

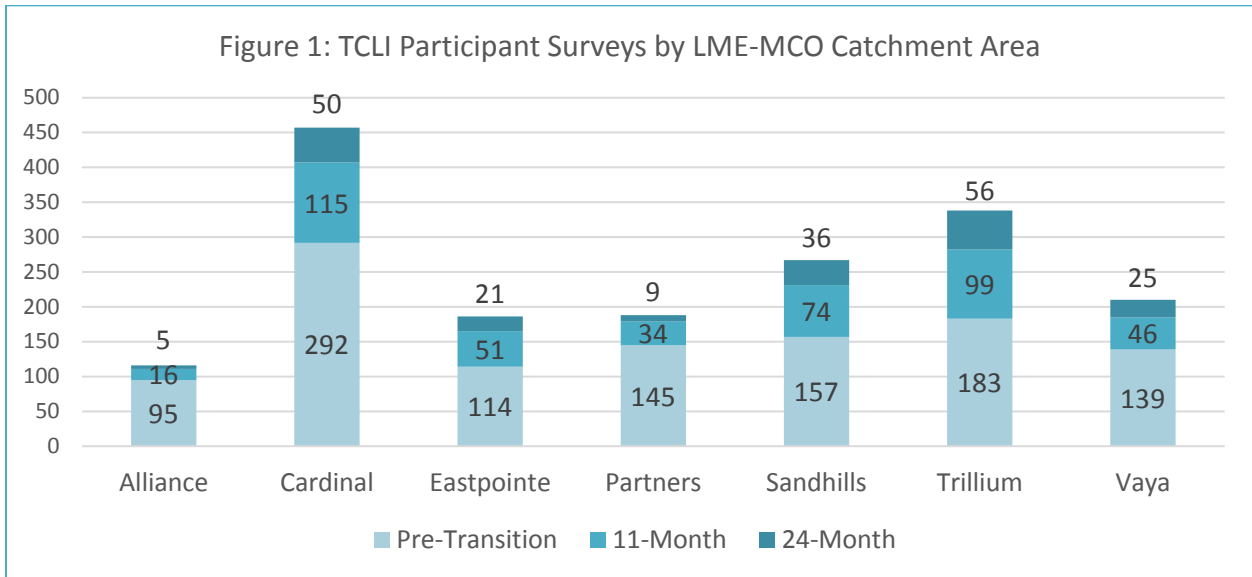
Appendix:
N. C. Transitions to Community Living Initiative Quality of Life Survey Summary Results
July 2017

Overview

The N.C. Transitions to Community Living Initiative (TCLI) Quality of Life surveys assess the extent to which individuals who transition to supportive housing in the community experience improvements in the quality of their daily lives, as well as areas in which they report obstacles and challenges. The surveys are designed to assess perceptions, satisfaction, and outcomes related to housing and daily living, community supports and services, and personal well-being.

LME-MCO staff administer the surveys in person during the transition planning period and again 11 and 24 months after the individual’s transition to supportive housing. They then submit survey responses through the State’s secure, web-based survey application.

This annual report summarizes 1,183 TCLI participants’ responses to a total of 1,762 surveys submitted through March 31, 2017. The total number includes 1,125 pre-transition, 435 11-month, and 202 24-month surveys.¹ (See Figure 1.)



Note. For all analyses in this report, each survey is assigned to the LME-MCO that submitted it or the LME-MCO with which the submitting LME-MCO later merged. A participant may be housed in and/or subsequently move to different LME-MCO catchment areas.

¹ As of May 2017, pre-transition Surveys had been completed and submitted for 83 percent of all individuals housed through March 31, 2017, and for 66 and 64 percent, respectively, of individuals housed for 11 and 24 months. Although individual survey participation is voluntary, LME-MCO compliance with the Quality of Life survey requirement is an area of ongoing State team performance monitoring. To date, 76 percent of all expected surveys have been submitted. Since the previous annual report, life-of-project pre-transition survey submission rates have increased by 8 percent, 11-month surveys by 7 percent, and 24-month surveys by 28 percent.

TCLI participants' perceptions and experiences related to their housing and services 11 and 24 months after transitioning to the community are summarized and compared to their pre-transition survey responses. Response summaries for select indicators are shown for individuals housed in different LME-MCO catchment areas. The final section of the report explores 11- and 24-month survey indicators that may differentiate between individuals who have maintained housing to date and those who subsequently left housing.

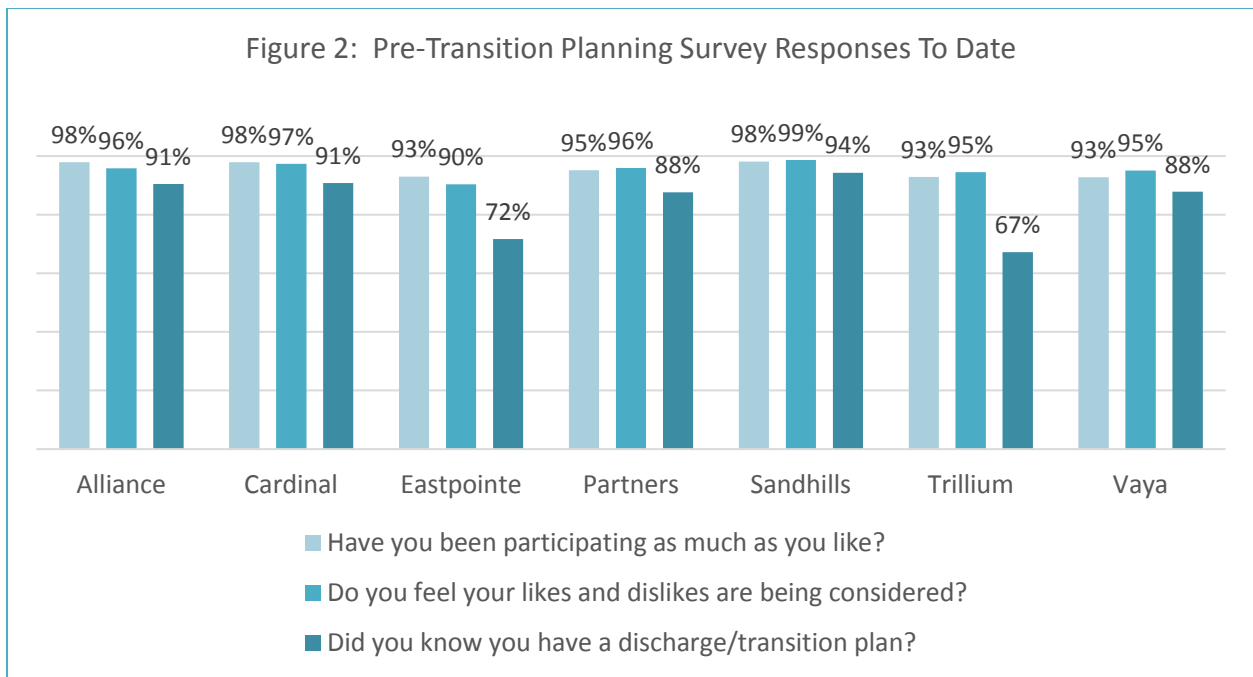
Survey results presented in this report are cumulative and include response data previously reported through December 2015 as well as new surveys submitted through March 2017. Differences between results reported in current and previous annual reports thus reflect trends in the responses of individuals surveyed since December 2015. Particularly where sample sizes are small, year-to-year and LME-MCO differences should be interpreted with caution.

