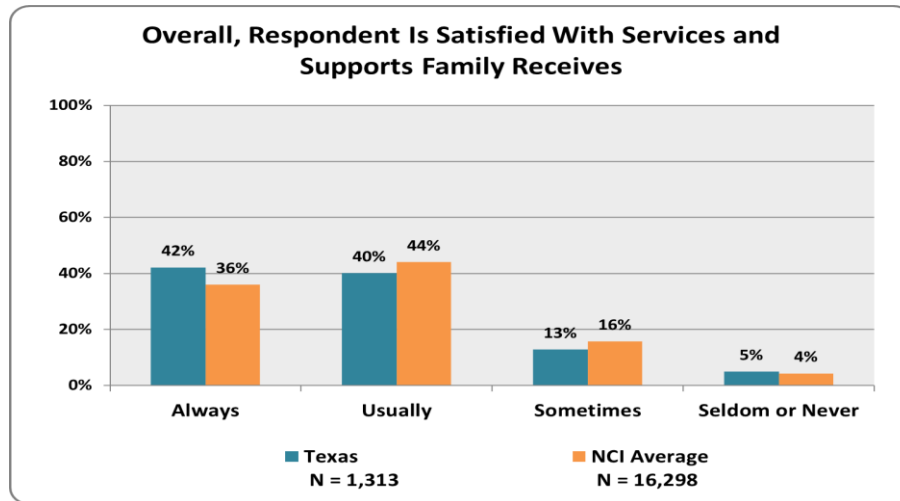
GRAPH 68.



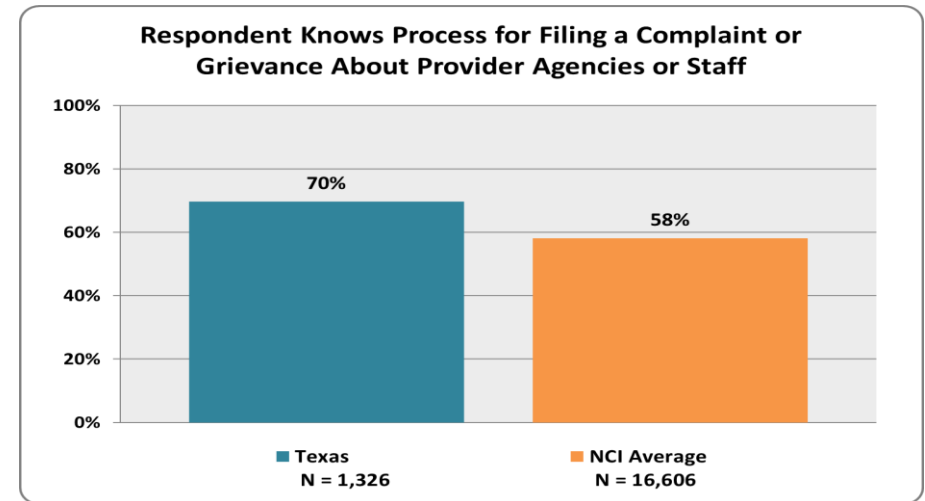
Satisfaction

CHILDREN WITH DISABILITIES AND THEIR FAMILIES RECEIVE ADEQUATE AND SATISFACTORY SUPPORTS

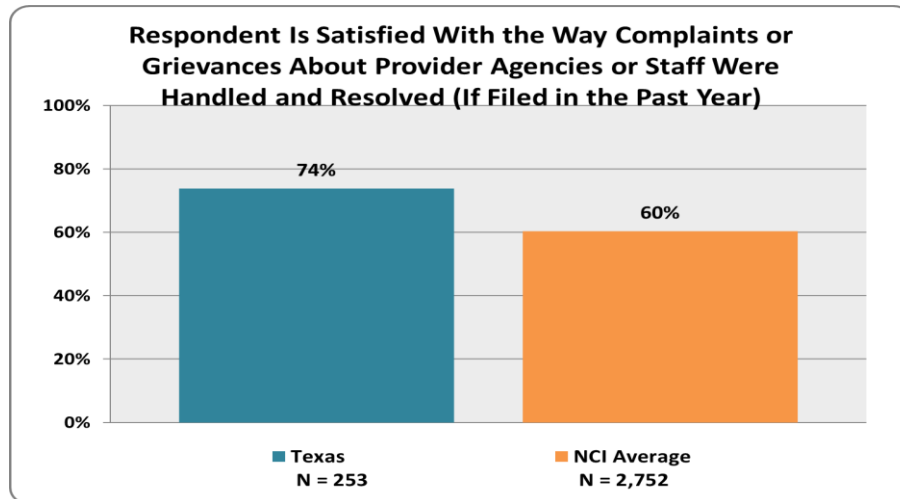
GRAPH 69.



