



Nebraska Olmstead Plan Evaluation Update

Partners for Insightful Evaluation (PIE)

July 30, 2024



Evaluation Data

- Two surveys
 - Individuals with disabilities
 - Workgroup members, key partners, and advocates
- Interviews with key partners at state agencies
- Four focus groups
 - Individuals with disabilities
 - Family member/caregivers
 - Workgroup members
 - DHHS Olmstead staff
- Administrative data
 - Meeting minutes
 - Workgroup reports/updates
- Olmstead Plans from other states

Nebraska's Olmstead Plan Evaluation Project

Nebraska is in its second iteration of the Olmstead Plan. The plan offers a roadmap for the state to be consistent with the principles of the 1999 Supreme Court *Olmstead* decision. Each plan covers three state fiscal years, which run from July through June. Every three years an evaluation is required of the Plan. The evaluation for the 2023 – 2025 Olmstead Plan is being done by [Partners for Insightful Evaluation](#) (PIE), an evaluation company in Lincoln, NE.



Purpose of Project

The intent of the evaluation is to:

- 1) Assess progress and better understand the successes and impacts of the current Olmstead Plan;
- 2) Determine what should be included in the next iteration of the Olmstead Plan, including ways to measure progress;
- 3) Identify what works well and what improvements could be made for implementing the plan.

Findings will be used to draft the next Olmstead Plan by December 2024.

Questions Being Explored

- To what degree **has progress been made** among the seven goals of the Olmstead Plan?
- What **improvements and impacts have resulted** from the Olmstead Plan, including collaborations between state agencies?
- What activities and outcomes **should be included in the next iteration of the Plan**?
- What are the **barriers/challenges** and **facilitators/successes** for implementing the Olmstead Plan?
- To what degree **do the metrics in the Olmstead Plan support the goals and outcomes**? How could they better align?

Data/Information to Answer Questions

A variety of primary (collected by PIE) and secondary (already existing) data will be used for the evaluation, including:

- **Interviews and focus groups** with 1) individuals from state agencies who serve on the advisory committee or steering group; 2) Olmstead Plan staff; 3) workgroup members; and 4) individuals with disabilities.
- **Surveys.** One survey will be for individuals with disabilities and family members or caregivers while another will be for those who are involved with the Olmstead Plan.
- **Administrative records**, including meeting minutes, workgroup reporting templates, and attendance logs.



Getting Involved

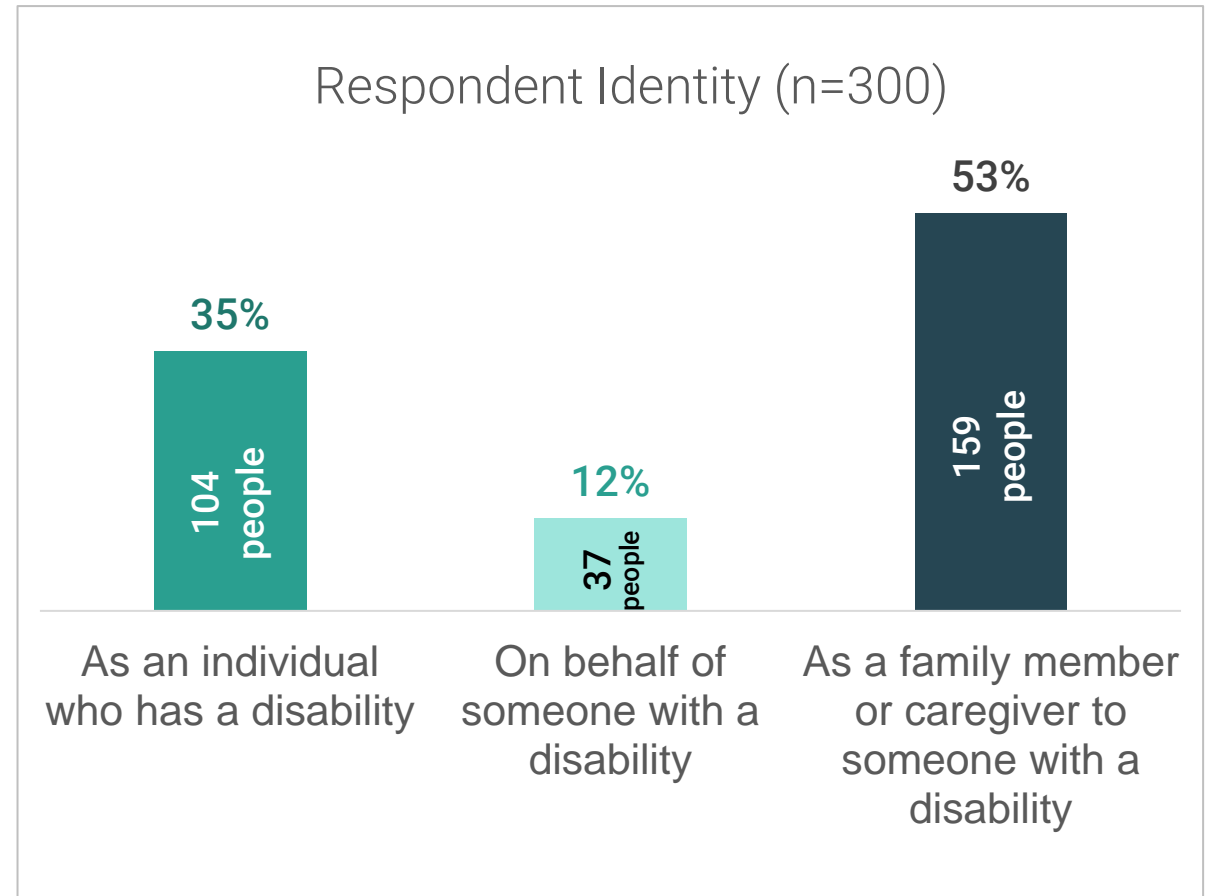
- Learn more about Nebraska's Olmstead Plan here: <https://dhhs.ne.gov/Pages/Olmstead.aspx>
- Participate in and share out data collection opportunities, including the surveys in February 2024.
- Look for summary reports sharing the feedback in December 2024.



Individuals with Disabilities Survey

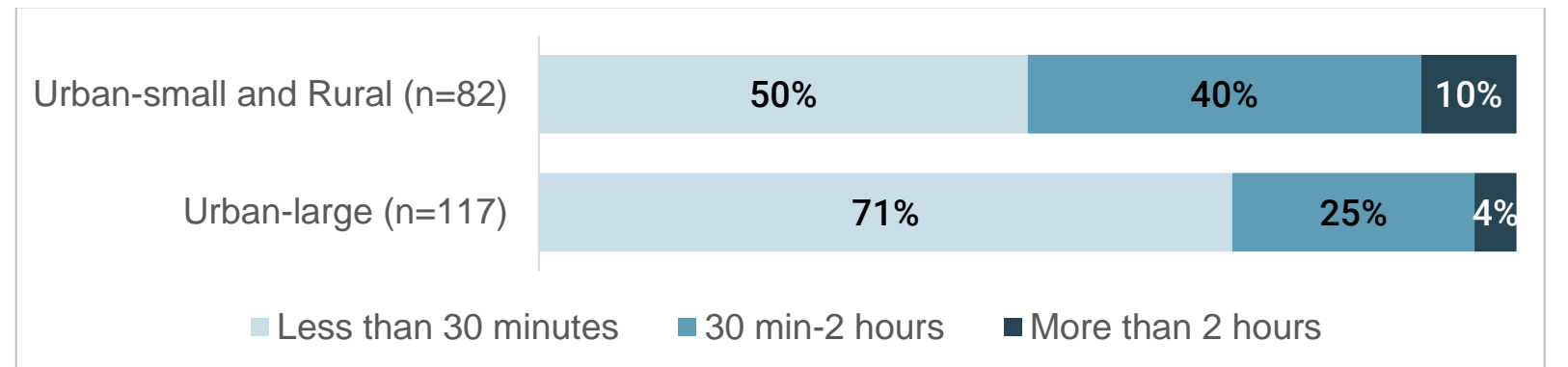
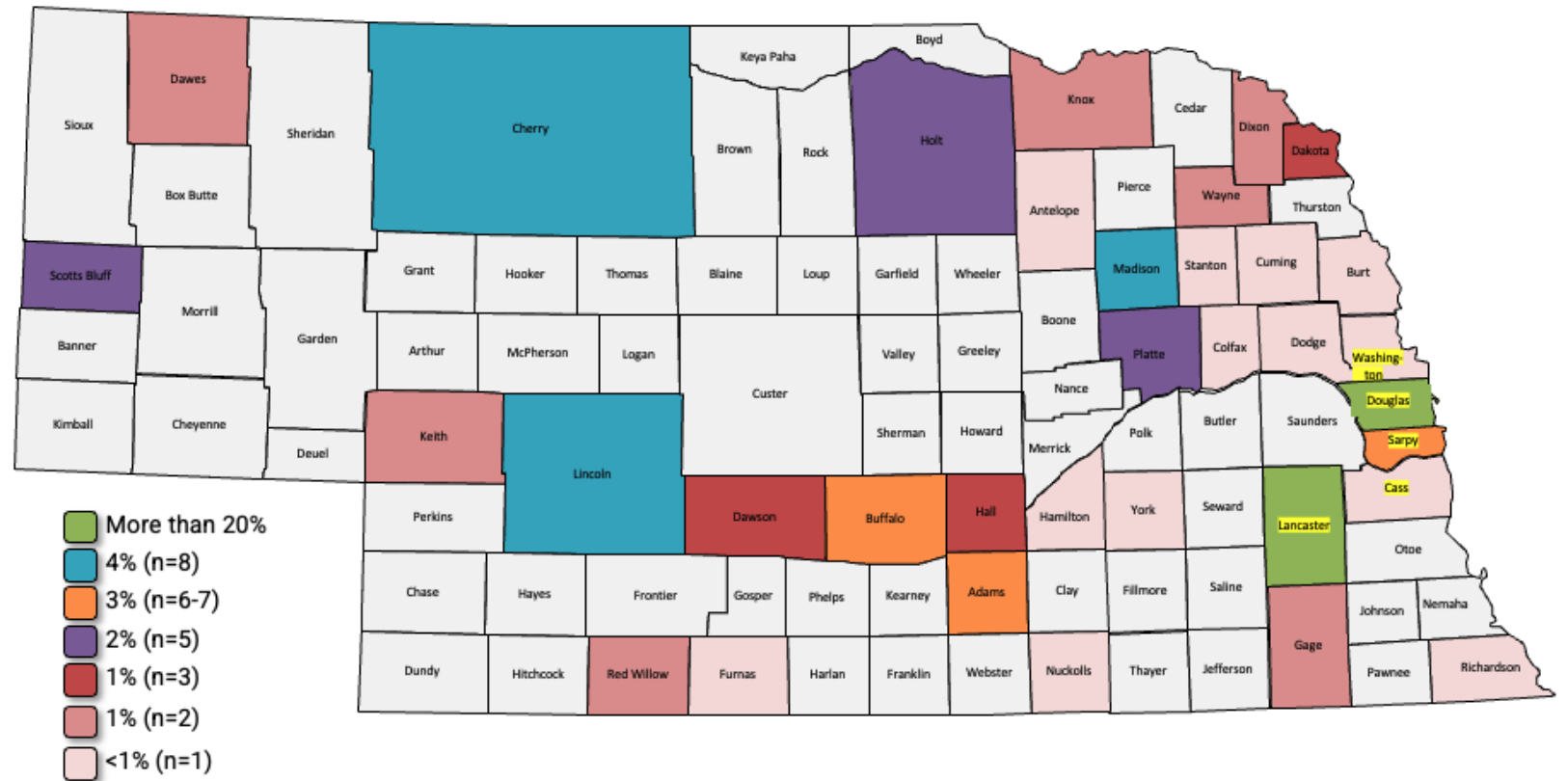
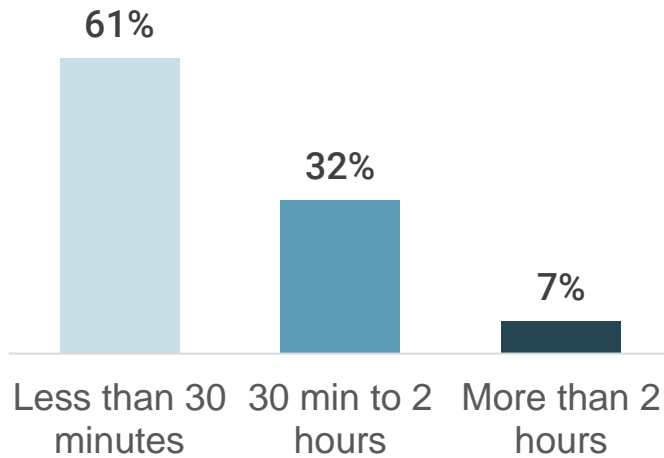
Survey Details

- Initial dissemination
 - Available February 4 through March 26
 - 175 people completed at least one question
 - 40 were individuals who have a disability (+24 on their behalf)
- Second dissemination
 - Available May 6 through May 28
 - 135 people completed at least one question
 - 64 were individuals who have a disability (+13 on their behalf)
 - Survey made available in Spanish, but none were completed



Geography & Travel

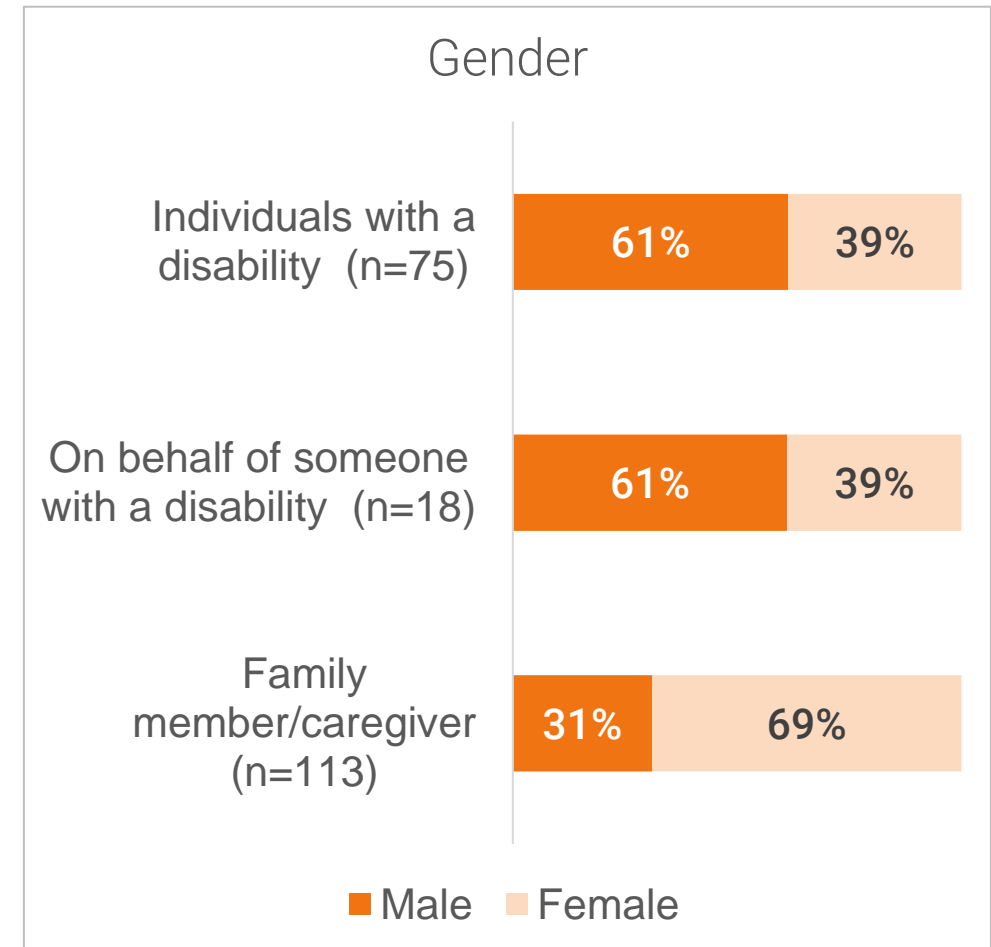
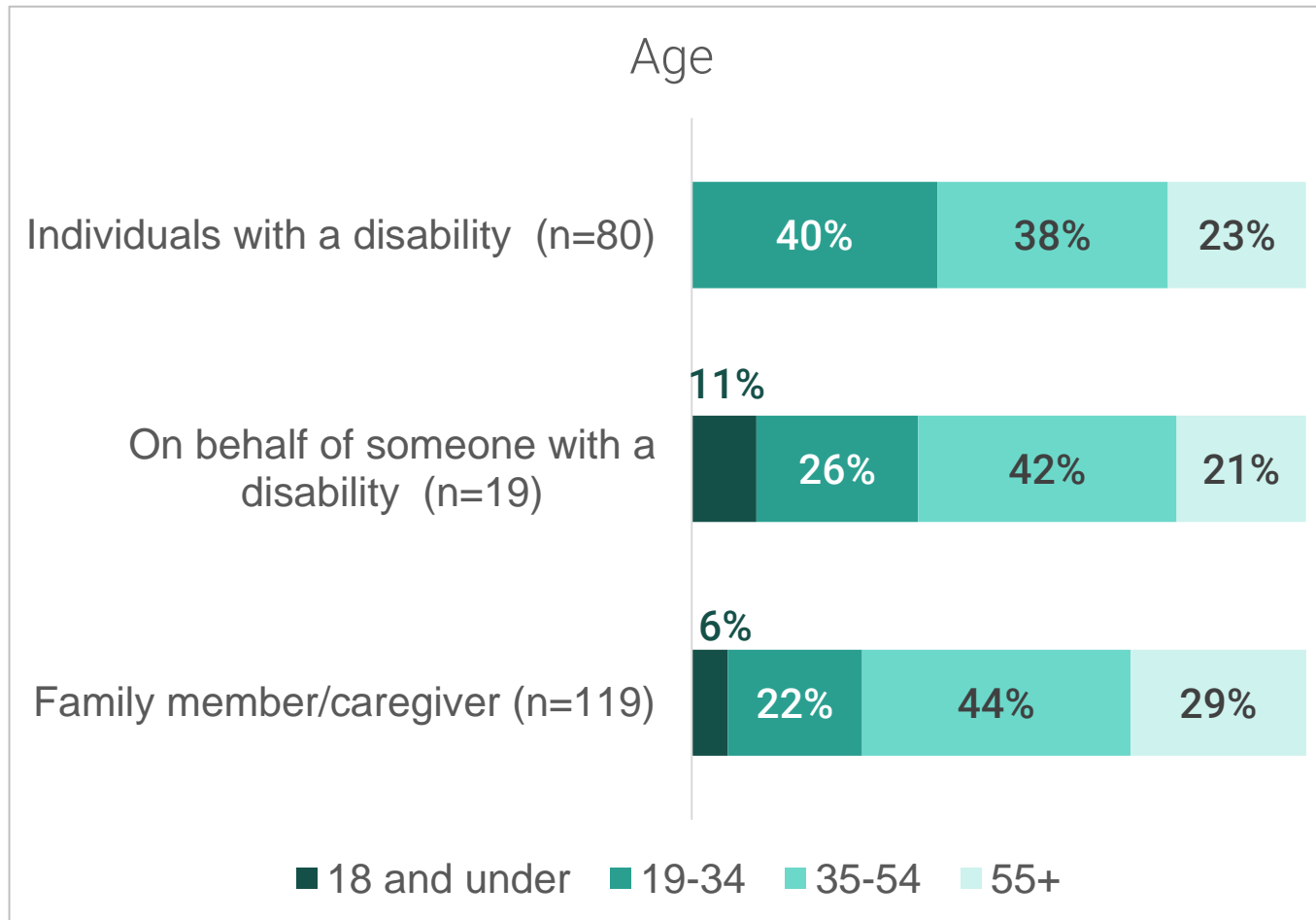
How far do you typically have to travel to get disability-related services and supports? (n=220)



