

Child Family Survey (CFS) FY 18/19 NATIONAL CORE INDICATORS	CA Average	ACRC	CVRC	ELARC	FDLRC	FNRC	GGRC	HRC	IRC	KRC	NBRC	NLARC	RCEB	ROCC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC
Khmer	0%	0%	0%	0%	0%	0%	0%	1%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Laos	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	1%	0%	0%	0%	0%	0%	0%
Russian	0%	1%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
ASL	1%	1%	1%	1%	0%	1%	1%	1%	2%	2%	1%	1%	1%	2%	1%	1%	1%	1%	2%	0%	0%	1%
Other	2%	2%	3%	2%	1%	0%	3%	2%	1%	1%	0%	1%	3%	1%	1%	5%	1%	2%	3%	0%	2%	1%
CHILD'S LEVEL OF SUPPORT NEED FOR SELF-INJURIOUS, DISRUPTIVE, OR DESTRUCTIVE BEHAVIOR																						
No support needed	26%	28%	27%	26%	21%	25%	31%	23%	23%	26%	22%	23%	31%	18%	19%	29%	26%	28%	26%	29%	31%	27%
Some support needed	44%	46%	45%	49%	48%	45%	42%	45%	40%	53%	49%	48%	40%	39%	47%	41%	45%	44%	41%	46%	45%	46%
Extensive support needed	30%	26%	28%	24%	31%	31%	27%	32%	37%	20%	29%	28%	29%	43%	33%	30%	29%	28%	33%	25%	25%	27%
CHILD'S LEVEL OF SUPPORT NEED WITH DAILY PERSON CARE ACTIVITIES																						
No support needed	8%	9%	6%	9%	12%	9%	7%	10%	4%	10%	6%	10%	9%	5%	7%	6%	8%	10%	9%	11%	9%	8%
Some support needed	42%	42%	39%	45%	42%	43%	36%	44%	36%	43%	41%	47%	44%	34%	52%	40%	37%	42%	42%	44%	44%	50%
Extensive support needed	50%	49%	55%	45%	46%	48%	57%	46%	59%	47%	53%	44%	47%	61%	41%	53%	55%	48%	48%	45%	48%	43%
LANGUAGE SPOKEN IN THE HOME																						
English	64%	78%	58%	50%	50%	89%	69%	55%	66%	67%	71%	61%	67%	69%	84%	56%	36%	69%	50%	73%	70%	71%
Spanish	25%	13%	39%	35%	31%	9%	14%	34%	31%	32%	25%	27%	15%	19%	15%	16%	57%	25%	33%	23%	24%	21%
Mandarin	6%	3%	1%	8%	9%	0%	11%	7%	1%	1%	1%	8%	9%	1%	0%	18%	6%	1%	12%	1%	3%	4%
Tagalog	1%	0%	0%	4%	1%	0%	2%	0%	1%	0%	0%	0%	3%	1%	0%	2%	0%	0%	2%	0%	0%	0%
Vietnamese	1%	1%	0%	1%	2%	0%	2%	2%	1%	0%	1%	1%	2%	0%	0%	2%	0%	1%	0%	2%	0%	0%
Korean	2%	2%	0%	1%	0%	0%	1%	0%	0%	0%	0%	0%	2%	7%	0%	5%	0%	1%	2%	1%	1%	1%
Arabic	0%	0%	0%	0%	3%	0%	0%	1%	0%	0%	0%	0%	1%	1%	0%	1%	0%	0%	0%	0%	0%	0%
Armenian	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	1%	1%	1%	0%	0%	2%	0%	0%	0%	0%	0%
Farsi	0%	0%	0%	0%	4%	0%	0%	0%	0%	0%	0%	1%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Hmong	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	2%
Khmer	0%	0%	1%	0%	0%	1%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	1%	0%
Laos	0%	0%	0%	0%	0%	0%	0%	1%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Russian	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	1%	0%	0%	0%	0%	0%	0%	0%
ASL	0%	1%	0%	0%	0%	0%	1%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Other	0%	0%	0%	0%	0%	0%	0%	1%	0%	0%	0%	0%	1%	0%	0%	0%	0%	0%	0%	0%	0%	0%
AGE OF RESPONDENT																						
Under 35	12%	13%	20%	11%	12%	16%	5%	13%	12%	23%	15%	12%	10%	7%	13%	9%	19%	11%	10%	15%	20%	7%
35-54	76%	76%	70%	78%	76%	66%	82%	78%	74%	62%	70%	78%	74%	81%	73%	78%	73%	76%	79%	71%	69%	83%
55-74	11%	11%	10%	11%	11%	17%	13%	9%	14%	16%	15%	10%	11%	11%	13%	12%	8%	12%	10%	12%	10%	10%
75+	0%	1%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	1%	1%	0%	1%	1%	1%	1%	0%
RESPONDENT'S OVERALL HEALTH																						
Excellent	21%	23%	20%	22%	21%	19%	25%	23%	19%	22%	24%	21%	20%	22%	20%	18%	21%	22%	16%	25%	19%	22%