Survey results are reported in the following sections of this report:

- I. **Pre-Transition Planning** presents responses for questions unique to the pre-transition survey. Response data are reported both statewide and by LME-MCO.
- II. **Quality of Life in Supportive Housing** compares 11- and 24-month surveys to pre-transition responses related to the following topics:
 - Community Integration and Personal Control
 - Health and Well-Being
 - Services and Supports
 - Satisfaction with Housing and Community
- III. **Response Patterns by LME-MCO Catchment Area**, new in this year's annual report, summarizes survey data for participants living in different LME-MCO catchment areas, using aggregated Quality of Life and Satisfaction Index measures.
- IV. **Predictors of Housing Stability** compares 11- and 24-month survey responses of individuals who maintained housing through the report period and those who later left housing. Indicators that may differentiate the two groups are explored.

I. Pre-Transition Planning

Responses of 1,020 individuals who have completed the pre-transition survey indicate that participants' transition-planning experiences continue to be positive, with some variability across LME-MCOs.² The vast majority of individuals reported they had been participating as much as they liked in conversations about their services and moving (96%), and that their likes, dislikes, and things important to them were being considered (96%).



Fewer participants reported knowing that they had a discharge/transition plan (85%), and responses to this question were more variable across LME-MCOs. Statewide, however, LME-MCOs have made progress toward ensuring participants are informed of having transition plans to assist in decisions regarding needed services and supports. While 82 percent of all participants surveyed through calendar year 2015 (N = 589) were aware of having a transition plan, the comparable percentage for individuals surveyed in calendar years 2016 and 2017 (N = 535) was significantly higher at 88 percent.³

² For this and all subsequent analyses, 105 pre-transition surveys are excluded based on a reported survey date that indicates participant may have responded in reference to supportive housing rather than the pre-transition living arrangement. Reported survey dates for 82 percent of the 105 were before January 2016 and responses were thus included in previous annual reports.

³ Throughout this document, "significant" is used exclusively to denote statistically significant analysis results.

II. Quality of Life in Supportive Housing

In numerous areas related to community integration and personal control, well-being, and services, participants were significantly more likely to report positive experiences after transitioning to supportive housing in the community. The most substantial increases in the percentages of individuals reporting positive experiences occurred in relation to aspects of community integration and personal control.

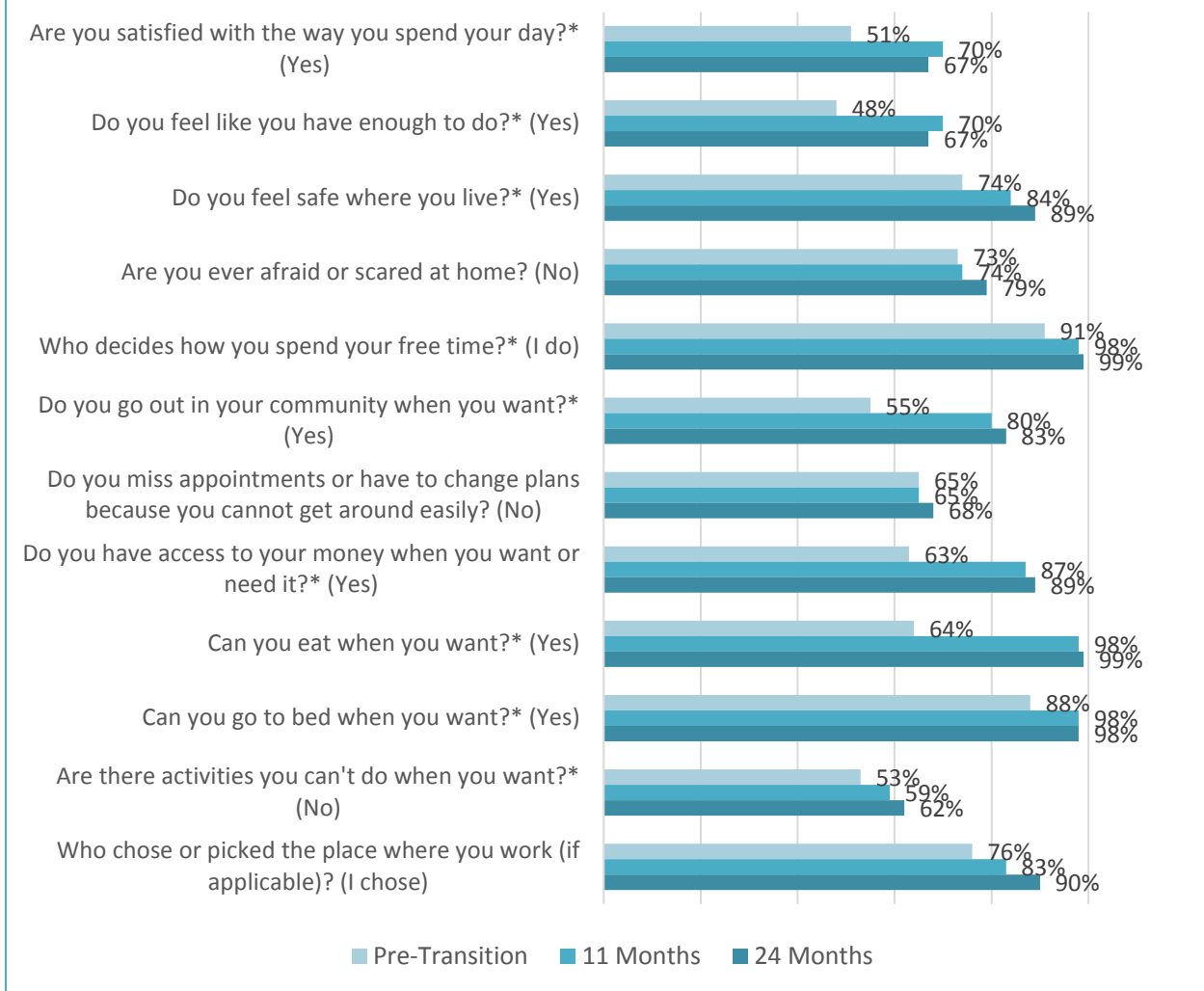
Community Integration and Personal Control

Significantly larger percentages of respondents reported positive experiences related to most aspects of community integration and personal control after transitioning. More respondents indicated satisfaction with daily activities. Smaller percentages reported not being able to go into the community or not being able to do preferred activities when desired. More individuals also reported feeling safe in their homes, with some indication of a further increase between 11- and 24-month survey points. (See Figure 3A.)

As a follow-up question, participants were asked about obstacles that may keep them from going out into the community when they want or choose. Fewer than half (48%) of pre-transition respondents said the question did not apply, that they do go into the community to do things when they chose. More than two-thirds (68%) of individuals who had transitioned to the community reported the same. Four of the seven listed reasons also were reported as obstacles by significantly smaller percentages of respondents after moving to supportive housing. (See Figure 3B.)

