

NC DHHS HCBS Transition Plan Chat Sessions Listening Tour At-A-Glance 2015

Date/Time	Location	Attendees	Session Feedback
February 3, 2015 2pm-3:30pm	343 E. Six Forks Rd. Suite 320 Raleigh, NC	Self-Advocate: 1 Family: 6 State Government: 2	Employment: Increase access to Vocational Rehabilitation much earlier; Increase employment options/develop job market; Supported Employment made available at the legal working age (16). Residential: "Homelike" must be reasonable (guidance is important); Group homes should not be "default" option; Improved transition planning for people moving out of parent's home or group home. Day Services/Adult Day Health: My "peers" may be others with disabilities, this may be my choice; Increased staff availability/pool so parents can work - critical shortage also skill level is an issue; Transition from segregated to integrated settings should be gradual, not immediate.
February 9, 2015 6pm - 8pm	205 C-D Plaza Dr. Greenville, NC	Self-Advocates: 3 Family: 3 State Government: 2	Employment: Educate employers on benefits of I/DD employees (include people with I/DD in the process); Need Vocational Rehabilitation to be involved earlier in the person's life; Need to promote work for everyone, not just the "highest functioning". Residential: If a person chooses a group home, the housemates should have a variety of abilities (not grouped by disability); Need affordable education opportunities to teach people to successfully live independently; Need staff trained on inclusion/integration. Day Services/Adult Day Health: Integration should start when children are young so they know their communities, and their communities know them; Options need to be individualized for real person-centeredness; Stigma and unwelcoming communities are a barrier to community inclusion.
February 10, 2015 6pm - 8pm	1006 S Marshall St. Winston-Salem, NC	Self-Advocates: 4 Family: 16 State Government: 1	Employment: - Emphasize employment outcomes; - Transportation is an issue to obtaining and maintaining employment; - Need to improve workforce to provide better supports. Residential: - Change in parent as provider requirements is a barrier; - Need a variety of housing options and emphasis on future planning; - Need more emphasis on roomate/housemate choice. Day Services/Adult Day Health: - Improve provider network to include more Adult Day Health providers; - Lack of available psychologist is a barrier to inclusion (people are unable to transition out of institutions without an evaluation); - Need a better variety of day settings.
February 11, 2015 2pm-3:30pm	5041 New Centre Dr. Suite 100 Wilmington, NC	Self-Advocates: 2 Family: 3 State Government: 1	Employment: - Need better training for job coaches; - Vocational Rehabilitation can be a barrier to employment (short staffed, no long term follow along); - Lack of jobs in the community is a barrier. Residential: - Essential to have a variety of options; - Community Networking is working well; - Need to improve true person-centered planning process. Day Services/Adult Day Health: - Need more options for people to choose from; - LME-MCOs are pushing group day supports - counterproductive to person-centeredness; - Need workforce development to improve staff competencies.
February 12, 2015 6pm-8pm	306 Summit St. Asheville, NC	Self-Advocate: 1 Family: 15 State Government: 2	Employment: - Need streamlined access to services, especially when a job becomes available; - Need to promote a variety of employment options such as microenterprise; - Vocational Rehabilitation can be a barrier to continued employment - step down plans can occur too quickly. Residential: - Alternative Family Living settings can be a good alternative to group homes; - System should not rely on natural supports as a substitute for services; - High staff turnover rate is a barrier to inclusion and person-centered supports. Day Services/Adult Day Health: - Day programs should be available if the person chooses that setting; - Need options for meaningful day based on the person's interests; - Need more education and training for staff.
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