Very good	49%	48%	55%	42%	45%	47%	44%	49%	49%	48%	49%	49%	49%	51%	54%	50%	51%	53%	50%	49%	49%	52%
Fairly good	27%	26%	22%	31%	30%	30%	27%	25%	28%	27%	24%	26%	28%	25%	23%	28%	26%	23%	32%	23%	29%	23%
Poor*	3%	3%	3%	4%	4%	5%	3%	3%	3%	3%	2%	4%	3%	2%	4%	4%	3%	2%	3%	3%	3%	2%
RESPONDENT'S RELATIONSHIP TO CHILD																						
Parent	96%	95%	96%	97%	98%	93%	99%	97%	95%	94%	95%	97%	97%	98%	93%	98%	98%	97%	97%	96%	95%	99%
Sibling	0%	1%	0%	0%	0%	0%	0%	1%	0%	0%	0%	0%	1%	0%	1%	0%	0%	1%	0%	0%	0%	0%
Grandparent	3%	4%	2%	3%	2%	6%	1%	2%	4%	5%	4%	2%	1%	1%	6%	2%	2%	2%	3%	3%	4%	1%
Other	1%	1%	2%	0%	0%	1%	0%	0%	1%	2%	1%	1%	1%	0%	1%	0%	1%	1%	0%	1%	1%	0%
FAMILY PROVIDES PAID SUPPORT																						
No	55%	55%	61%	52%	57%	56%	50%	59%	43%	73%	45%	61%	67%	42%	65%	42%	55%	62%	58%	48%	62%	59%
Yes, respondent does	32%	35%	27%	30%	29%	31%	29%	30%	45%	14%	43%	30%	25%	48%	28%	37%	28%	31%	31%	31%	20%	25%
Yes, another family member does	14%	10%	12%	19%	15%	16%	23%	12%	14%	13%	15%	10%	11%	11%	7%	24%	20%	7%	11%	22%	18%	17%
NUMBER OF ADULTS IN HOUSEHOLD																						
1	16%	15%	19%	14%	18%	21%	13%	18%	14%	23%	16%	19%	17%	10%	21%	12%	23%	15%	15%	14%	17%	21%
2	58%	60%	55%	55%	58%	59%	62%	54%	55%	56%	62%	58%	62%	64%	60%	58%	45%	62%	50%	59%	52%	59%
3	18%	17%	15%	23%	18%	15%	15%	19%	21%	15%	16%	17%	13%	16%	15%	19%	22%	15%	21%	19%	20%	13%
4+	9%	8%	11%	8%	6%	5%	10%	9%	10%	7%	7%	7%	8%	10%	4%	11%	10%	7%	13%	8%	11%	6%
NUMBER OF CHILDREN IN THE HOUSEHOLD																						
1	35%	34%	31%	36%	45%	36%	39%	32%	31%	28%	39%	35%	38%	36%	33%	35%	37%	37%	38%	33%	25%	42%
2	40%	40%	30%	39%	39%	36%	42%	42%	38%	36%	37%	39%	42%	41%	33%	45%	36%	42%	38%	42%	41%	38%
3	18%	18%	22%	19%	13%	15%	16%	17%	20%	23%	18%	19%	14%	17%	19%	15%	18%	16%	18%	16%	21%	15%
4+	8%	7%	17%	6%	3%	13%	3%	8%	10%	13%	7%	7%	6%	6%	15%	6%	9%	5%	6%	8%	13%	4%
RESPONDENT'S HIGHEST LEVEL OF EDUCATION																						
No high school diploma/GED	15%	8%	28%	21%	21%	8%	9%	18%	19%	25%	11%	17%	8%	10%	12%	11%	29%	11%	19%	14%	19%	11%

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DOES THE CASE MANAGER/SERVICE COORDINATOR RESPECT YOUR FAMILY'S CHOICES AND OPINIONS																							
Always	66%	71%	68%	66%	71%	74%	56%	67%	70%	57%	66%	65%	62%	68%	67%	63%	57%	66%	59%	69%	74%	72%	
Usually	25%	23%	22%	25%	20%	19%	34%	22%	24%	30%	27%	23%	29%	26%	19%	27%	28%	25%	32%	23%	21%	22%	
Sometimes*	7%	3%	7%	7%	7%	5%	6%	8%	5%	11%	5%	8%	7%	5%	9%	7%	11%	7%	8%	7%	4%	4%	
Seldom/Never*	2%	2%	2%	2%	2%	2%	4%	2%	1%	3%	2%	3%	2%	2%	4%	3%	4%	2%	2%	1%	1%	1%	
DO YOU HAVE ENOUGH INFORMATION ABOUT OTHER PUBLIC SERVICES FOR WHICH YOUR FAMILY IS ELIGIBLE (FOOD STAMPS, SSI, OR HOUSING SUBSIDIES, FOR EXAMPLE)																							
Always	25%	31%	34%	28%	24%	29%	14%	29%	25%	25%	20%	23%	19%	21%	34%	21%	23%	24%	21%	25%	35%	22%	
Usually	31%	30%	32%	29%	30%	35%	33%	30%	34%	26%	34%	29%	25%	32%	27%	35%	32%	29%	34%	29%	32%	35%	
Sometimes*	22%	21%	16%	24%	24%	20%	25%	20%	19%	21%	19%	20%	27%	27%	19%	24%	20%	23%	19%	25%	19%	26%	
Seldom/Never*	22%	18%	18%	19%	21%	16%	27%	22%	22%	28%	26%	28%	29%	20%	20%	20%	24%	23%	26%	21%	14%	17%	
WANTS HELP WITH PLANNING FOR CHILD'S FUTURE WITH RESPECT TO...																							