After transitioning to supportive housing, more individuals reported going out into their communities when they want to.

Figure 3A: Community Integration and Personal Control at Pre-Transition, 11 and 24 Months

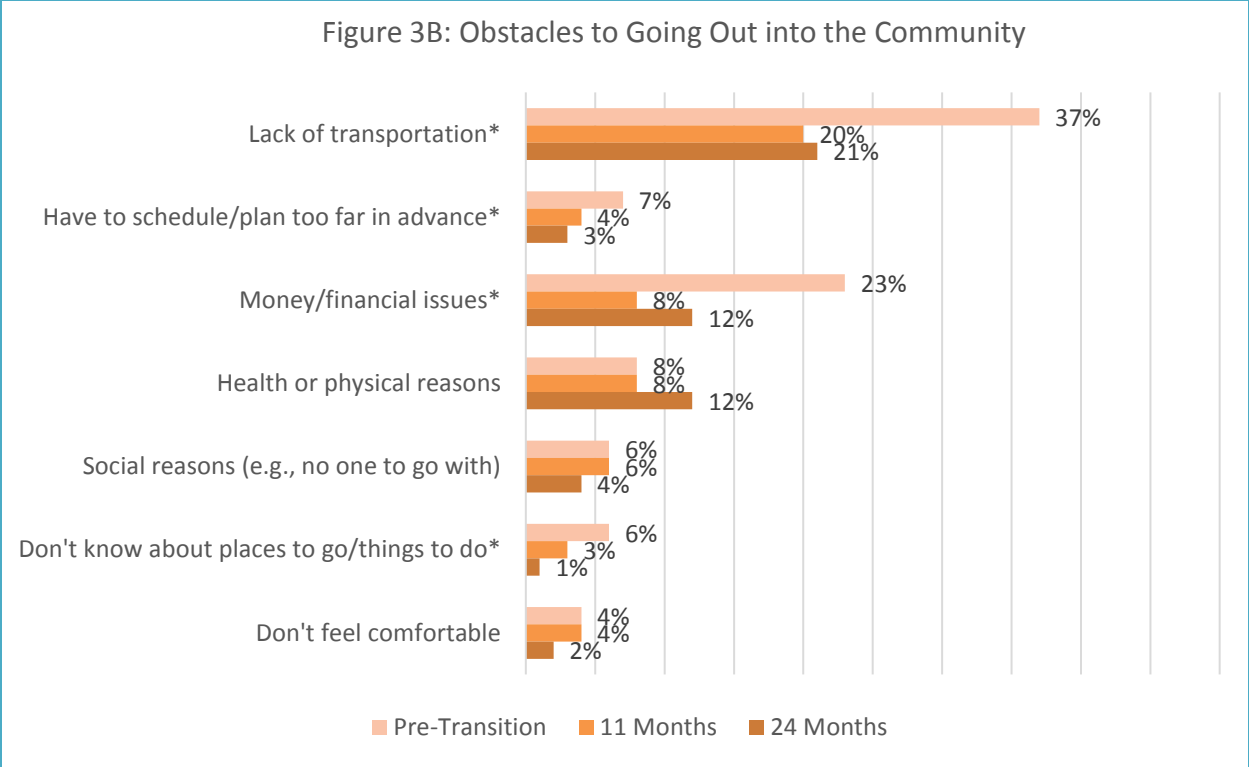


"No Response" and "Unsure" responses are excluded from percentage denominators.

*Pre- to post-transition percentage change is statistically significant.

Nearly one-third of participants living in the supportive housing cited one or more obstacles to going out in the community. Transportation was the most common barrier at all time points, reported by approximately two out of every five respondents before transition and one of every five participants in supportive housing. The percentage of post-transition surveys in which respondents reported transportation obstacles ranged from 15 to 32 percent by LME-MCO.⁴

⁴ By LME-MCO catchment area, percentages of post-transition surveys in which respondents cited transportation obstacles were as follows: Cardinal (15%), Sandhills (15%), Eastpointe (22%), Vaya (22%), Trillium (24%), Alliance (25%), Partners (32%).



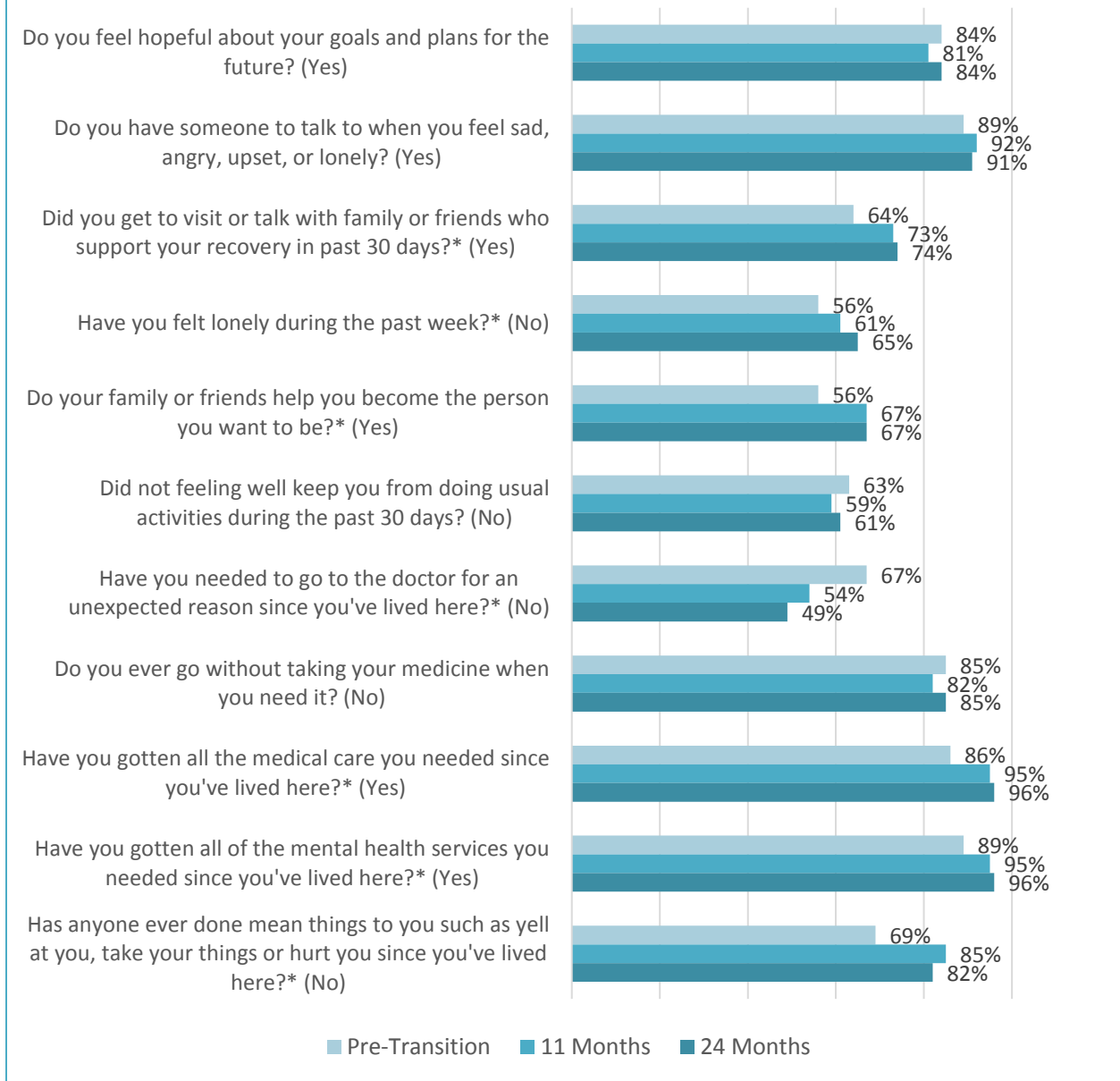
*Pre- to post-transition percentage change is statistically significant.

