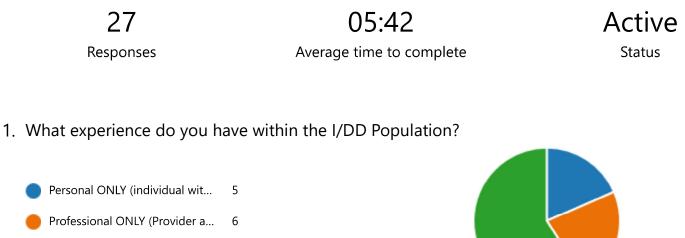


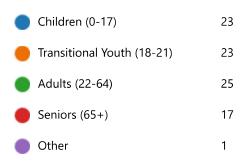
DHHS I/DD Stakeholder Workgroup Survey



- - Professional ONLY (Provider a... BOTH Professional and Personal 16



2. What age group do you have direct EXPERIENCE with, including lived experience? (Multiple Answers Allowed)

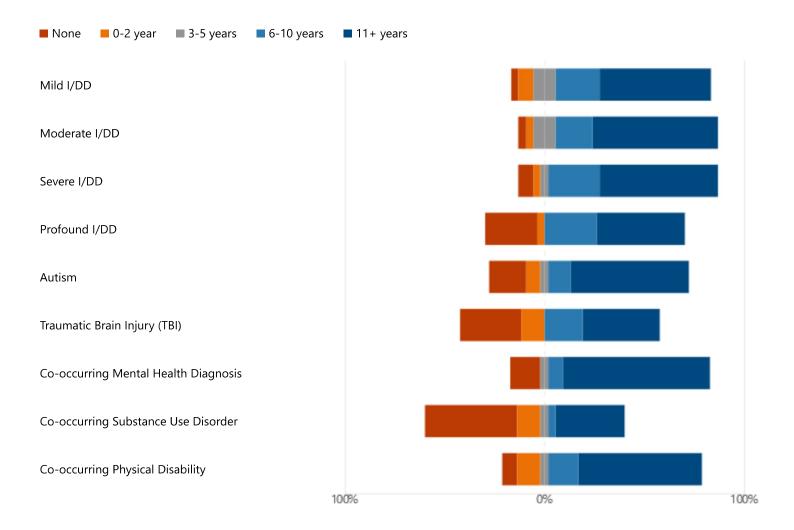




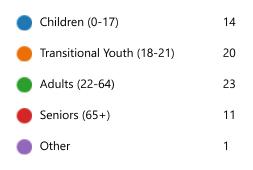
?

CL

3. Please mark your experience level with EACH of the following groups. Classifications of Intellectual Disability Severity are defined as follows: https://www.ncbi.nlm.nih.gov/books/NBK332877/table /tab_9-1/?report=objectonly:

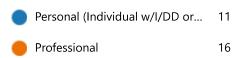


4. In accordance to the group you are representing on the DHHS IDD Stakeholder work group, what population are you representing? Select all that apply.





5. What GROUP are you representing as a part of the DHHS IDD Stakeholder Workgroup in alignment with your assigned grouping?





6. Please provide any additional feedback for consideration of the DHHS IDD Stakeholder Work group.

