

# **SAN GABRIEL/POMONA** **REGIONAL CENTER**

## **NOTICE OF MEETING**

Notice is hereby given that the Board of Directors of the San Gabriel/Pomona Valleys Developmental Services, Inc. will hold their monthly Board meeting on the following date and at the listed location:

**DATE: Wednesday, September 23, 2020**

**TIME: 7:15 p.m.**

**PLACE: THE MEETING SESSION IS OPEN TO THE PUBLIC VIA VIDEOCONFERENCE.**

All SG/PRC Board and related Committee meetings will not be cancelled, however they will be temporarily adapted to video-conference to maintain distancing during the COVID-19 outbreak. All scheduling for such video-conferenced meetings will remain at their regularly scheduled times.

**Join Zoom Meeting:  
Meeting ID: 234 566 141  
Password: 916227**

The upcoming meeting will be convened via videoconference. Please check our website, [sgprc.org](http://sgprc.org) to access the videoconference link.

75 Rancho Camino Drive, Pomona, CA 91766  
(909) 620-7722

Program of San Gabriel/Pomona Valleys Developmental Services, Inc.

**SAN GABRIEL POMONA**  
**REGIONAL CENTER**  
**75 Rancho Camino Drive**  
**Pomona, CA 91766**

**MEETING AGENDA**  
**BOARD OF DIRECTORS MEETING**  
 (Meets 4<sup>th</sup> Wednesday of each Month)

**Wednesday, September 23, 2020 at 7:15 p.m.**  
**Videoconference Meeting**

**BOARD OF DIRECTORS**

**Gisele Ragusa, Board President**

**Julie Chetney, 2<sup>nd</sup> Vice President**

**Shannon Hines, Secretary**

**Mary Soldato, Treasurer**

**David Bernstein, VAC Chairperson**

**Georgina Molina**

**Preeti Subramaniam**

**Daniel Rodriguez**

**John Randall**

**Natalie Webber**

**Penne Fode**

**Sherry Meng**

**Julie Lopez**

		ACTION	MATERIAL	COLOR
7:15 - 7:25	<b>CALL TO ORDER</b> (Gisele Ragusa, President)	None	None	None
	• Roll Call	Quorum	None	None
	• Review Agenda	Info	Attached	White
	• Minutes of August 26, 2020 Meeting	Consent	Attached	White
7:25 – 7:30	GENERAL PUBLIC INPUT	Info	None	None
7:30 – 7:50	SPECIAL DISCUSSION (Lucina Galarza, Director of Community Services) "Adult Services and Transitions"	Info	None	None
7:50 – 7:55	EXECUTIVE/FINANCE COMMITTEE (Gisele Ragusa, Anthony Hill & Roy Doronila) - Financial Report - Contracts	Action	Attached	Ivory
7:55 – 8:00	COMMUNITY RELATIONS/LEGISLATIVE COMMITTEE (Daniel Rodriguez)	Info	Attached	Orange
8:00 – 8:05	CLIENT SERVICES/ADVISORY COMMITTEE (Mary Soldato)	Info	Attached	Yellow
8:05 – 8:10	VENDOR ADVISORY COMMITTEE (David Bernstein)	Info	Attached	Goldenrod

APPROXIMATE SCHEDULE	ITEM	ACTION	MATERIAL	COLOR
8:10 – 8:15	STRATEGIC DEVELOPMENT COMMITTEE (Julie Chetney) Mentorship Opportunities	Info	Attached	Green
8:15– 8:20	BOARD OVERVIEW (Gisele Ragusa) -Board Bylaws -Board Training Plan	Info	None	None
8:25– 8:30	EXECUTIVE DIRECTOR'S REPORT (Anthony Hill, Executive Director) - Covid-19 (Global Survey) - Re-engagement – Non Residential Services	Info	None	None
8:30 – 8:35	OTHER BOARD & COMMUNITY ANNOUNCEMENTS	Info	None	None
<b><u>ADJOURNMENT OF THE BOARD OF DIRECTORS MEETING</u></b>				
8:35	<b>EXECUTIVE SESSION</b> - None	Info	None	None