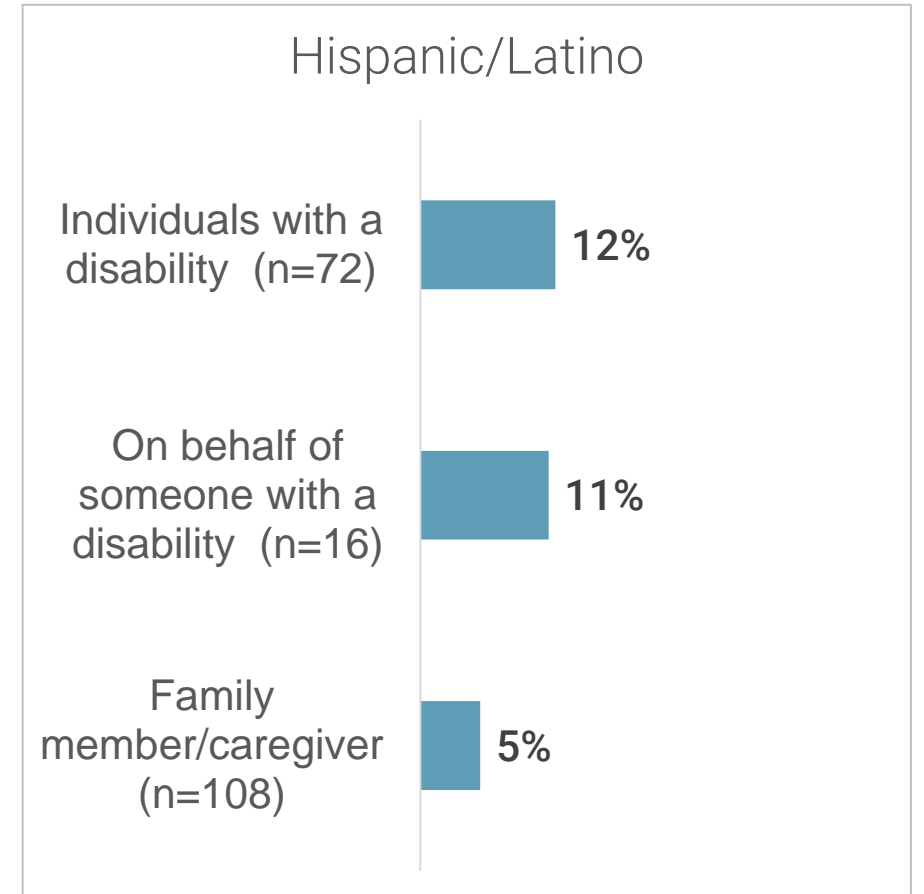
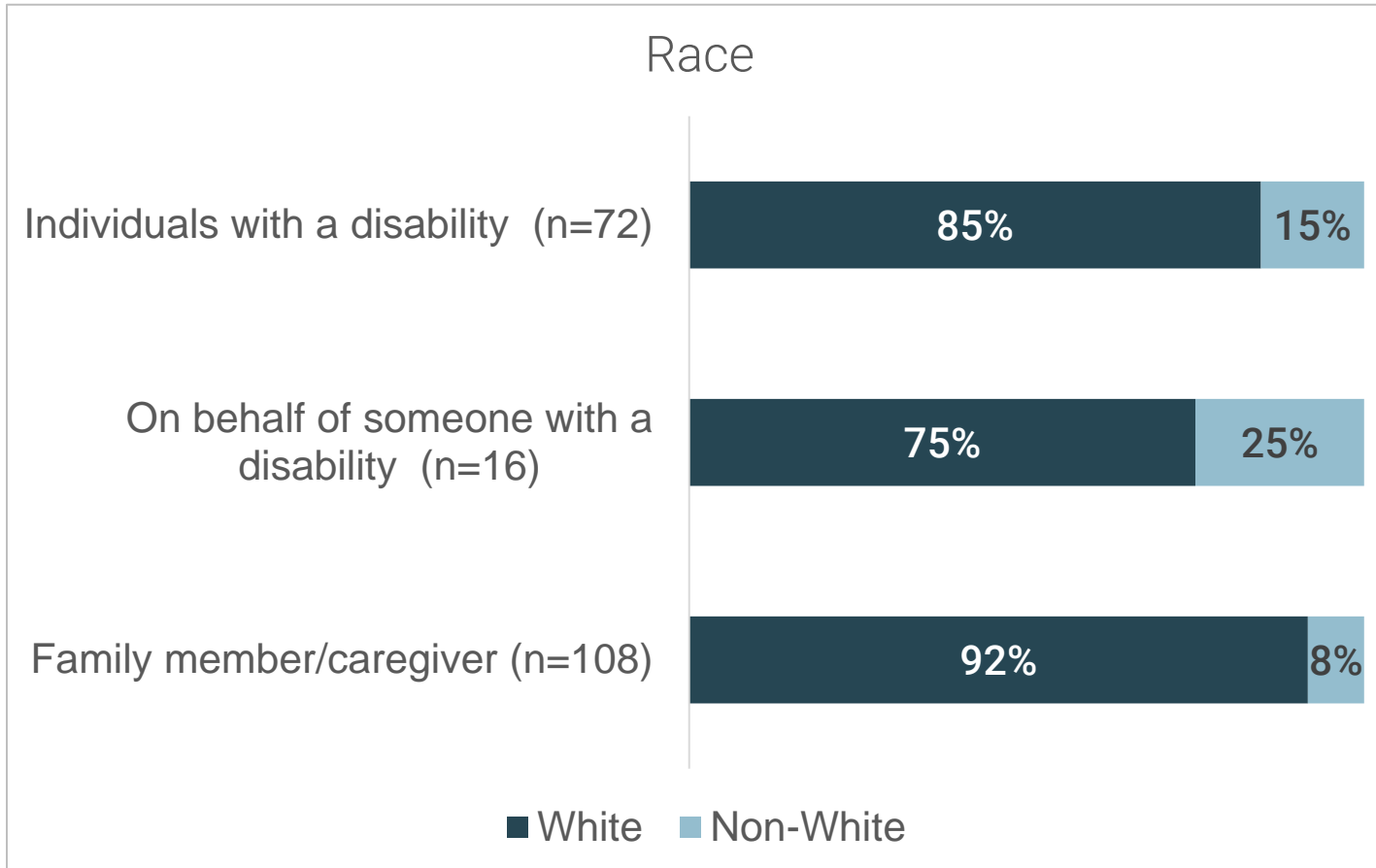
Who Participated



