

Meta-analysis of Nevada Needs Assessments

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NvLEND

The Nevada Leadership Education in Neurodevelopmental and Related Disabilities (NvLEND) improves the health of infants, children, and adolescents with autism and other disabilities by preparing practicing professionals, parents, and graduate trainees from diverse professional disciplines to assume leadership roles in their respective fields and by developing high levels of interdisciplinary clinical competence.

Leadership Projects

Leadership projects are one of the three branches that make up LEND. Trainees are grouped into interdisciplinary teams to complete the project over a year-long period. Leadership projects provide trainees an opportunity to participate in a research, scholarly or systems change project.

Our Leadership Project

- Research and design an ecomap/org chart representation of the Nevada "landscape" related to resources and services available for people with developmental disabilities. The map will start at the Governor's office and flow down to include information about boards/commissions, state agencies, local resources, and funding sources that impact the disability community. While highlighting available resources, the map will also highlight gaps in funding and service that impact the disability community.
- No Wrong Door Project
- Meta analysis of Needs Assessments and Reports of state agencies

Type	Name	Agency - Public Body	Frequency	Due Next	Contact	Email
NA	Nevada Substance Abuse, Mental Health and Suicide Prevention Needs Assessment Report 2015	DPBH				
NA	Statewide Community Needs Assessment 2016	DHHS - GMAC	Annual	Jun-18	Cindy Smith	
NA	DCFS - Victims of Crime Needs Assessment	DCFS				
Rpt	Behavioral Health Services System in the State of Nevada 2014	DPBH - BHWC	One time			
Rpt	Summary Report: A Discussion of Services Needed by Individuals who are Blind or Visually Impaired 2014	NDALC				
Rpt	Nevada's Olmstead Report 2016	ADSD - CSPD	Annual			
Rpt	Nevada and Olmstead - A Continuous Examination 2015	ADSD - CSPD	Annual			
Rpt	Nevada Veterans Comprehensive 2016 Report	Intragency Council on Veterans Services	Annual			
Rpt	State Fiscal Year 2014-2015, Provider Network Access Analysis 2015	Health Services Advisory Group	Annual			
Rpt	FHN Bi-Annual Report	ADSD - COA & CSPD; CPG	2 years - odd years		Cindy Smith	
Rpt	Food Security in Nevada: Nevada's Plan for Action	DPBH - Food Security Council	Annual Report		Laura Urban	
SP	Nevada State Plan for Alzheimer's Disease	ADSD - TFAD	Annual	Jun-18	Kali M. Ochoa	kochoa@adsd.nv.gov
SP	Nevada Autism Spectrum Disorders Strategic Plan 2015-2020	ADSD - ASD	5 years	Jun-20	Brooke Adie	
SP	Coordinated Human Services Transportation Plan 2015	RTC	3 years			mulroyk@rtcsonv.com
SP	Nevada's Strategic Plan on Integrated Employment 2015-2025	DD Council	10 years		Sherry Manning	
SP	Generations to Come: Nevada's Strategic Planning Framework 2016-2020	Office of the Governor	4 years	Apr-20		stratolan@gov.nv.us
SP	Nevada's Strategic Plan for Integration of Developmental Services and Early Intervention Services into ASD 2014	ADSD	One time		Jill Bernstson	
SP	Nevada Interagency Council on Homelessness: Strategic Plan 2015	DPBH				
SP	Master Plan for Aging Services. Goals and Objectives 2014 - Washoe County	WCSS - NACO?				
SP	Nevada's Integrated Workforce Plan 2016-2021		5 years			
SP	State Plan for Aging Services October 1, 2016-September 30, 2020	ADSD - COA	4 years	Fall 2018	Jeff Duncan	
SP	Nevada 2-1-1 Strategic Plan 2016-2020	CPG	One time		Jennifer White	
SP	Nevada State Systems Improvement Plan (SSIP), Part C, Phase II, Federal Fiscal years 2014-2018	IDEA Part C Office -ICCC?	4 years			
SP	State Independent Living Plan	ADSD - SILC	3 years		John Rosenlund	
SP	ADSD/DHHS Strategic Plan?	ADSD	One time?		Dena Schmidt	
SP	DCFS Five Year State Plan	DCFS	5 years			
SP	DHCFP - Strategic Plan	DHCFP				
SP	Nevada's NWD Implementation Plan	ADSD - DHHS	One time		Cheyenne Pasquale	