**SAN GABRIEL/POMONA REGIONAL CENTER  
DEVELOPMENTAL SERVICES, INC.  
BOARD OF DIRECTORS  
DRAFT Minutes of the Meeting of the Board of Directors  
(A California Corporation)**

**August 26, 2020**

**ATTENDANCE**

The following members of the Board of Director's were present at said meeting:

**PRESENT:**

Gisele Ragusa  
Joseph Huang  
Sheila James  
Julie Chetney  
Anabel Franco  
David Bernstein  
Preeti Subramaniam  
Shannon Hines  
Natalie Webber  
Georgina Molina  
Sharry Lin  
Penne Fode  
Julie Lopez  
Mary Soldato  
Daniel Rodriguez

**GUESTS:**

Joseph Huang  
Jacqueline Gaytan  
Bruce Cruickshank

**STAFF:**

Anthony Hill, Executive Director  
Lucina Galarza, Director of Community Services  
Aaron Christian, Director of Client Services  
Carol Tomblin, Director of Compliance  
Joe Alvarez, Associate Director of Clinical Services  
Daniela Santana, Manager, Fair Hearing and Behavioral Services  
Pete Tiedermann, CFO Consultant  
Jose De Leon, Manager of Facilities  
Amos Byun, Community Outreach Specialist  
Lisa Brady, Interim Exec. Assistant in Management  
Yvonne Gratianne, Communications & Public Relations  
Erika Gomez, Exec. Assistant BOD

**ABSENT:**

John Randall

**A. CALL TO ORDER:**

Gisele Ragusa, Board President, called the meeting to order at 7:20 p.m. Roll call was taken, and a quorum was established.

- The Board members requested that moving forward, the Covid 19 updates not be repetitive.
- The minutes for the June 24, 2020 meeting were reviewed and approved by the Board.

**M/S/C (James & Subramaniam) The Board approved the minutes.**

**Abstain: Molina**

- The minutes for the July 22, 2020 meeting were reviewed and approved by the Board.  
**M/S/C (James & Lopez) The Board approved the minutes.  
Abstain: Soldato and Rodriguez**

**B. PUBLIC INPUT:**

None

**C. SPECIAL PRESENTATION: "UNDERSTANDING SG/PRC'S PERFORMANCE CONTRACT WITH DDS"**

Dr. Carol Tomblin, Director of Compliance touched on the following:

- Performance Contract Process
- Performance Contract Timelines
- Public Policy Measures
- Disparity/Equity Measures
- Compliance Measures
- Local Measures
- Local Measures – Employment
- Local Measures for Employment - Baseline
- Performance Contract Local Measure Activities

Dr. Tomblin will present again in October to talk about National Core Indicators.

**D. EXECUTIVE/FINANCE COMMITTEE**

Pete Tiedemann, Interim Chief Financial Officer Consultant, reported on the following:

**Financial Report**

**Operations**

- Based on the A-6 contract amendment, the allocation in Operations is \$34,986,084 including all restricted funds
- For the month of June, expenditures were \$2,857,378 and \$29,742,846 has been spent year to date, with expenditures remaining of \$2,146,877

*Restricted Funds:*

1. **The Family Resource Center allocation is projected to meet expenditure projections, resulting in a zero balance remaining in allocation. The current allocation is \$154,564 with projected expenditures of \$154,564.**
2. **The Foster Grandparent/Senior Companion, includes both programs: North (Lanterman) and South (Fairview), have a current allocation in the amount of \$1,140,094 with projected expenditures for the year in the amount of \$1,127,645 which leaves an allocation balance of \$12,449.**
3. **The Community Placement Plan (CPP) operations allocation is currently at \$1,801,704. Expenditures for the year are projected to be \$1,927,118 resulting in an allocation deficit of (\$125,414) which will be covered with regular OPS if no more funds allocated for CPP.**