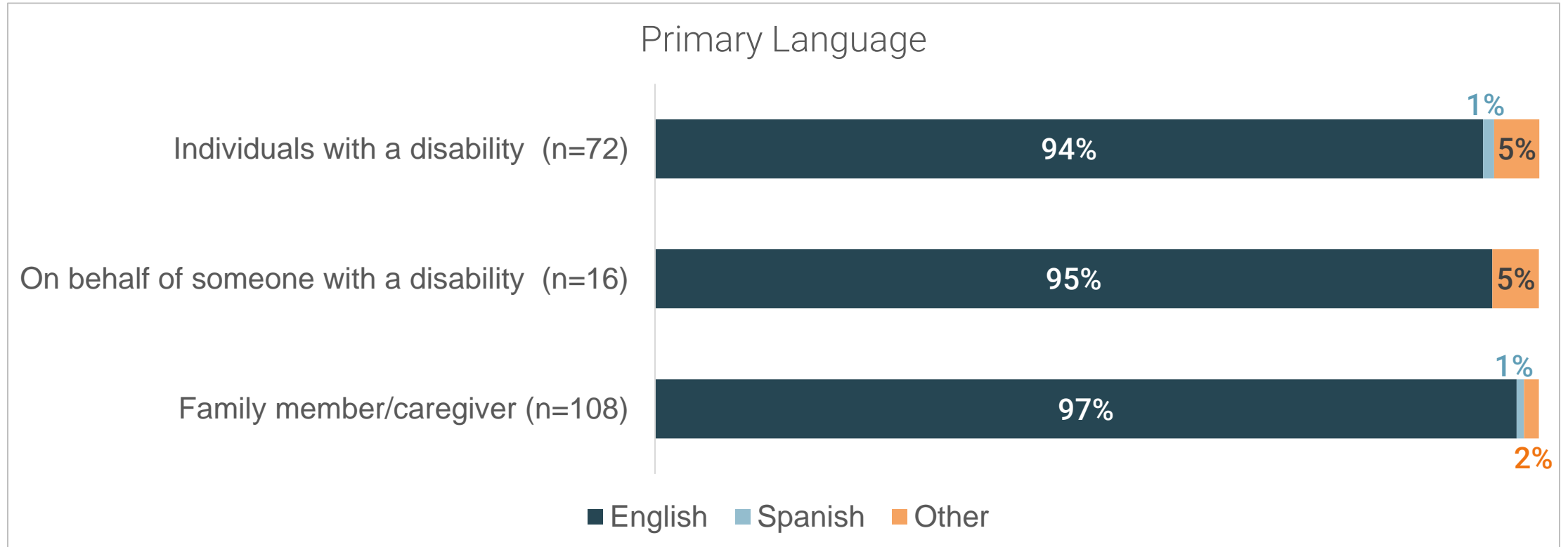
Demographics



Demographics



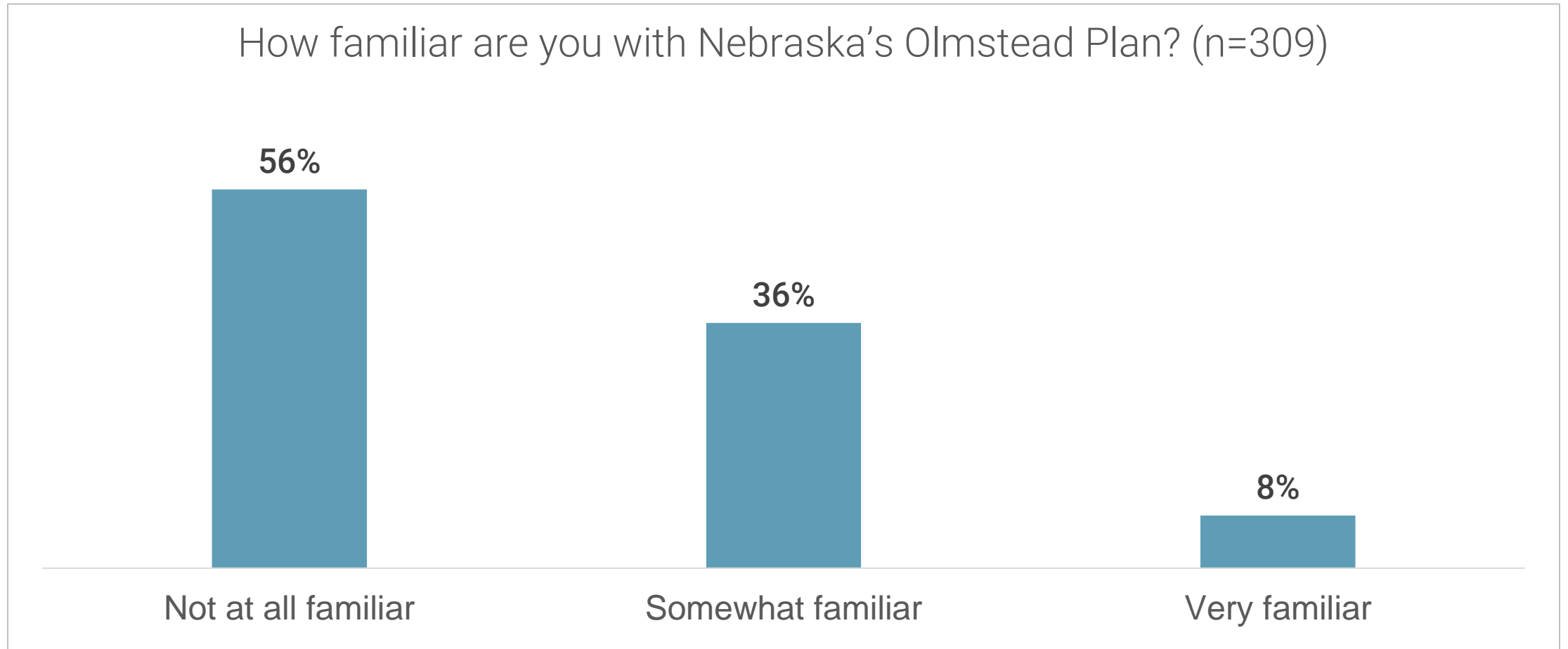
Primary Language



Other includes Chinese, Karen, Pig Latin, and Both English and Spanish

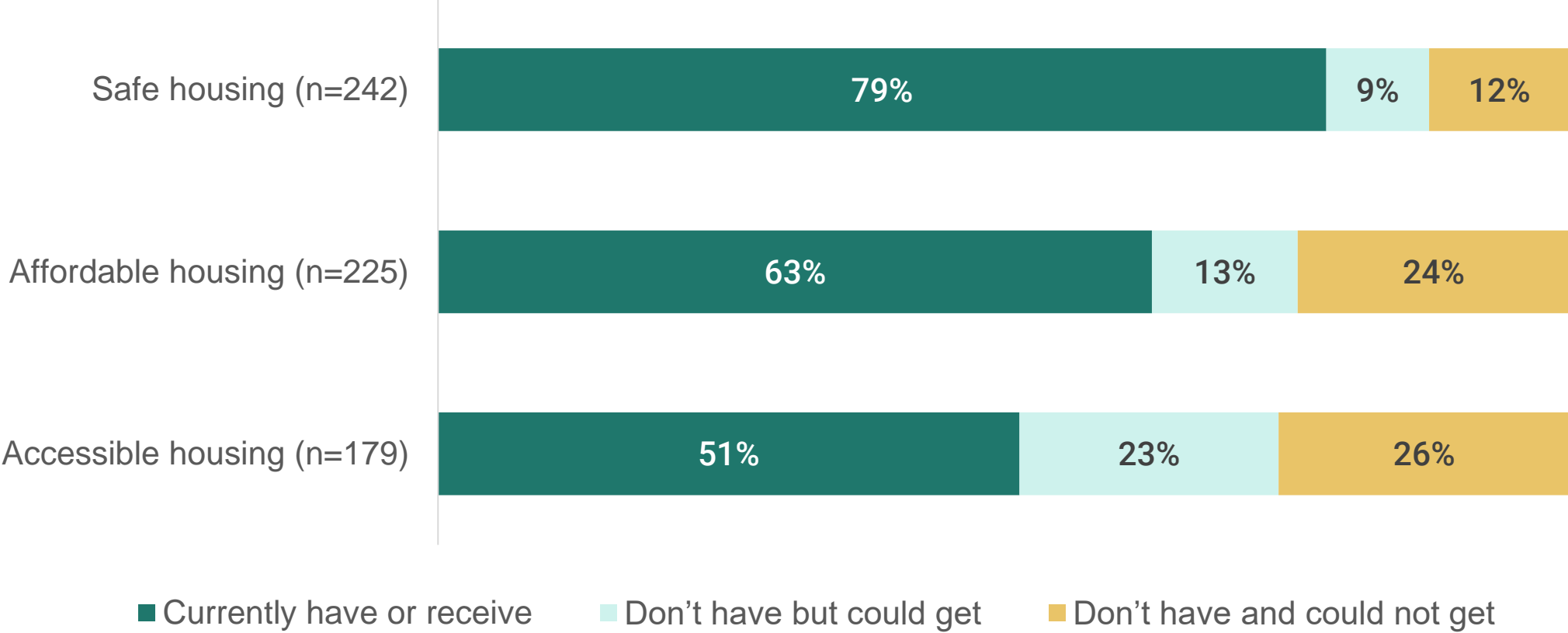
Olmstead Plan & Goal Areas

Familiarity with the Olmstead Plan

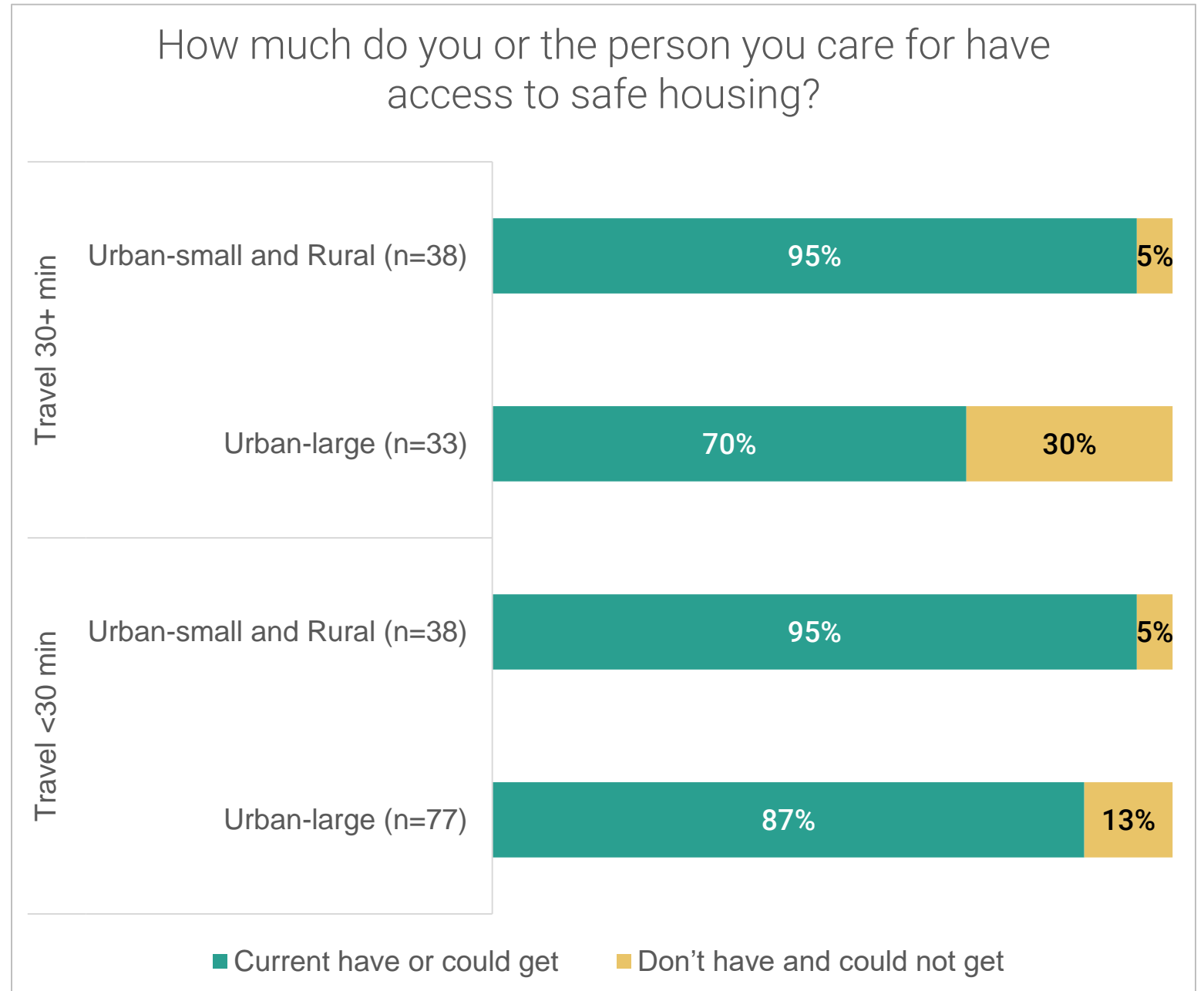


Access to Housing

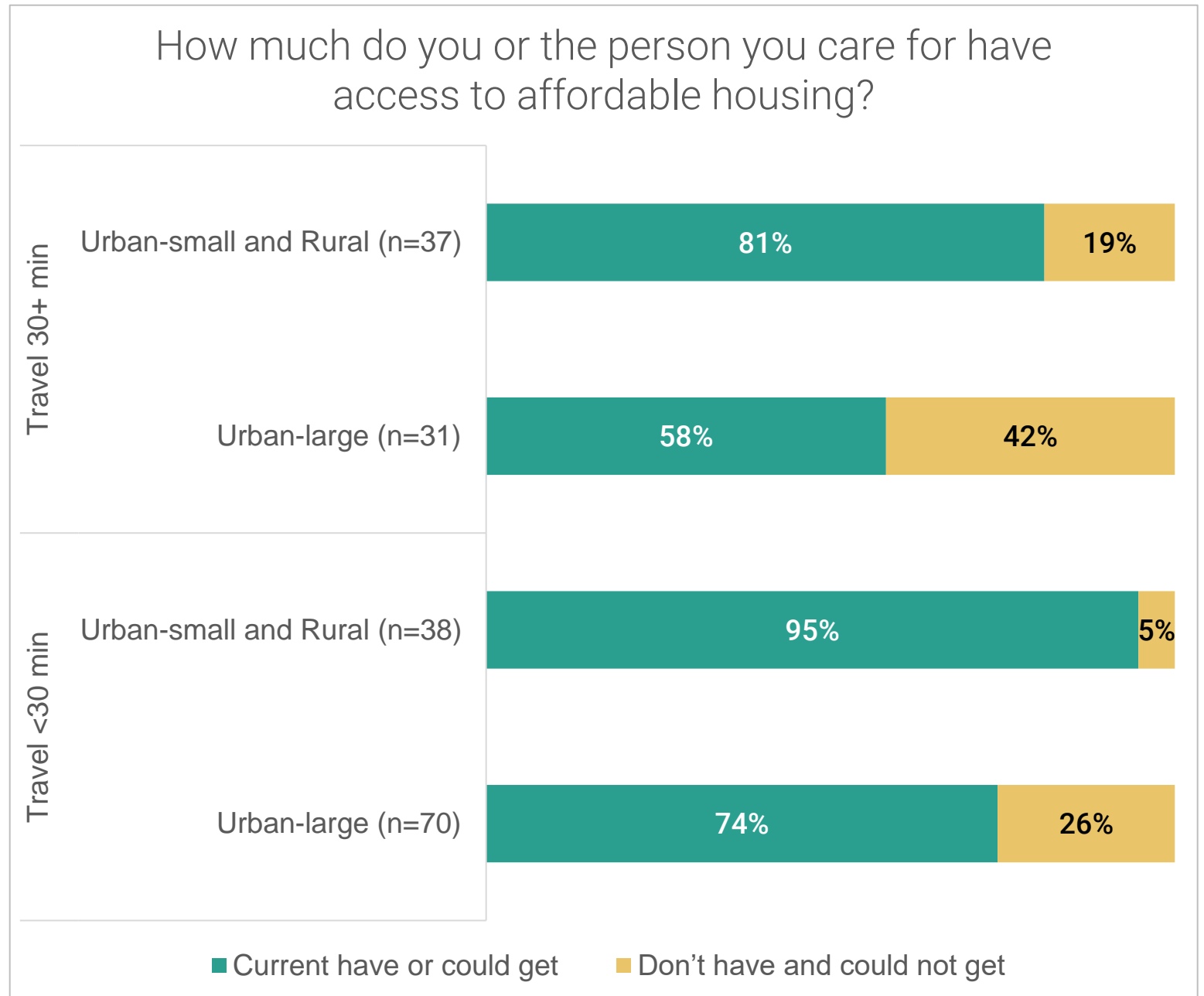
How much do you or the person you care for have access to...



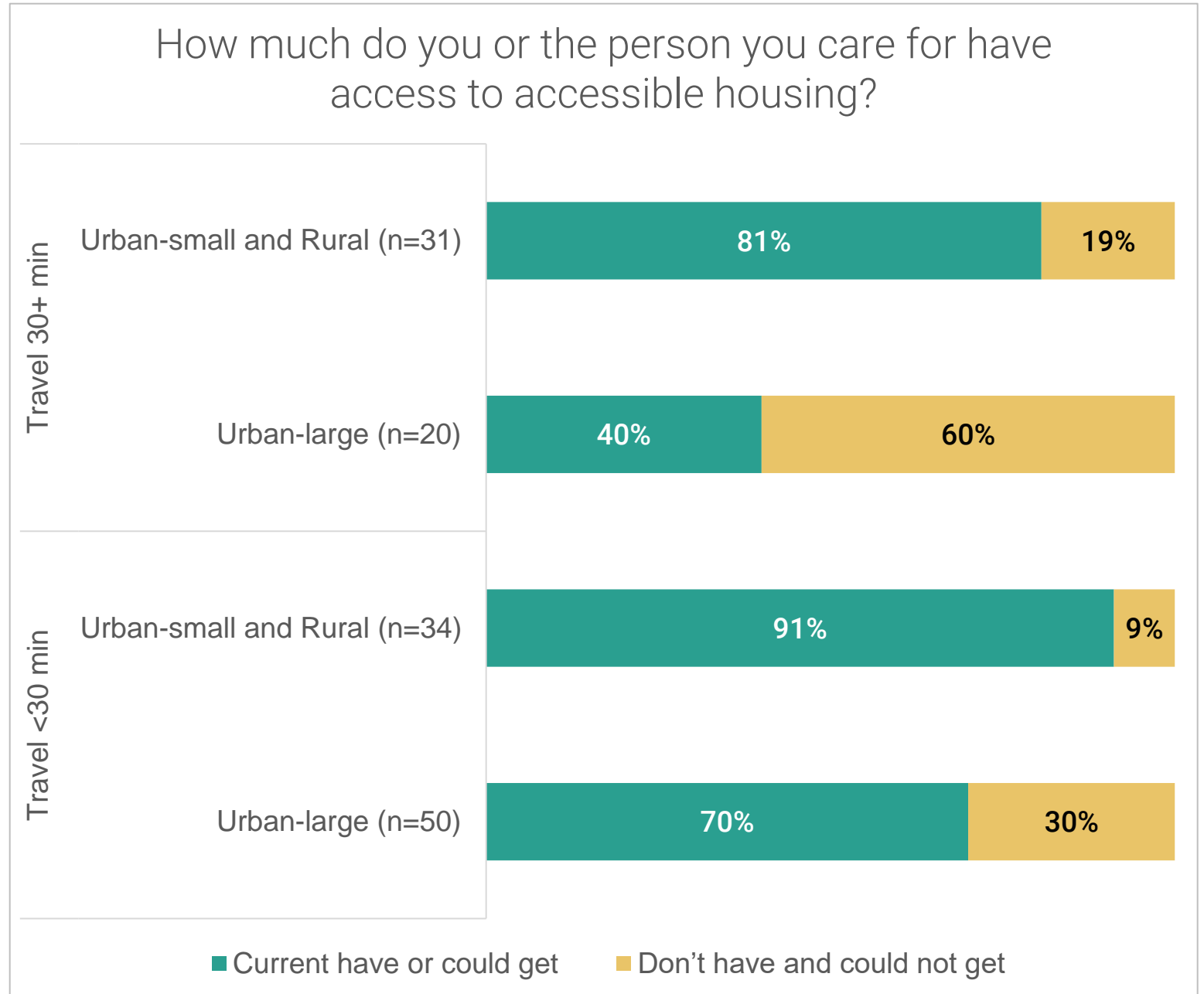
Access to Safe Housing x Rural/Urban x Travel Time



Access to Affordable Housing x Rural/Urban x Travel Time

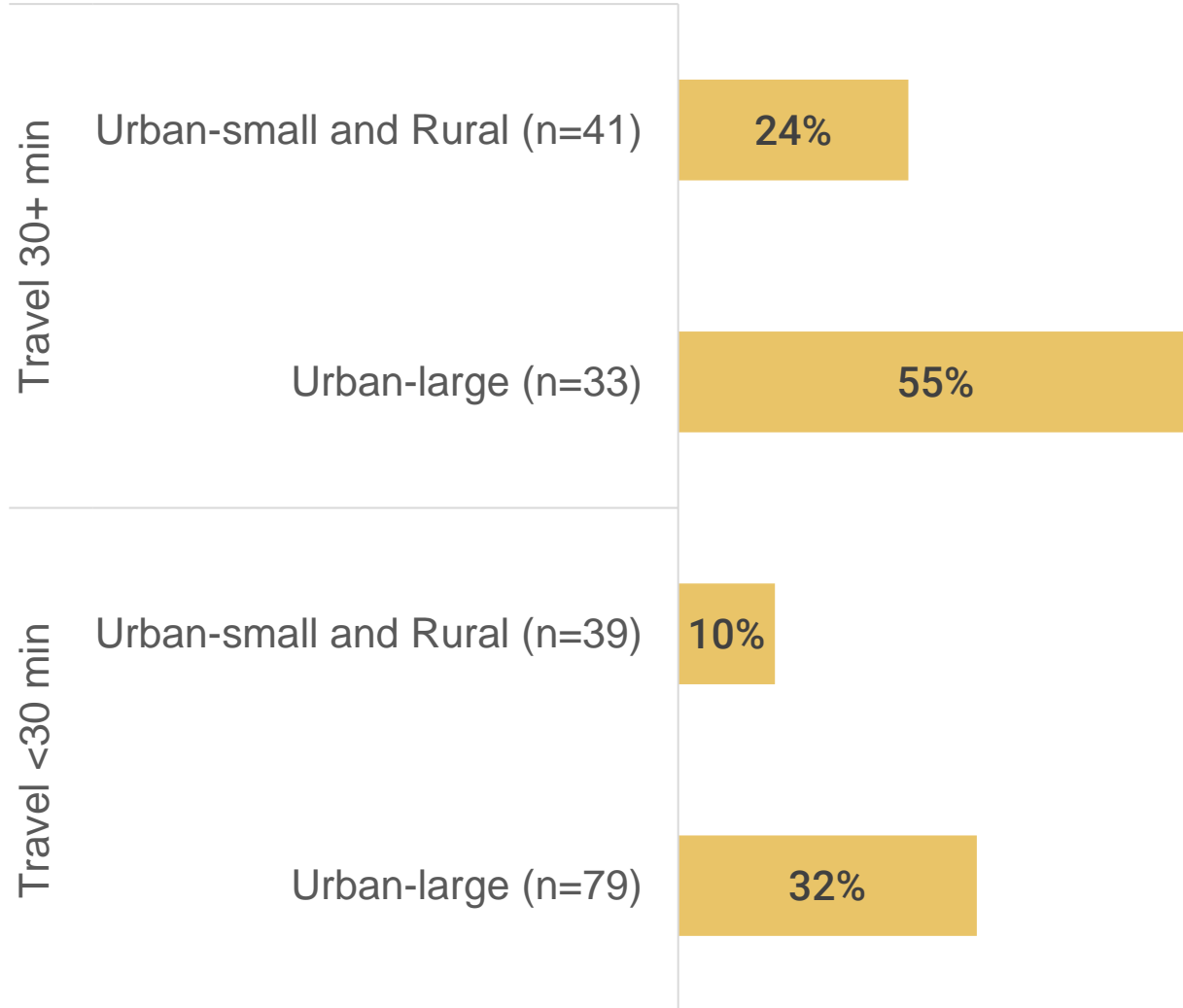


Access to Accessible Housing x Rural/Urban x Travel Time



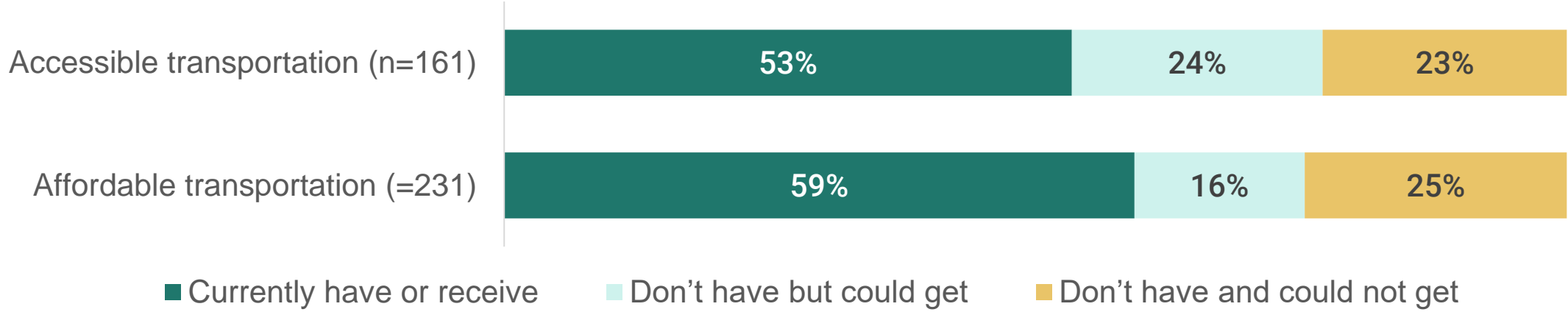
Access to Housing x Rural/Urban x Travel Time