Employment	54%	57%	45%	55%	53%	52%	61%	54%	51%	53%	57%	54%	57%	55%	50%	56%	51%	53%	53%	50%	51%	61%	
Financial	54%	57%	39%	51%	57%	54%	66%	52%	49%	53%	56%	52%	61%	57%	51%	57%	47%	51%	54%	52%	52%	55%	
Housing	48%	50%	33%	48%	49%	39%	64%	44%	41%	37%	47%	45%	54%	51%	48%	58%	47%	47%	44%	48%	43%	59%	
Legal	44%	47%	34%	42%	44%	44%	51%	43%	46%	39%	43%	39%	47%	49%	42%	51%	40%	40%	48%	37%	37%	46%	
Medical	46%	47%	46%	46%	44%	44%	57%	47%	42%	47%	45%	42%	53%	53%	46%	52%	41%	41%	44%	42%	46%	42%	
Social/relationships	59%	60%	50%	64%	58%	63%	59%	62%	54%	54%	61%	63%	63%	60%	57%	58%	53%	57%	61%	56%	52%	65%	
Transition from school	56%	58%	47%	58%	53%	56%	69%	52%	54%	48%	60%	56%	62%	58%	59%	58%	52%	57%	58%	52%	49%	58%	
Recreation/having fun	58%	56%	57%	59%	56%	54%	65%	61%	57%	57%	61%	57%	67%	63%	53%	60%	56%	58%	55%	56%	52%	64%	
Other	9%	8%	11%	8%	10%	10%	6%	11%	11%	15%	11%	9%	5%	6%	13%	8%	10%	7%	9%	9%	14%	11%	
IF YOU ASKED FOR CRISIS OR EMERGENCY SERVICES DURING THE PAST YEAR, WERE SERVICES PROVIDED WHEN NEEDED																							
Yes	41%	51%	41%	44%	35%	50%	34%	44%	46%	33%	42%	39%	39%	43%	50%	37%	32%	42%	30%	52%	44%	46%	
DOES YOUR CHILD HAVE A IPP/IFSP																							
Yes	78%	81%	79%	86%	77%	84%	70%	71%	74%	75%	80%	84%	71%	77%	86%	79%	71%	80%	82%	80%	83%	73%	
DOES THE IPP/IFSP INCLUDES ALL SERVICES/SUPPORTS CHILD NEEDS																							
Yes	81%	84%	87%	82%	77%	84%	73%	77%	78%	78%	81%	80%	73%	83%	84%	81%	73%	81%	80%	84%	89%	79%	
DOES YOUR CHILD GET ALL SERVICES LISTED IN IPP/IFSP																							
Yes	87%	92%	96%	87%	86%	89%	84%	87%	82%	84%	86%	88%	82%	89%	78%	88%	72%	87%	79%	92%	91%	85%	
DID YOU OR ANOTHER FAMILY MEMBER HELPED MAKE IPP/IFSP																							
Yes	77%	80%	77%	73%	69%	88%	85%	73%	75%	74%	85%	74%	79%	75%	84%	82%	50%	80%	73%	84%	79%	83%	
DID YOUR CHILD WITH DISABILITY HELP MAKE IPP/IFSP																							
Yes	18%	18%	24%	21%	21%	22%	14%	21%	14%	20%	15%	21%	11%	15%	19%	14%	22%	16%	19%	20%	23%	23%	
DID YOU GET A COPY OF YOUR CHILD'S IPP/IFSP IN YOUR PREFERRED LANGUAGE																							
Yes	93%	94%	94%	95%	91%	94%	90%	91%	90%	89%	96%	94%	96%	88%	93%	94%	83%	91%	94%	95%	95%	90%	
DID YOU DISCUSS HOW TO HANDLE EMERGENCIES (SUCH AS A MEDICAL EMERGENCY OR A NATURAL DISASTER) AT YOUR CHILD'S LAST IPP/IFSP MEETING																							
Yes	41%	52%	38%	45%	24%	64%	25%	28%	68%	32%	34%	32%	25%	70%	56%	32%	35%	35%	44%	37%	40%	33%	
DOES YOUR CHILD HAVE A TRANSITION PLAN																							
Yes	66%	58%	70%	61%	72%	76%	55%	66%	70%	66%	74%	69%	54%	71%	71%	64%	74%	65%	69%	70%	70%	64%	
DID YOU HELP MAKE THE TRANSITION PLAN																							
Yes	84%	90%	77%	81%	83%	90%	84%	80%	84%	81%	85%	86%	87%	81%	74%	89%	84%	84%	79%	83%	78%	89%	
DO YOU FEEL PREPARED TO HANDLE THE NEEDS OF YOUR CHILD IN AN EMERGENCY SUCH AS A MEDICAL EMERGENCY OR A NATURAL DISASTER																							
Yes	71%	82%	77%	65%	62%	87%	61%	65%	76%	74%	74%	71%	64%	78%	83%	63%	62%	71%	62%	75%	74%	77%	