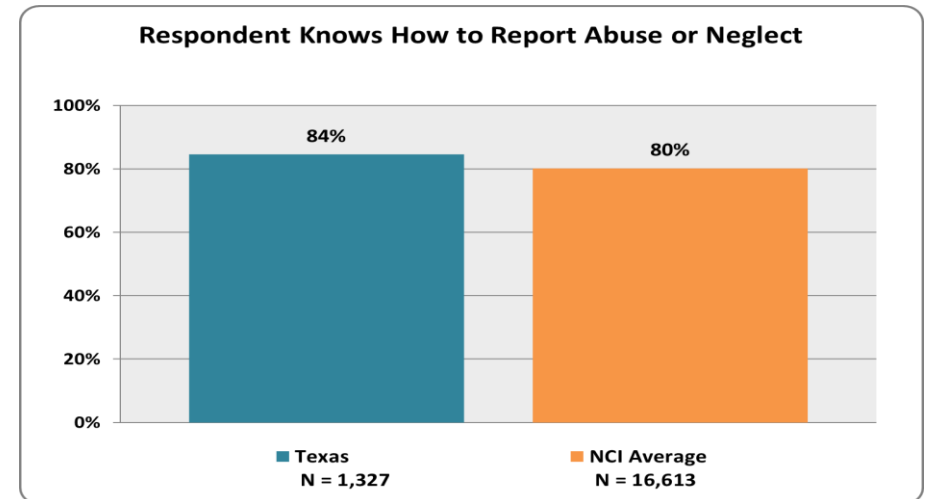
GRAPH 70.*



GRAPH 71.