Don't have and could not get access to safe, affordable, or accessible housing (reported at least one)

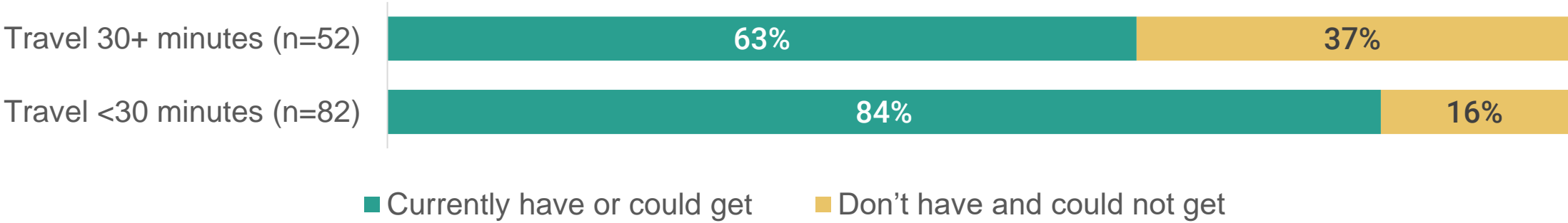


Access to Transportation

How much do you or the person you care for have access to...

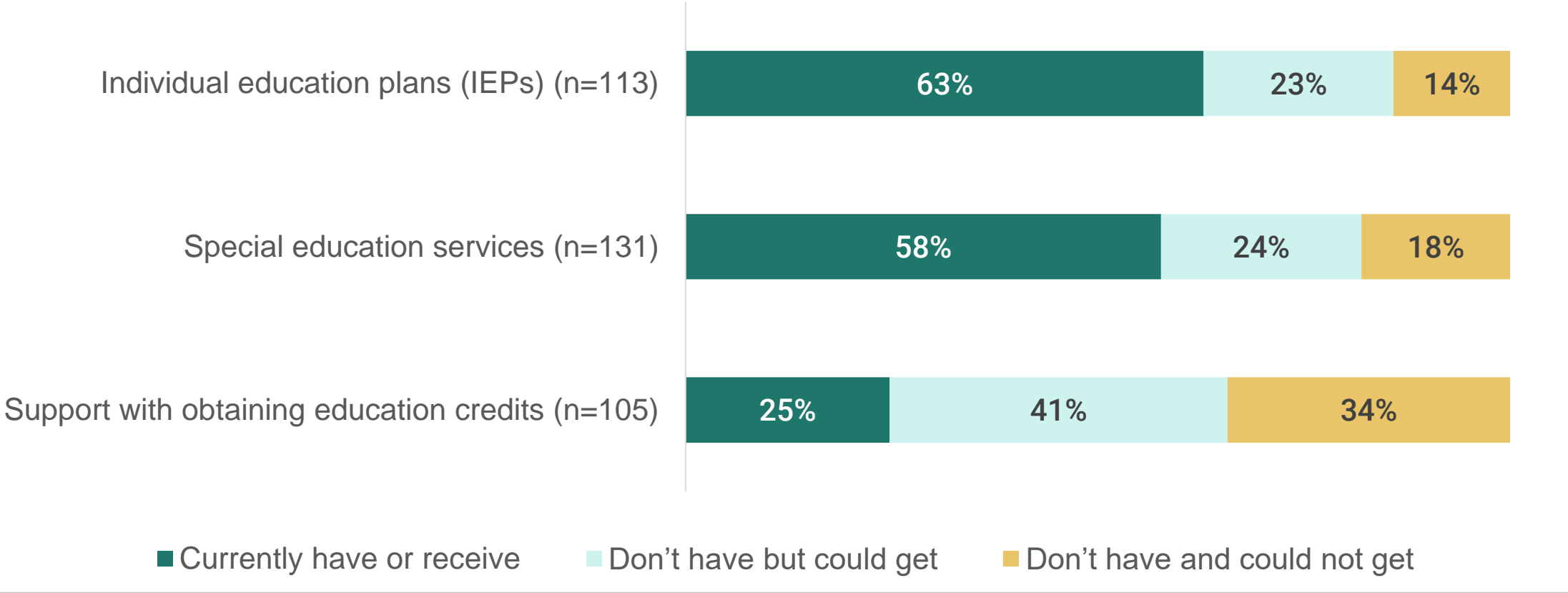


Accessible transportation



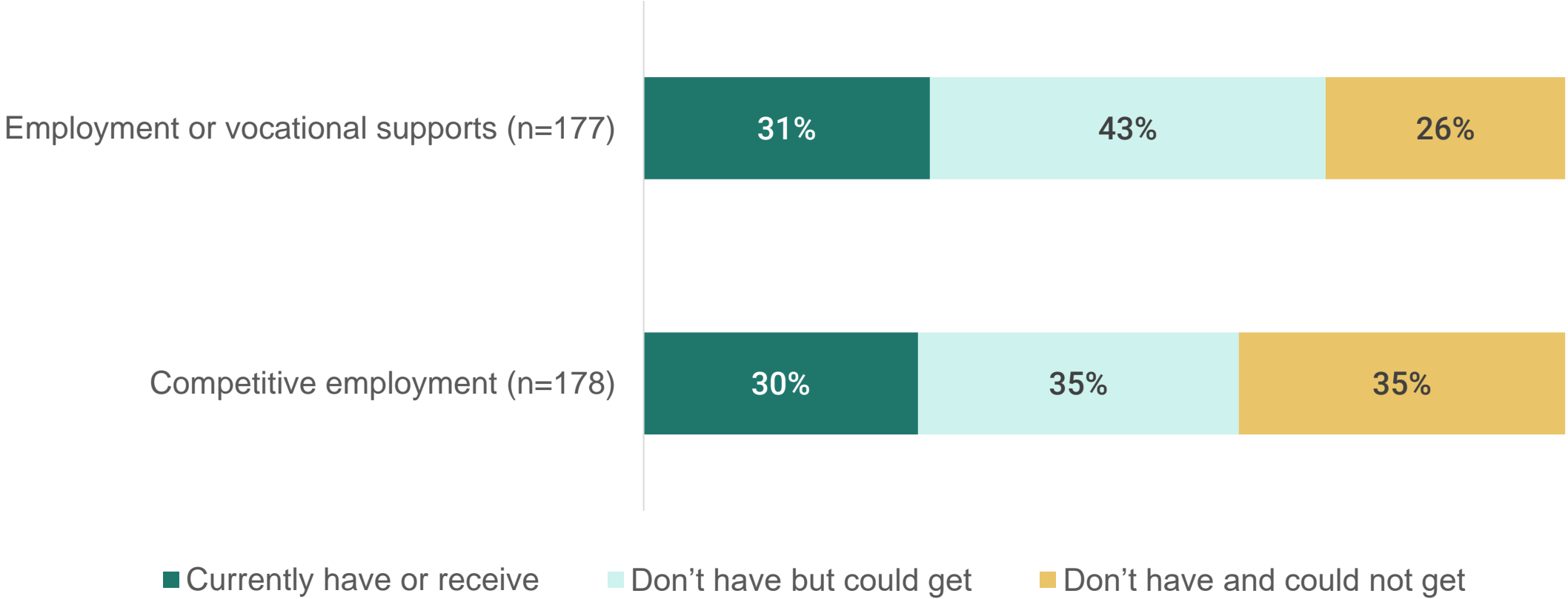
Access to Education

How much do you or the person you care for have access to...



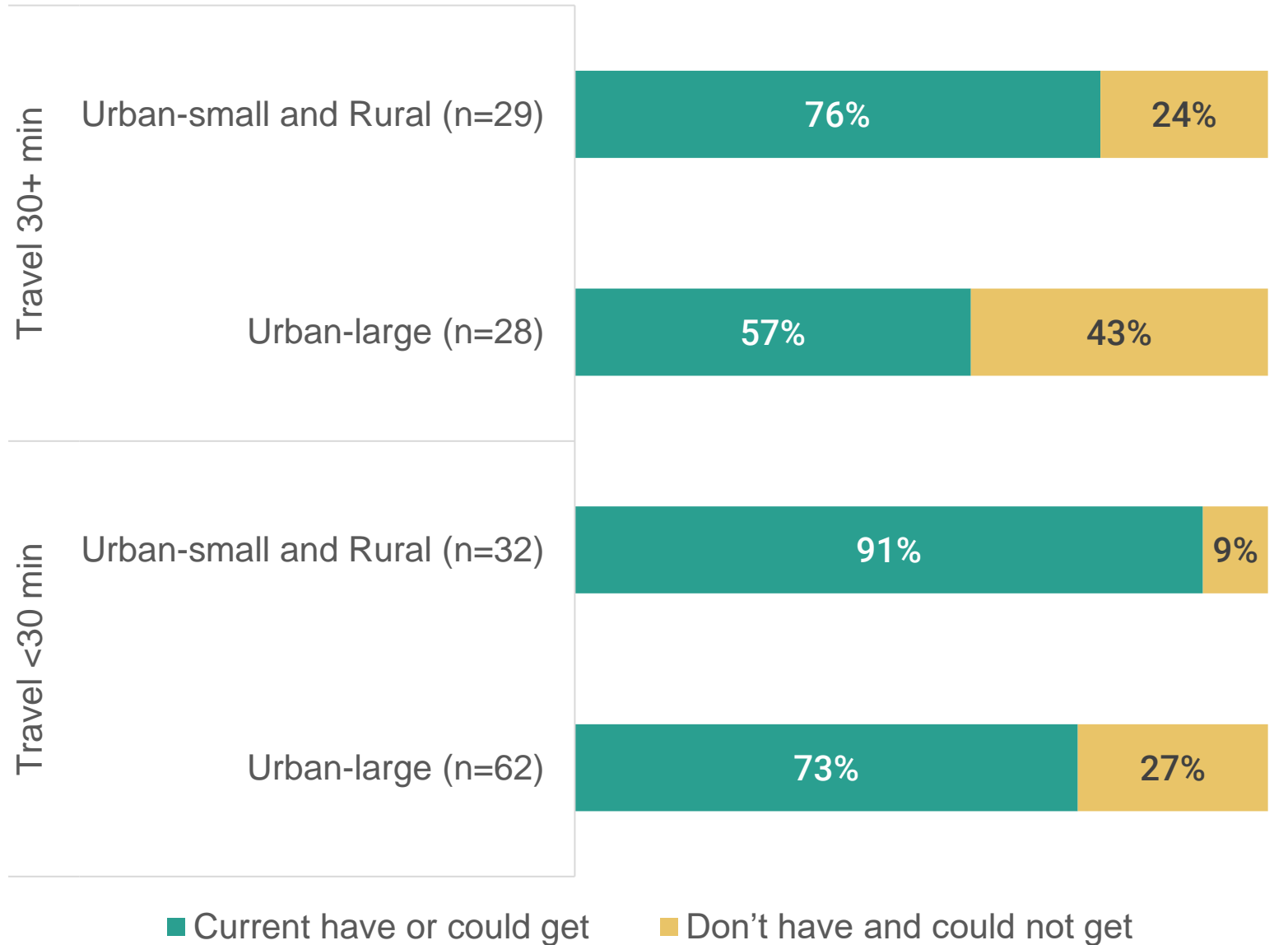
Access to Employment

How much do you or the person you care for have access to...



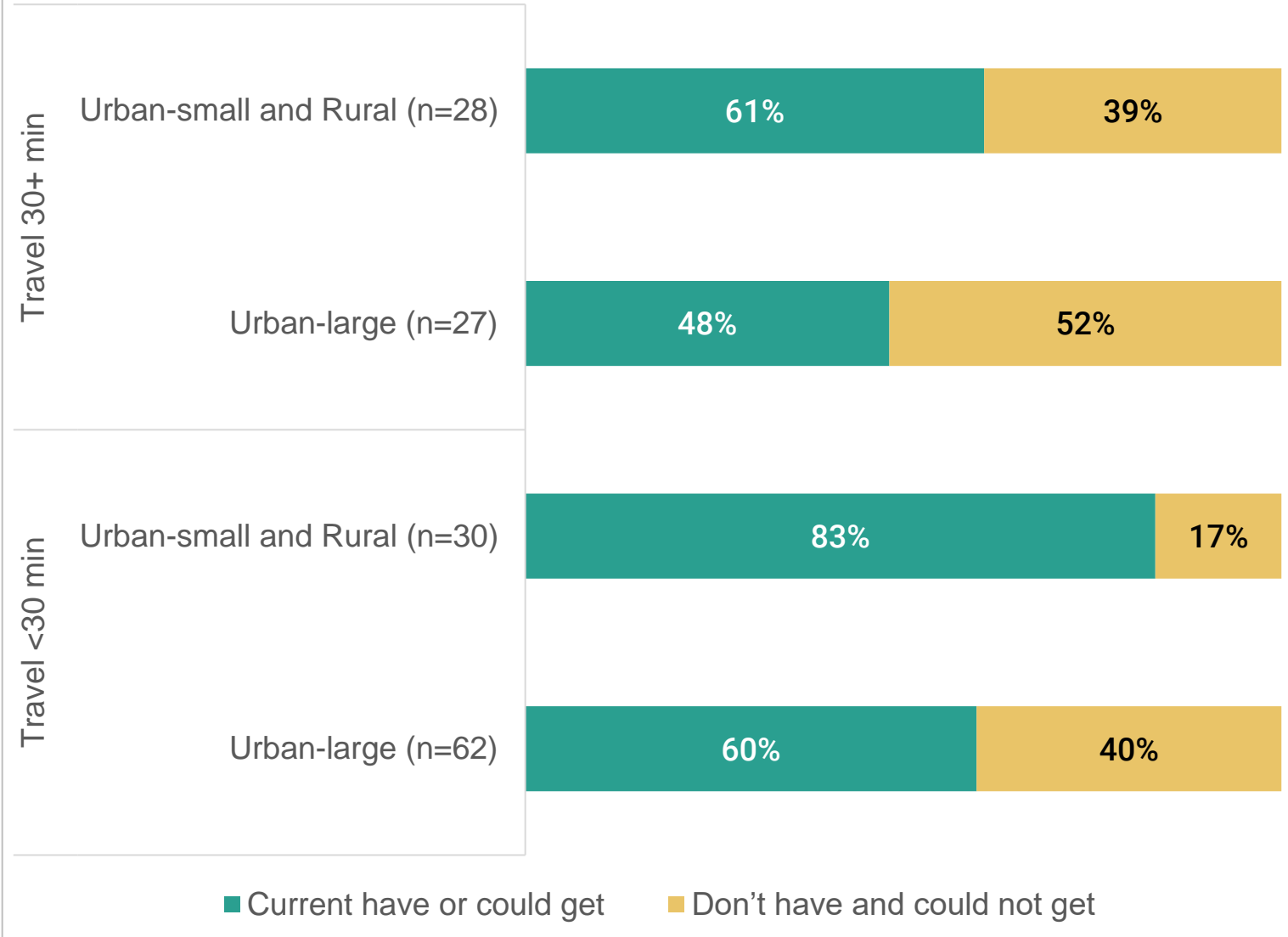
Access to Employment Supports x Rural/Urban x Travel Time

How much do you or the person you care for have access to employment supports?



