

## Listening Sessions Summary

Roswell People First: September 20, 2019

80 people – 48 self-advocates and 32 “supports” (staff/family)

Albuquerque People First: October 2, 2019

55 Total Participants: 14 self-advocates, 3 family member/guardian, 16 provider staff, 13 advocate agency staff, 9 DOH/DDSD staff

### Person Centered Planning and Individual Service Plan (ISP) Redesign

- Overall people said they spend the day they want to
- People liked a diverse schedule ex. “I like both my day program and out in community”
- “I get cabin fever if I’m home too much”
- In-home day hab would work best; I am exhausted by Friday and need to rest
- Almost everyone expressed a desire to be more independent although it looked different for different people (ride my bike without someone with me, work without a job coach, pay my own bills, stay home by myself, go into the community by myself, live by myself....)
- Pre-ISP meetings are very helpful for the people who said they had them
- Responses were mixed on whether they can have friends come to their home (Ex. “How can we see friends without Day Hab?”)
- Running your own meeting- some people said they run their own meeting, almost everyone else said they would like to learn how to do this
- Some people have keys to their home, some do not
- Most people said they are not allowed to get a snack in the middle of the night
- Some people choose when they go to bed, and some do not. One staff said “Low levels” can’t stay up late, they don’t get to choose when they go to bed. A person in Family living has to go their room at 9:00 every night so the owner has some time alone in his house.
- Having a separate budget meeting- some people liked this idea, some did not think it’s necessary
- People have alone time but have to stay inside.
- DOH should consider allowing services in mother-in-law home for some individuals.
- Having the people, you want at the meeting makes a big difference
- Some people have great teams that listen to them and others do not
- “Some providers say you have to come to their program a certain number of days a week or you can’t come at all. This isn’t fair because people like to do a variety of activities. DDSD should tell providers they can’t do this; people should be able to decide how often they want to go.”
- If you have 1-1 staff and you don’t need it maybe there is a time to change staff

### Therapies

- People who received therapy generally said it helps them, it’s the right amount and they like it

- Some people said they don't know what therapies are available.
- There were several people who said they want 1:1 therapy instead of 1:3 group therapy because the 1:1 therapy is more personal (ex. sometimes the group goes to movies for "group therapy")
- Not enough therapy in the Region.
- Someone said their team says they can't get therapy because it's too far away even though it's written in their plan
- Therapies are limited in the DD Waiver. People should be able to do nontraditional therapies like acupuncture and massage.
- Someone said their team wants them to have speech therapy, but they don't think they need it

### **Telehealth**

- "In Farmington people get speech therapy via skype and the people say it's not productive"

### **Personal Support Technology/Assistive Technology**

- People did not know what kind of technology is available or how to use it.
- People need more education and training about this service.
- People need examples of how it works.
- Some people described devices they have that really help them: Dragon dictate, powerchair; Big buttons to help me communicate, Alexa to control my radio, TV
- Someone was trying to get a Medical Alert System because of their health condition

### **Non-Medical Transportation**

- Most transportation is provided by the (Provider) agency.
- Some people said they would like to use Uber or Lyft
- Staff need to be trained on how to use public transportation, sometimes they are scared to use it
- Some people said they did not know this was available
- Some people have it on their budget and it really helps
- Some people said it's not enough money, they use it up too fast
- Options are needed for people with mobility issues
- Using the mileage is a challenge for providers because this can't be billed with another service at the same so how is staff to be paid?

### **Nursing**

- Not much comment on this, people said they don't really use this very much

### **Staying Home when I want to**

- Why can't people stay home if they want, if they are sick? Agencies say they can't afford to have individuals at home due to the amount of limited funding.
- Many people said they can stay home if they want to

- Some people said they are not allowed to stay home because they have a medical concern or it's inconvenient for staff
- I wish DDSD would make more independent apartments available so I could still have supports but me in my own place and be more independent.

### **Employment**

- A lot of people said they work (McDonald's, Antigua restaurant, Wal-Mart, Sonic, coffee shop, Peter Piper Pizza, Trading Post, etc) and everyone who works said they like their job
- People said the amount of job coaching was just right and they like their staff

### **Customized Community Supports**

- "In-home day hab would work best; I am exhausted by Friday and need to rest"