

# Quality Assessment & Improvement: Individual Interviews Report

Pennsylvania Office of Developmental Programs

Interim Year 1 ~ Fiscal Year 2020-2021

Interim Year 2 ~ Fiscal Year 2021-2022



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# Acronyms Used in This Report

<b>AAW</b>	Adult Autism Waiver
<b>ADLs</b>	Activities of Daily Living
<b>AE</b>	Administrative Entity
<b>APS</b>	Adult Protective Services
<b>ASD</b>	Autism Spectrum Disorder
<b>AWC</b>	Agency with Choice
<b>BSASP</b>	Bureau of Supports for Autism and Special Populations
<b>CLW</b>	Community Living Waiver
<b>CMS</b>	Centers for Medicare and Medicaid Services
<b>CQI</b>	Continuous Quality Improvement
<b>CW</b>	Consolidated Waiver
<b>DHS</b>	Department of Human Services
<b>ID/A</b>	Intellectual Disability/Autism
<b>IM4Q</b>	Independent Monitoring for Quality
<b>IY1</b>	Interim Year 1
<b>IY2</b>	Interim Year 2
<b>ODP</b>	Office of Developmental Programs
<b>P/FDS</b>	Person/Family Directed Support
<b>PPR</b>	Plans to Prevent Recurrence
<b>QA&amp;I</b>	Quality Assessment & Improvement Process
<b>QM</b>	Quality Management
<b>QOLQ</b>	Quality of Life Questionnaire
<b>SC</b>	Supports Coordinator
<b>SCO</b>	Supports Coordination Organization

# A. Introduction

## About the QA&I Process

The Office of Developmental Programs (ODP) Quality Assessment and Improvement (QA&I) process is a tool that ODP uses to evaluate the current system of services and supports and to identify ways to improve the service system for all individuals. Launched in July 2017 as part of ODP's Quality Management Strategy, the QA&I process is designed to:

- Follow an individual's experience throughout the system,
- Measure progress toward implementing *Everyday Lives: Values in Action*,
- Gather timely and useable data to manage system performance,
- Use data to manage the service delivery system with a continuous quality improvement (CQI) approach,
- Assess compliance with Centers for Medicare and Medicaid Services (CMS) performance measures and 55 Pa. Code Chapter 6100 regulations, and
- Demonstrate Administrative Entity (AE) outcomes in the AE Operating Agreement.

Through the QA&I process, a comprehensive quality management review is conducted of all county programs, AEs, Supports Coordination Organizations (SCOs), and providers who deliver services and supports to individuals with intellectual disabilities and autism spectrum (ID/A) disorders.

Individual interviews are considered a critical component of the QA&I process in order to fully evaluate an individual's experience with services and supports. All individuals in the Core – Adult Autism Waiver (AAW) and ID/A – services, Base, and Supports Coordination (SC) Services Only samples are offered an interview to be conducted by Independent Monitoring for Quality (IM4Q) local programs on behalf of ODP. Additionally, Agency with Choice (AWC) Provider Managing Employer interviews are conducted by ODP, or an assigned AE, to collect information about individuals' experience and satisfaction with their AWC services. Individual interviews begin in July of each year and are completed by mid-October.

In keeping with person-centered practices, the individual is encouraged to participate in the interview but may also choose to decline. The individual may choose who is present during the interview and when appropriate, a person familiar with the individual will be asked to assist in the interview. While ODP's interview preference is in-person, the individual may choose to participate virtually.

If, during an individual interview any issue related to health and safety is discovered, the interviewer must immediately report it to ODP's QA&I mailbox. It is also recommended that Adult Protective Services (APS) is contacted to ensure that appropriate follow-up is completed. If any issue

related to service quality is identified, ODP regional staff are responsible for any follow-up required from the interview and will collaborate with SCOs and AEs as appropriate.

Findings, including individual interview responses (if applicable), of all comprehensive QA&I reviews, are compiled by QA&I teams into Comprehensive Reports. Entities are expected to use these findings to correct any agency-wide systemic issues through development of Plans to Prevent Recurrence (PPR) or, in some cases, Quality Management (QM) and accompanying Action Plans. An entity is expected to regularly evaluate and internally report on its progress with implementing the QM and Action Plans and determine the effectiveness and impacts of the interventions taken to improve its performance.

## QA&I Report 20-21 – Interim Year 1 (IY1)

In FY20-21, ODP included a "COVID-19 supplement" in the QA&I individual interview tool for IY1 that asked questions geared towards assessing individuals' experiences during the pandemic. These interviews were conducted remotely by IM4Q Local Programs, across the state, from September 2020 through January 2021, and 431 total individuals (381 enrolled in ID/A programs and 50 enrolled in AAW programs) chose to participate in the interviews. Results from IY1 individual interviews are included in this report.

## QA&I Report 21-22 – Interim Year 2 (IY2)

Individual interviews for both IY1 and IY2 were conducted remotely by IM4Q Local Programs, across the state. In FY21-22, IY2 interviews were conducted from September 2021 through January 2022 and 351 total individuals (257 enrolled in ID/A programs, 51 enrolled in AAW programs, and 43 enrolled in Base and SC Services Only) chose to participate. Individual interviews were the only part of the IY2 QA&I process that people who receive Base and SC services only could participate in. Results from IY2 individual interviews are included in this report.

**Note that this report was developed using some graphic and alternative text features to help provide increased accessibility to all readers. Additionally, data greater than zero and less than 11 (<11) is not shown in some instances for privacy purposes.**

# A. Details About Interviews

## Number & Percent of Interviews Conducted by Region & Statewide

<b>CENTRAL REGION</b>					
IY1 <b>Yes</b> Count and Percent of Total	165 of 202	82%	IY2 <b>Yes</b> Count and Percent of Total	40 of 57	70%
IY1 <b>No</b> Count and Percent of Total	37 of 202	18%	IY2 <b>No</b> Count and Percent of Total	17 of 57	30%
<b>NORTHEAST REGION</b>					
IY1 <b>Yes</b> Count and Percent of Total	38 of 59	64%	IY2 <b>Yes</b> Count and Percent of Total	99 of 128	77%
IY1 <b>No</b> Count and Percent of Total	21 of 59	36%	IY2 <b>No</b> Count and Percent of Total	29 of 128	23%
<b>SOUTHEAST REGION</b>					
IY1 <b>Yes</b> Count and Percent of Total	68 of 70	97%	IY2 <b>Yes</b> Count and Percent of Total	164 of 187	88%
IY1 <b>No</b> Count and Percent of Total	2 of 70	3%	IY2 <b>No</b> Count and Percent of Total	23 of 187	12%
<b>WESTERN REGION</b>					
IY1 <b>Yes</b> Count and Percent of Total	160 of 213	75%	IY2 <b>Yes</b> Count and Percent of Total	48 of 71	68%
IY1 <b>No</b> Count and Percent of Total	53 of 213	25%	IY2 <b>No</b> Count and Percent of Total	23 of 71	32%
<b>STATEWIDE</b>					
IY1 <b>Yes</b> Count and Percent of Total	431 of 544	79%	IY2 <b>Yes</b> Count and Percent of Total	351 of 443	79%
IY1 <b>No</b> Count and Percent of Total	113 of 544	21%	IY2 <b>No</b> Count and Percent of Total	92 of 443	21%



# Number of Interviews Not Conducted by Reason & Program

The table below shows the reasons given if the interview could not be conducted. Improvements in results were seen in all but one category from IY1 to IY2. Opportunities to continue to improve regarding efforts to reach the individual to conduct the interview, as well as helping parents/guardians to better understand the importance of survey participation remain for consideration.

## Did the individual agree to be interviewed/showed up for the interview? – No

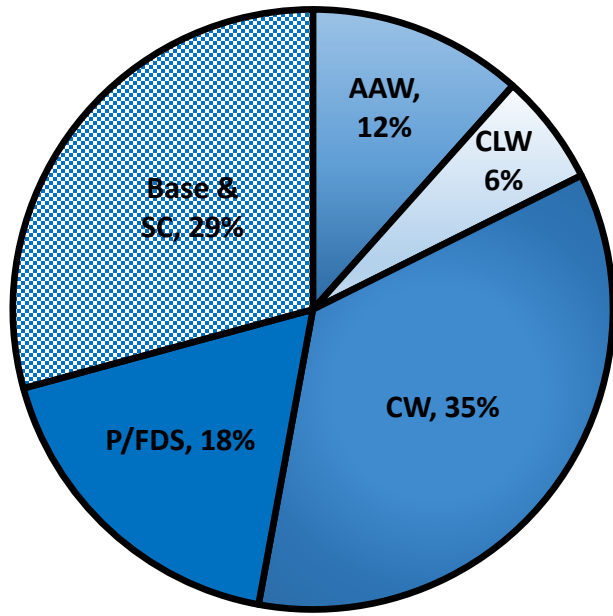
If the interview was not conducted, please select the reason why from the choices below.