Process

- Read through Needs Assessments and reports
- Pull out identified gaps and needs and compiled data into crosswalk
- Combed through initial data and coded commonly identified themes
- Repeated process for additional reports
- Compiled top 12 commonly identified gaps and needs into crosswalk

Transportation

Support expanded affordable, reliable public transportation options across all geographic regions within the state, especially for individuals with disabilities.

-- Generations to Come: Nevada's Strategic Planning Framework 2016-2020

The highest ranked barrier for client/community survey respondents was cost, followed by lack of knowledge of resources (i.e., not knowing where to go for help); **lack of transportation**; and lack of insurance coverage.

-- Nevada Substance Abuse, Mental Health and Suicide Prevention Needs Assessment Report 2015

Increased Community Collaboration

The LEAD/REACH Subcommittee emphasized the need for enhanced collaboration among state and non-state agencies through interfacing and aligning local and state nutrition program plans with the Food Security Plan.

-- Food Security in Nevada: Nevada's Plan for Action 2013 – 2017 Plan Progress and Recommendations

Access to information and services must be streamlined and standardized across systems to empower consumers to make choices.

Better collaboration among professionals was noted as a critical opportunity to facilitate better linkage and referral. Providers may not know all or the best resources to connect clients to additional assistance.

*-- Nevada Aging and Disability Services Division's STATE PLAN FOR AGING SERVICES
October 1, 2016 – September 30, 2020*

Integrated Health Information Technology

LTSS providers are mostly using different systems to track consumer information including service and outcome data. Therefore, ADSD will develop an integrated information technology (IT) system to improve access for consumers and improve efficiencies across programs and providers.

--Nevada's No Wrong Door Strategic Plan 2015-2018

Develop the technology to connect and share data among multiple state agencies, regional food banks, community agencies, and faith based organizations for efficient and effective targeting of services and populations.

*--Food Security in Nevada: Nevada's Plan for Action 2013 – 2017 Plan
Progress and Recommendations*

Access to Primary and Behavioral Health

Health / Mental Health Care was the No. 1 need identified in the 2014 Needs Assessment. Two years later, it continues to cling firmly to the top spot. In the 2016 surveys and in public forums, more input was collected about this need than any other.

-- 2016 Statewide Community Needs Assessment, GMAC

The combined impact of the rural and frontier nature of much of the state, along with a workforce shortage of not only physicians but other health care professionals, calls for infrastructure to provide reliable and consistent access to physical and behavioral health care services.

-- Nevada State Health System Innovation Plan 2016

Increased Public Awareness

The lack of knowledge of resources was the top barrier for focus group participants, followed by lack of insurance coverage, stigma associated with needing services, and fear.

--Nevada Substance Abuse, Mental Health and Suicide Prevention Needs Assessment Report 2015

People do not know what resources are available or how to access them. Additionally, there is not enough public awareness of ASD to support individuals within community settings.

--Nevada Commission on Autism Spectrum Disorders Strategic Plan, 2015-2020

Access and Engagement

Improve veterans' access to state employment by creating direct hire opportunities similar to the federal VRA program and based loosely on the current "Ready, Willing, and Able to Work" program.

-- Nevada Veterans Comprehensive 2016 Report

There is a need for all Nevada companies have enough information about and access to people with I/DD seeking employment to make informed business decisions to hire them.