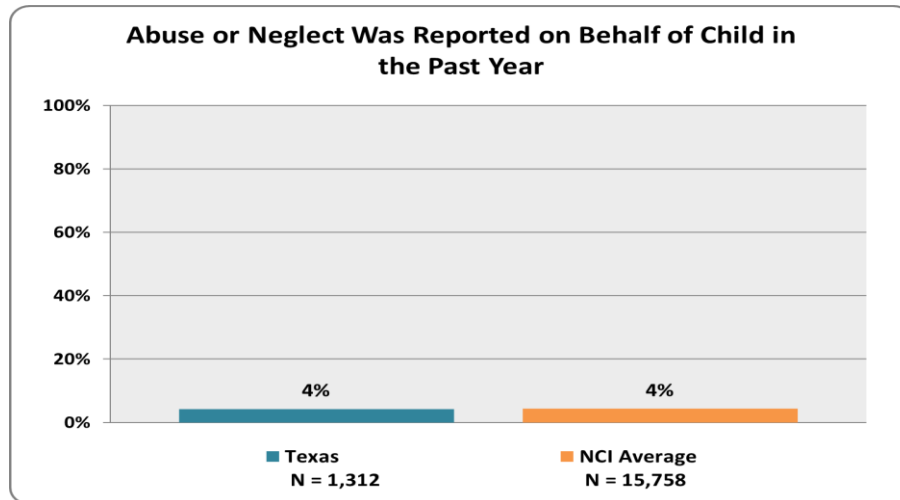


GRAPH 72.*

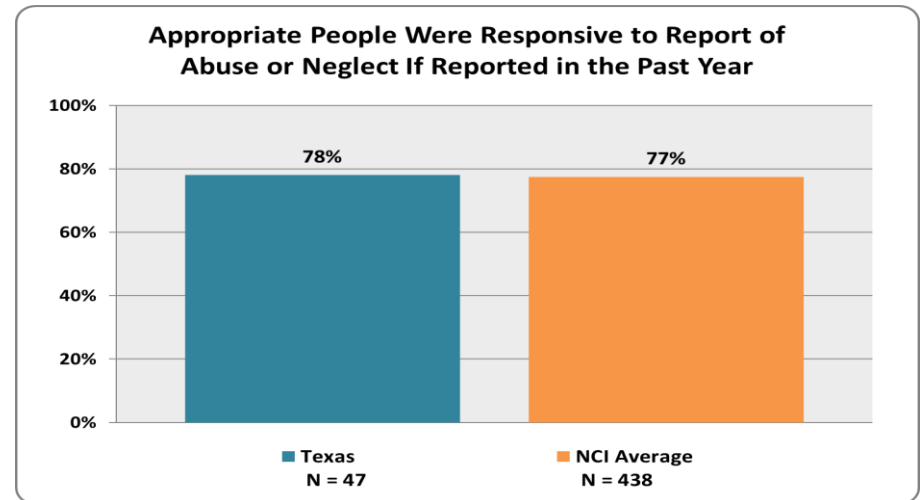


*For this question, 'No' and Don't Know' responses were combined.

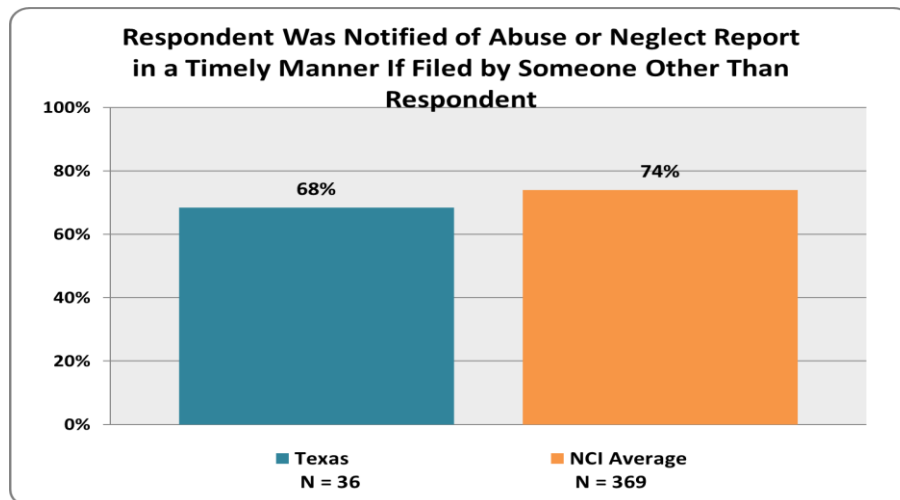
GRAPH 73.



GRAPH 74.



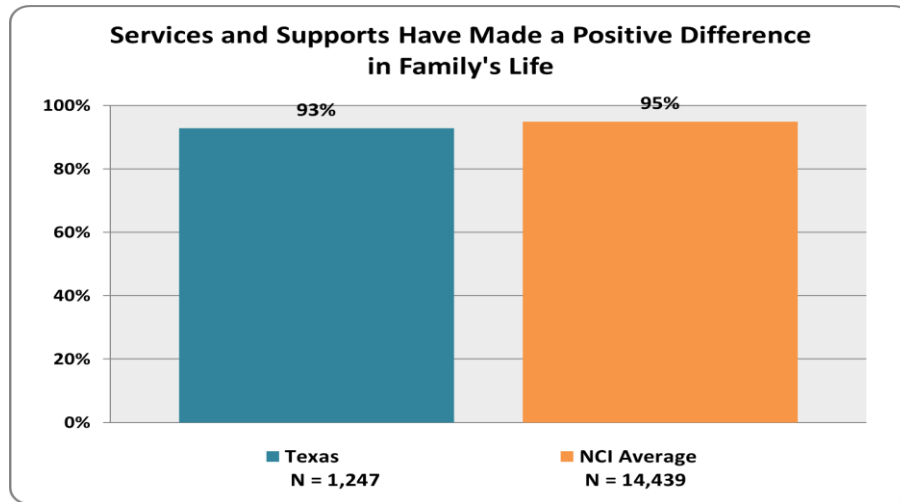
GRAPH 75.