	IY1	IY2
Individual could not be reached	69	48
Individual is deceased	3	1
Individual is not receiving services	9	4
Interview was refused by individual	13	13
Interview was refused by parent/guardian	10	20
Other reason the interview could not be conducted	9	6
<b>Total</b>	<b>113</b>	<b>92</b>

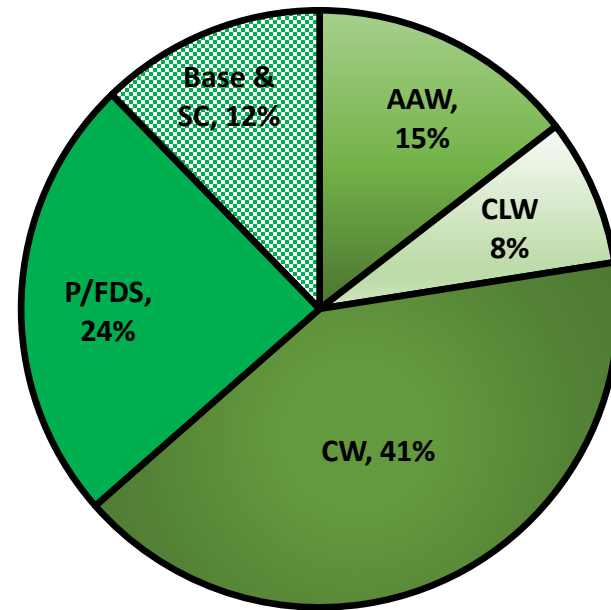
## For “individual could not be reached,” breakdown by ODP program

	IY1	IY2
Adult Autism Waiver (AAW)	10	4
Community Living Waiver (CLW)	5	5
Consolidated Waiver (CW)	11	9
Person/Family Directed Support Waiver (P/FDS)	18	19
Base Services & Supports Coordination Services only	25	11
<b>Total</b>	<b>69</b>	<b>48</b>

**Percent of Survey Participation by Waiver - IY1**



**Percent of Survey Participation by Waiver - IY2**



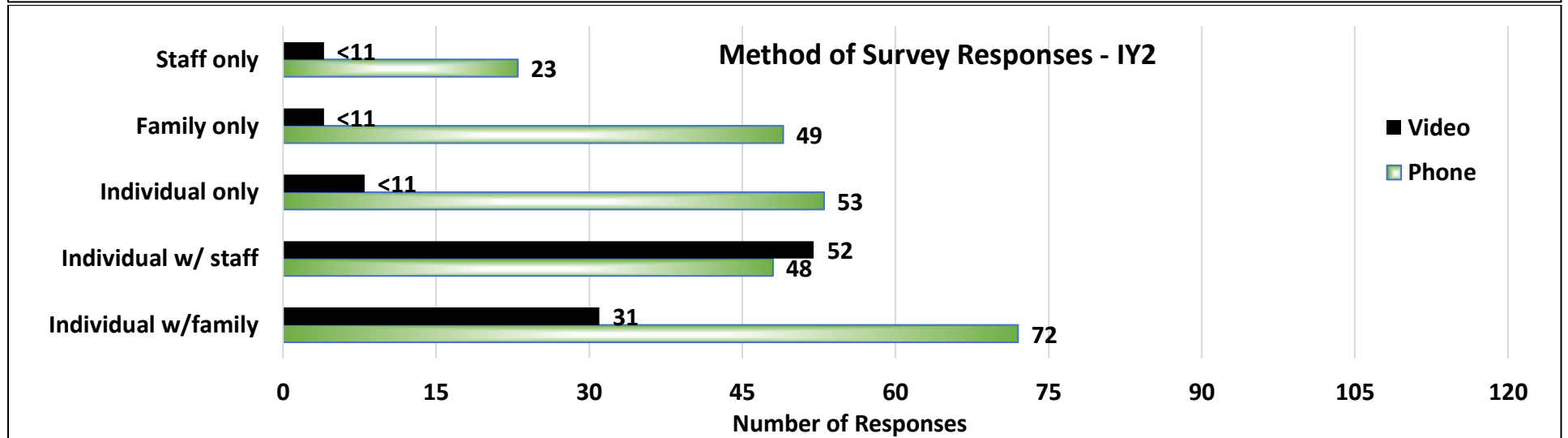
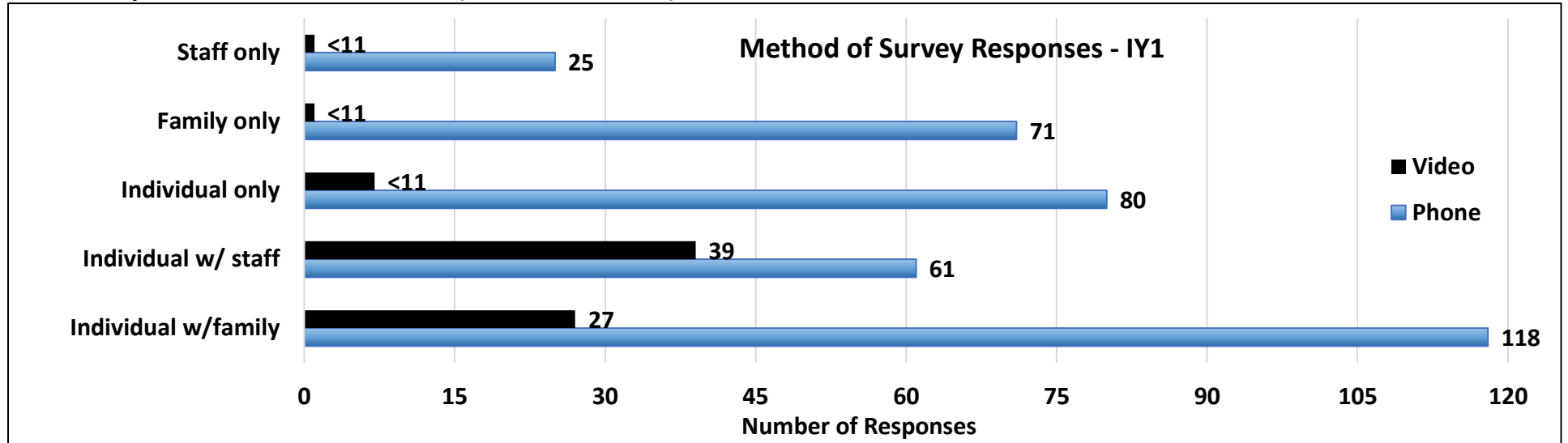
**Who was present at the interview?**

	IY1	IY2
Individual w/family	143	102
Individual w/ staff	96	96
Individual w/staff and family	<11	<11
Individual only	87	63
Family only	72	52
Staff only	26	27
Family and staff only	0	<11
Other	<11	<11
Individual w/other	<11	<11
Did not participate	114	92
<b>Total</b>	<b>544</b>	<b>443</b>