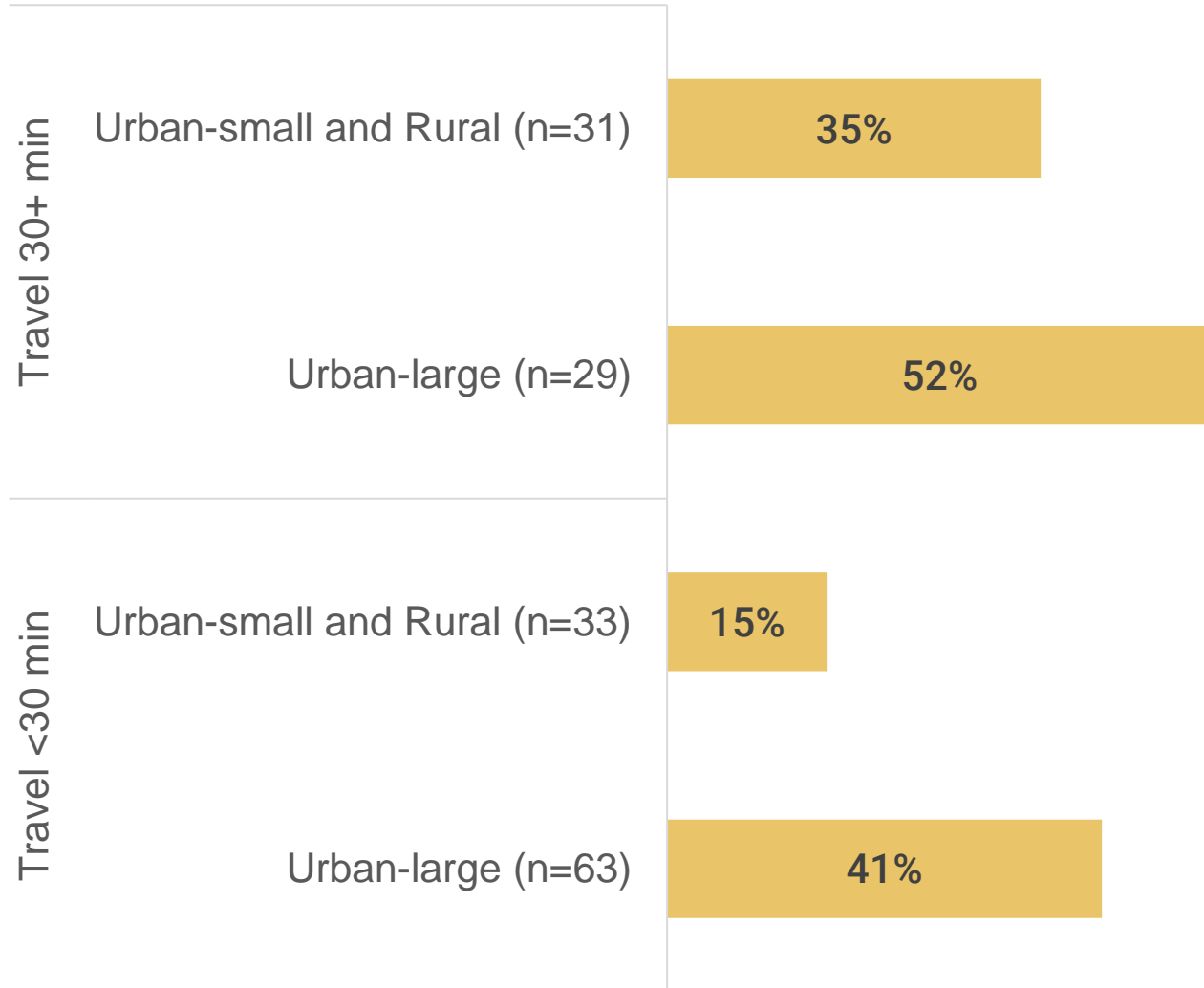
Access to Competitive Employment x Rural/Urban x Travel Time

How much do you or the person you care for have access to competitive employment?



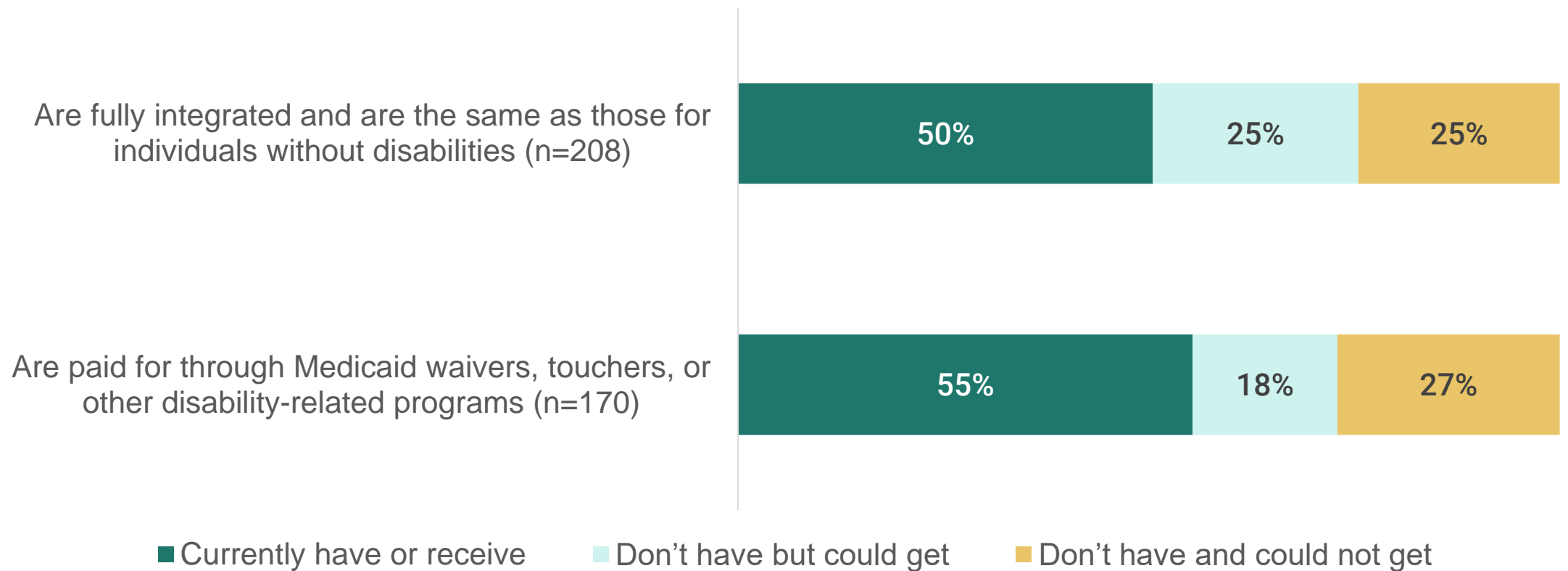
Access to Employment x Rural/Urban x Travel Time

Don't have and could not get access to competitive employment or employment supports? (Reported at least one)



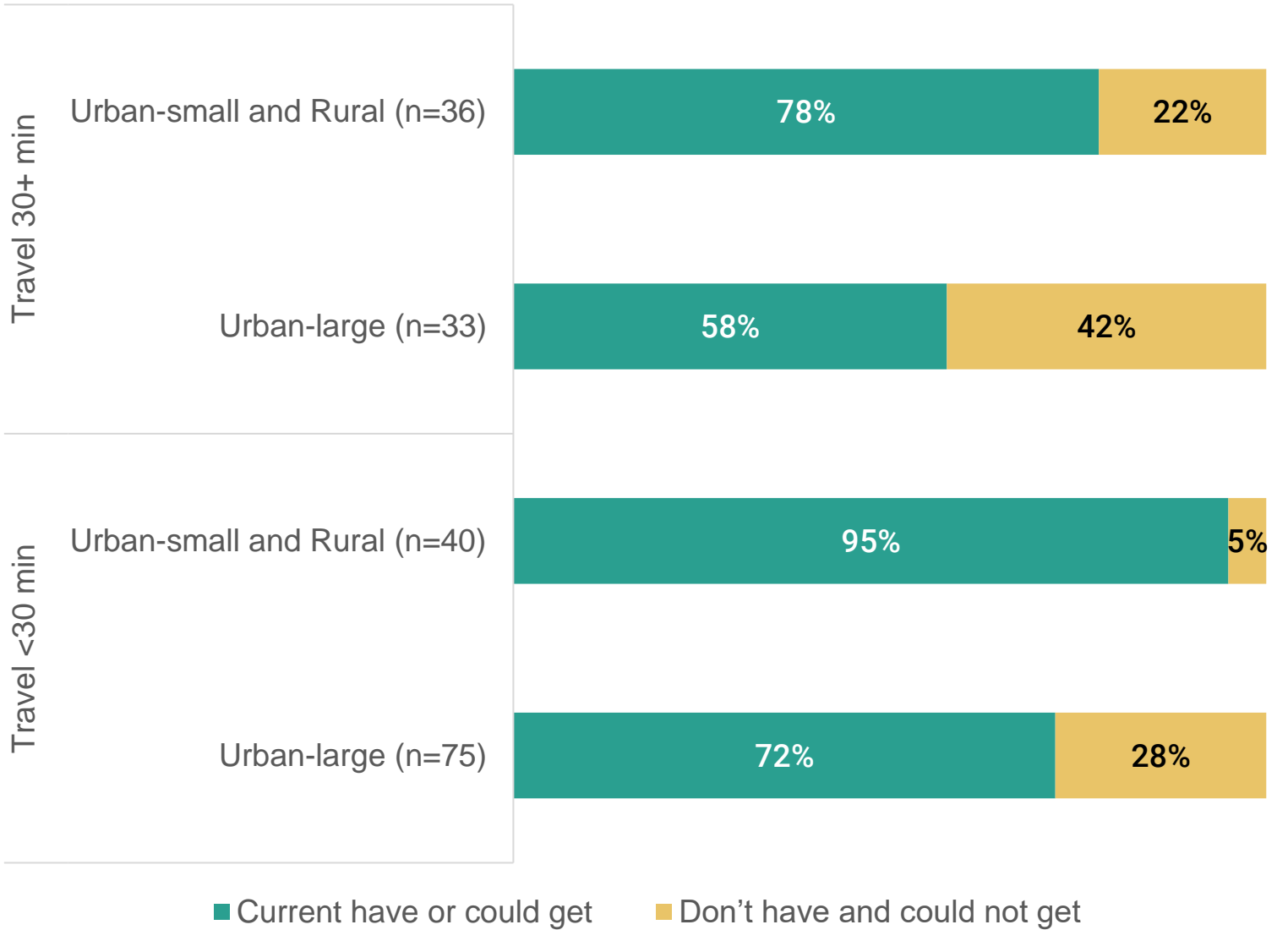
Community-based Services

How much do you or the person you care for have access to community-based services that...



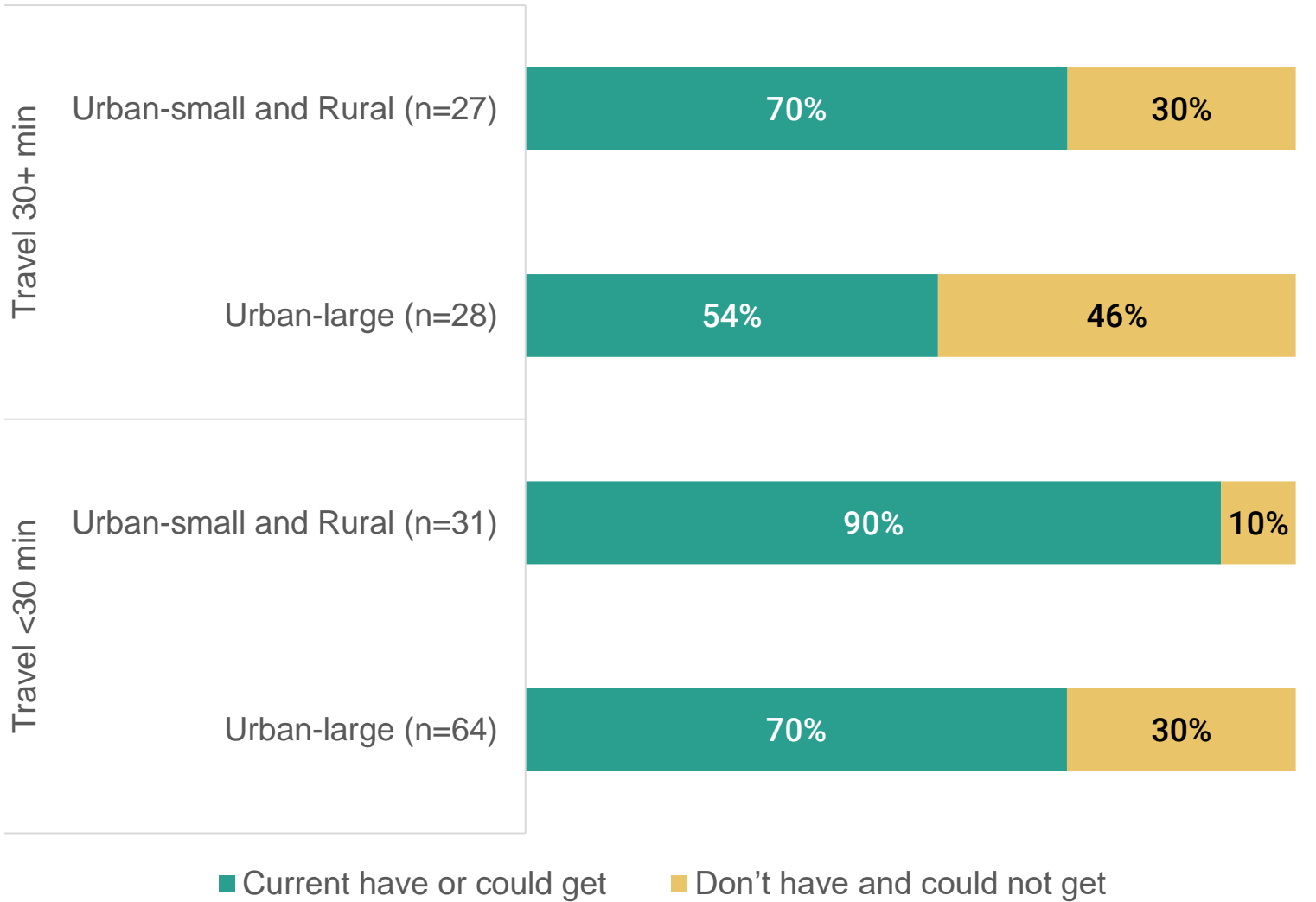
Access to Community Based Services Fully Integrated x Rural/Urban x Travel Time

How much do you or the person you care for have access to community-based services that are fully integrated?



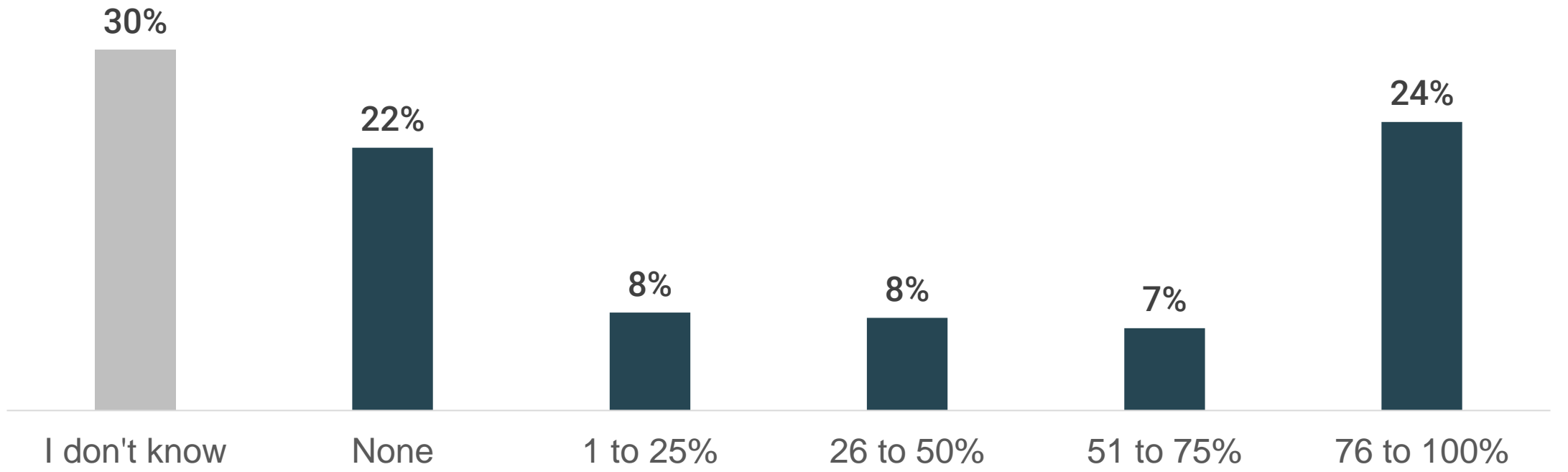
Access to Community Based Services Paid x Rural/Urban x Travel Time

How much do you or the person you care for have access to community-based services that are paid through waivers, vouchers, or programs?