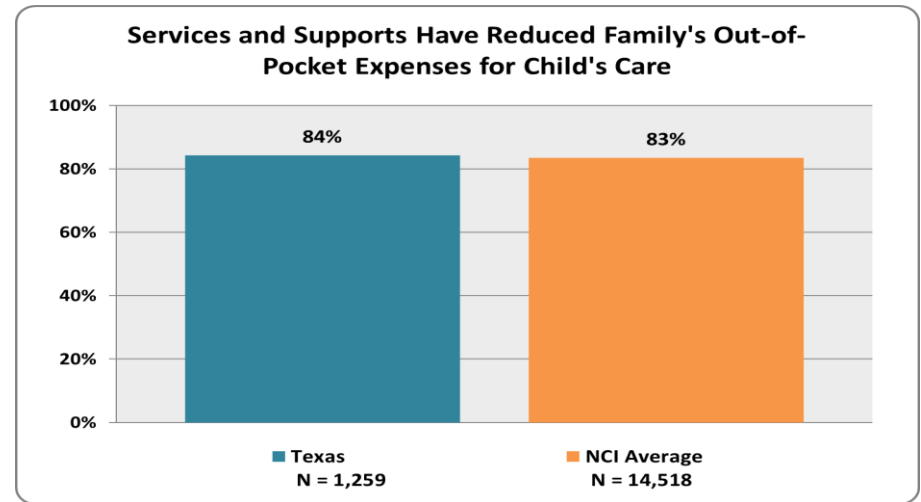
Outcomes

INDIVIDUAL AND FAMILY SUPPORTS MAKE A POSITIVE DIFFERENCE IN THE LIVES OF FAMILIES

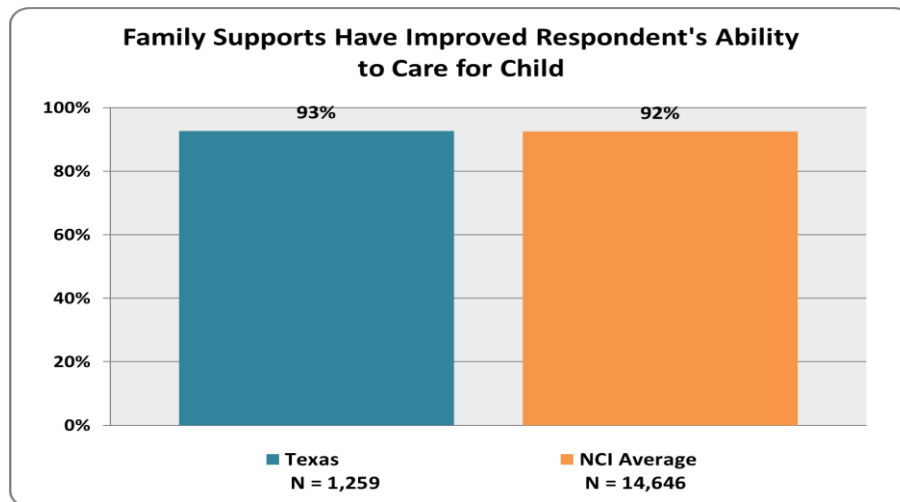
GRAPH 76.