--Nevada's Strategic Plan on Integrated Employment 2015-2025

Lack of Person or Family Centered Care

Need for greater state and community capacity to implement person-centered planning.
-- Nevada's Olmstead Report 2016

Increase access to person-centered planning.
-- State Plan for Aging Services October 1, 2016-September 30, 2020

Insufficient Person-Centered Planning Supports: There was broad concern that there is a lack of infrastructure and support to implement the person-centered planning that is now required by Federal rules.
-- Nevada and Olmstead - A continuous Examination 2015

Person-centered counseling (PCC) is not being implemented consistently within organizations or between organizations. There are not enough staffing resources to fully implement person-centered counseling.
-- Nevada's NWD Implementation Plan

Home-based/Community based Services

Improve the accessibility and quality of supportive services for at-risk populations by increasing the availability of home-and-community-based services to vulnerable adults by 20%.

-- Generations to Come: Nevada's Strategic Planning Framework 2016-2020

Lack of Intensive home-based services.

-- Nevada Substance Abuse, Mental Health and Suicide Prevention Needs Assessment Report 2015

Lack of Community Behavioral Health/Psychiatric Supports Capacity: This problem was reported as particularly acute in rural and frontier regions, but was listed as a concern statewide.

-- Nevada and Olmstead - A continuous Examination 2015

Bilingual Materials and Employees

Limited Spanish-speaking psychiatrists and other mental health professionals. Lack of mental health information and resources available in Spanish.

-- Nevada Substance Abuse, Mental Health and Suicide Prevention Needs Assessment Report 2015

Nevada 2-1-1 – needs marketing and outreach, resource updates, bilingual texting, warm handoffs.

-- Statewide Community Needs Assessment 2016

Accessibility of services for victims is limited by transportation, timeliness of services, language barriers....

-- Victims of Crime Needs Assessment

Long-Term Supports and Services

Long-term Planning: includes linking with the strategies of other regional strategic plans as well as sustainability planning for homeless programs.

-- Nevada Interagency Council on Homelessness: Strategic Plan 2015

Fund and implement an integrated, high-quality, person-centered service delivery system with services and supports that can be delivered over the long term so individuals can be self-sufficient.

-- ADSD/DHHS Strategic Plan

Finding the right long term services and supports to fit a family's needs can be difficult. In Nevada, there are a variety of different service providers, funding streams, and eligibility requirements that can make the search confusing, difficult, or frustrating. To address this reality, Nevada has been actively pursuing improvements to its LTSS system.

-- No Wrong Door Strategic Plan 2015-2018

Other Considerations

- Respite
 - Only a theme in three reports
- Access to Primary and Behavioral Health
 - #4 most commonly identified gap
 - Comes in higher on other lists
- All reports came from the State level
- Working in Silos

Needs Assessments

4 Common Practices that Present Problems in Needs Assessments:

1. Relying on common knowledge rather than empirical research.
2. Using one measure on a single slice of the target population.
3. Lack of implementation of recommended solutions.
4. **Working in isolation.**

4 Best Practices in Needs Assessments:

1. Empirical evidence from research to identify community needs and potential solutions.
2. **Collecting data from multiple groups**
3. An action-oriented approach to implementing recommending solutions
4. **Community leaders, service providers, researchers,** and members of the target population, as active members of the research team

Needs Assessments

It is pivotal to ascertain the significance the assessments and its findings will have for the agency. Often, needs assessments are implemented in response to mandates that are put into place by funding sources or governmental units as part of an effort to encourage agencies to engage in a systematic planning process. There is no “one size fits all” template for needs assessments. If the funding organization does not have standards or guidelines about what constitutes a “good” needs assessment, the efforts may result in products that fulfil the mandate, but lack usefulness.

(Center for Community Health and Development-UK, 2017)

Thank You!

Cynthia Smith

Jeff Duncan

Cheyenne Pasquale

Steven Cohen

References

Center for Community Health and Development at the University of Kansas. (2017). Assessing Community Needs and Resources. Community Tool Box. Retrieved from <https://ctb.ku.edu/en/table-of-contents/assessment/assessing-community-needs-and-resources/develop-a-plan/main>

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