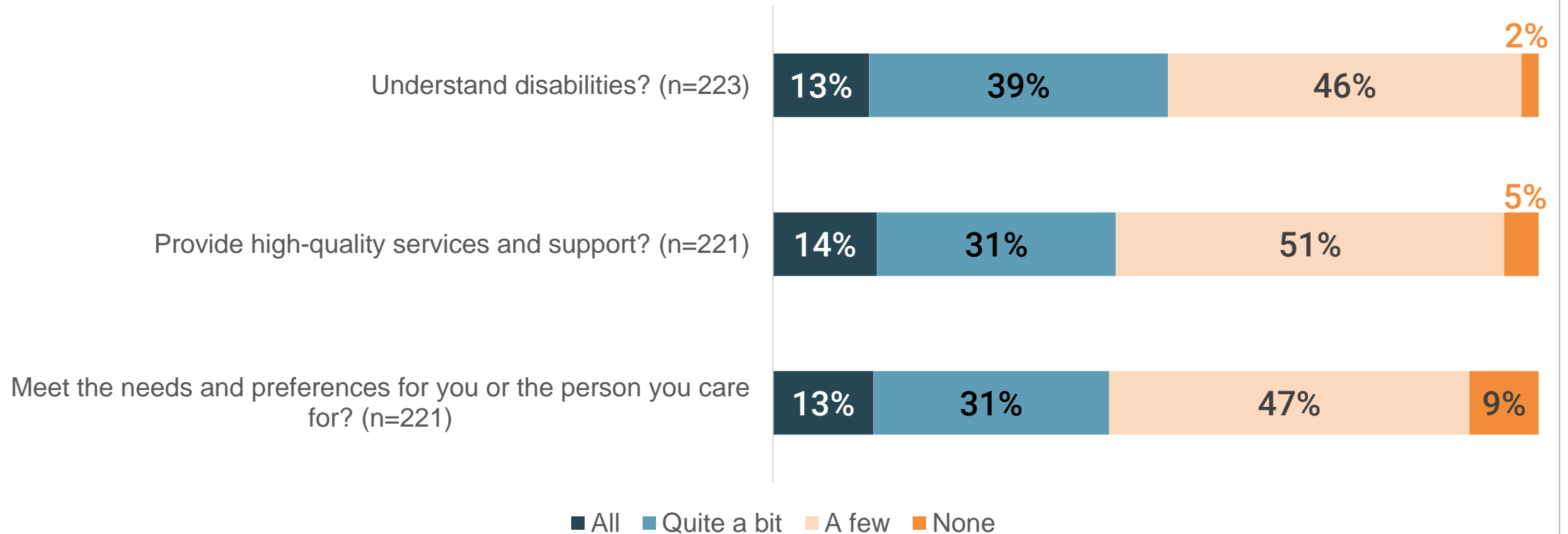
Eligibility Requirement, Qualification, Request

Of the services that you receive or use, about what percentage required an eligibility determination, qualification, or special request rather than being available to the public? (n=230)



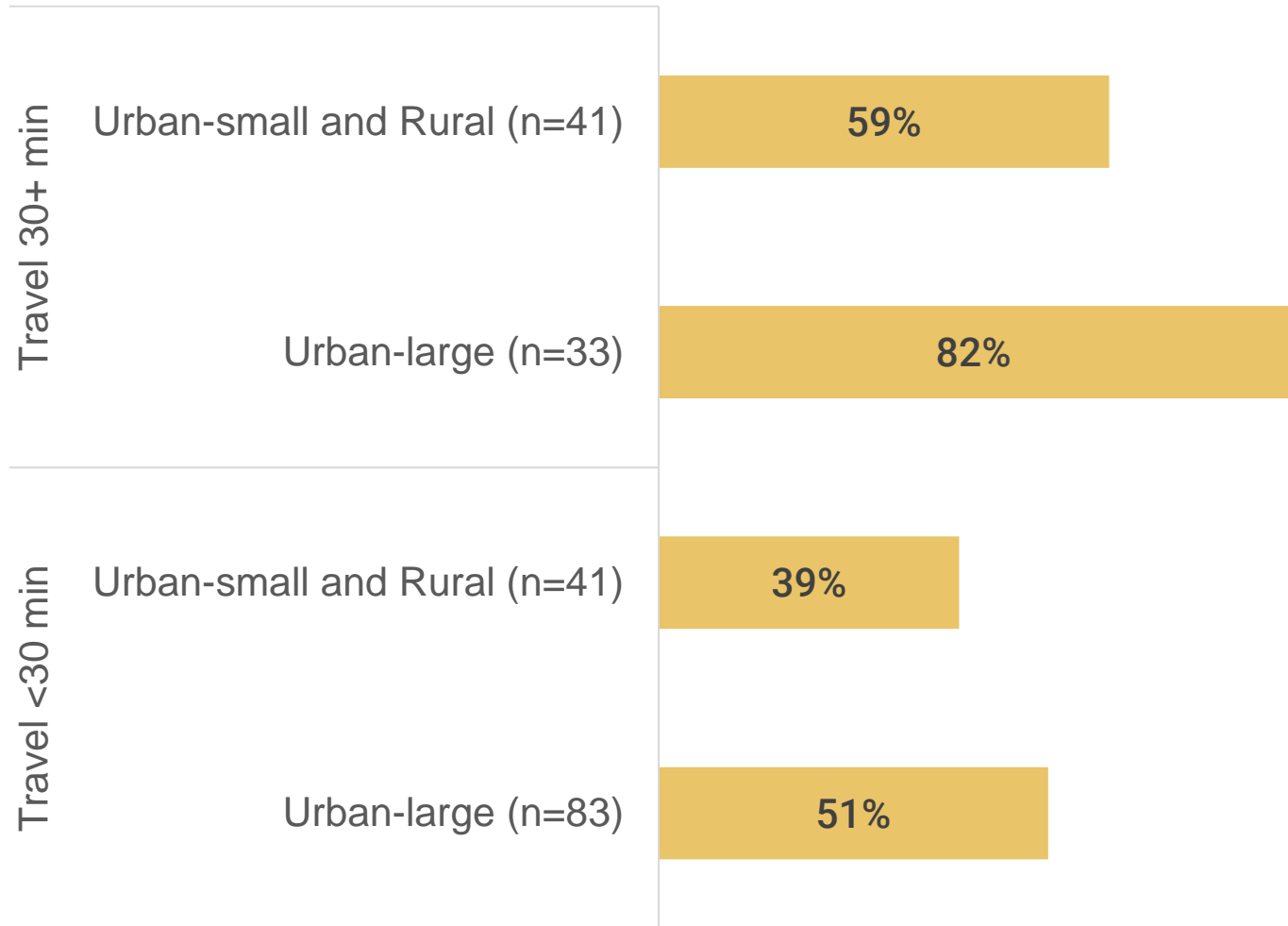
Services and Support

Thinking about the people and organizations that provide disability-related services and support, in general how many of them...



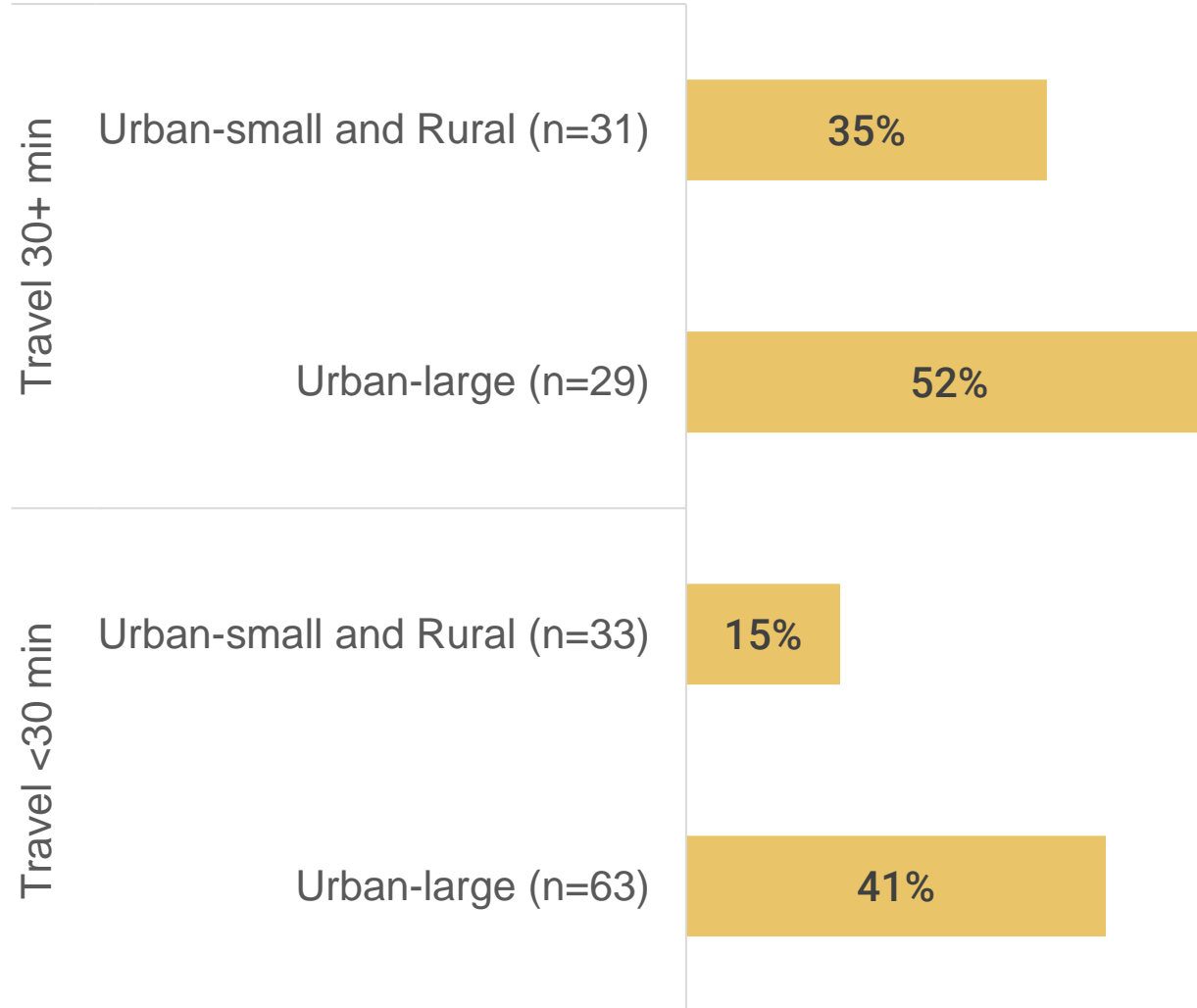
Providers are of High Quality x Rural/Urban x Travel time

NONE or A FEW of the people and organizations that provide disability-related services and support are of high quality



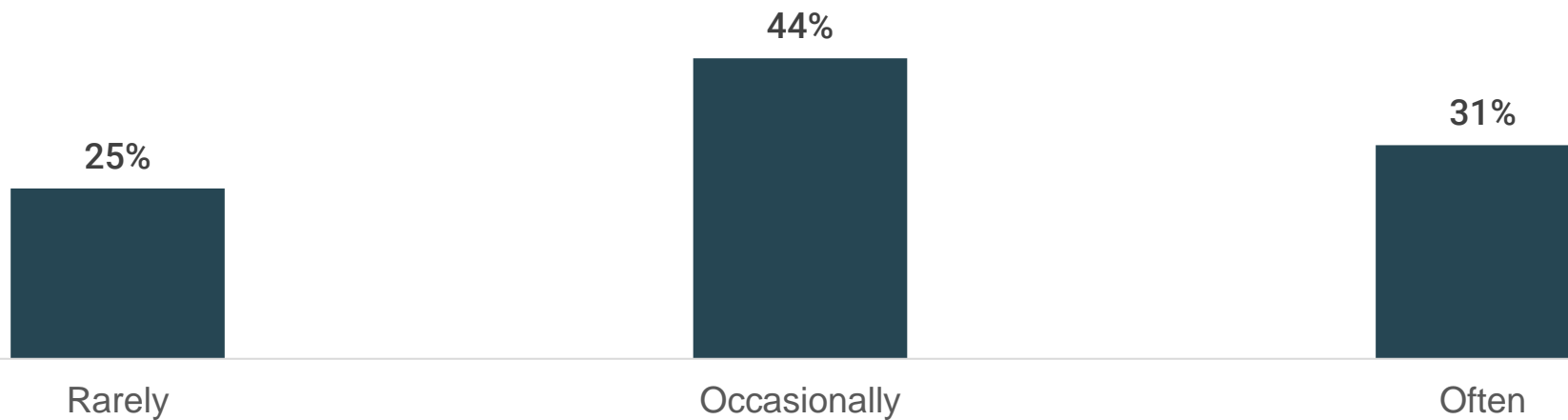
Providers Meet Needs x Rural/Urban x Travel Time

NONE or A FEW of the people and organizations that provide disability-related services and support meet needs and preferences



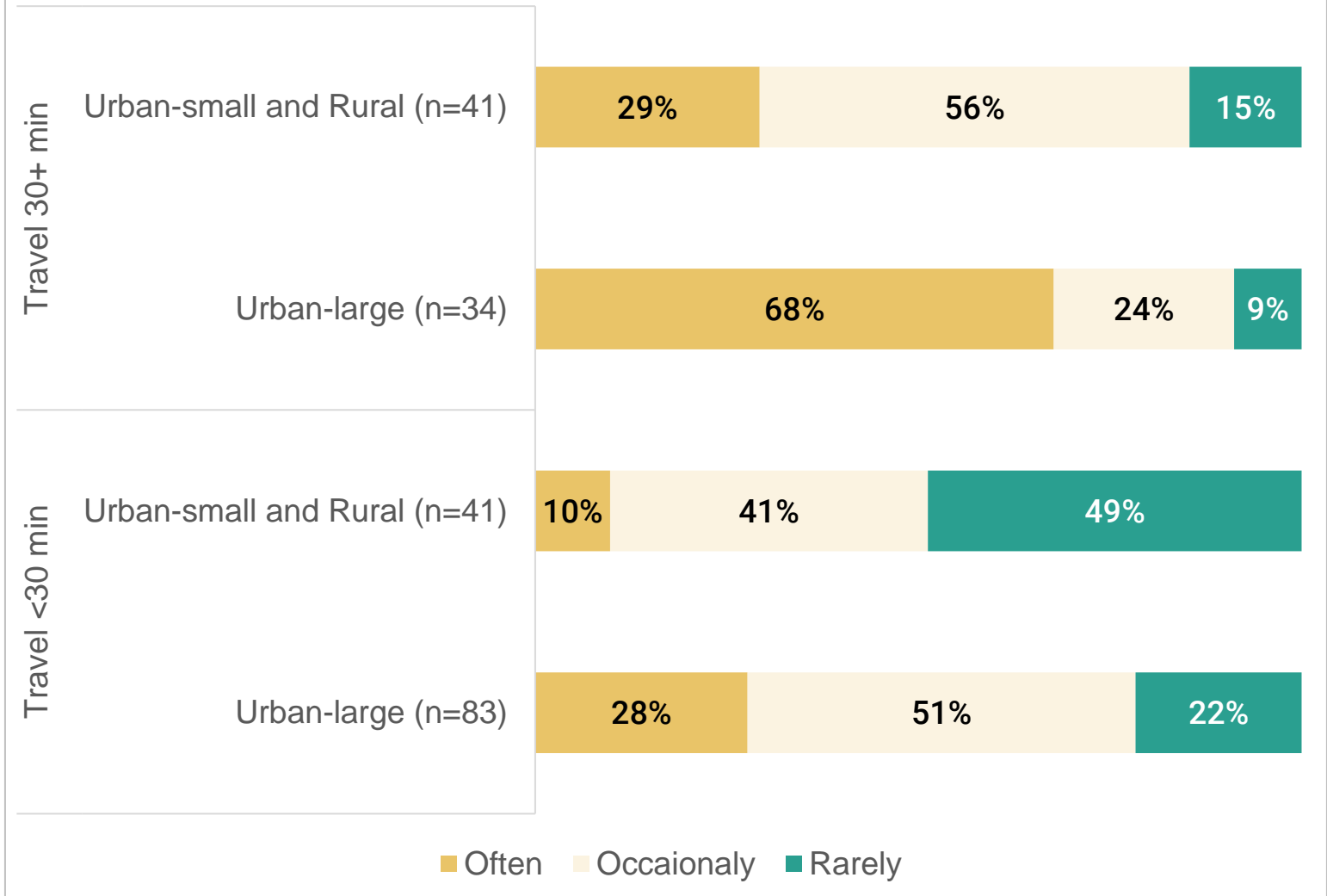
Services and Support

How often have you had difficulties getting access to disability-related services and supports? (n=221)