Individual Question Responses Above 5%		10 out of 36	8 out of 36	2 out of 36	2 out of 36	11 out of 36	9 out of 36	1 out of 36	3 out of 36	2 out of 36	2 out of 36	1 out of 36	5 out of 36	8 out of 36	9 out of 36	5 out of 36	1 out of 36	0 out of 36	1 out of 36	4 out of 36	10 out of 36	12 out of 36	
Individual Question Responses Below 5%		1 out of 36	7 out of 36	2 out of 36	6 out of 36	2 out of 36	12 out of 36	4 out of 36	4 out of 36	12 out of 36	3 out of 36	3 out of 36	11 out of 36	2 out of 36	4 out of 36	3 out of 36	15 out of 36	2 out of 36	5 out of 36	1 out of 36	6 out of 36	2 out of 36	
Access																							
ARE YOU ABLE TO CONTACT YOUR CHILD'S SUPPORT WORKERS WHEN YOU WANT TO																							
Always	47%	54%	52%	43%	46%	47%	41%	48%	48%	36%	43%	49%	43%	48%	49%	40%	37%	47%	43%	51%	51%	51%	
Usually	35%	33%	32%	37%	34%	39%	42%	32%	35%	37%	39%	32%	38%	38%	25%	39%	26%	37%	38%	36%	32%	34%	
Sometimes*	14%	11%	13%	15%	16%	10%	10%	15%	13%	21%	12%	13%	13%	12%	16%	15%	24%	13%	14%	10%	13%	11%	

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CAN YOUR CHILD GO TO THE DENTIST WHEN NEEDED																						
Always	66%	69%	67%	64%	64%	67%	63%	69%	67%	68%	72%	70%	69%	64%	66%	61%	60%	73%	59%	69%	62%	64%
Usually	21%	18%	21%	23%	25%	17%	24%	19%	22%	20%	16%	20%	20%	21%	20%	23%	25%	19%	25%	19%	20%	24%
Sometimes*	7%	8%	8%	8%	5%	7%	6%	6%	7%	8%	7%	6%	7%	9%	8%	8%	10%	5%	10%	8%	11%	8%
Seldom/Never*	5%	5%	4%	5%	5%	9%	6%	5%	5%	4%	5%	4%	4%	6%	6%	8%	5%	3%	6%	4%	7%	4%
DOES YOUR CHILD'S DENTIST UNDERSTAND HIS/HER NEEDS RELATED TO HIS/HER DISABILITY																						
Always	53%	50%	54%	52%	54%	51%	51%	54%	54%	55%	53%	54%	54%	52%	60%	50%	56%	55%	51%	54%	53%	51%
Usually	30%	33%	27%	27%	33%	31%	31%	28%	30%	28%	31%	29%	31%	31%	20%	34%	27%	30%	31%	30%	27%	36%
Sometimes*	12%	12%	12%	14%	10%	12%	14%	12%	11%	11%	12%	13%	12%	14%	14%	11%	13%	10%	13%	11%	15%	11%
Seldom/Never*	5%	5%	6%	7%	4%	6%	3%	6%	5%	6%	4%	5%	4%	4%	5%	5%	5%	4%	6%	4%	6%	2%
IF YOUR CHILD TAKES MEDICATIONS, DO YOU KNOW WHAT THEY'RE FOR																						
Always	90%	90%	89%	89%	90%	94%	91%	86%	90%	87%	92%	90%	91%	88%	94%	86%	89%	91%	87%	92%	90%	87%
Usually	7%	6%	8%	8%	5%	2%	6%	9%	6%	8%	4%	8%	5%	8%	4%	10%	7%	7%	8%	5%	8%	8%
Sometimes*	2%	2%	1%	1%	3%	1%	2%	3%	2%	1%	2%	1%	2%	2%	1%	3%	2%	2%	2%	1%	1%	3%
Seldom/Never*	2%	2%	2%	2%	1%	3%	2%	1%	2%	4%	2%	1%	2%	2%	1%	2%	2%	1%	2%	2%	1%	2%
IF YOUR FAMILY MEMBER TAKES MEDICATIONS, DO YOU, YOUR FAMILY MEMBER OR SOMEONE ELSE IN YOUR FAMILY KNOW WHAT IS NEEDED TO SAFELY TAKE THE MEDICATIONS (WHEN IT SHOULD BE TAKEN, HOW MUCH TO TAKE, POTENTIAL SIDE EFFECTS)																						
Always	87%	90%	89%	86%	89%	97%	88%	84%	90%	92%	90%	87%	88%	83%	92%	82%	85%	89%	85%	90%	88%	84%
Usually	10%	9%	8%	10%	9%	3%	10%	13%	7%	8%	8%	11%	10%	14%	8%	15%	12%	10%	11%	8%	10%	12%
Sometimes*	2%	1%	2%	1%	1%	n/a	1%	2%	2%	1%	1%	2%	1%	3%	n/a	3%	2%	1%	1%	1%	1%	3%