# C. General Questions

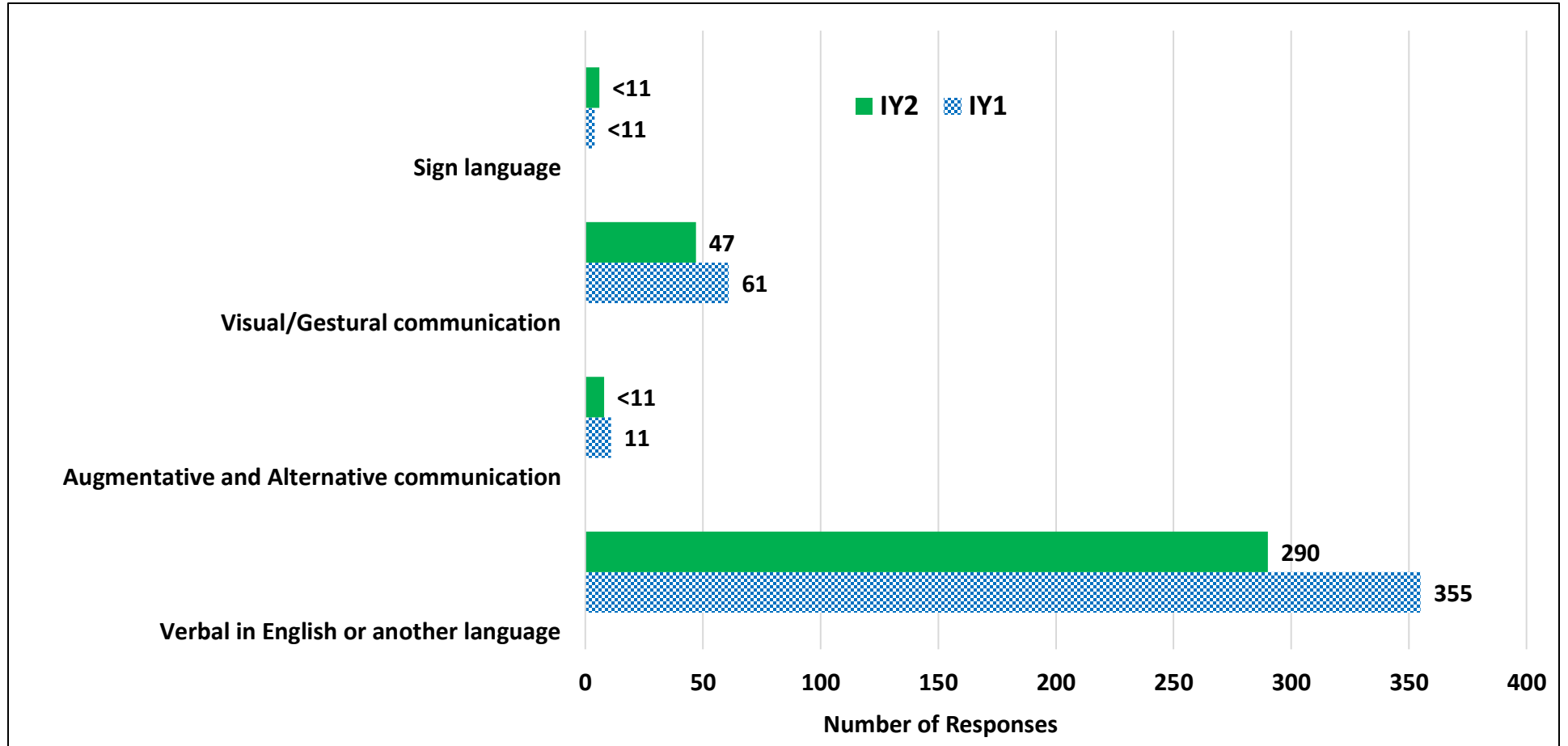
Where did the interview take place? (IY1 Q10 - IY2 Q1) \*During IY1 and IY2 all interviews took place remotely.

Who was present at the interview? (IY1 Q11 - IY2 Q2) Select all that apply.

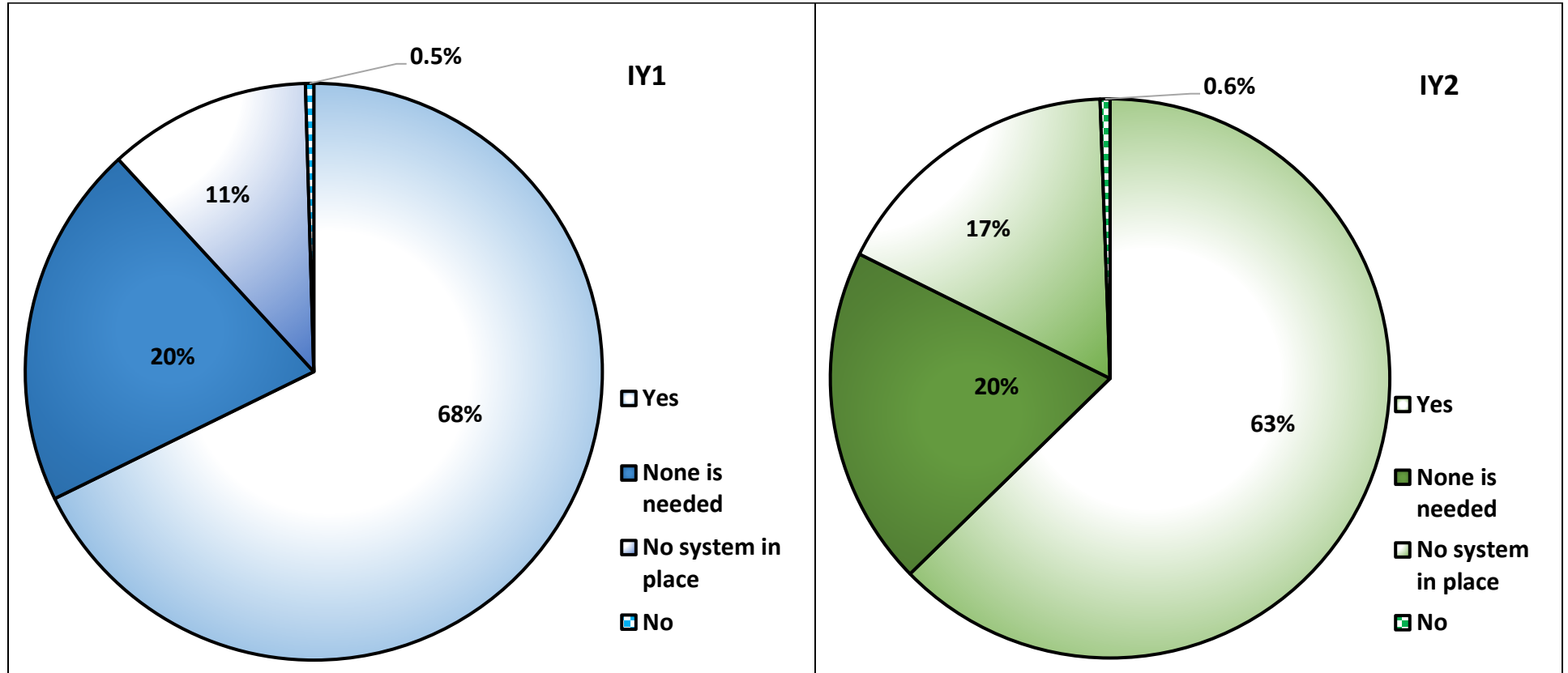


Note: In Interim Year 2, five individuals participated in the interview with both family and staff via video and one participated in the interview with both family and staff via phone.

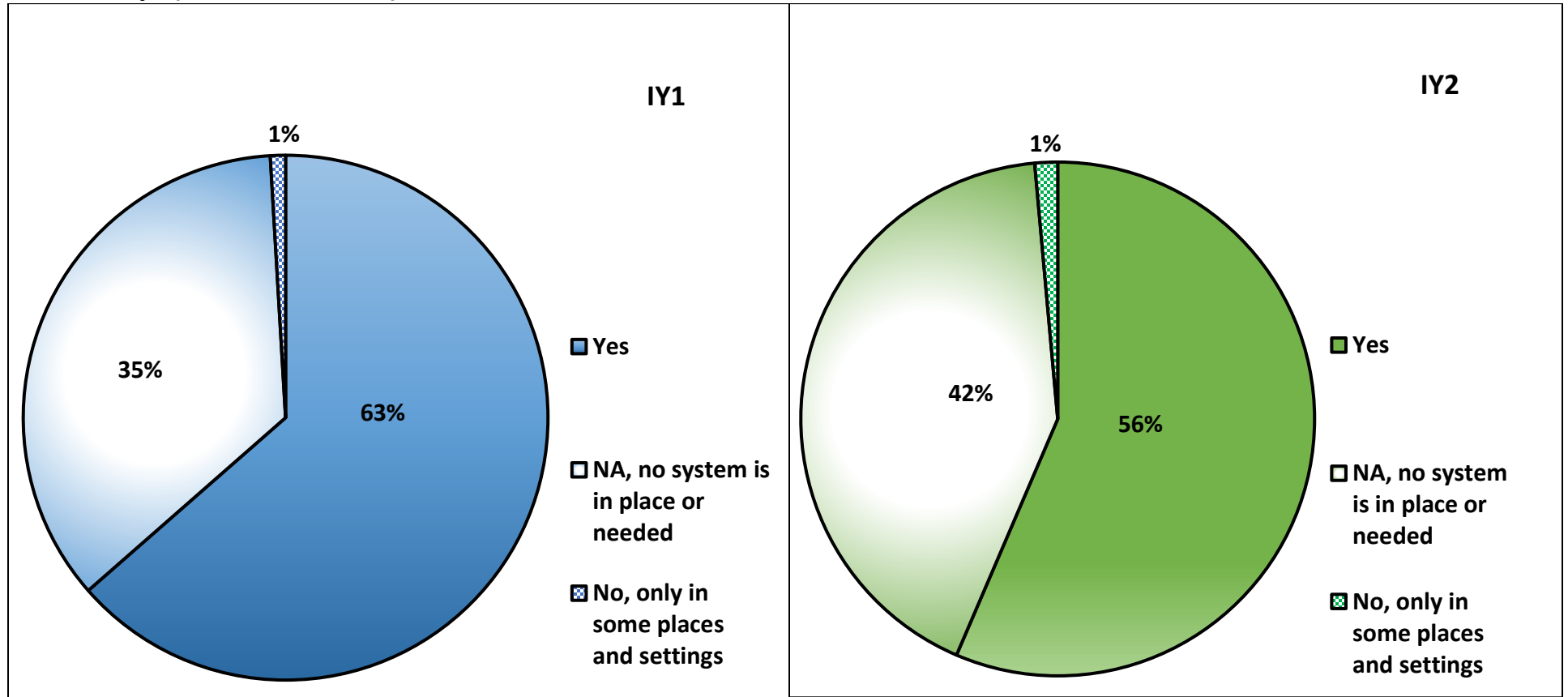
### What is the individual's preferred mode of communication? (IY1 Q12 – IY2 Q3)