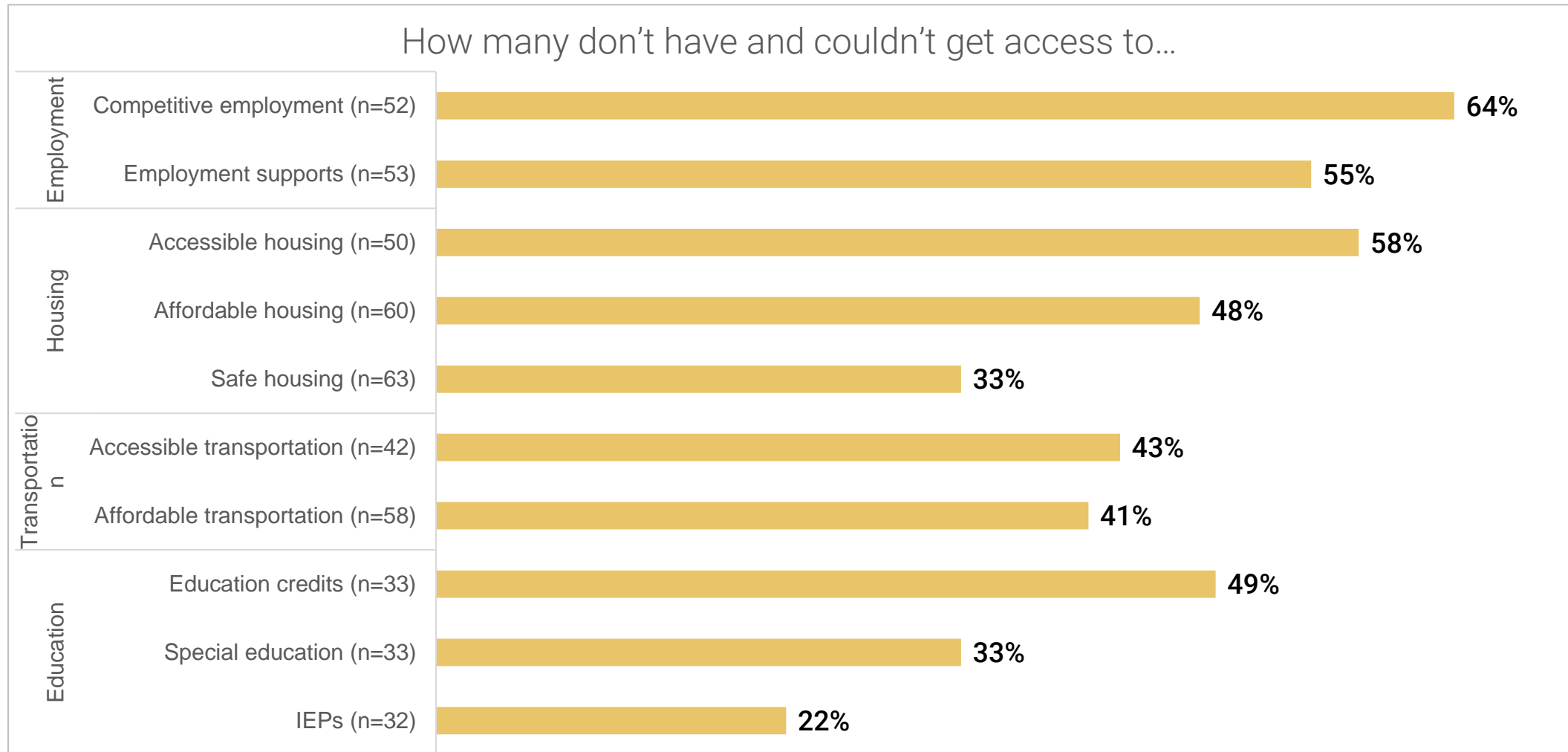


Difficulty Getting Access x Rural/Urban x Travel time

How much do you or the person you care for have difficulties getting access to disability-related services and supports?



Among those who reported OFTEN having difficulties getting access to services and supports... ..

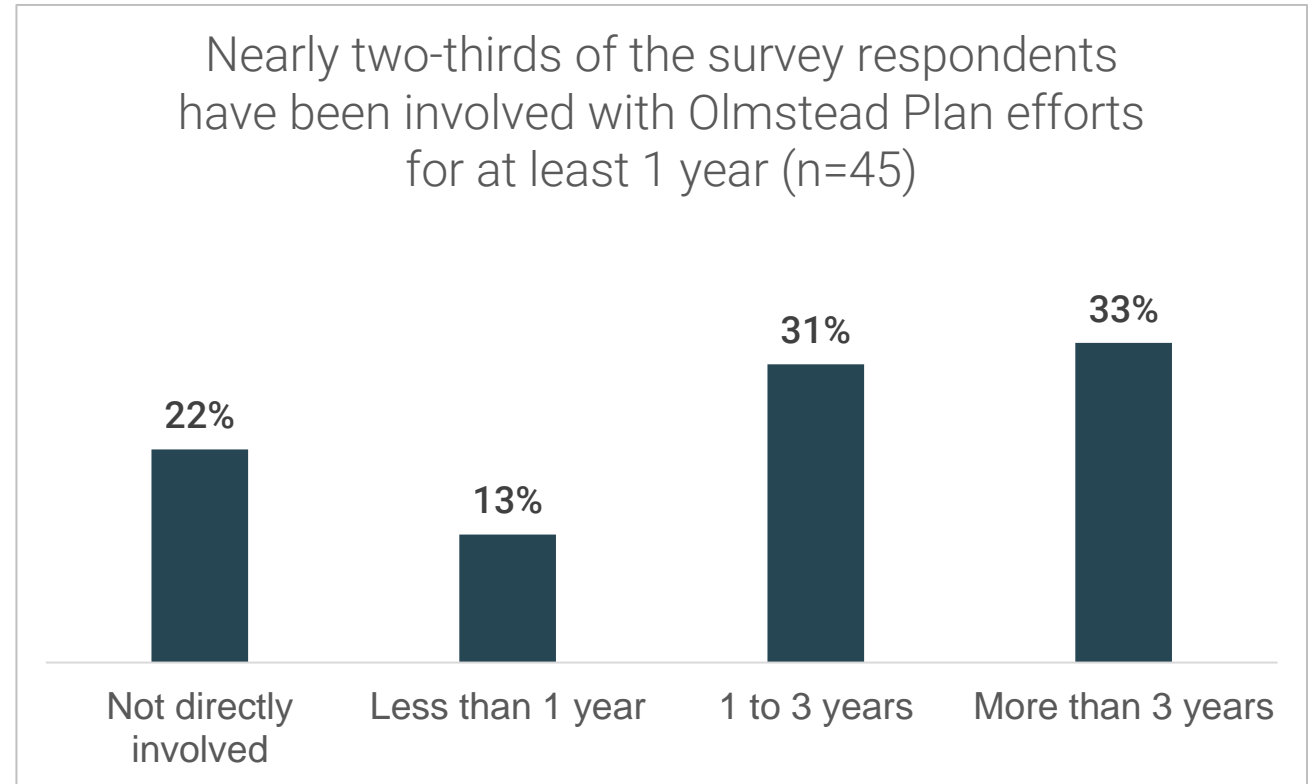




Workgroup Member, Advocate & Key Partner Survey

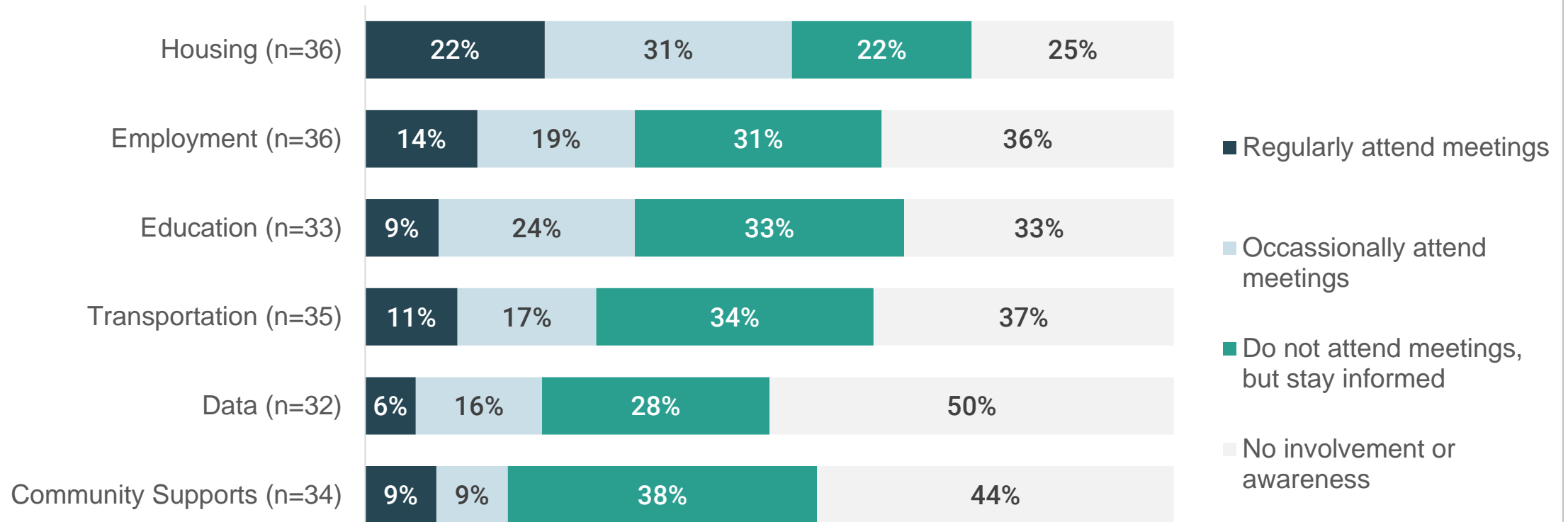
Survey Details

- Available February 9 through March 22, 2024
- Sent to 83 individuals
 - 54% participated in the survey



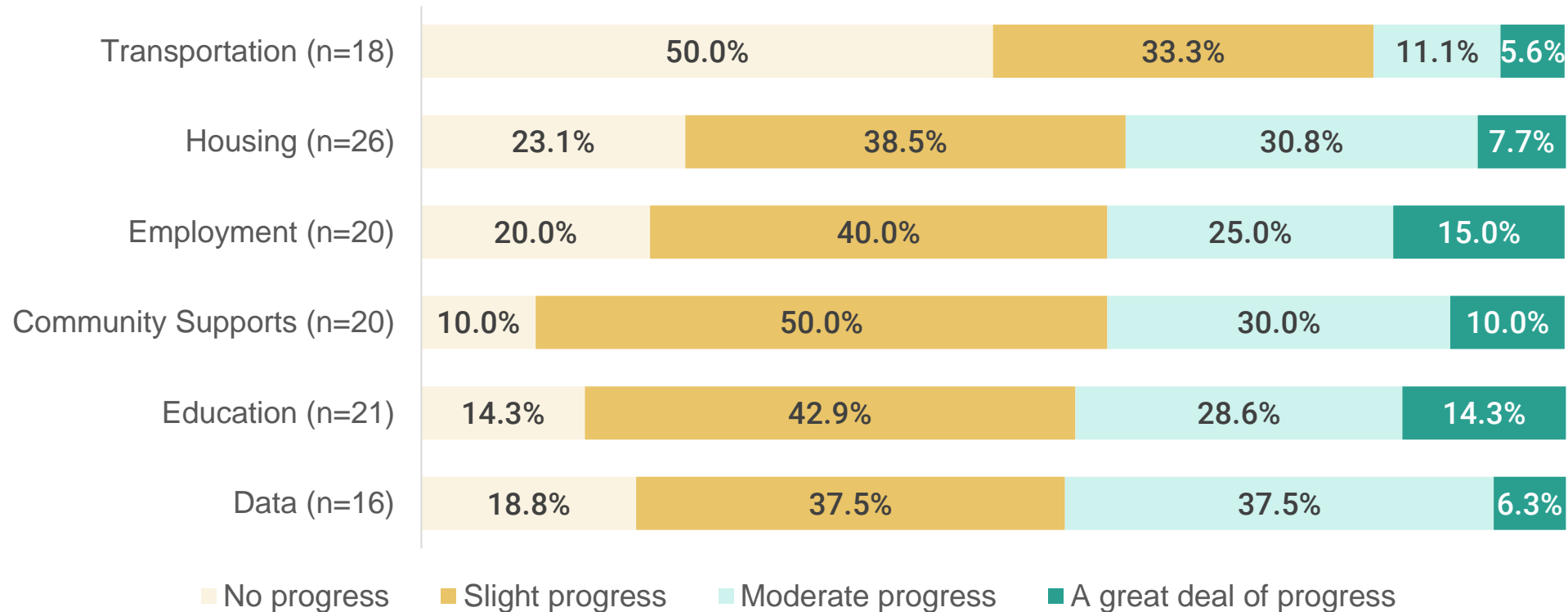
Workgroup, Advocate & Partner Survey Results

Participation in workgroup meetings was highest among housing (53%)



Workgroup, Advocate & Partner Survey Results

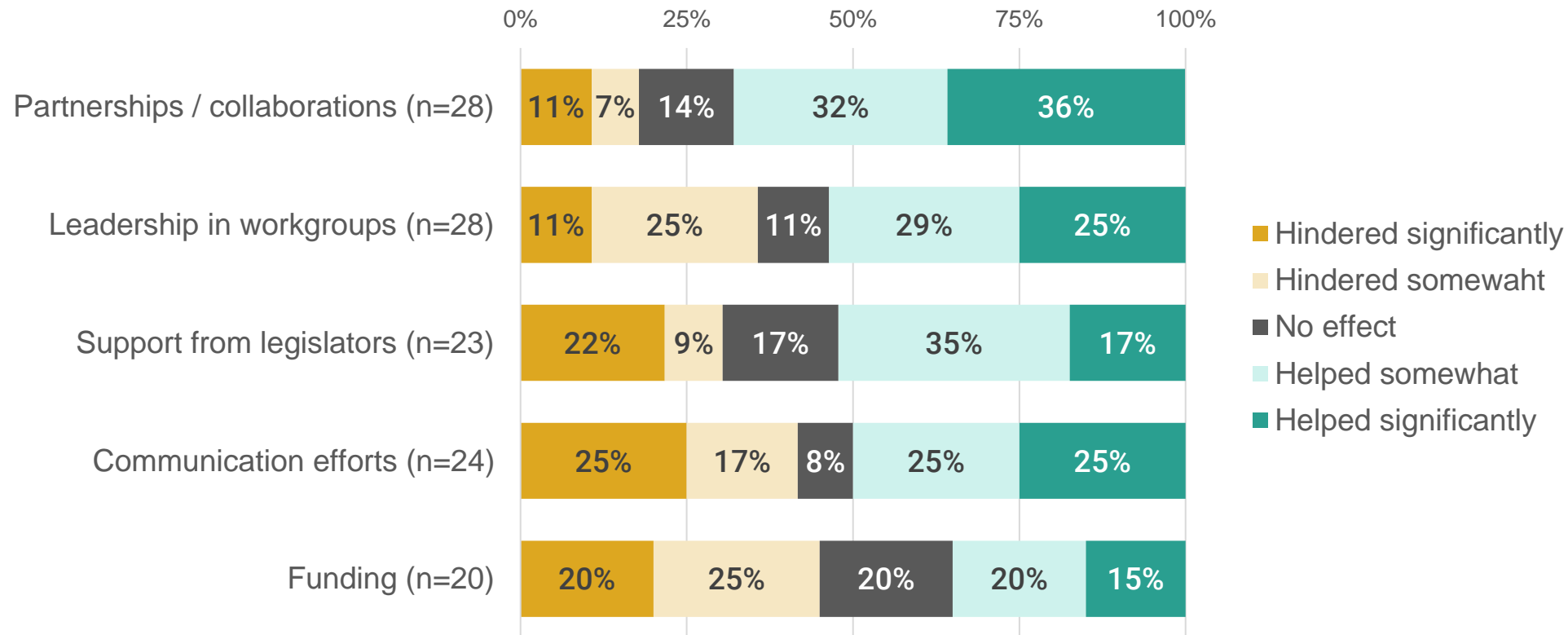
On average across the six goal areas, 10% feel there's been a great deal of progress while 23% report no progress



NOTE: There was not a statistically significant difference in the perceived level of progress based on 1) the length of time someone was involved in Olmstead efforts or 2) the level of involvement within that committee

Workgroup, Advocate & Partner Survey Results

A majority (68%) viewed partnerships and collaborations as something that helped with progressing on the Olmstead Plan



NOTE: There was not a statistically significant difference in the perception of factors based on the length of time someone was involved in Olmstead efforts

Workgroup, Advocate & Partner Survey Results

Other Factors that Hindered (n=19)

1. Lack of communication (n=3)
2. Unproductive meetings / low attendance (n=3)
3. No support from governor's office or legislature (n=3)
4. Lack of high-level / agency leadership support (n=3)
5. Funding (n=2)
6. Lack of awareness about plan (n=2)
7. Lack of direction for workgroups (n=2)
8. Limited involvement to implement plan (n=2)
9. Feels like the plan is a box to check (n=2)

There were 12 additional factors listed one time

"To this point with little support from Governor and legislature I am not sure other Departments see this as serious."