Seldom/Never*	1%	0%	n/a	2%	1%	n/a	0%	2%	1%	n/a	2%	n/a	0%	1%	n/a	1%	1%	1%	2%	1%	0%	1%
IF YOUR CHILD USES MENTAL HEALTH SERVICES, DOES THE MENTAL HEALTH PROFESSIONAL (FOR EXAMPLE, PSYCHOLOGIST, PSYCHIATRIST, COUNSELOR) UNDERSTAND YOUR CHILD'S NEEDS RELATED TO HIS/HER DISABILITY																						
Always	52%	53%	56%	54%	48%	48%	44%	52%	53%	53%	56%	56%	50%	46%	52%	43%	62%	53%	52%	48%	60%	57%
Usually	32%	33%	26%	28%	41%	31%	39%	34%	32%	24%	31%	27%	33%	36%	31%	38%	25%	33%	27%	35%	31%	35%
Sometimes*	11%	10%	11%	12%	6%	10%	13%	9%	11%	18%	9%	11%	14%	13%	13%	14%	7%	9%	14%	9%	5%	6%
Seldom/Never*	5%	4%	7%	5%	5%	10%	5%	4%	4%	5%	4%	5%	3%	5%	4%	5%	6%	5%	8%	8%	5%	1%
IF YOU NEED RESPITE SERVICES, ARE YOU ABLE TO GET/USE THEM																						
Always	48%	42%	47%	58%	46%	46%	37%	46%	57%	40%	38%	52%	43%	40%	29%	49%	58%	48%	50%	55%	59%	50%
Usually	28%	29%	23%	23%	28%	25%	32%	28%	29%	30%	26%	25%	26%	37%	26%	27%	23%	31%	26%	30%	22%	30%
Sometimes*	13%	17%	14%	10%	11%	15%	20%	14%	8%	14%	18%	12%	15%	16%	18%	15%	10%	14%	14%	10%	10%	11%
Seldom/Never*	10%	12%	16%	9%	14%	15%	11%	12%	6%	16%	17%	12%	17%	7%	26%	9%	9%	7%	10%	5%	9%	9%
IF YOU HAVE USED RESPITE SERVICES IN THE PAST YEAR, WERE YOU SATISFIED WITH THE QUALITY OF THE RESPITE PROVIDERS																						
Always	62%	61%	67%	70%	57%	69%	67%	56%	62%	60%	61%	65%	58%	48%	56%	60%	71%	59%	61%	69%	71%	72%
Usually	23%	22%	17%	20%	28%	20%	24%	27%	23%	20%	20%	20%	24%	31%	24%	23%	20%	27%	20%	20%	15%	14%
Sometimes*	10%	11%	8%	7%	7%	6%	6%	9%	10%	11%	13%	9%	12%	17%	10%	12%	4%	10%	14%	8%	8%	10%
Seldom/Never*	5%	6%	7%	3%	7%	5%	2%	8%	5%	9%	5%	6%	6%	5%	10%	5%	5%	4%	5%	3%	5%	4%
DOES YOUR FAMILY GET THE SUPPORTS IT NEEDS																						
Yes	70%	74%	75%	69%	68%	69%	62%	66%	79%	69%	67%	71%	61%	74%	60%	63%	61%	70%	66%	78%	77%	70%
ADDITIONAL SERVICES NEEDED																						
Respite*	40%	42%	43%	32%	43%	43%	43%	39%	38%	39%	48%	41%	56%	38%	47%	40%	38%	38%	35%	26%	33%	34%
Regularly scheduled support for child*	36%	31%	36%	39%	44%	31%	51%	44%	40%	34%	28%	37%	43%	29%	33%	35%	39%	32%	39%	30%	28%	35%
Homemaker services*	22%	24%	17%	21%	23%	14%	21%	22%	23%	8%	17%	23%	31%	22%	13%	21%	27%	22%	23%	22%	22%	21%
Home and vehicle modifications*	15%	11%	17%	18%	16%	9%	23%	18%	13%	16%	9%	14%	15%	13%	17%	8%	15%	17%	15%	17%	17%	8%
Counseling*	38%	32%	28%	39%	42%	26%	30%	49%	36%	42%	36%	42%	41%	30%	40%	36%	44%	38%	43%	39%	32%	37%
Family to family networks*	28%	25%	26%	34%	19%	26%	26%	25%	31%	26%	39%	28%	40%	25%	22%	26%	26%	27%	32%	25%	23%	23%
Other*	38%	44%	37%	38%	41%	53%	24%	35%	39%	39%	41%	37%	31%	37%	49%	39%	32%	37%	38%	42%	42%	47%
Individual Question Responses Above 5%		9 out of 80																				
Individual Question Responses Below 5%		4 out of 80																				
Choice																						
CAN YOUR FAMILY CHOOSE OR CHANGE THE AGENCY THAT PROVIDES YOUR CHILD'S SERVICES																						
Always	45%	47%	53%	44%	40%	48%	35%	45%	48%	54%	37%	51%	38%	36%	50%	39%	47%	45%	42%	49%	57%	41%