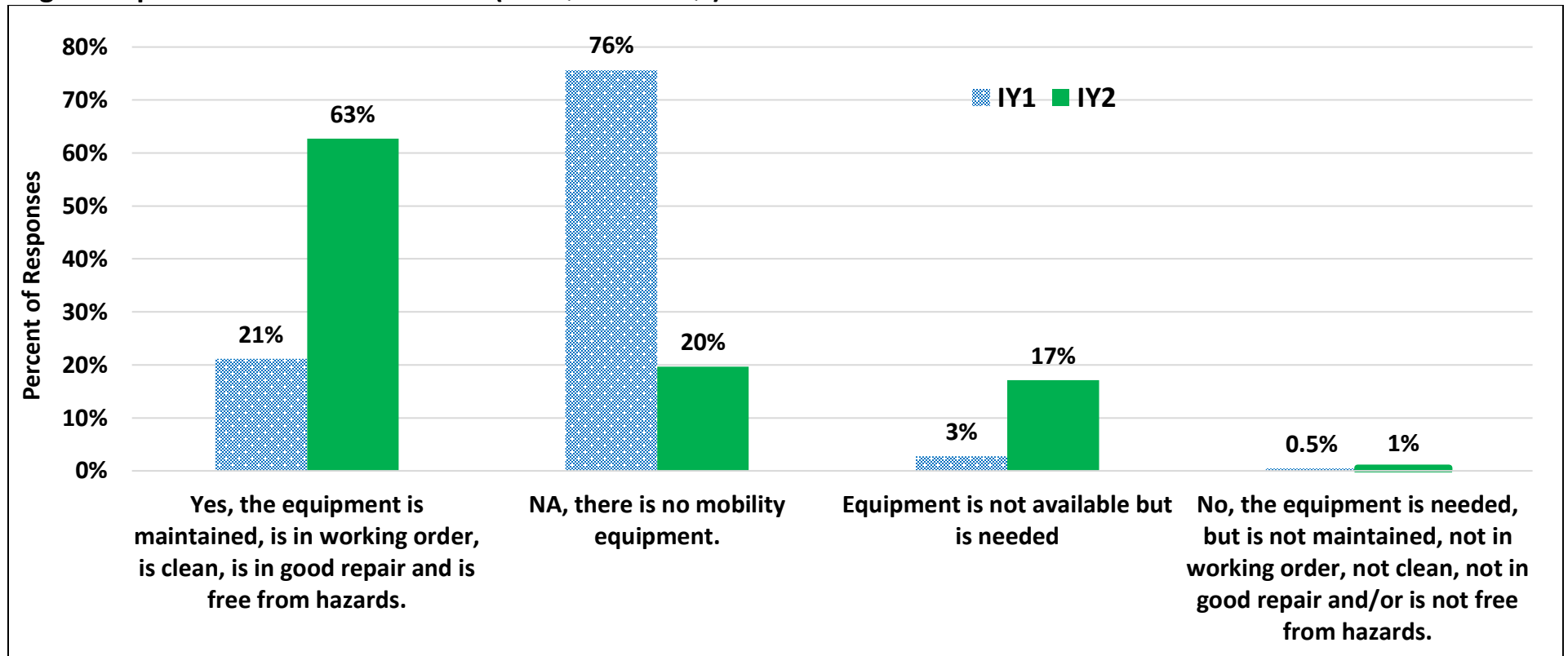
Is the individual's preferred mode of communication used? (IY1 Q13 – IY2 Q4)



Do you use your mode of communication everywhere you go, such as when you are at home, at work, at school and in your community? (IY1 Q14 – IY2 Q5)



**If the individual uses mobility equipment and/or other assistive equipment, is it: Available? In good working order? Clean? In good repair and free from hazards? (IY1 Q15 – IY2 Q6)**



**Who usually helps you in your day-to-day life? (IY1 Q16 – IY2 Q7) (Q7)**

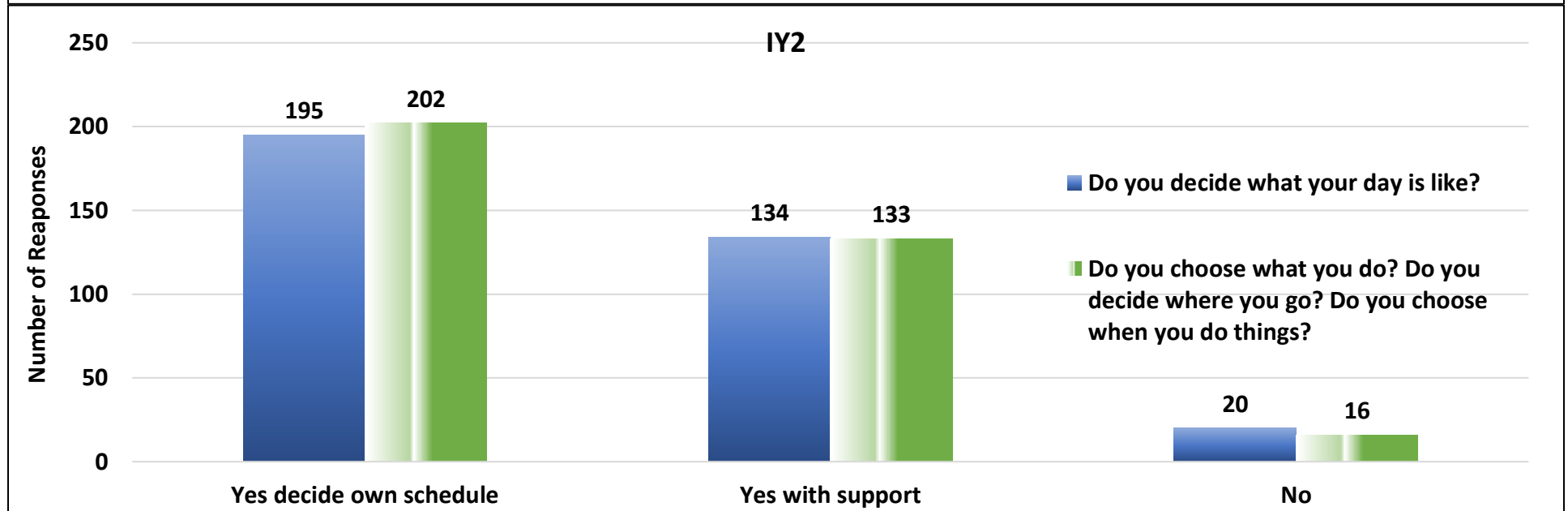
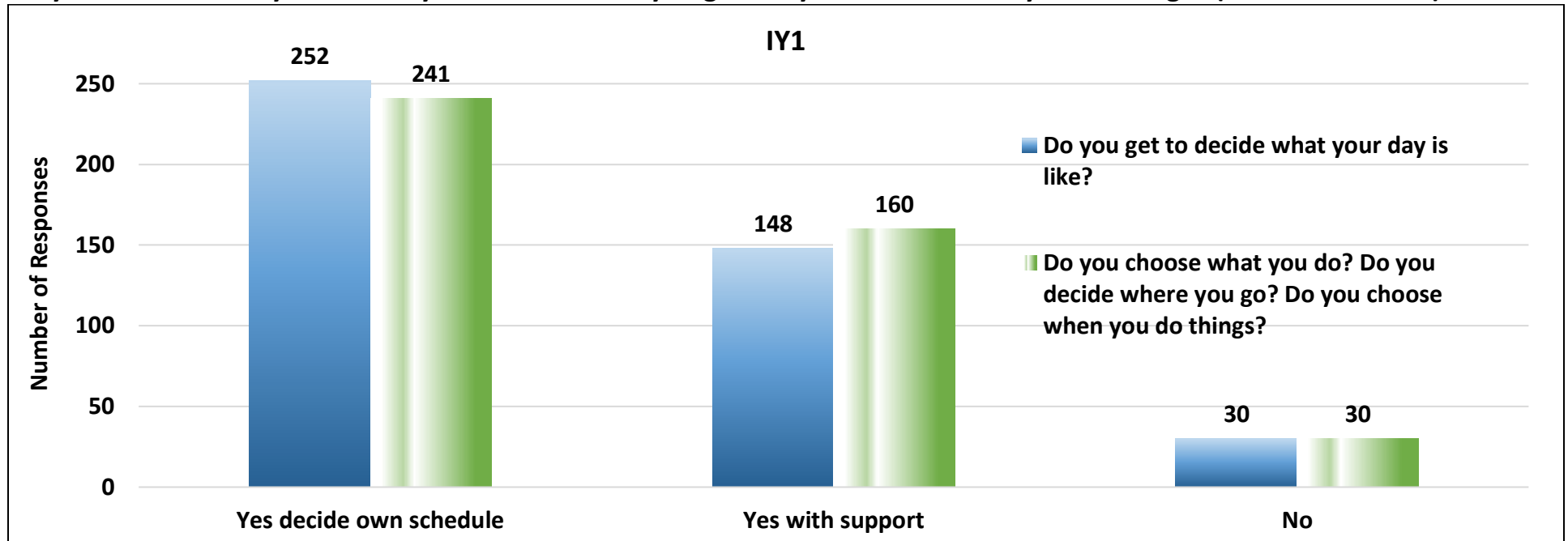
Participants could select up to four categories for this answer, therefore the total number of responses, indicated in parentheses after the categories below, was more than the number of participants. Additionally, some categories cannot be reported on due to privacy purposes because the data is greater than zero and less than 11. The categories that were the most frequently selected were, Staff, including Residential Habilitation Staff (42 in IY1, <11 in IY2), Nursing Staff (14 in IY1, <11 in IY2), Community Support Staff (<11 in both IY1 and IY2), Behavioral Support Staff (<11 in both IY1 and IY2) and Staff - Not Specified (208 in IY1, 206 in IY2), Relative/Family Member (195 in IY1, 169 in IY2), Not Applicable (70 in IY1, 30 in IY2), Supports Coordinator (12 in IY1, <11 in IY2) and Friend/Companion (<11 in both IY1 and IY2).