**Purchase of Services - Based on the A-6 contract amendment, the total for Purchase of Services allocation is in the amount of \$250,605,281 which includes CPP, Community Placement Plan and HCBS, Home and Community- Based Services**

**For the month of June, the regular Purchase of Services expenditures were \$21,902,274 with year-to-date expenditures for services in the amount of \$236,548,361. Projected expenditures and late bills remaining are in the amount of \$10,206,250 it leaves us with a surplus of \$1,143,811 POS expenses related to COVID19 are included in the "Other Items" section (page two). Staff are keeping track of these unforeseen expenditures on which are now encumbered thru June.**

**Community Placement Plan - (CPP) POS allocation is \$1,639,000. Expenditures projected to be \$1,639,000 resulting in a zero balance.**

**Home Community Base Services (HCBS) POS Allocation is \$1,067,860. Expenditures projected to be \$1,067,860 resulting in a zero balance.**

#### **E. COMMUNITY RELATIONS/LEGISLATIVE COMMITTEE**

**Dr. Gisele Ragusa, on behalf of Daniel Rodriguez, shared that the committee discussed the Community Outreach Report, changes to the Board Bylaws and the measures that SG/PRC has taken regarding Covid-19 as well as legislative updates.**

**F. CLIENT SERVICES ADVISORY COMMITTEE**

Shannon Hines reported that the committee requested the following training topics:

- Mental Health – September 23, 2020
- Community Outreach – Parenting Black Children – October 28, 2020

**G. VENDOR ADVISORY COMMITTEE (VAC)**

David Bernstein shared that the Service Providers continue having weekly Covid-19 meetings via videoconference. The VAC has started to also have their regular VAC monthly meetings and the subcommittees are meeting regularly. The Day Program and Transportation Subcommittees will meet tomorrow. The Infant and Child category has been filled.

**H. STRATEGIC DEVELOPMENT COMMITTEE**

Julie Chetney, on behalf of the committee, recommended the following Board training topics:

- October 28, 2020 – National Core Indicators and Performance Contract
- February 24, 2020 – Understanding Roles of Vendor Categories
- April 28, 2020 – Communication Among Board Members
- July 28, 2020 – Engaging and Understanding Board Strategic Processes

**M/S/C (James & Soldato) The Board approved the recommended Board training topics.**

Board Mentorship Program - This project is still in development.

**I. BOARD OVERVIEW**

Dr. Gisele Ragusa shared the following information:

- Bylaws – Dr. Ragusa emailed the Board and committee members a copy of the amendment Board Bylaws for their review. This is “round one” of revisions, when feedback is provided the ad hoc committee will do a second reading and the Board will likely vote on them in September or October.
- ARCA Board Delegate –
  - Dr. Ragusa shared that the Board Delegates are meeting monthly and one item of discussion were the errors found in the contracts between regional centers and DDS.

- o There is a plan to create small virtual trainings for Board members

**J. EXECUTIVE DIRECTOR'S REPORT:**

Anthony Hill, Executive Director, discussed SG/PRC's continuous response to Covid-19. Mr. Hill and staff also shared on the following:

- There are fires going on that are affecting 8 regional centers. SG/PRC is assisting with placements.

*Regarding Covid 19:*

- Workforce is currently at 92% working remotely.
- Established a sophisticated temperature and mask test when entering the building for those working on-site and for the public.
- Intake and Early Start assessments have start up again.
- Directors continue to meet every morning to assess the latest COVID-19 information.
- SG/PRC continues to host weekly COVID-19 Vendor Advisory Committee Meetings (on Mondays) and weekly Community Meetings (on Tuesdays).
- Joe Alvarez provided individual stats on COVID-19; spoke about the spikes, presented information on the DDS report to the Committee.
- Lucina Galarza reported on hot spots.
- Aaron Christian discussed PPE distribution.
- Dr. Larry Yin did a presentation on the Impact of Covid-19 on Individuals with Developmental Disabilities on August 20, 2020 at 10am. 365 people participated.