Child Family Survey (CFS) FY 18/19 NATIONAL CORE INDICATORS	CA Average	ACRC	CVRC	ELARC	FDLRC	FNRC	GGRC	HRC	IRC	KRC	NBRC	NLARC	RCEB	ROCC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC
Usually	34%	34%	30%	35%	33%	25%	36%	31%	35%	24%	33%	34%	36%	37%	27%	36%	32%	39%	32%	36%	32%	39%
Sometimes*	14%	12%	13%	15%	17%	10%	19%	17%	10%	15%	19%	10%	17%	18%	15%	14%	12%	11%	19%	11%	5%	13%
Seldom/Never*	7%	7%	5%	6%	10%	16%	10%	7%	7%	7%	11%	5%	8%	9%	8%	11%	10%	5%	7%	4%	7%	7%
CAN YOUR FAMILY CHOOSE OR CHANGE YOUR CHILD'S SUPPORT WORKERS																						
Always	44%	48%	53%	40%	37%	48%	33%	47%	48%	51%	44%	49%	36%	35%	51%	40%	47%	46%	41%	48%	53%	45%
Usually	33%	33%	28%	35%	37%	26%	35%	33%	35%	25%	31%	34%	33%	36%	20%	29%	32%	36%	34%	32%	29%	36%
Sometimes*	14%	11%	11%	17%	13%	9%	16%	15%	11%	17%	17%	11%	19%	19%	14%	17%	12%	11%	15%	13%	8%	14%
Seldom/Never*	9%	7%	7%	8%	13%	16%	16%	5%	6%	7%	8%	6%	13%	10%	15%	15%	9%	7%	10%	7%	10%	6%
DOES YOUR FAMILY DIRECTLY MANAGE SUPPORT WORKERS (FOR EXAMPLE, HIRING AND DECIDING SCHEDULE)																						
Always	44%	47%	45%	41%	32%	51%	43%	45%	46%	42%	49%	44%	42%	36%	42%	44%	51%	47%	39%	44%	45%	43%
Usually	28%	25%	29%	31%	28%	21%	32%	24%	29%	24%	23%	32%	30%	28%	19%	27%	24%	30%	27%	31%	30%	29%
Sometimes	14%	14%	15%	14%	19%	14%	10%	14%	14%	15%	16%	13%	14%	16%	17%	12%	10%	13%	15%	11%	10%	12%
Seldom/Never	14%	14%	11%	14%	21%	15%	15%	17%	11%	20%	11%	11%	14%	20%	22%	16%	14%	11%	18%	14%	14%	17%
DO SERVICES PROVIDERS FOR YOUR CHILD WORK TOGETHER TO PROVIDE SUPPORT																						
Yes	69%	69%	70%	70%	58%	75%	68%	65%	72%	70%	75%	71%	71%	72%	69%	71%	53%	71%	61%	71%	77%	69%
DID YOU, YOUR CHILD, OR SOMEONE ELSE IN YOUR FAMILY CHOOSE YOUR CHILD'S CASE MANAGER/SERVICE COORDINATOR																						
No, didn't choose but can change if wanted	70%	74%	68%	74%	73%	73%	70%	70%	73%	63%	61%	71%	65%	72%	77%	64%	65%	66%	73%	71%	73%	76%
Yes, chose case manager/service coordinator	13%	14%	17%	15%	11%	10%	8%	15%	14%	12%	15%	16%	11%	12%	5%	12%	21%	15%	12%	13%	11%	13%
No, didn't choose and cannot change if wanted*	17%	12%	15%	11%	16%	17%	22%	15%	14%	25%	24%	14%	24%	16%	18%	24%	15%	19%	15%	16%	16%	12%
Individual Question Responses Above 5%																						
1 out of 16																						
Individual Question Responses Below 5%																						
0 out of 16																						
Community Participation																						
DOES YOUR CHILD PARTICIPATE IN ACTIVITIES IN THE COMMUNITY																						
Yes	78%	78%	66%	77%	77%	78%	78%	81%	77%	76%	78%	81%	77%	80%	87%	78%	70%	81%	74%	84%	75%	81%
WHAT MAKES IT HARD FOR YOUR CHILD TO TAKE PART IN COMMUNITY ACTIVITIES																						
Lack of transportation*	10%	8%	11%	12%	16%	4%	11%	11%	7%	13%	9%	8%	11%	8%	7%	10%	16%	9%	14%	7%	10%	11%
Cost*	25%	23%	22%	24%	29%	22%	26%	24%	27%	23%	23%	28%	26%	23%	22%	22%	25%	26%	22%	24%	29%	29%