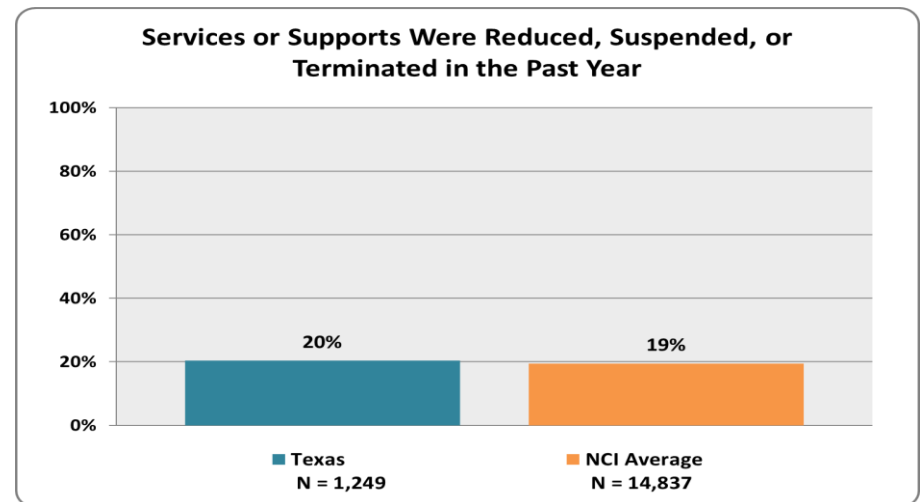
GRAPH 77.



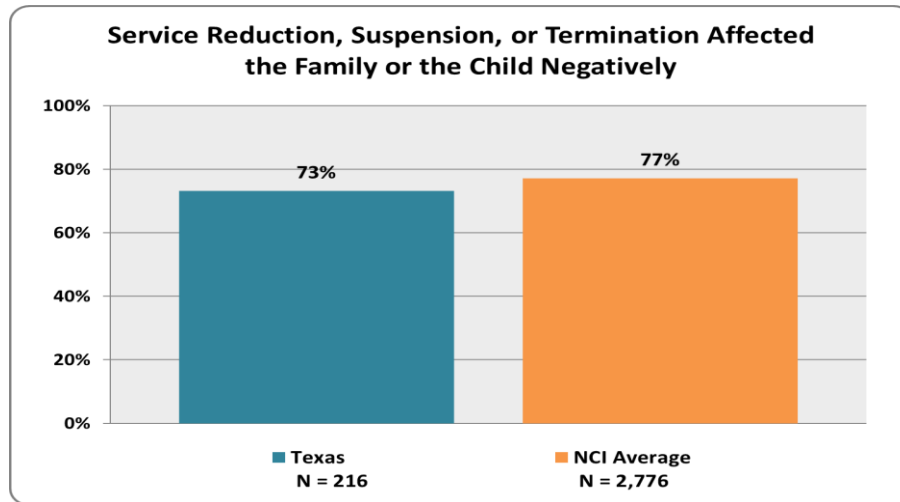
GRAPH 78.



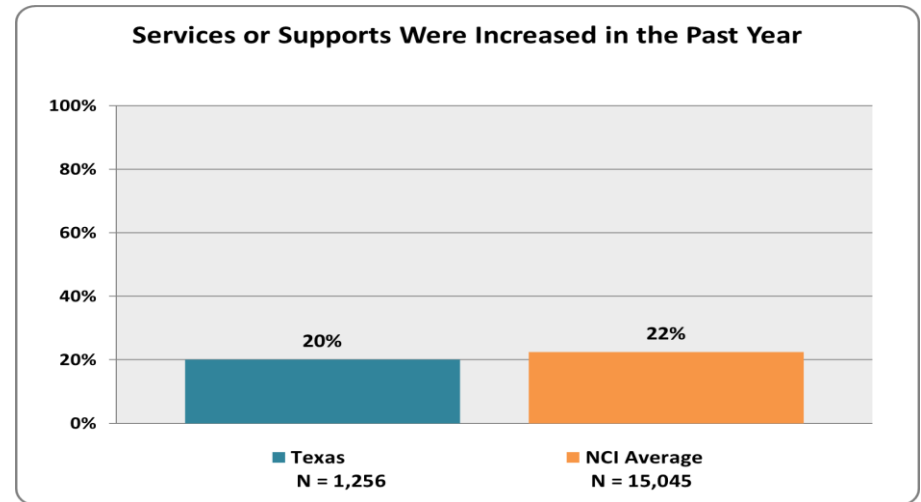
GRAPH 79



GRAPH 80.



GRAPH 81



GRAPH 82.