**Do you get to decide what your day is like? (IY1 Q17 – IY2 Q8)**

Region	Year	Yes, decide own schedule		Yes, with support		No		Total Number	Total Percent
CENTRAL	IY1	95	58%	59	36%	10	6%	164	38%
	IY2	32	80%	8	20%	0	0%	40	11%
NORTHEAST	IY1	26	68%	10	26%	2	5%	38	9%
	IY2	53	55%	36	37%	8	8%	97	28%
SOUTHEAST	IY1	33	49%	31	46%	4	6%	68	16%
	IY2	83	51%	70	43%	11	7%	164	47%
WESTERN	IY1	98	61%	48	30%	14	9%	160	37%
	IY2	27	56%	20	42%	1	2%	48	14%
STATEWIDE	IY1	<b>252</b>	<b>59%</b>	<b>148</b>	<b>34%</b>	<b>30</b>	<b>7%</b>	<b>430</b>	<b>100%</b>
	IY2	<b>195</b>	<b>56%</b>	<b>134</b>	<b>38%</b>	<b>20</b>	<b>6%</b>	<b>349</b>	<b>100%</b>

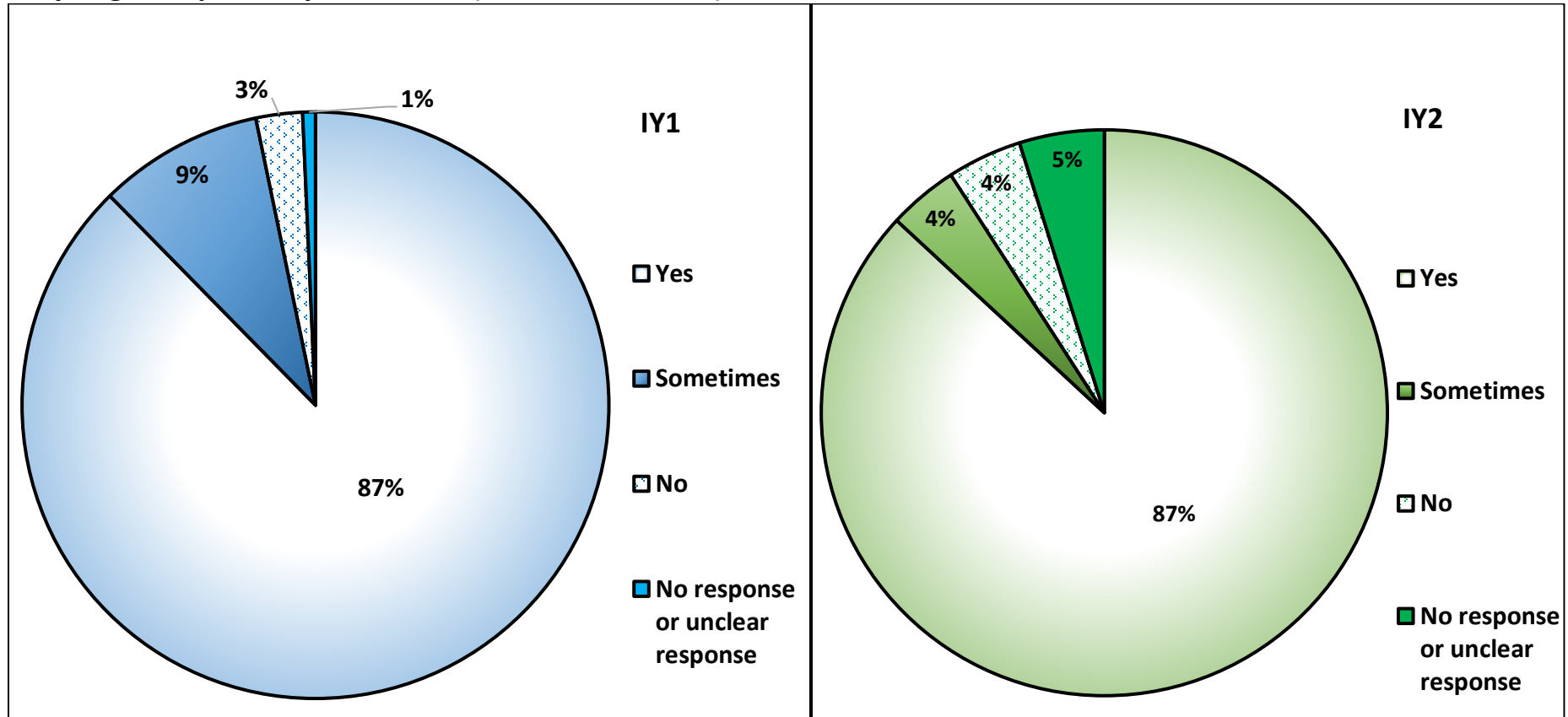


**Do you choose what you do? Do you decide where you go? Do you choose when you do things? (IY1 Q18 – IY2 Q9)**

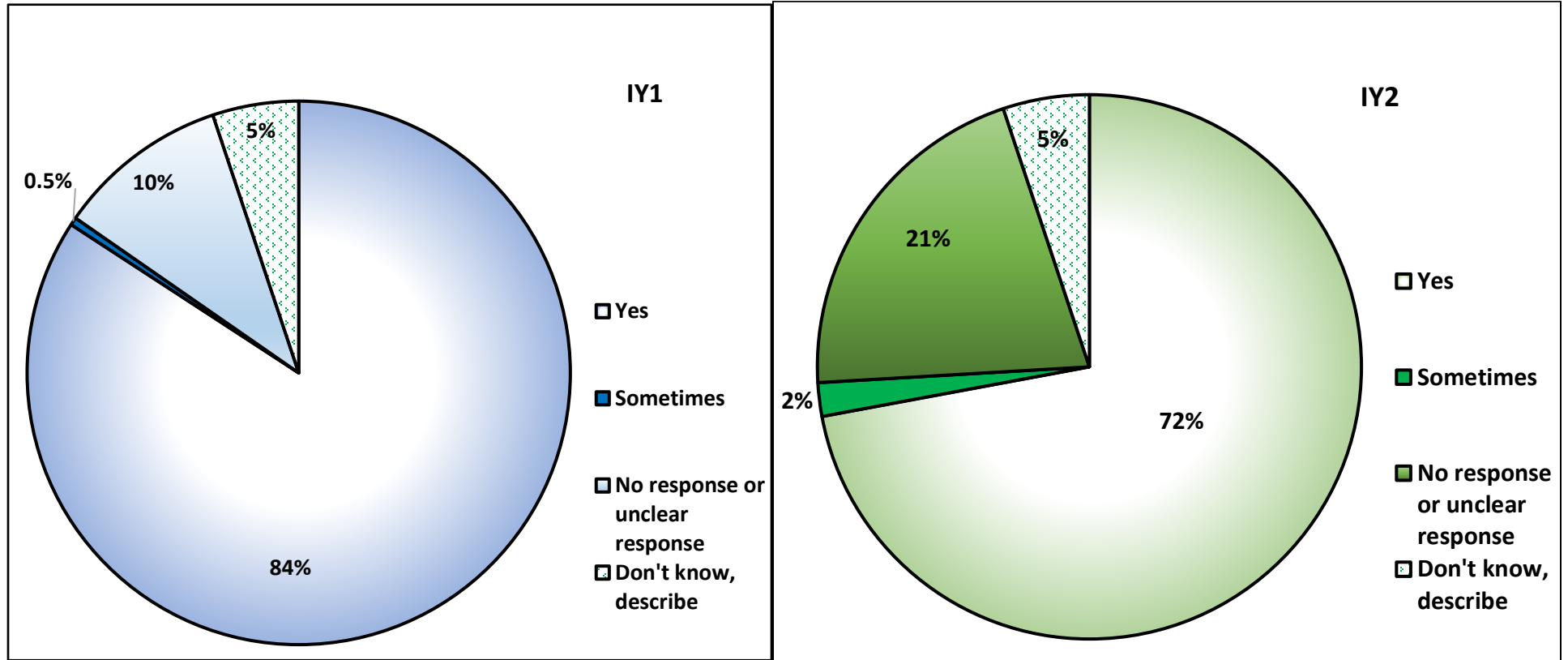


Note: Incomplete or no answer given responses for these questions were not included in the graphs.