Lack of support staff*	21%	19%	21%	23%	21%	16%	36%	21%	18%	18%	25%	19%	28%	23%	23%	25%	20%	23%	21%	18%	11%	19%
Stigma*	29%	31%	27%	27%	31%	21%	35%	33%	28%	27%	29%	28%	29%	30%	32%	31%	27%	28%	30%	26%	28%	26%
Other*	31%	35%	29%	25%	28%	49%	29%	31%	31%	28%	36%	28%	31%	37%	36%	32%	23%	32%	26%	37%	30%	30%
CHILD SPENDS TIME WITH NON-DD CHILDREN (THIS CAN INCLUDE SIBLINGS)																						
Yes	87%	89%	88%	86%	82%	94%	81%	85%	85%	90%	88%	89%	87%	84%	93%	87%	85%	90%	83%	90%	86%	87%
HOW OFTEN DOES YOUR CHILD SPEND TIME WITH CHILDREN WHO ARE NOT SIBLINGS AND DO NOT HAVE A DEVELOPMENTAL DISABILITY																						
Often	45%	50%	46%	45%	46%	57%	43%	44%	45%	52%	48%	48%	42%	37%	57%	39%	41%	48%	41%	45%	48%	51%
Sometimes	35%	33%	37%	35%	36%	28%	33%	36%	35%	34%	34%	33%	36%	38%	27%	33%	42%	33%	35%	36%	37%	34%
Seldom*	17%	15%	16%	17%	15%	13%	20%	18%	17%	11%	17%	17%	19%	21%	13%	24%	14%	16%	18%	16%	12%	14%
Never*	3%	2%	2%	3%	4%	1%	4%	3%	3%	3%	2%	2%	3%	4%	3%	4%	3%	3%	5%	3%	4%	1%
IN YOUR COMMUNITY, ARE THERE RESOURCES THAT YOUR FAMILY CAN USE THAT ARE NOT PROVIDED BY THE REGIONAL CENTER																						
Yes	80%	84%	75%	81%	81%	81%	78%	86%	82%	79%	80%	81%	79%	79%	80%	74%	76%	82%	75%	85%	78%	77%
DOES YOUR FAMILY TAKE PART IN ANY FAMILY-TO-FAMILY NETWORKS IN YOUR COMMUNITY (FOR EXAMPLE, PARENT TO PARENT, SIBLING NETWORKS, ETC.)																						
Yes	23%	22%	18%	25%	22%	17%	32%	26%	18%	19%	28%	23%	28%	25%	26%	32%	20%	23%	19%	19%	21%	26%
Individual Question Responses Above 5%																						
1 out of 13																						
Individual Question Responses Below 5%																						
0 out of 13																						
Satisfaction																						
OVERALL, ARE YOU SATISFIED WITH THE SERVICES AND SUPPORTS YOUR FAMILY CURRENTLY RECEIVES																						
Always	32%	32%	37%	36%	33%	34%	17%	33%	36%	28%	32%	34%	25%	28%	32%	29%	31%	32%	28%	37%	42%	33%
Usually	41%	46%	39%	40%	40%	38%	52%	36%	40%	40%	40%	39%	39%	50%	40%	42%	28%	43%	41%	45%	38%	42%

Child Family Survey (CFS) FY 18/19 NATIONAL CORE INDICATORS	CA Average	ACRC	CVRC	ELARC	FDLRC	FNRC	GGRC	HRC	IRC	KRC	NBRC	NLACRC	RCEB	ROCC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC
Sometimes*	21%	18%	20%	19%	22%	18%	26%	25%	20%	24%	24%	20%	26%	18%	19%	23%	28%	20%	24%	15%	16%	20%
Seldom/Never*	6%	5%	4%	5%	6%	10%	5%	6%	5%	8%	4%	7%	10%	4%	9%	6%	13%	5%	7%	4%	4%	5%
DO YOU KNOW HOW TO FILE A COMPLAINT OR GRIEVANCE ABOUT PROVIDER AGENCIES OR STAFF																						
Yes	43%	52%	46%	54%	38%	50%	34%	47%	45%	44%	38%	43%	33%	45%	59%	35%	33%	37%	48%	43%	60%	44%
IF A COMPLAINT OR GRIEVANCE WAS FILED OR RESOLVED IN THE PAST YEAR, ARE YOU SATISFIED WITH THE WAY IT WAS HANDLED AND RESOLVED																						
Yes	56%	70%	49%	59%	54%	68%	33%	60%	58%	66%	47%	53%	50%	59%	38%	44%	51%	65%	51%	53%	78%	67%
DO YOU KNOW HOW TO REPORT ABUSE OR NEGLECT																						
Yes	65%	74%	69%	73%	63%	76%	55%	63%	71%	72%	64%	63%	54%	62%	77%	59%	59%	62%	64%	68%	73%	64%