One of every five individuals in supportive housing cited lack of transportation as a reason for not going out into the community.

Health and Well-Being

Compared to pre-transition survey respondents, larger percentages of individuals in supportive housing reported visiting or talking with friends or family recently and receiving all needed medical and mental health services. Smaller percentages reported feeling lonely or being hurt by others. However, percentages of respondents who reported having gone to the doctor for an unexpected reason increased from 33 percent among pre-transition respondents to 51 and 46 percent at 11- and 24-month follow-ups, respectively. (See Figure 4.)

Figure 4: Health and Well-Being at Pre-Transition, 11 and 24 Months



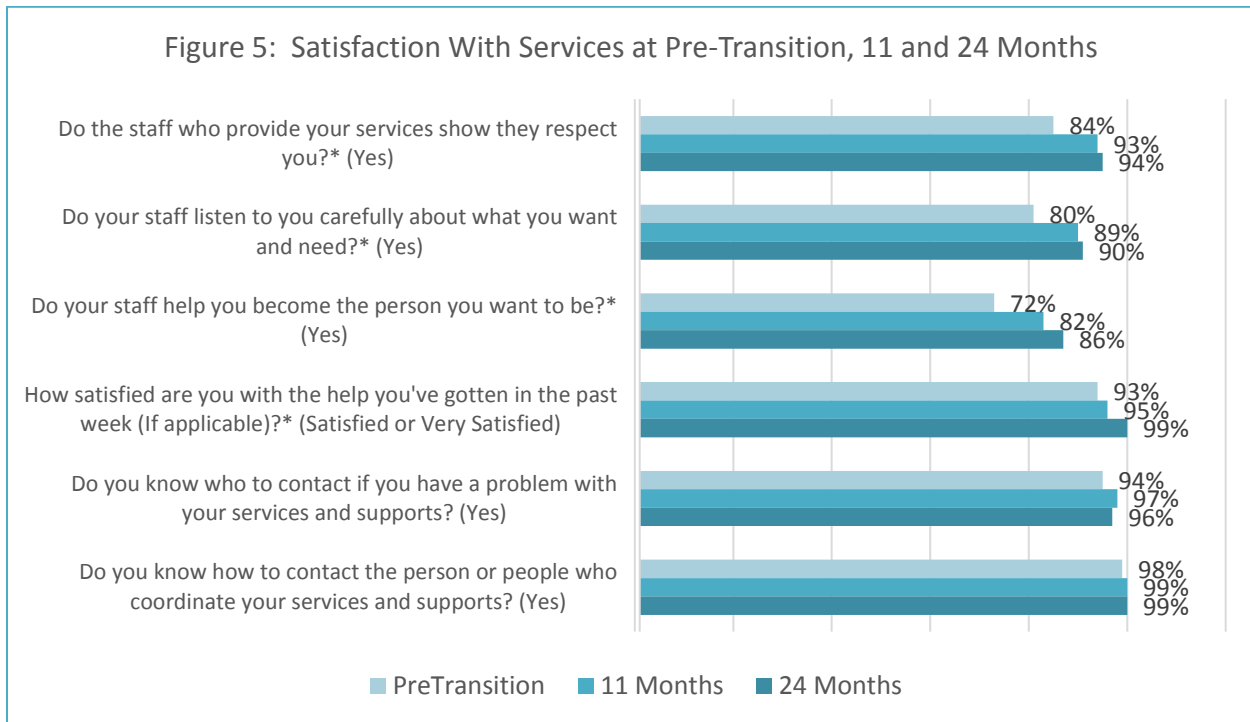
“No Response” and “Unsure” responses are excluded from percentage denominators.

*Pre- to post-transition percentage change is statistically significant.

Individuals in supportive housing were about 1.5 times more likely to report having to see a doctor for unexpected reasons.

Services and Supports

Participants continue to report more positive experiences and greater satisfaction with services and providers after transitioning to the community. Compared to pre-transition respondents, individuals in supportive housing were approximately ten percent more likely to positively evaluate the staff who provide their services. (See Figure 5.)



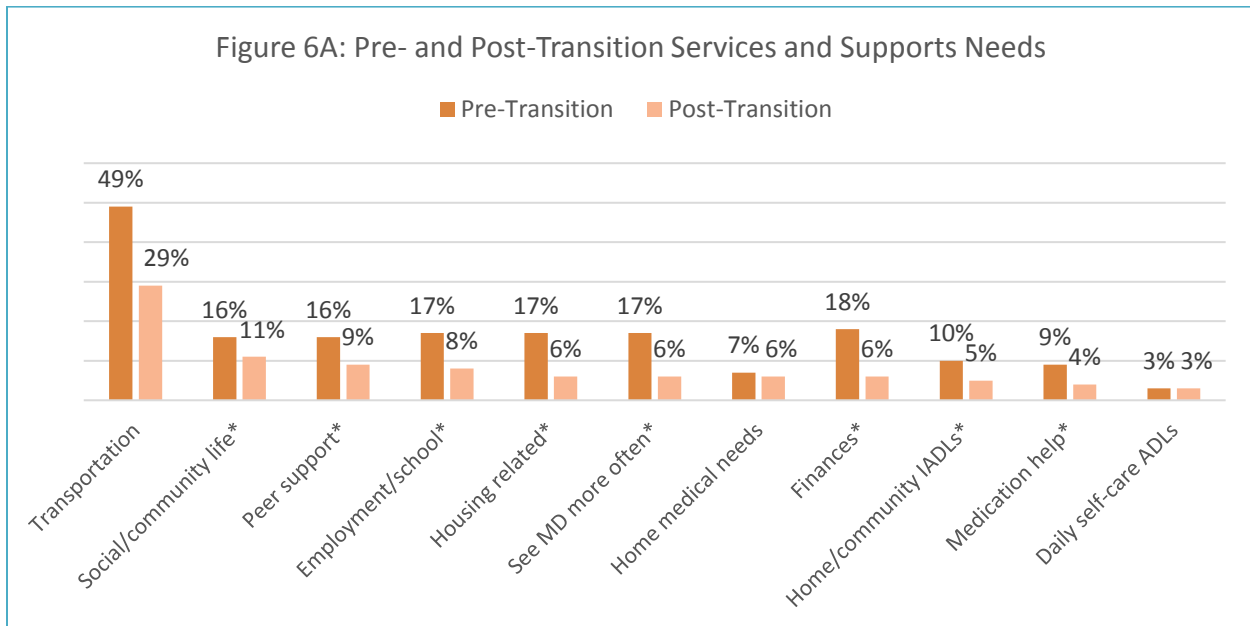
“No Response” and “Unsure” responses are excluded from percentage denominators.

