

2022 SG/PRC PERFORMANCE CONTRACT PLAN - DRAFT

#	Public Policy Measures	Planned Activities
1	<p>Individuals supported by SG/PRC who are now residents of a State Developmental Center (SDC) will live in the community.</p> <p>Note: Statements designated *() below quote the public policy measure as stated by DDS.</p> <p>*(Number and percent of regional center caseload in Developmental Center.)</p> <p>Also Note: The statewide numbers represent the percentage of the total number of individuals served by the regional center system who reside in SDC institutions. The lower the number, the better the outcome.</p>	<p>a. Implement the Community Placement Plan (CPP) or Community Resource Development Plan (CRDP) to develop resources to support individuals in the community.</p> <p>b. Provide training to service providers to enhance their skills in serving individuals with challenging behaviors.</p>
2	<p>Children served by SG/PRC live with their families.</p> <p>*(Number and percent of minors residing with families).</p> <p>Note: The numbers represent the percentage of the total number of children served by the regional center system who live with their families. The higher the number, the better the outcome.</p>	<p>a. Provide training to parents on topics such as behavior intervention and adaptive skills that increase families' capabilities to maintain their children in the home. This includes on-line training.</p> <p>b. Continue SG/PRC Bio-Behavioral Clinic and Psychiatric Consultations as well as Crisis Services and Supports through CBEM.</p> <p>c. Inform families of family support or peer support groups/activities.</p> <p>d. Encourage parents to take advantage of respite services to take a break from the continuous care they provide for their child/adult family members at home.</p> <p>d. Advocate for use of generic resources, such as In-Home Support Services (IHSS), we will provide training on mental health services and IHSS to families.</p> <p>e. Offer telehealth services as an option of service modality.</p> <p>f. Refer to Parent's Place Family Resource Center for generic resources and supports.</p>

Draft 2022 Performance Contract Plan - SG/PRC

		<p>g. SG/PRC has LMS modules for parents to learn about ABA trainings.</p>
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		<p>h. SG/PRC also promotes to families trainings that take place at Parents Places.</p>
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Draft 2022 Performance Contract Plan - SG/PRC

<p>3</p>	<p>Adults live independently with or without paid supports.</p> <p>*(Number and percent of adults residing in independent living.)</p> <p>The higher the number and percentage, the better the outcome.</p> <p>+Note: Public Policy Measures 3, 4, 5 and 6 were combined and reported collectively in Measure #7 (see below).</p>	<p>a. Service Coordinators will offer adults and their families an opportunity to discuss various living options, such as independent living, supported living, and adult family homes and will provide written information about these living options, upon request.</p> <p>b. Provide training to Service Coordinators on adult living options.</p> <p>c. Provide family members with information about adult living options through outreach as well.</p> <p>d. Resource developers to encourage new providers of living options that are culturally sensitive and address the diverse needs of community members.</p> <p>e. Encourage all existing and new providers to comply with CMS regulations for Home and Community-Based Services (HCBS).</p> <p>f. SG/PRC Housing Specialist to assist with finding affordable housing options.</p>
<p>4</p>	<p>Adults live in their own home (apartment, etc.) with paid supported living services.</p> <p>*(Number and percent of adults residing in supported living.)</p> <p>The higher the number, the better the outcome.</p> <p>+Note: Public Policy Measures 3, 4, 5 and 6 were combined and reported collectively in Measure #7 (see below).</p>	<p>Same as above. In addition, SG/PRC Housing Specialist will assist adults with finding affordable housing options. New staff are required to complete the LMS module on SLS to meet the training requirement in statute.</p>
<p>5</p>	<p>Adults live in certified family homes along with no more than one other person with developmental disabilities.</p> <p>*(Number and percent of adults residing in Adult Family Home Agency homes.)</p> <p>+Note: Public Policy Measures 3, 4, 5, and 6 were combined and reported collectively in Measure #7 (see below).</p>	<p>SG/PRC has developed a new Adult Family Home Agency to increase number and diversity of certified adult family home options. SG/PRC now have a new AFHA – LEAP. SG/PRC will make appropriate referrals to the new AFHA- LEAP through Living Options Committee.</p>