**K. TENANT IMPROVEMENTS**

Jose De Leon, Manager of Facilities presented information about the tenant improvements that will happen at SG/PRC the following weeks in and how the following areas will be affected:

- Parking Lot
- Temporary Entrances
- Temporary Reception, Lobby and Waiting Room
- Temperature Check Station
- Waiting Rooms
- New Waiting Room and Reception Design



- **New Family Restroom**
- **Front Entrance Ramp**
- **Front Entrance Planters**
- **New Sinks and Garbage Disposals**
- **Hot Water Installation**
- **Recycling Project**
- **Security Cameras Upgrade**

**EXECUTIVE SESSION**

None

**Next meeting on Wednesday, September 23, 2020 at 7:15 p.m.**

**BOARD MINUTES FROM THE AUGUST 26, 2020 MEETING**

Submitted by:

\_\_\_\_\_  
Shannon Hines, Board Secretary

\_\_\_\_\_  
Date

**SAN GABRIEL/POMONA VALLEYS  
DEVELOPMENTAL SERVICES, INC.  
DRAFT Executive/Finance Committee Meeting Minutes**

**September 9, 2020**

**PRESENT**

Gisele Ragusa, President  
Sheila James, 1<sup>st</sup> VP  
Julie Chetney, 2<sup>nd</sup> VP  
Mary Soldato, Treasurer  
Shannon Hines, Secretary  
Natalie Webber, Director

**GUESTS:**

David Bernstein

**STAFF:**

Anthony Hill, Executive Director  
Lucina Galarza, Director of Community Services  
Roy Doronilla, Interim Chief Financial Officer  
Aaron Christian, Director of Client Services  
Joe Alvarez, Director of Clinical Services  
Lisa Brady, Interim Exec. Asst. (Mgmt.)  
Jose De Leon, Facilities Manager  
Erika Gomez, Executive Assistant - BOD

**ABSENT:**

Daniel Rodriguez, Director

**RECOMMENDED ACTIONS**

**THE EXECUTIVE/FINANCE COMMITTEE RECOMMENDATION:**

None

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**ACTIONS TAKEN BY THE EXECUTIVE/FINANCE COMMITTEE  
PURSUANT TO SECTION 20.04 OF THE BYLAWS**

All actions taken by the Executive/Finance Committee on behalf of the Board of Directors shall be reported at the next meeting of the Board. The actions taken by the Executive/ Finance Committee at this meeting were:

**Approval of Financial Report-** For services paid through August 17, 2020

**ITEMS DISCUSSED**

**A. CALL TO ORDER**

Gisele Ragusa, Board President, called the meeting to order at 7:17 pm. A Quorum was established.

The Committee reviewed and approved the minutes from the August 12, 2020 meeting with the following changes: remove "interim" from Rosa Ham's title as

she was Chief Financial Officer and correct David Bernstein's name as it was misspelled.

**(M/S/C Hines & Soldato) The committee approved the minutes.**

Mr. Hill, Executive Director, introduced the following individuals:

- Lisa Brady, interim Executive Assistant to the Executive Director
- Roy Doronilla, Chief Executive Director, effective September 14, 2020

**B. PUBLIC INPUT:**

None

**C. FINANCIAL REPORT**

Pete Tiedemann, Chief Financial Officer Consultant, reported on the following:

**Financial Report**

Operations

- Based on the A-6 contract amendment, the allocation is projected to meet expenditure projections, resulting in a slight deficit of \$107,690. The operations allocation for fiscal year 2019-20 is currently \$34,986,084 with projected expenditures of \$35,093,774
- For the month of June, the supplemental 2 claim, expenditures were \$951,980 and staff have spent \$33,765,700 year to date, with expenditures remaining of \$1,328,074
- *Restricted Funds:*
  1. The Family Resource Center allocation is projected to meet expenditure projections, resulting in a zero balance remaining in allocation. The current allocation is \$154,564 with projected expenditures of \$154,564.
  2. The Foster Grandparent/Senior Companion, includes both programs: North (Lanterman) and South (Fairview), have a current allocation in the amount of \$1,140,094 with projected expenditures for the year in the amount of \$1,127,965 which leaves an allocation balance of \$12,129.
  3. The Community Placement Plan (CPP) and DC ongoing Workload operations allocation is currently at \$1,801,704. Expenditures for the year are projected to be \$1,921,523 resulting in an allocation deficit of \$119,819 which staff expect to be funded in future allocations or to be funded from regular Operations if no additional CPP funds are allocated.

Purchase of Services - Based on the A-6 contract amendment, the total for Purchase of Services allocation is in the amount of \$250,605,281 which includes CPP, Community Placement Plan and HCBS, Home and Community- Based Services

For the month of June 2<sup>nd</sup> supplemental, net expenditures were \$4,032,262 with year-to-date expenditures for services totaling \$240,679,190. Projected expenditures and late bills remaining are in the amount of \$6,668,144 leaving a surplus of \$3,257,947.

POS expenses related to COVID19 are included in these projections, under the "other items section." Staff are keeping track of these unforeseen expenditures. Encumbrances are now through September 30, 2020 and will be projected in fiscal year 2020-21.

**(M/S/C Chetney & Soldato) The committee approved the Financial Report.**

**Abstain: Rodriguez**

**D. CONTRACTS FOR REVIEW**

Lucina Galarza, Director of Community Services, presented the following contracts:

- CHOICES
- Vocational Innovations Diamond Bar
- Inmotion Transit

**(M/S/C Soldato & Hines) The committee approved to recommend the contracts to the Board for their review.**

**E. BOARD OVERVIEW**

Board President Dr. Gisele Ragusa reported on the following:

- Bylaws – Dr. Ragusa emailed the Board and committee members a copy of the amendment Board Bylaws for their review. The process is now on "round two" of revisions. There is currently one item under review. The Board will likely vote on them in September or October.
- Agenda for the September 23, 2020 Board Meeting:
  - Bylaws
  - Adult Services and Transition Discussion
  - Mentorship Opportunities
  - Training Efforts Document to DDS
- Agenda items for the October 14, 2020 Executive Finance Committee meeting:
  - Financial Report

**F. COVID-19 UPDATE:**

Anthony Hill, Executive Director reported the following regarding Covid-19:

- The Bobcat Fire is impacting SG/PRC's catchment area. Staff did a survey and found out 500 individuals served, and six Residential Facilities are impacted and may have to evacuate. An Everbridge message was sent to those impacted and the Quality Assurance staff is in contact with the Residential Facilities.
- Workforce is currently at 95% working remotely.
- 300 staff will receive a new laptop to facilitate their work offsite.
- Intake and Early Start assessments are operating at full scope and by appointment only.
- Directors continue to meet every morning to assess the latest COVID-19 information.
- SG/PRC continues to host weekly COVID-19 Vendor Advisory Committee Meetings (on Mondays) and weekly Community Meetings (on Tuesdays).
- Joe Alvarez provided individual stats on COVID-19; spoke about the spikes, presented information on the DDS report to the Committee.
- Lucina Galarza reported on hot spots and updated on the Reengagement Plan for Providers.
- Aaron Christian discussed PPE distribution. He also spoke about new guidance from the California Department of Public Health Care Services that allows for schools to deliver in person services with small school cohorts.
- Dr. Larry Yin did a presentation on the Impact of Covid-19 on Individuals with Developmental Disabilities on August 20, 2020 at 10am. 365 people participated.