*Pre- to post-transition percentage change is statistically significant.

Although most individuals reported they had received all the medical and mental health services they needed while living in their current home (see Figure 4), two-thirds (66%) of pre-transition respondents and nearly half (44%) of individuals in supportive housing identified additional services or supports they needed and were not receiving at the time of the survey. Before transition, individuals identified an average of two additional needed services. Individuals in supportive housing identified 1.5 additional needed services on average.⁵

⁵ This difference is statistically significant. Factors such as the proximity of the individual’s survey and transition dates may influence whether reported pre-transition service and support needs reflect services initiated during in-reach. Survey data related to pre-transition services thus may not fully reflect the number or magnitude of service needs before individuals were identified as TCLI population members.

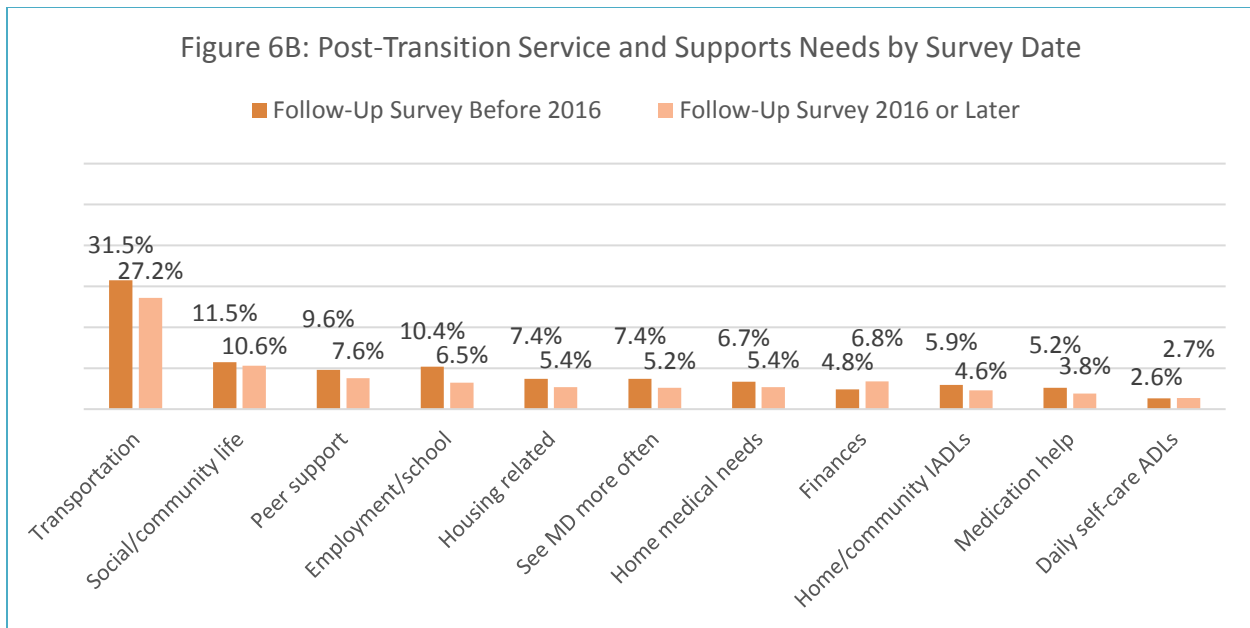
Transportation was the most frequently identified need, both before and after individuals transitioned to the community. Consistent with previous annual reports, the next three most commonly identified post-transition support needs were *Help with my social or community life*, *Peer support services*, and *Help finding employment or going back to school*. (See Figure 6A.)



Note. Post-transition responses include 11- and 24-month surveys.
 *Pre- to post-transition percentage change is statistically significant.

Compared to post-transition surveys conducted before calendar year 2016, smaller percentages of participants identified most of the assessed services and supports as additional needs in follow-up surveys conducted in the 2016-2017 period. (See Figure 6B.) Percentages were nonsignificantly lower in more recent post-transition surveys for all services and supports except *Finances* and *Daily self-care ADLs*. These differences represent approximately a 20 percent decrease in the average rate with which housed participants identified each service or support as one they needed and were not currently receiving.⁶

⁶ The assessed services and supports were identified as additional needs in an average of 10 percent of pre-2016 follow-up surveys compared to 8 percent of 2016 and 2017 follow-up surveys.



Post-transition responses include 11- and 24-month surveys.

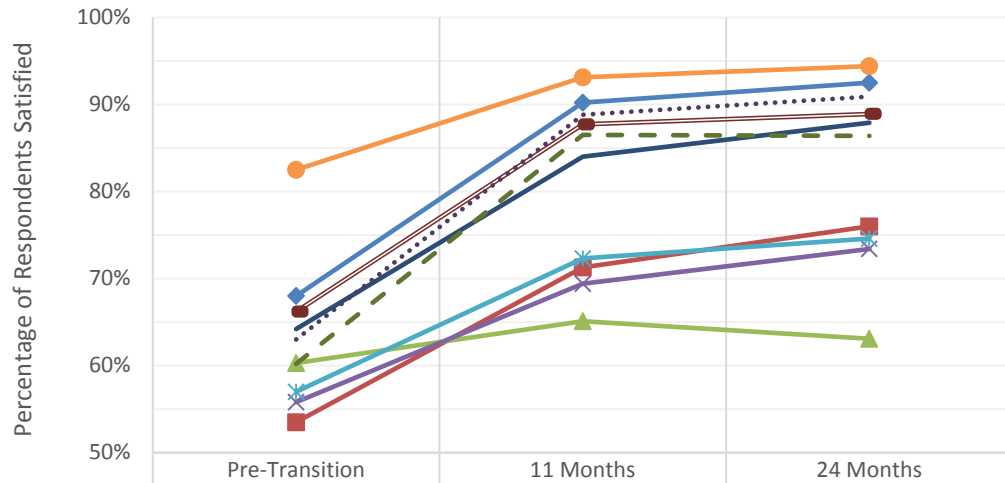
Satisfaction with Housing and Community

Figure 7A illustrates the percentages of respondents who indicated at each timepoint they were satisfied with various aspects of their housing and communities. In all areas assessed, significantly higher percentages of participants were satisfied and/or lower percentages were dissatisfied after transition to supportive living.

Larger percentages of participants were satisfied with all assessed aspects of their housing and community after transition.

High percentages of respondents reported satisfaction with healthcare and shopping near their homes in the community and with their landlords. Areas with the lowest percentages of respondents reporting satisfaction were church, parks/open space, and leisure/entertainment options near their new homes, although many reported “No opinion” about these three areas (28%, 21%, and 12%, respectively). Areas with the highest post-transition rates of participant dissatisfaction were transportation (23%), leisure (15%), home location (12%), and home maintenance (10%).