### Do you get help when you need it? (IY1 Q19 – IY2 Q10)



Do you feel your staff are nice to you? (IY1 Q20 – IY2 Q11)

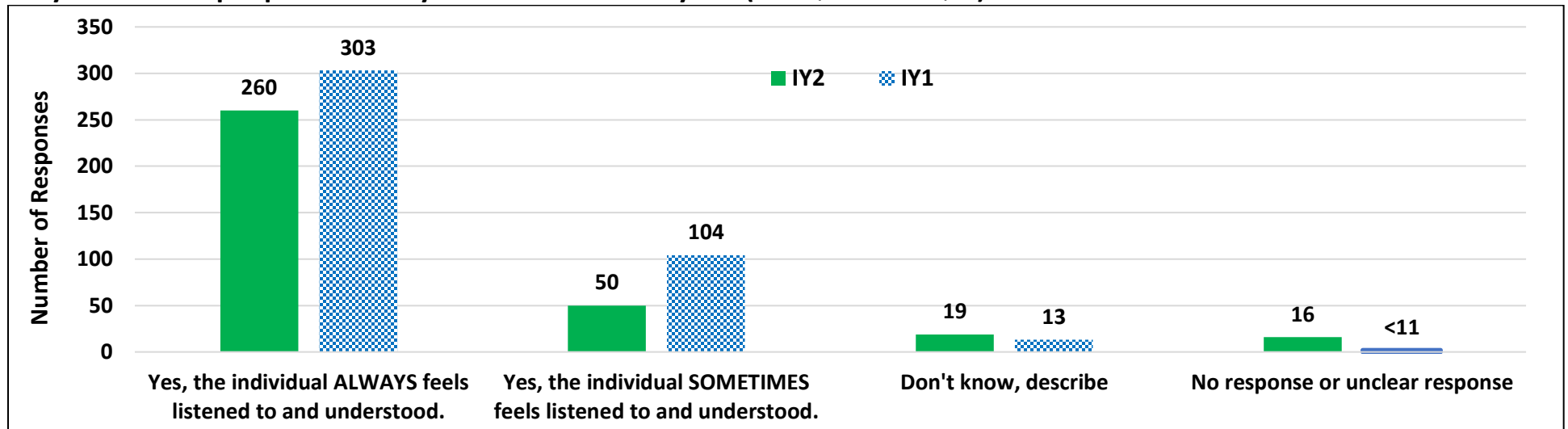


In IY1 survey, one person answered “no”.

**When you have changes in the people who help you, did you know they were leaving, and did you meet the new support person before s/he helped you? (IY1 Q21 – IY2 Q12)**

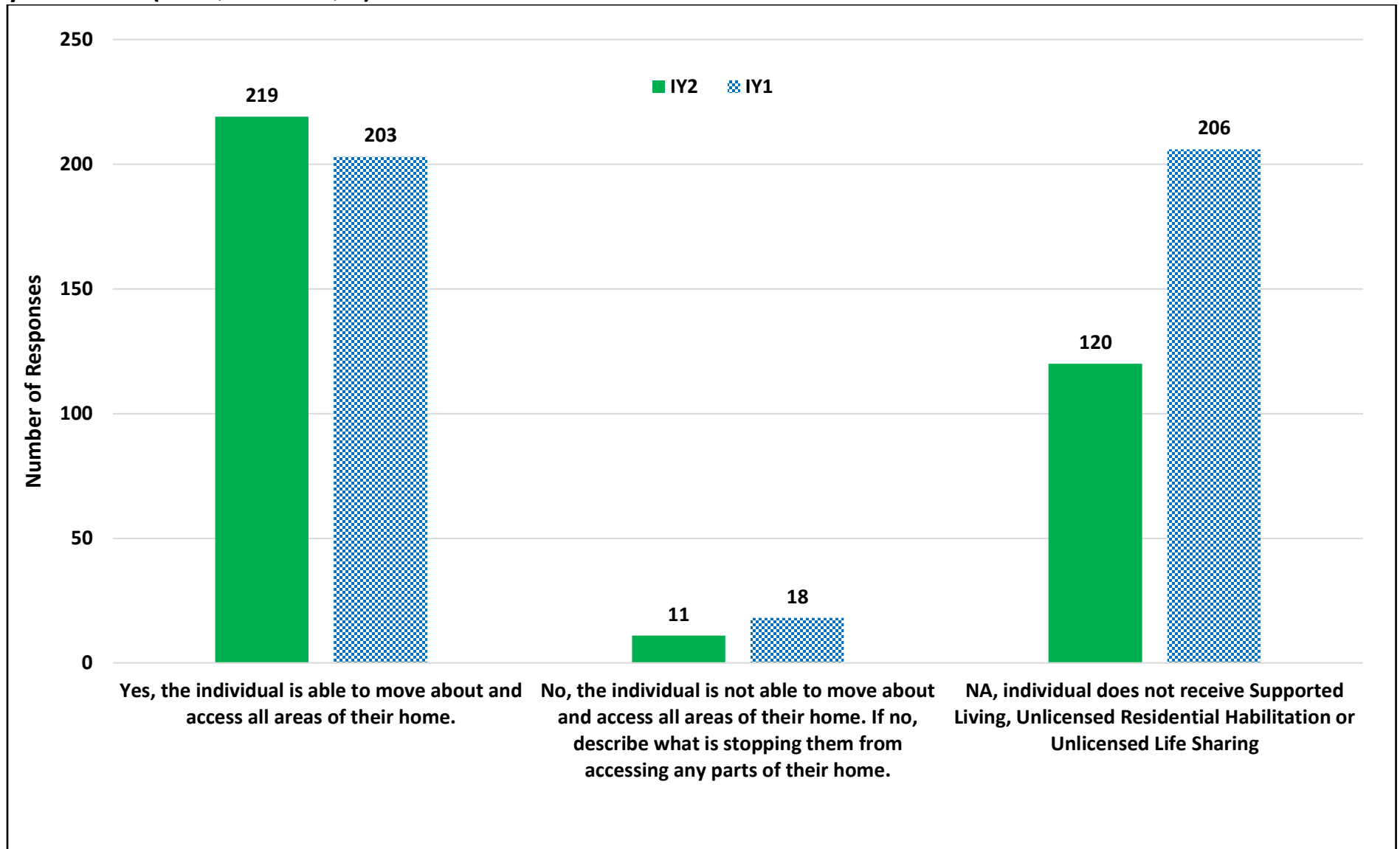
	IY1		IY2	
	Overall Total	%	Overall Total	%
The individual knew the support person was leaving but didn't meet the new support person ahead of time	25	6%	24	7%
Yes, the individual knew the support person was changing and met the new support person ahead of time	173	40%	158	45%
There were no changes in support person/s	144	33%	95	27%
No, the individual didn't know the support person was leaving, but did meet the new support person ahead of time	13	3%	15	4%
No, the individual didn't know the support person was leaving, but did not meet the new support person ahead of time	24	6%	14	4%
No response or unclear response	32	7%	29	8%
Don't know	20	5%	16	5%
<b>TOTAL</b>	<b>431</b>	<b>100%</b>	<b>351</b>	<b>100%</b>