Draft 2022 Performance Contract Plan - SG/PRC

6	<p>Adults live with their families.</p> <p>*(Number and percent of adults residing in family homes (home of parent or guardian.)</p> <p>+Note: Public Policy Measures 3, 4, 5 and 6 were combined and reported collectively in Measure #7 (see below).</p>	<p>a. As part of the IPP process, SCs will assess the supports needed by families to maintain the adult served by SG/PRC within the family home and will discuss additional service and support options, such as additional respite and independent living skills training.</p> <p>b. Provide training to parents on topics such as behavior intervention and adaptive skills that increases families' capabilities to maintain their adult family member in the home. This includes on-line training and IHSS training.</p> <p>c. Continue SG/PRC Bio-Behavioral Clinic and Psychiatric Consultations as well as Crisis Services and Supports.</p> <p>d. Inform families of family support or peer support groups/activities.</p> <p>e. Advocate for use of generic resources, such as In-Home Support Services (IHSS), mental health services.</p>
7	<p>Adults live in home settings, including with their own family, or with supports from other people.</p> <p>*(Number and percent of adults residing in home settings.)</p> <p>The higher the number, the better the outcome.</p>	<p>See activities for Measures 3 through 6 above.</p>
8	<p>Children served by SG/PRC who require licensed residential care live in small, home-like settings.</p> <p>*(Number and percent of minors living in facilities serving > 6.)</p> <p>Note: the numbers represent the percent of total minors served by SG/PRC, including those placed by LA County Department of Children and Family Services (DCFS) living in large facilities. The lower the numbers, the better the outcome.</p>	<p>a. Continue to work with large facilities to reduce their licensed capacity.</p> <p>b. Provide assistance to the Los Angeles Department of Children Services (DCFS) in locating appropriate, smaller facilities for mutually served minor clients.</p> <p>c. At least annually, Service Coordinators to discuss with families and/or DCFS the option for children to live in facilities with a capacity of six (6) or fewer residents.</p> <p>d. Assure that all residential services for children complies with CMS regulations for HCBS.</p>

Draft 2022 Performance Contract Plan - SG/PRC

<p>9</p>	<p>Adults served by SG/PRC who reside in licensed facilities live with five or fewer other adult residents.</p> <p>*(Number and percent of adults living in facilities serving > 6.)</p> <p>Note: Facilities include both community care and health care – ARFs, ICF/DDs, ICF/DD-Hs, ICF/DD-Ns, and SNFs. Residential Care Facilities for the Elderly (RCFEs) are excluded.</p> <p>Also Note: The numbers represent the percent of total adults served in the regional center system living in large residential facilities. The lower the number, the better the outcome.</p>	<p>a. Continue to work with large facilities to reduce their licensed capacity.</p> <p>b. At least annually, Service Coordinators to discuss with individuals and their families the option to live in facilities with a capacity of six (6) or fewer residents.</p> <p>c. If appropriate and the adult has an interest, discuss other living options, such as Adult Family Home certified homes and supported living arrangements.</p>
<p>10</p>	<p>EMPLOYMENT MEASURES</p> <p>The number and percentage of individuals aged 16 -64 with earned income will increase over the previous calendar year.</p> <p>*(Number and percentage of individuals, ages 16-64 with earned income.)</p>	<p>a. SG/PRC will calculate the number of individuals served ages 16 through 17 years of age.</p> <p>b. SG/PRC will calculate the number of individuals served ages 18 through 22 years of age and determine the number of individuals still eligible for public education separately from those who are no longer eligible for public education.</p> <p>c. SG/PRC will calculate the number of individuals served from 23 years through 64 years of age.</p> <p>d. Using these age groups, SG/PRC will review the number and percent of individuals who are eligible to work in terms of their earned income during the calendar year.</p> <p>e. SG/PRC will participate in monthly (during school year) Transition Task Force meetings with school personnel, when in-person meetings are allowed or virtually when school personnel are available, to advance employment experience options for individuals still eligible for public education.</p>

Draft 2022 Performance Contract Plan - SG/PRC

11	<p>The average annual wages for individuals aged 16-64 will increase over the previous calendar year.</p> <p>*(Annual annual wages for individuals ages 16-64.)</p>	<ul style="list-style-type: none"> a. Service Coordinators to monitor and report competitively employed client's wages in Sandis. b. Service Coordinators will encourage clients to obtain competitive integrated employment in the community with employers that that prevailing wage or higher. c. Monitor and encourage Supported employment vendors to pay at minimum wage or better and to increase client wages at state or local level. d. Monitor Supported employment wages through vendor wage report documentations (DS1964 & DS1972). e. SGPRC will collect wage reports as part of employment data collection.
12	<p>*(Annual earnings of individuals ages 16-64 compared to all people with disabilities in California.)</p>	<ul style="list-style-type: none"> a. SG/PRC will calculate the number of individuals served ages 16 through 17 years of age. b. SG/PRC will calculate the number of individuals served ages 18 through 22 years of age. c. SG/PRC will calculate the number of individuals served from 23 years through 64 years of age. d. Using these age groups, SG/PRC will review the average annual earnings for the calendar year in comparison to all people with disabilities in CA.