Figure 7A: Satisfaction with Housing and Community

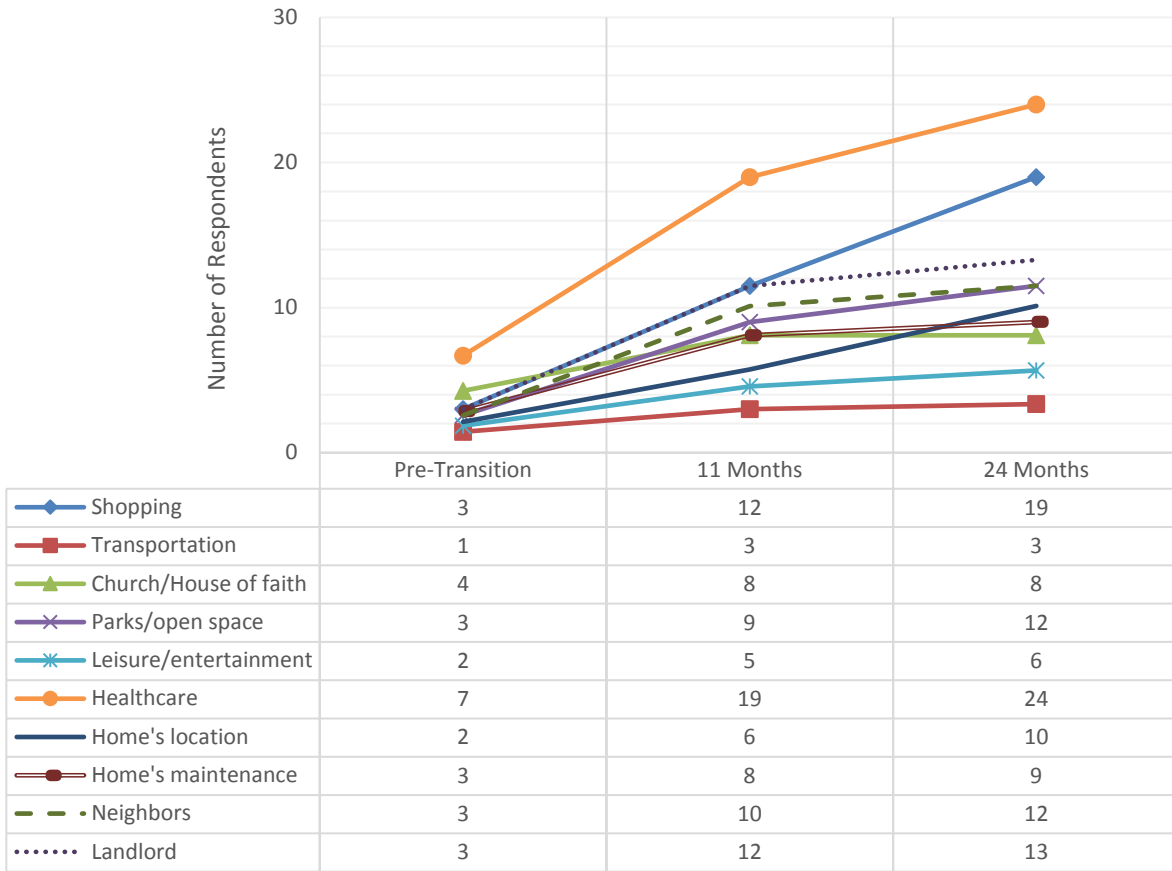


	Pre-Transition	11 Months	24 Months
Shopping	68%	90%	93%
Transportation	54%	71%	76%
Church/House of faith	60%	65%	63%
Parks/open space	56%	69%	73%
Leisure/entertainment	57%	72%	75%
Healthcare	83%	93%	94%
Home's location	64%	84%	88%
Home's maintenance	66%	88%	89%
Neighbors	60%	87%	86%
Landlord	63%	89%	91%

Lower “Satisfied” percentages do not necessarily indicate high “Dissatisfied” percentages and may also reflect higher rates of individuals reporting “No opinion.”

Overall, the area of transportation was associated with the lowest rates of satisfaction as measured by “Satisfied” and “Dissatisfied” responses considered together. For every one individual dissatisfied with transportation options at follow-up, only three participants reported satisfaction. In contrast, for every individual dissatisfied with healthcare after 24 months in supportive housing, 24 participants reported being satisfied with healthcare. (See Figure 7B.)

Figure 7B: Satisfied Respondents per One Dissatisfied



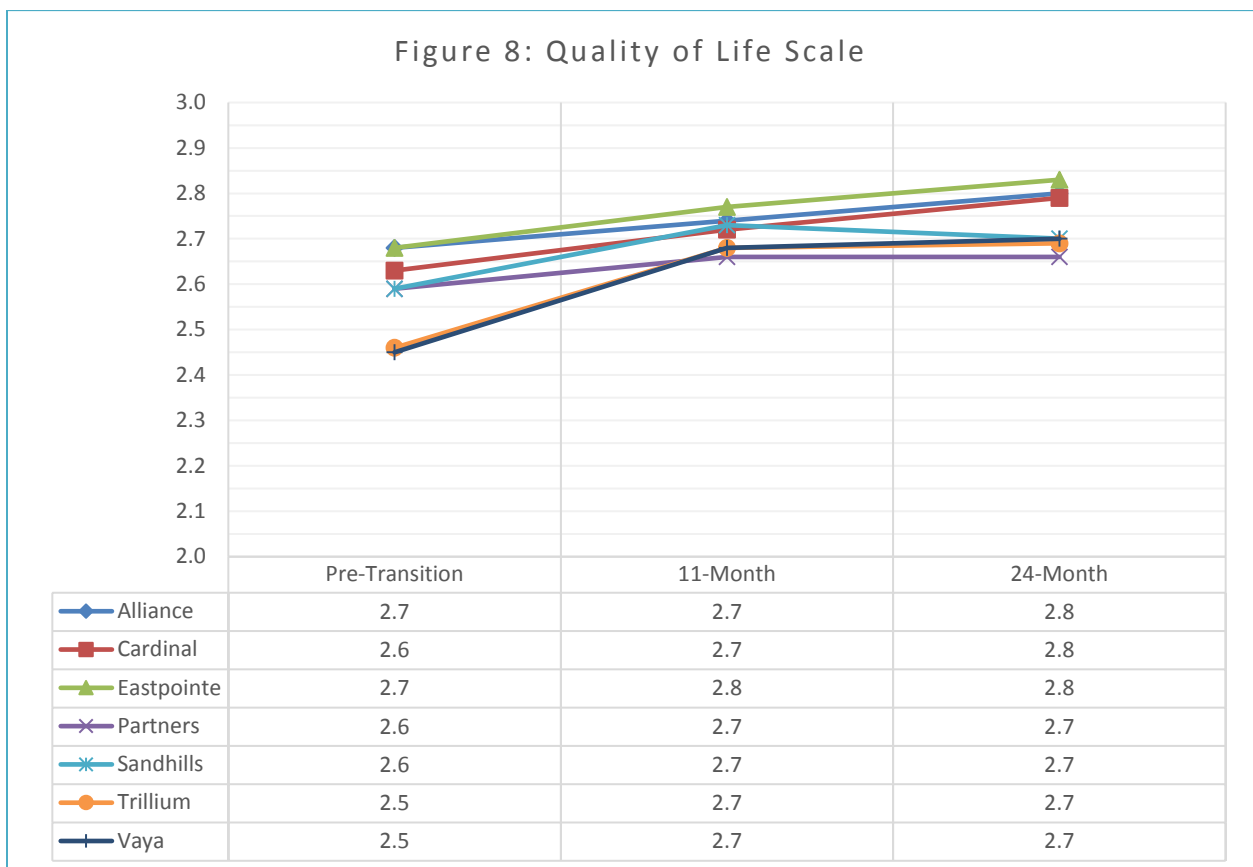
Higher numbers reflect higher rates of satisfaction and lower rates of dissatisfaction. For example, pre-transition Transportation index of “1” indicates only one report of satisfaction for every report of dissatisfaction, and 24 months Healthcare index indicates 24 reports of satisfaction for every report of dissatisfaction.