**Do you feel that people listen to you and understand you? (IY1 Q22 – IY2 Q13)**



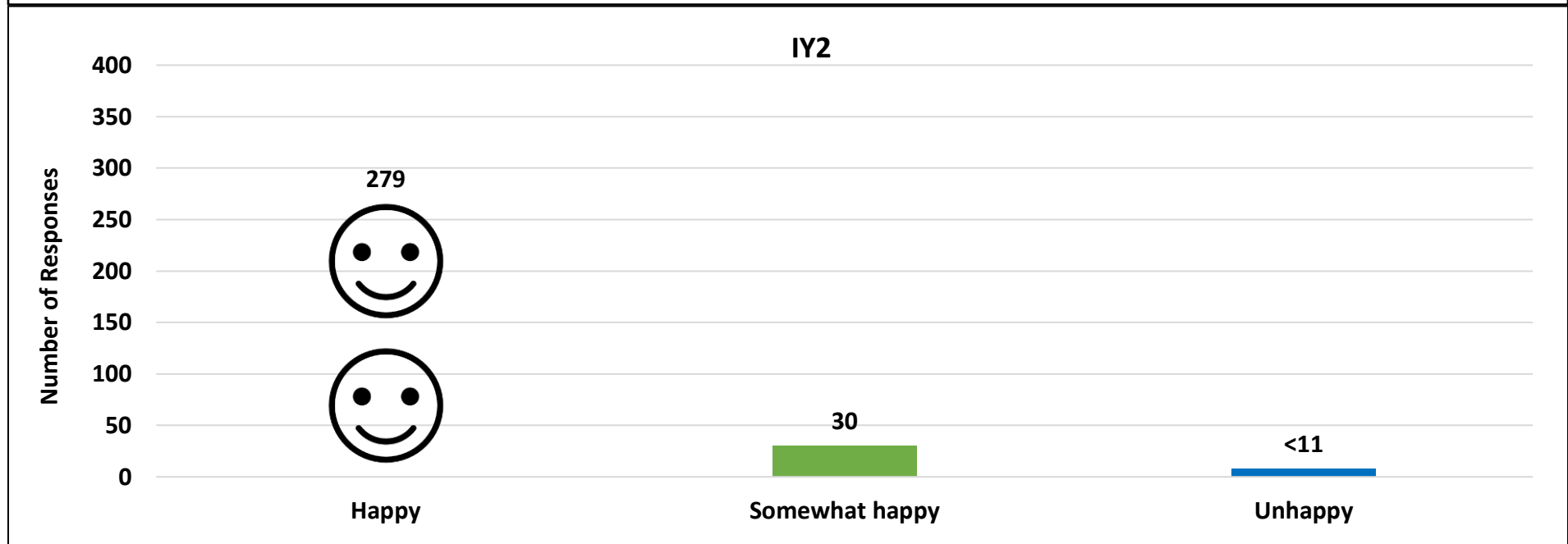
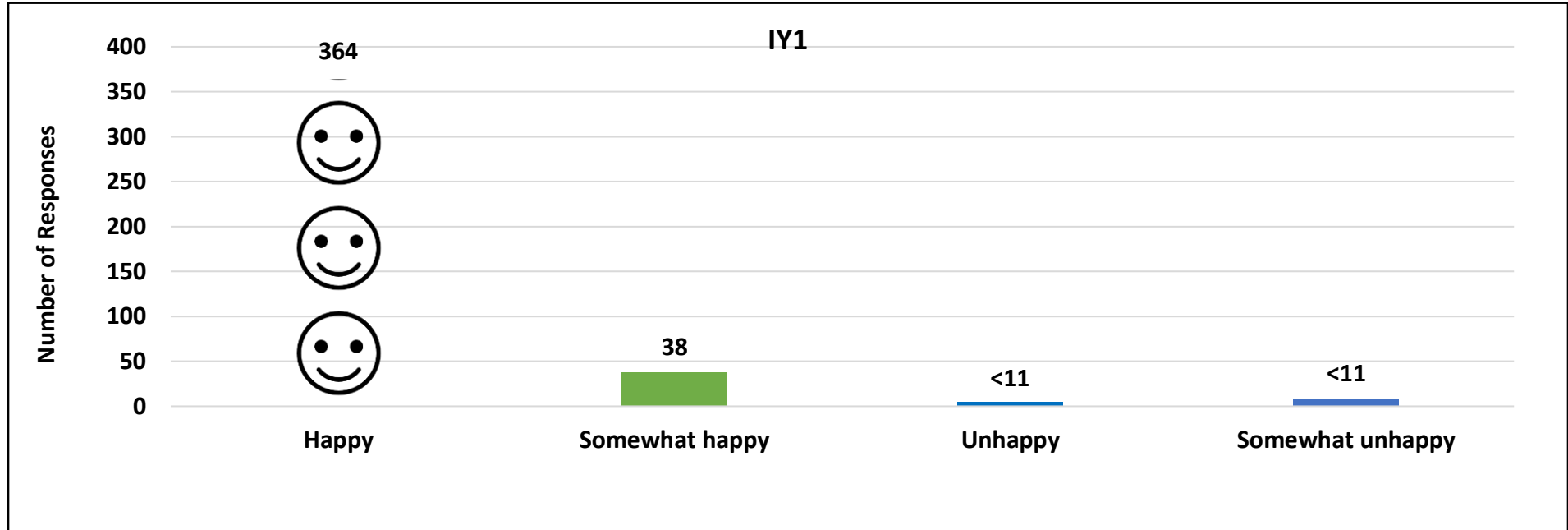
Note: Answers for the categories of “No, the individual NEVER feels listened to and understood”, and “No, the individual doesn't usually feel listened to and understood” were not included in the graphs because of few or no responses to these two questions.

**Are you able to move about and access all areas of your home? Is there anything stopping you from accessing any part of your home? (IY1 Q23 – IY2 Q14)**



Note: An unclear answer or no answer given response for these questions were not included in the graphs.

### How happy are you with your services and supports overall? (IY1 Q24 – IY2 Q15)



## D. Supplemental COVID Questions

During IY1

<b>Have you heard of the coronavirus (also known as COVID-19)? (Q25)</b>				
Yes	No	No response or unclear response	Don't Know, describe	TOTAL
405	16	<11	<11	431
94%	4%	1%	2%	100%
<b>Did someone talk to you about the importance of handwashing? (Q26)</b>				
Yes	No			TOTAL
418	13			431
97%	3%			100%
<b>Did someone talk to you about the importance of social distancing? (Q27)</b>				
Yes	No			TOTAL
407	24			431
94%	6%			100%
<b>Did someone talk to you about the importance of wearing a mask? (Q28)</b>				
Yes	No			TOTAL
416	15			431
97%	3%			100%
<b>Did someone talk to you about the importance of coughing into your sleeve? (Q29)</b>				
Yes	No			TOTAL
392	39			431
91%	9%			100%

During coronavirus time, did any of the following things happen? Select all apply. (Q30)								
Person had to move or change where they lived.	Person had to stop going to day program or other unpaid day activity.	Person had fewer hours going to their day programs, workshop, or other unpaid day activity.	Person had to stop working at their paid job.	Person had fewer work hours at their paid job.	Person stopped seeing their family and friends who don't live with them.	Person stopped going to school.	None of the above changed - daily life did not change because of the coronavirus.	Don't know, unclear response
18	186	56	63	<11	178	43	<11	<11

**If you were hospitalized for COVID-19, were you able to return to where you were living after you were discharged from the hospital? OR, did you have to go somewhere else first - like a nursing home or a rehab facility? (Q31)**

Yes, returned home	Individual was not hospitalized	No response or unclear response	TOTAL
<11	427	<11	431
1%	99%	0%	100%

**Do you have access to the internet in your home? (Q32)**

Yes	No	Don't Know, describe	TOTAL
380	49	<11	431
88%	11%	0%	100%

**Is there a computer, tablet (iPad or similar) or smartphone that you can use in your home? (Q33)**

Yes	No	Sometimes	Don't Know, describe	TOTAL
375	53	<11	<11	431
87%	12%	0%	0%	100%

**How does the internet work at home? (Q34) Would you say that:**

The internet ALWAYS works	The internet SOMETIMES works	The internet RARELY OR NEVER works	I do not have internet in my home	No response or unclear response	Don't Know, describe	TOTAL
375	53	<11	<11	431	<11	435
87%	12%	0%	0%	100%	0%	101%

**During coronavirus time did you use a remote (video) platform (like Zoom, SKYPE or Facetime) to get any services? (Q35)**

\* For example, did you use videoconferencing for job coaching or other day program activities by talking over the computer?