Other Factors that Helped (n=16)

1. Active involvement of community and advocates (n=4)
2. DHHS staff (n=4)
3. Collaboration with partners (n=4)
4. N/A or Don't know (n=3)
5. Active involvement of workgroup or committee members (n=3)
6. Knowledge / expertise (n=2)

There were 6 additional factors were listed one time

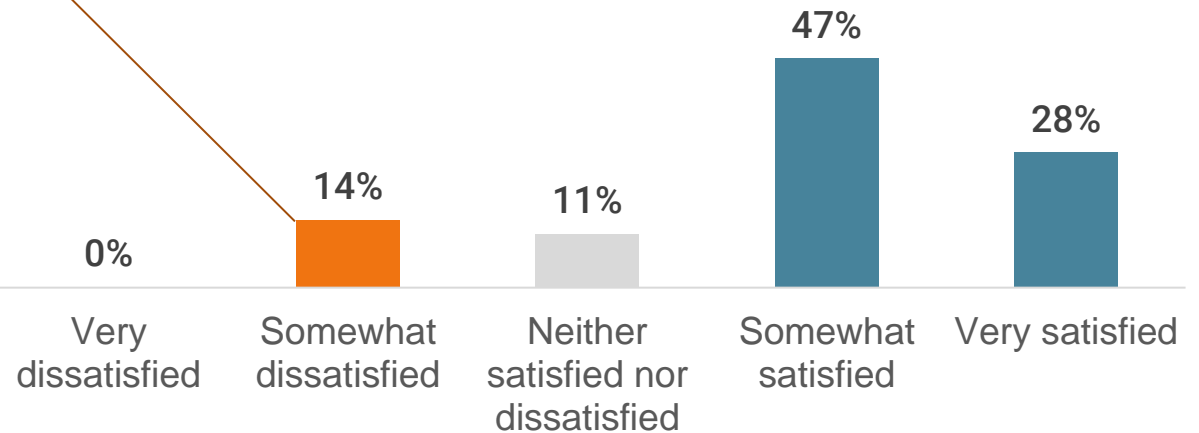
"The opportunity to collaborate across systems is tremendous. Leveraging the resources of those attending these meetings can really drive change."

Workgroup, Advocate & Partner Survey Results

Feedback from those who were dissatisfied :

1. The objectives need to go deeper and target individuals with disabilities who are at risk of institutionalization and also individuals who currently live institutional lives because of a lack of supports and services available.
2. A low process for change
3. There needs to be consideration of a continuum of care including the ICF option for individuals with mental illness and IDD/DD
4. Without studying the plans and hearing from people affected, it is hard to judge whether the plan is effective or not.
5. No current needs assessment that lends to indications of improvement in the data. The correct areas are cited to be addressed, there's just no way to know if improvement has occurred as there is no baseline. The strategies for improvement are lacking as well.

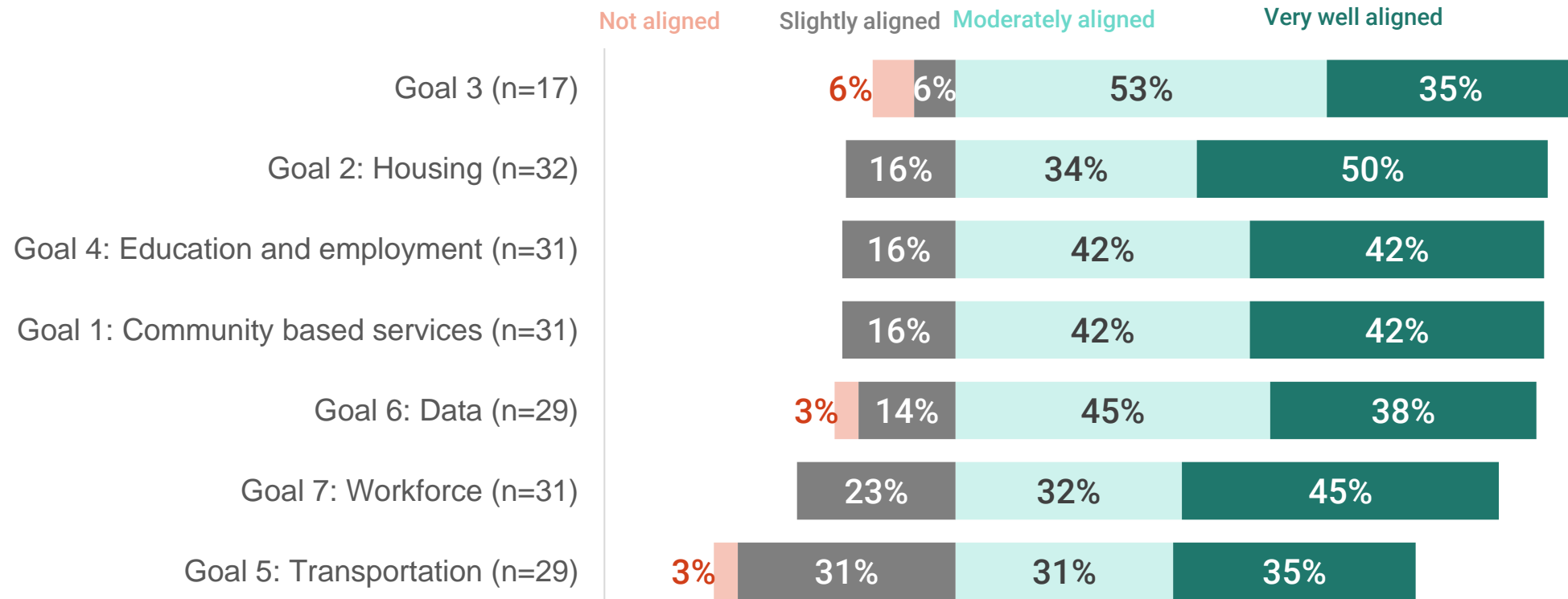
About 75% of survey respondents reported they were **satisfied** with the current objectives included in the Olmstead Plan (n=36)



NOTE: There was not a statistically significant correlation between the length of time involved in the Olmstead Plan efforts and how satisfied people were with the current objectives

Workgroup, Advocate & Partner Survey Results

Survey respondents felt objectives were most aligned with Goal 3 and less aligned with Goal 5

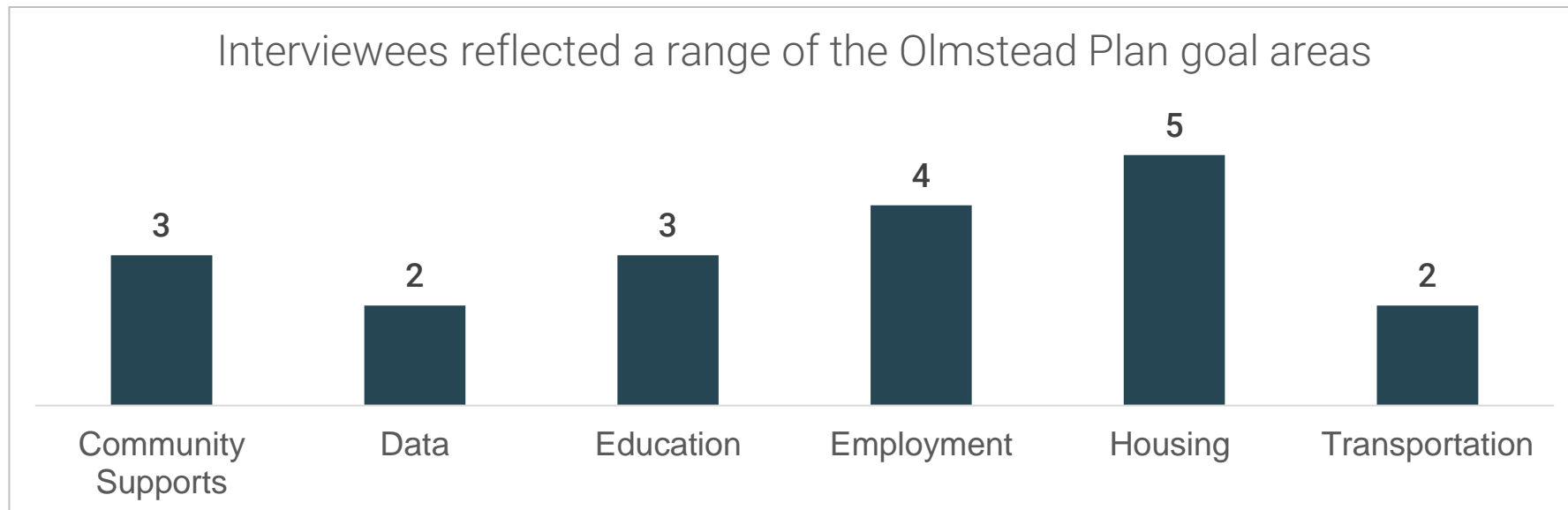




Key Partner Interviews

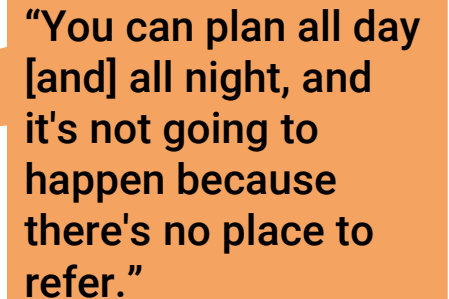
Data Collection Details

- Conducted interviews with 18 individuals
 - Reflected 9 unique agencies



Key Results

- Collaboration has been a key to success
 - Still have opportunities to increase alignment and communication; Olmstead Plan could be a way to create a shared vision
- A key barrier in many of the goal areas was limited workforce or services
- Ideally more data would be available or shared to better understand current status and progress
- Most felt the outcomes were aligned with the goal area they were involved with
 - Some would like to see “stretch goals” integrated



“You can plan all day [and] all night, and it's not going to happen because there's no place to refer.”

Key Results

What People Liked

1. Having a plan that was more specific than before
2. Formatting and ease of viewing the document

“I thought it was very user friendly. I really appreciated...the use of the bullet points and the indents, the bolding... I felt like all of those things were very easy to guide the reader through what the important parts were, and to keep the logic of a large document well laid out.”

Potential Improvements

1. Outcomes seem to be more process-oriented measures rather than true outcomes
2. Identify specific communities, populations, or areas that would benefit most to focus on for some of the objectives
3. Replace ambiguous words like “routinely” and “regular” with more specific descriptions
4. Considering adding outcomes related to collaboration across entities; find ways to measure the collaboration
5. Ensure activities/objectives are related to things that agencies have control over
6. Make the statement of need clearer in the plan



Focus Groups

Data Collection Details

Audience	Date	No. of Participants
Individuals with Disabilities	4/9/24	4 live, 2 via online form
Family Members/caregivers	4/4/24	2 live, 5 via online form
Workgroup members	4/5/24	6 live, 1 via online form
DHHS Olmstead Plan staff	5/22/24	3

Individuals with Disabilities & Family Members/Caregivers

A person with disabilities would have:

- Safe and secure place to live ✓
- Access to the medical care they need, including home help
- Access to integrated services for complex needs, such as brain injury and mental health treatment ✓
- Employment of some kind, with or without supports, if desired ✓
- Community, social, and recreational opportunities
- Access to all spaces where people without disabilities can go
 - restrooms, walkways, public spaces, etc.
- Access to transportation that will get them where they wish to go – every day, where they live, and beyond their parents ✓

✓
indicates that
topic is currently
addressed in the
Olmstead Plan

The Olmstead Plan would ideally include:

- Assisted Outpatient Therapy
- Community-based housing ✓
- Housing that is safe, affordable, and designed for people with disabilities ✓
- Transportation – beyond just getting to medical appointments ✓
- Incentives for businesses to hire people with disabilities
- Education for medical providers
- Universal preschool
- Focus on dignity for individuals with disabilities ✓



indicates that
topic is currently
addressed in the
Olmstead Plan

Barriers to being fully integrated:

- Limited employment opportunities – particularly integrated employment
- Limited options for continuing education at colleges, institutions and universities
- Safe housing that has supports available, such as a tenant assistant to answer questions or a medication dispensary
- Built and social environment – buildings not having electric door openers, restaurants that do not accept cash
- Limitations with transportation, such as need to book a week in advance or having limited weekend availability
- Mental health care system is a “revolving door” with people moving from one system to another and back again



Overarching Qualitative Data Themes

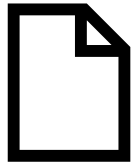
Key Takeaways from Qualitative Data

- The right people/organizations are at the table
 - Attendance at meetings – particularly for workgroups – is a challenge to keeping work moving forward
- Most of key topics and goals needed in the plan are included
 - There's alignment with the objectives for each goal, but some would like to see stretch goals or opportunities for the Plan to set a vision for agencies
- Many would like to see higher level leadership supporting the Olmstead Plan and making it a priority
- Better access to data and information to know what the true problems are and if Nebraska is making progress



Next Steps

Reporting & Use of Results



July

- Draft report to DHHS (7/17)
- Convene ad hoc evaluation workgroup (7/24)
- Present preliminary findings to advisory committee (7/31)

August

- Convene ad hoc evaluation workgroup

September

October

- Final evaluation report to DHHS (10/15)
- Present findings to advisory committee (10/29)
- Present findings to DD Advisory Committee

Beyond the Final Report...

- Executive summary of findings
- Workgroup specific summary report/infographics
 - Final iterations due January 15, but will aim to drafts ready earlier for use in revising the next Olmstead Plan

NEBRASKA OLMSTEAD PLAN 2024 EVALUATION FINDINGS

Education & Employment

What Success Looks Like

Through interviews and focus groups, key partners discussed how they would define success for education and employment. In an ideal world, this is how the Olmstead Plan efforts would

- **Having a common vision.** Having a shared vision and strategic plan among agencies and division – including Nebraska Vocational Rehabilitation and DHHS (the Division of Developmental Disability and Division and Behavioral Health).
- Having a clear **distinction of where educational services end and adult services begin.**
- Understanding and sharing data, ideally **having one place where data could be obtained.** This would be a key resource to have for all entities.
- Offering **additional supports to consumers and caregivers.** This could include 1) increasing support for younger age children to foster independence and advocacy earlier, 2) preparing youth and their family members/caregivers prior to the individuals' 18th birthday, and 3) increasing the employment rate for VR clients.
- **Integration of consumers into communities.** This means ensuring people know about work options and having support to make an informed decision about if they work or not and ensuring that people being served are fully integrated into society. That includes having the opportunity to be promoted, having access to health care, being able to retire, and more.
- [\[add more from focus group transcripts\]](#)



What Aids in Success

A variety of factors help organizations, workgroups and committees move toward success:

- Shared commitment across partners and stakeholder organizations
- Connecting through meetings

"I think our dedication to working across agencies is very powerful... we're all committed to working together. We're not about finger pointing. We're not about leaving anyone out. I think we truly see that we're stronger when we work together, so that, I think, has been really important."



Key Accomplishments

These are some of the key successes, accomplishments or wins within education and employment through the Olmstead Plan:

- Strong collaboration focused on creating consistent messaging – particularly when it comes to communicating with schools across the state.
- Increasing partnerships between behavioral health and developmental disabilities related to employment.
- Educational advocacy efforts and entities being involved with various supports, such as Individual Education Plans (IEPs), 504 plans, and Individual Family Service Plans (IFSPs).
- Increasing open-mindedness around hiring individuals with disabilities. Though preconceptions are still a concern, some progress is being made.
- [\[add in content related to metrics/data for outcomes\]](#)