Transportation was a source of dissatisfaction for 1 out of 4 individuals in supportive housing; 1 out of 7 were dissatisfied with options for leisure/recreation near their homes.

III. Response Patterns by LME-MCO Catchment Area

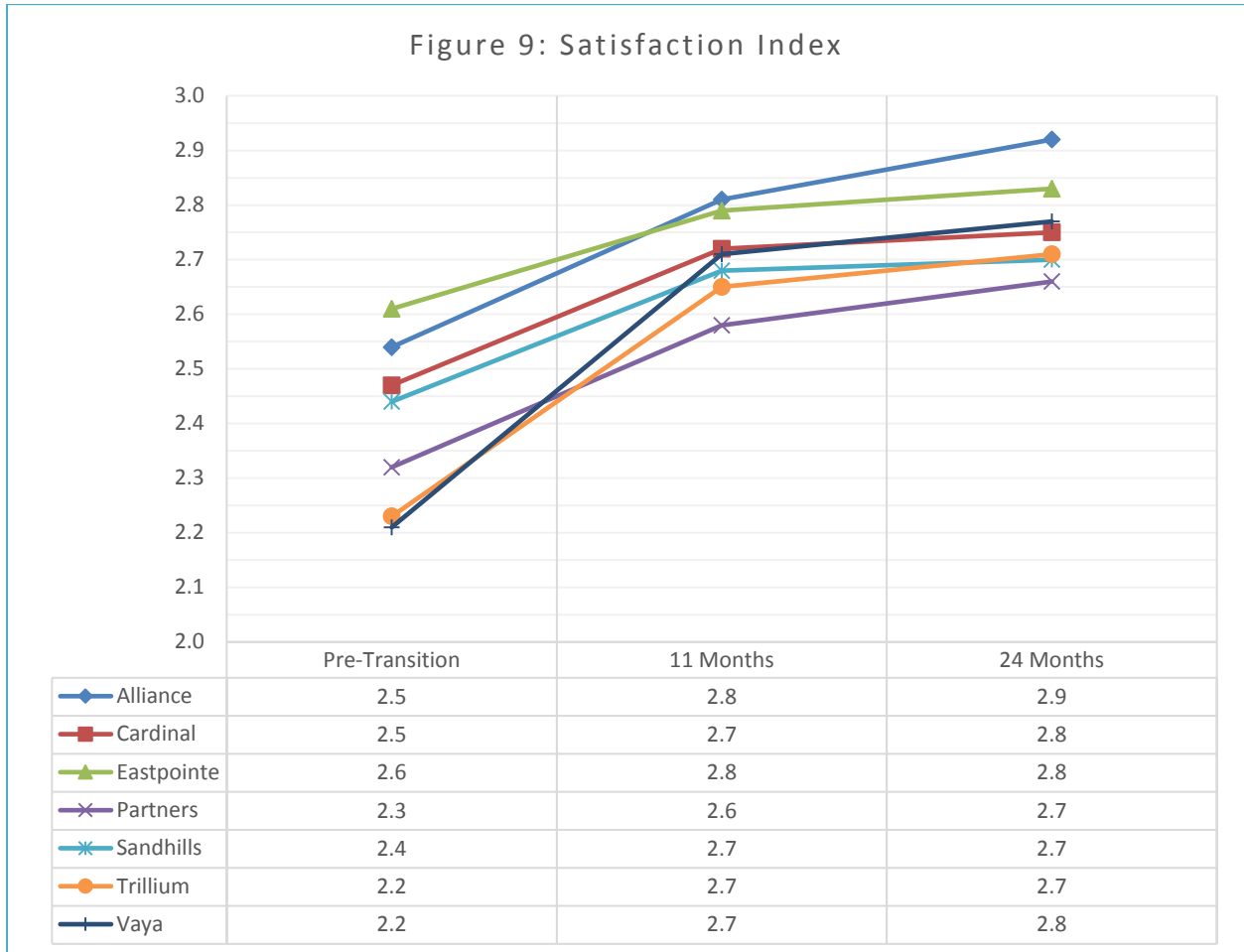
A summary Quality of Life (QoL) score was produced for each respondent survey based on the 29 survey questions listed in Figures 3A, 4, and 5. Responses to each question were converted by assigning numerical scores of 3, 2, and 1 to responses indicating positive, neutral or middle, and negative experiences or perceptions. The average item response was then calculated for each survey.

Statewide, scores were significantly higher at 11 months (mean = 2.71) and 24 months (mean = 2.73) compared to before transition (mean = 2.58). The same pattern of change was observed at the regional level, and participants from all LME-MCO catchment areas reported comparable improvements in their experiences. Statistically significant differences were also observed across LME-MCOs, but these primarily appear to reflect baseline, pre-transition differences. (See Figure 8.)



The possible score range is 1.0 to 3.0. Chart is truncated to show detail.

An aggregate Satisfaction Index was computed as the re-coded (Satisfied = 3, No opinion = 2, Dissatisfied = 1) average of the ten housing and community satisfaction ratings for the areas shown in Figure 7. This index was moderately related to the summary QoL scale score (correlation = .66). As with the summary QoL, similar gains in satisfaction were observed for participants across LME-MCO catchment areas, although significant differences existed between LME-MCOs both before and after transition. (See Figure 9.)



The possible score range is 1.0 to 3.0. Chart is truncated to show detail.

IV. Predictors of Housing Stability

Responses to 496 surveys of individuals who maintained housing after the follow-up survey and throughout the report period were compared to responses from 141 follow-up surveys of individuals who later left housing.⁷ Summary QoL and Satisfaction Index scores of individuals who left housing were slightly lower than those of individuals who remained in housing, although the differences were statistically significant.⁸

The two groups also differed only slightly in the total number of areas in which they reported satisfaction (8.1 for those who maintained housing vs. 7.7) or dissatisfaction (0.9 vs. 1.4). Reported satisfaction rates with each specific area were very similar for the two groups, although marginally significant differences did occur for the areas of *shopping*, the *home's location*, and the *home's maintenance*. Individuals who maintained housing were approximately seven percent more likely to report being satisfied in each of these three areas.