### **MEETING ADJOURNED**

The meeting adjourned. The next regular meeting will be held on October 14, 2020 at 7:15 p.m. via teleconference.

**EXECUTIVE SESSION** – There was a closed session regarding a personnel matter.

SAN GABRIEL/POMONA REGIONAL CENTER  
**PURCHASE OF SERVICES FUND FINANCIAL REPORT**

FISCAL YEAR 2019-20

PAYMENTS THROUGH AUGUST 17, 2020 FOR SERVICES PROVIDED THROUGH JUNE 30, 2020

100.0% OF YEAR ELAPSED

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CONTRACT ALLOCATIONS	Regular POS	CPP	HCBS	Total			
A Preliminary Allocation (Regular POS)	188,642,272			188,642,272			
A-1 Allocation - 8/30/2019	51,627,748			51,627,748			
A-2 Allocation - 10/10/2019		1,590,900		1,590,900			
A-3 Allocation - 1-3-2020	7,628,401			7,628,401			
A-4 Allocation (OPS only)							
A-5 Allocation (OPS only)							
A-6 Allocation - 6/05/2020		48,100	1,067,860	1,115,960			
<b>Total Contract Allocation</b>	<b>247,898,421</b>	<b>1,639,000</b>	<b>1,067,860</b>	<b>250,605,281</b>			
	C plus E						
	A	B	C	D	E	F	G
		Current Month Expenditures	Year-to-Date Expenditures	YTD Actual as percent of Allocation	Projected Remaining Expenditures	Total Projected Expenditures	YTD & Projected as percent of Allocation
<b>Total POS Actual &amp; Projected Expenditures</b>		<b>4,032,262</b>	<b>240,679,190</b>	<b>96.0%</b>	<b>6,668,144</b>	<b>247,347,334</b>	<b>98.70%</b>
<b>OUT OF HOME CARE</b>							
Community Care Facilities		169,013	87,374,623	35.2%	81,056	87,455,679	35.3%
ICF/SNF Facilities		0	441,997	0.2%	27,399	469,396	0.2%
<b>Total Out of Home Care</b>		<b>169,013</b>	<b>87,816,621</b>	<b>35.4%</b>	<b>108,455</b>	<b>87,925,076</b>	<b>35.5%</b>
<b>DAY PROGRAMS</b>							
Day Care		749,081	8,081,880	3.3%	534,338	8,616,217	3.5%
Day Training		467,120	51,667,458	20.8%	304,934	51,972,393	21.0%
Supported Employment		111,763	5,719,816	2.3%	329,372	6,049,188	2.4%
Work Activity Program		2,848	2,602,839	1.0%	110,140	2,712,979	1.1%
<b>Total Day Programs</b>		<b>1,330,812</b>	<b>68,071,993</b>	<b>27.5%</b>	<b>1,278,784</b>	<b>69,350,777</b>	<b>28.0%</b>
<b>OTHER SERVICES</b>							
Non-Medical: Professional		341,827	6,518,587	2.6%	305,540	6,824,127	2.8%
Non-Medical: Programs		254,628	15,083,207	6.1%	515,756	15,598,963	6.3%
Home Care: Programs		73,455	2,645,557	1.1%	156,691	2,802,248	1.1%
Transportation		11,368	6,802,186	2.7%	12,681	6,814,866	2.7%
Transportation Contracts		2,392	7,791,747	3.1%	22,855	7,814,602	3.2%
Prevention		283,741	12,302,681	5.0%	201,045	12,503,726	5.0%
Other Authorized Services		238,320	14,563,177	5.9%	125,348	14,688,525	5.9%
Personal and Incidentals		137	153,866	0.1%	228	154,094	0.1%
Hospital Care		0	574,470	0.2%	0	574,470	0.2%