WITHIN THE PAST YEAR, WAS A REPORT OF ABUSE OR NEGLECT FILED ON BEHALF OF YOUR CHILD																						
Yes	3%	2%	3%	3%	3%	3%	2%	2%	2%	4%	2%	3%	2%	2%	6%	3%	4%	2%	3%	2%	2%	5%
DO YOU FEEL THAT REGIONAL CENTER SERVICES HAVE MADE A POSITIVE DIFFERENCE IN THE LIFE OF YOUR FAMILY																						
Yes	90%	89%	90%	92%	90%	87%	90%	87%	94%	79%	89%	89%	89%	92%	92%	90%	77%	93%	92%	95%	89%	97%
DO YOU FEEL THAT FAMILY SUPPORTS HAVE MADE A POSITIVE DIFFERENCE IN THE LIFE OF YOUR FAMILY																						
Yes	91%	93%	92%	92%	93%	90%	91%	86%	93%	86%	91%	91%	90%	95%	88%	91%	80%	93%	90%	96%	91%	94%
HAVE SERVICES AND SUPPORTS REDUCED YOUR FAMILY'S OUT-OF-POCKET EXPENSES FOR YOUR CHILD'S CARE?																						
Yes	72%	77%	67%	72%	72%	71%	80%	62%	72%	66%	74%	71%	71%	77%	72%	78%	51%	73%	74%	82%	72%	73%
DO YOU FEEL THAT REGIONAL CENTER SERVICES HAVE IMPROVED YOUR ABILITY TO CARE FOR YOUR CHILD																						
Yes	86%	89%	85%	87%	90%	82%	89%	81%	89%	80%	83%	87%	79%	89%	81%	87%	71%	89%	87%	92%	89%	92%
DO YOU FEEL THAT FAMILY SUPPORTS HAVE IMPROVED YOUR ABILITY TO CARE FOR YOUR CHILD																						
Yes	87%	88%	86%	90%	89%	80%	87%	82%	89%	81%	86%	87%	83%	90%	82%	87%	77%	89%	87%	92%	88%	90%
HAVE THE SERVICES OR SUPPORTS THAT YOUR CHILD/FAMILY RECEIVED DURING THE PAST YEAR BEEN REDUCED, SUSPENDED, OR TERMINATED																						
Yes*	18%	15%	17%	27%	19%	21%	12%	16%	16%	20%	21%	22%	20%	21%	21%	17%	17%	17%	20%	18%	13%	16%
IF SERVICES OR SUPPORTS HAVE BEEN REDUCED, SUSPENDED OR TERMINATED IN THE PAST YEAR, DID THE REDUCTION, SUSPENSION, OR TERMINATION OF THESE SERVICES OR SUPPORTS AFFECT YOUR FAMILY NEGATIVELY																						
Yes*	66%	67%	55%	68%	64%	53%	83%	69%	67%	69%	61%	56%	64%	72%	77%	80%	78%	66%	63%	62%	63%	63%
HAVE THE SERVICES OR SUPPORTS THAT YOUR CHILD RECEIVED BEEN INCREASED IN THE PAST YEAR																						
Yes	25%	26%	22%	25%	27%	22%	28%	26%	33%	27%	26%	22%	21%	19%	25%	19%	30%	27%	21%	26%	25%	23%
ARE SERVICES AND SUPPORTS HELPING YOUR CHILD TO LIVE A GOOD LIFE																						
Yes	91%	90%	92%	92%	91%	87%	93%	86%	93%	89%	91%	92%	88%	93%	88%	90%	80%	92%	92%	94%	92%	94%
HAVE REGIONAL CENTER SERVICES MADE A DIFFERENCE IN HELPING KEEP YOUR CHILD AT HOME																						
Yes	82%	79%	81%	87%	85%	73%	82%	78%	87%	75%	81%	85%	75%	85%	74%	82%	68%	84%	78%	82%	82%	85%
Individual Question Responses Above 5%		5 out of 18	2 out of 18	3 out of 18	0 out of 18	4 out of 18	3 out of 18	0 out of 18	3 out of 18	2 out of 18	1 out of 18	1 out of 18	0 out of 18	2 out of 18	2 out of 18	1 out of 18	1 out of 18	1 out of 18	1 out of 18	7 out of 18	6 out of 18	3 out of 18
Individual Question Responses Below 5%		0 out of 18	2 out of 18	1 out of 18	1 out of 18	2 out of 18	6 out of 18	6 out of 18	0 out of 18	6 out of 18	2 out of 18	0 out of 18	7 out of 18	2 out of 18	5 out of 18	5 out of 18	14 out of 18	1 out of 18	1 out of 18	0 out of 18	0 out of 18	0 out of 18