Yes	No	No response or unclear response	Don't Know, describe	TOTAL
226	202	<11	<11	431
52%	47%	0%	0%	100%



**What do you think about getting services through videoconference (Like Zoom, SKYPE, Facetime)? (Q36) Did you:**

Think it was OK - you would use it again but didn't really like it that much	Not like it	Like it	NA - Individual did not use videoconference	No response or unclear response	Don't Know, describe	TOTAL
62	31	131	197	<11	<11	431
14%	7%	30%	46%	1%	1%	100%

**Have you talked to health professionals (such as a doctor, nurse) using videoconference/telehealth? (Q37) (Zoom, SKYPE, Facetime)**

Yes	No	No response or unclear response	Don't Know, describe	Totals
172	254	<11	<11	431
40%	59%	1%	0%	100%

**What does the individual think about talking to health professionals using a videoconference? (Q38)**

Think it was OK - you would use it again but didn't really like it that much	Do not like it	Like it	NA - Individual did not use videoconference	No response or unclear response	Don't Know, describe	TOTAL
48	29	84	247	<11	16	431
11%	7%	19%	57%	2%	4%	100%

**What does the individual think about talking to health professionals using a videoconference? (Q39)**

Yes	No	I talked to some friends/family enough, and some not enough	NA - doesn't have friends or family	No response or unclear response	Don't Know, describe	TOTAL
273	62	72	11	<11	<11	431
63%	14%	17%	3%	2%	1%	100%

**During coronavirus time, how did you usually talk with your friends and family? (Q40) Those who don't live with you. Select all that apply.**

Phone	Email	Videoconference (SKYPE, ZOOM, Facetime, etc.)	In person	Don't know, describe	No response or unclear response	NA - didn't talk to family/friends	TOTAL
299	18	128	188	<11	<11	35	674
44%	3%	19%	28%	0%	0%	5%	100%

<b>During coronavirus time, did staff come into your house to support you? (Q41)</b>							
Yes	No	Staff never come to home to provide support	No response or unclear response	Don't Know, describe	TOTAL		
273	62	72	<11	<11	420		
63%	14%	17%	2%	1%	97%		
<b>Do your staff (who do not live with you) wear protective equipment? (Q42)</b>							
"Protective equipment" are things like masks and gloves used to stay healthy and safe and help others to stay healthy and safe.							
Yes - all staff, always	No - no staff, never	Some staff or sometimes	No response or unclear response	NA - Don't have staff, or not seeing staff right now, or all staff live with person.	They used to wear protective equipment, but do not anymore.	Don't Know, describe	TOTAL
254	<11	<11	<11	156	<11	<11	431
59%	2%	1%	1%	36%	0%	0%	100%
<b>Do you talk to your family and friends more now than, less than, or the same amount as before coronavirus time? (Q43)</b>							
The same amount as before coronavirus time	More than before coronavirus time	Less than before coronavirus time	No response or unclear response	Don't Know, describe	TOTAL		
238	50	131	<11	<11	431		
55%	12%	30%	2%	1%	100%		
<b>Do you feel more safe than before coronavirus time, less safe than before coronavirus time, or feel just as safe as before coronavirus time? (Q44)</b>							
Feel MORE safe than before coronavirus time	Feel the same as before coronavirus time	Feel LESS safe than before coronavirus time	No response or unclear response	Don't Know, describe	TOTAL		
44	275	70	16	26	431		
10%	64%	16%	4%	6%	100%		
<b>Do you feel more happy than before, less than, or the same amount as before coronavirus time? (Q45)</b>							
Feel MORE happy than before coronavirus time	Feel the same as before coronavirus time	Feel LESS happy than before coronavirus time	No response or unclear response	Don't Know, describe	TOTAL		
45	250	113	<11	16	431		
10%	58%	26%	2%	4%	100%		

**Are you getting support and/or services that are specific to you and your family's needs during the coronavirus time? (Q46)**

Yes, the individual and family strongly feels that needed support and/or services were provided during the pandemic.	Yes, the individual and family somewhat feels that needed support and/or services were provided during the pandemic.	No, the individual and family doesn't usually feel that needed support and/or services were provided during the pandemic. Explain.	No response or unclear response	Don't Know, describe	TOTAL
330	47	35	16	<11	431
77%	11%	8%	4%	1%	100%

**Is there anything else you'd like to tell me about your life during, or since COVID time? (Q47)**

Positive changes	No changes	Negative changes	TOTAL
101	90	351	542
19%	17%	65%	100%

## During IY2

<b>Have you heard of COVID-19 (also known as coronavirus)? (Q16)</b>						
Yes	No	No response or unclear response	Maybe	Don't Know	TOTAL	
287	33	<11	11	11	351	
82%	9%	3%	3%	3%	100%	
<b>Did you get the COVID-19 shot, also known as the "vaccine"? (Q17)</b>						
Yes, had one of two shots	Yes, fully vaccinated	Yes, but have not gotten booster	No response or unclear response	No	Don't know	TOTAL
<11	225	64	13	43	<11	351
1%	64%	18%	4%	12%	1%	100%
<b>If the individual has not been fully vaccinated, why not? (Q18) * Select all that apply.</b>						
I decided not to get it				13	19.4%	
I didn't have enough help/support to schedule an appointment				<11	1.5%	
I wasn't allowed to get it				<11	4.5%	
Someone else decided I would not get it				<11	10.4%	
Vaccine is scheduled, but haven't had it yet				<11	1.5%	
Other, describe				28	41.8%	
No answer				14	20.9%	
TOTAL				67	100%	

\* 278 individuals received the vaccine; table represents those who did not get the vaccine.

<b>Were there changes to your services and supports during COVID time? (Q19)</b>				
Like if you stopped getting some services, started getting some services over the computer or had to stay home more than before.				
Yes, there were changes	No, there were no changes	No response or unclear response	Don't know	TOTAL
250	92	<11	<11	351
71%	26%	1%	1%	100%

<b>Are those changes still part of your life? (Q20)</b>									
Yes, all changes are still in place	Some changes are still in place	Not applicable, no changes	No, everything has re-started	No response or unclear response	Don't know	TOTAL			
80	70	86	108	<11	<11	351			
23%	20%	25%	31%	1%	1%	100%			
<b>IY2-CQ6. Do you want to restart services? (Q21) * For the purposes of this interview, "re-start services" refers to: a. Re-starting services as they were before the pandemic; and/or b. Starting new services since the pandemic (for example, going to a different day program in-person, having new staff come to the home, etc.)</b>									
No	Yes, all services	Yes, some services	Not applicable	No answer/don't know	TOTAL				
29	108	14	167	33	351				
8%	31%	4%	48%	9%	100%				
<b>Why don't you want to re-start services? (Q22) Select all that apply.</b>									
Not applicable, no changes to life/routine or wants to restart all services	Liked what I did during COVID more	Don't like the services that are re-starting	Don't feel comfortable or safe	Haven't gotten enough information about re-starting	Services I got before COVID time aren't available anymore	Other, describe	Don't know	No response or unclear response	TOTAL
273	11	<11	15	<11	<11	19	<11	19	357
76%	3%	1%	4%	1%	2%	5%	2%	5%	100%
<b>Do you feel ready and prepared to re-start services? (Q23)</b>									
Yes, I felt ready to re-start services	Not applicable, no changes to life/routine or not going back to any services/supports	No, I didn't feel ready to re-start services	No response or unclear response	I felt ready to re-start some services and unready to re-start others	Don't know	TOTAL			
117	174	16	<11	14	20	351			
33%	50%	5%	3%	4%	6%	100%			

<b>Why didn't you feel ready? (Q24)</b> Select all that apply.									
NA, no changes to life/routine or felt ready to restart all services as they were before COVID	Liked what you did during COVID more	Didn't like the services that were re-starting	Don't feel comfortable or safe	Hadn't gotten enough information about re-starting	Services got before COVID time no longer available	Other, describe	Don't know	No response or unclear response	TOTAL
277	<11	<11	18	<11	<11	15	16	16	351
79%	1%	0%	5%	1%	1%	4%	5%	5%	100%

<b>Has anyone like your case manager/SC or staff talked to you about how to make you more ready to re-start services? (Q25)</b>					
Yes	NA, no changes to life/routine or not going back to any services/supports or feels ready to restart services	No response or unclear response	No	Don't know	TOTAL
65	237	11	25	13	351
19%	68%	3%	7%	4%	100%

<b>IY2-CQ11. Do you need more help or reminders to do things that keep you and other people safe and healthy from COVID? (Q26)</b> Like washing your hands, wearing a mask?				
No response or unclear response	I don't need more help and/or reminders to do this	I need more help and/or reminders to do this	Don't know	TOTAL
<11	235	108	<11	351
1%	67%	31%	1%	100%

<b>Is there always a clean mask for you to use if you want or need one? (Q27)</b>				
Yes, always	Sometimes	No response or unclear response	No	TOTAL
344	<11	<11	<11	351
98%	1%	1%	1%	100%

**Do your staff do things to keep you healthy and safe from COVID-19 like wash their hands, wear a mask, or help sanitize your surroundings? (Q28)**

Yes, all staff, always	Some staff or sometimes	NA - Don't have staff, or not seeing staff right now, or all staff live with person	No, no staff, never	No response or unclear response	Don't know	TOTAL
267	<11	58	<11	<11	<11	351
76%	2%	17%	2%	1%	3%	100%

**Since COVID started, have you made an emergency plan or made changes to an emergency plan for emergencies in the future? (Q29)**

Yes	No response or unclear response	No	Don't know	TOTAL
131	<11	185	30	351
37%	1%	53%	9%	100%

**Is there anything else you'd like to tell me about your life during, or since COVID time? (Q30)**

Positive changes	No changes	Negative changes	TOTAL
24	15	52	91
26%	16%	57%	100%