Significant or near-significant average differences were also observed in response to specific survey questions. These centered around content domains that might be viewed as risk or protective factors to an individual's ability and/or desire to remain and succeed in supportive housing: Community Integration and Meaningful Day, Social and Recovery Support, and Basic Health and Safety. For each question shown in Table 1, a smaller percentage of participants who left housing selected the response indicating more positive experiences or perceptions.

Individuals who maintained housing also selected the most positive response option to more of the questions: 10.4 compared to 9.2 on average for those who subsequently left housing. The difference of 1.2 out of 13 questions is small (9.2%). As shown in Figure 10, however, the difference between groups increases with the total number of positive responses. Compared to those who maintained housing, individuals who later left housing were approximately half as likely to respond positively to 11, 12 or 13 of the questions.⁹ (See Figure 10.)

⁷ This group includes individuals who left housing for any reason, and whether or not they were subsequently rehoused.

⁸ Average scores from surveys of individuals who maintained housing were QoL = 2.74 and Sat = 2.73 compared to QoL = 2.65 and Sat = 2.65 for surveys of individuals who later left housing.

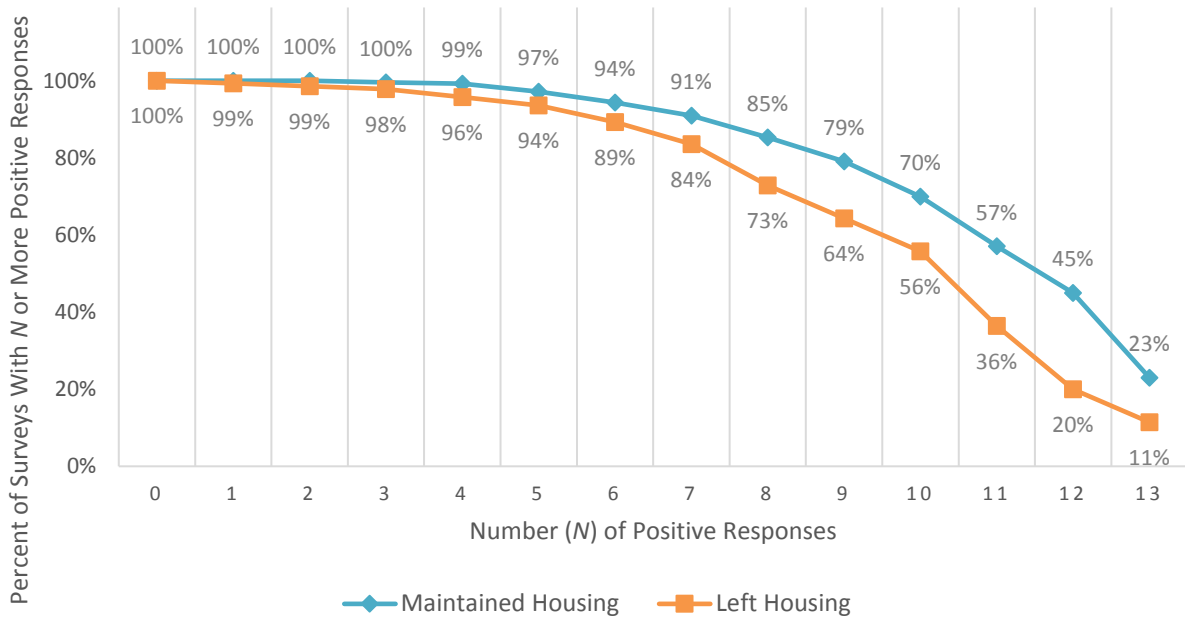
⁹ Note that the "maintained housing" group also includes individuals who may later leave housing.

Table 1. Risk and Protective Factors: Response Differences in Follow-Up Surveys of Participants Who Left Housing and Participants Who Maintained Housing

	Left Housing	Maintained Housing
COMMUNITY INTEGRATION AND MEANINGFUL DAY		
Are you satisfied with the way you spend your day? (<i>Yes</i>)	57.7%	72.4%
Do you feel like you have enough to do? (<i>Yes</i>)	59.4%	71.4%
Do you go out in your community when you want? (<i>Yes</i>)	74.1%	82.6%
Are there activities you can't do when you want? (<i>No</i>)	49.3%	63.2%
Do you feel hopeful about your goals and plans for the future? (<i>Yes</i>)	73.1%	84.2%
SOCIAL AND RECOVERY SUPPORT		
Do you have someone to talk to when you feel sad, angry, upset, or lonely? (<i>Yes</i>)	87.7%	93.3%
Did you get to visit or talk with family or friends who support your recovery in the past 30 days? (<i>Yes</i>)	65.4%	75.1%
Do your family or friends help you become the person you want to be? (<i>Yes</i>)	57.1%	69.5%
Do your staff help you become the person you want to be? (<i>Yes</i>)	75.0%	85.5%
BASIC HEALTH AND SAFETY		
Do you feel safe where you live? (<i>Yes</i>)	77.5%	87.9%
Do you ever go without taking your medicine when you need it? (<i>No</i>)	76.8%	84.0%
Have you gotten all the medical care you needed since you've lived here? (<i>Yes</i>)	91.4%	96.5%
Do you know who to contact if you have a problem with your services and supports?	93.4%	97.3%

Follow-up surveys include 11- and 24-month surveys.

Figure 10: Cumulative Distribution of Positive Responses to 13 Risk/Protective Factor Questions on Follow-Up Surveys



“Positive responses” are the question response options that indicate more positive experiences and perceptions. Neutral or middle responses such as “sometimes” are not included in the count of positive responses. Follow-Up Surveys include 11- and 24-month surveys. Refer to Table 1 for a list of the 13 Risk/Protective factor survey questions.

Summary

Survey results included in this annual report confirm and extend patterns and trends from previous analyses. Compared to their pre-transition survey responses, TCLI participants living in supportive housing report greater satisfaction with their homes and communities and more positive experiences and outcomes related to community integration, personal choice and control, health and well-being, and services and supports. These improvements appear to hold and in some cases further improve between the first and second years housed.

The largest gains were observed in relation to individuals' community integration, choice and personal control, satisfaction with daily activities, and satisfaction with home and aspects of their communities. Smaller improvements were noted in satisfaction with services, for which participants' pre-transition assessments tended to be more positive.

Transportation remains the most frequently cited challenge to some individuals' community integration, personal control, and satisfaction. With considerable variability across LME-MCO catchment areas, a total of one in five respondents in supportive housing reported that lack of transportation has been an obstacle to going out into the community. Nearly one-third of participants cited transportation as an area of additional needed support. However, transportation was not among the indicators that most differentiated between individuals who maintained or subsequently left housing.

Clusters of survey questions related to individuals' daily activities, social and recovery support, and basic health and safety were more predictive of subsequent housing status. These three areas may be regarded as risk and protective factors to the individual's ability and/or desire to remain and succeed in supportive housing.

Analysis of survey response patterns by LME-MCO catchment area suggests two additional conclusions. First, TCLI participants across the state report comparable improvements in their quality of life and satisfaction linked to their transitions into supportive housing. Second, although small post-transition differences among catchment areas are seen for aggregate quality of life and satisfaction measures, these appear to reflect baseline, pre-transition differences.