Draft 2022 Performance Contract Plan - SG/PRC

13	*(Number of adults who were placed in competitive, integrated employment following participation in a Paid Internship Program.)	<p>a. SG/PRC will sponsor and/or participate in a Job Fair or Employment Fair to promote employment opportunities for those who participated in PIP and for potential employers.</p> <p>b. Employment options will be routinely discussed at IPP meetings.</p> <p>c. The importance of Paid Internship Program (PIP) potentially leading to employment will be discussed at the Vendor Advisory Committee (VAC) and in the employment subcommittee of the VAC.</p> <p>d. Employment following PIP participation will be discussed during quarterly Work Services meetings that includes DOR and employment vendors.</p> <p>e. SG/PRC Resource Development staff will change the PIP writing guidelines to clarify the intent of the vendor's PIP.</p> <p>f. SG/PRC Employment Specialist will work with Resource Development staff to have PIP vendors specify the intended outcome in the program/service design.</p> <p>g. SG/PRC will provide training to service coordination staff to help staff better understand PIP and Competitive Integrated Employment.</p>
14	*(Percent of adults who entered in competitive integrated employment following participation in a Paid Internship Program.)	a. See activities above for Employment Measure 13.
15	*(Average hourly or salaried wages and hours worked per week for adults who participated in a Paid Internship Program during the prior fiscal year.)	a. See activities above for Employment Measure 13.
16	*(Average wages and hours worked for adults engaged in competitive integrated employment on behalf of whom incentive payments have been made.)	<p>a. SG/PRC will utilize the same activity plans for competitive, integrated employment (CIE) as for PIP, indicated above.</p> <p>b. As appropriate, SCs will list CIE as an IPP goal.</p> <p>c. If CIE is identified in IPP goals, the SCs will define the number of hours of CIE as part IPP objectives/outcomes and plans.</p> <p>d. SG/PRC will inform service coordination staff of PIP, CIE and incentive programs through a group training.</p>

Draft 2022 Performance Contract Plan - SG/PRC

17	<p>*(Total number of \$2000, \$2500 and \$3000 incentive payments made for the fiscal year.)</p>	<p>a. SG/PRC will discuss the benefits of incentives and how to quality for incentives during Vendor Advisory Committee (VAC) meetings, VAC employment subcommittee meetings, as part of Technical Assistance Trainings for vendors, and during Work Services meetings. b. Information about the CIE incentives will be posted to the SG/PRC website. c. Inform service coordination staff of PIP, CIE and incentive programs.</p>
18	<p>*(Percentage of adults who reported having competitive integrated employment as a goal in their IPP.)</p>	<p>a. SG/PRC will develop Individual Program Plans (IPPs) based on the Person-Centered Thinking and Person-Centered Planning approach. b. Service Coordinators (SCs) will discuss integrated employment with adults as a part of the "important to/important for" conversation. c. For those adults who report an interest in integrated employment, SCs will incorporate integrated employment as an IPP goal.</p>
19	<p>MEASURES RELATED TO REDUCING DISPARITIES AND IMPROVING EQUITY IN POS EXPENDITURES For each age group, the variance in the authorizations and expenditures of Purchase of Services (POS) among ethnic/racial groups -- for individuals living at home with their families -- will be reduced/minimized over previous years. *(Indicator showing the relationship between annual authorized services and expenditures by individual's residence type and ethnicity.)</p>	<p>a. Recruit and maintain a culturally diverse staff whose ethnicity, language and cultural background reflect that of the collective individuals served by SG/PRC. b. Provide information and training for staff and service providers to promote culturally-competent and person-centered service delivery. c. Seek input from our community regarding barriers to access and utilization of services, and ways to overcome these barriers, especially for Hispanic school-aged children and Hispanic adults residing with their families. d. Review annual POS authorization and expenditure data and monitor progress. e. Service Coordinators annually review utilization of authorized POS for the individuals assigned to them. f. Continue seeking DDS funding for successful equity projects and continue implementing the Equity Projects funded by the DDS Disparity Funds Program, to better inform and prepare families to access and utilize regional center services.</p>

Draft 2022 Performance Contract Plan - SG/PRC

20	<p>For each age group, the number and percent of individuals receiving NO POS, when comparing ethnic/racial groups for those living at home with their families, will decrease over previous years.</p> <p>*(Number and percent of individuals receiving only case management services by age and ethnicity:</p> <p>Birth to age two, inclusive. Age three to 21, inclusive. Twenty-two and older.)</p>	<p>Plans same as above in Measure #19.</p> <p>Also run periodic reports of NO POS to track progress and identify trends.</p> <p>For children in Early Intervention who show no POS, clearly identify those children that are being serviced under their medical insurance plan.</p>
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COMPLIANCE MEASURES

#	Compliance Measures	Planned Activities
1	Unqualified independent audit with no material finding(s).	
2	Substantial compliance with the Department fiscal audit.	
3	Operates within OPS budget.	
4	Certified to participated in Home and Community--Based Services Waiver.	
5	Compliance with Vendor Audit Requirements per contract, Article III, Section 10.	
6	CDER/ESR Currency	
7	Intake/assessment and IFSP timelines (ages 0-2).	
8	Intake/assessment timelines for individuals ages 3 or older.	
9	IPP Development (W&I Code requirements)	
10	IFSP Development (Title 17 requirements)	