SAN GABRIEL/POMONA REGIONAL CENTER  
**PURCHASE OF SERVICES FUND FINANCIAL REPORT**

FISCAL YEAR 2019-20

PAYMENTS THROUGH AUGUST 17, 2020 FOR SERVICES PROVIDED THROUGH JUNE 30, 2020

100.0% OF YEAR ELAPSED

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	C plus E					G YTD & Projected as percent of Allocation	
	A	B	C	D	E		F
		Current Month Expenditures	Year-to-Date Expenditures	YTD Actual as percent of Allocation	Projected Remaining Expenditures		Total Projected Expenditures
Medical Equipment		618	16,180	0.0%	966	17,146	0.0%
Medical Service: Professional		44,332	1,567,412	0.6%	264,372	1,831,784	0.7%
Medical Service: Programs		1,240	2,006,507	0.8%	34,070	2,040,577	0.8%
Respite: In Own Home		766,495	16,305,637	6.6%	17,322	16,322,959	6.6%
Respite: Out of Home		0	18,276	0.0%	94,101	112,377	0.0%
Camps		0	30,847	0.0%	20,646	51,493	0.0%
Total Other Services		2,018,553	86,380,335	34.8%	1,771,620	88,151,955	35.6%
Total Estimated Cost of Current Services		3,518,378	242,268,949	97.7%	3,158,859	245,427,808	99.0%
<u>OTHER ITEMS</u>							
Estimated Cost of COVID19 expenses		439,781	4,583,597	1.8%	987,393	5,570,990	2.2%
Total Other Items		439,781	4,583,597	1.8%	987,393	5,570,990	2.2%
Total Purchase of Services		3,958,159	246,852,545	99.6%	4,146,252	250,998,797	101.3%
Deduct: Estimated Receipts from Intermediate Care Facilities for State Plan Amendment Services		(12,297)	(6,358,323)	-2.6%	0	(6,358,323)	-2.6%
Expenditures Regular POS ( Net of HCBS & CPP)	247,898,421	3,945,862	240,494,222	97.0%	4,146,252	244,640,474	98.7%
Projected Allocation Balance (Deficit) Regular POS						3,257,947	1.3%
<u>COMMUNITY PLACEMENT PLAN and HOME COMMUNITY BASED SERVICES</u>							
Home Community Based Services	1,067,860	76,400	76,400	7.2%	991,460	1,067,860	100.0%
Community Placement Plan (inc. CRDP)	1,639,000	10,000	108,568	6.6%	1,530,432	1,639,000	100.0%
Allocation Balance (Deficit) CPP and HCBS						0	0.0%
Total Projected Allocation Balance (Deficit) Regular & Community Placement Plan POS						3,257,947	1.3%

SAN GABRIEL MONA REGIONAL CENTER  
**OPERATIONS FUND FINANCIAL REPORT**

FISCAL YEAR 2019-20

PAYMENTS THROUGH AUGUST 17, 2020 FOR SERVICES PROVIDED THROUGH JUNE 30, 2020

100.0% OF YEAR ELAPSED

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	Regular	CPP/CRDP	Family Resource Center	Foster Grandparents	Covid	Total			
<b>CONTRACT ALLOCATIONS</b>									
A Preliminary Allocation	25,140,187					25,140,187			
A-1 Allocation - 08/30/2019	4,128,921		154,564	1,140,094		5,423,579			
A-2 Allocation - 10/10/2019	1,552,044	1614376				3,166,420			
A-3 Allocation - 01/03/2020	247,402	172096				419,498			
A-4 Allocation - 02/02/2020	244,792					244,792			
A-5 Allocation - 03/16/2020	353,746	15,232				368,978			
A-6 Allocation - 06/05/2020					222,635	222,635			
<b>Total Operations Contract Allocation</b>	<b>31,667,087</b>	<b>1,801,704</b>	<b>154,564</b>	<b>1,140,094</b>	<b>222,635</b>	<b>34,986,084</b>			
	<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>	<b>E</b>	<b>F</b>	<b>D plus F</b>	<b>A minus G</b>	
							<b>G</b>	<b>H</b>	<b>I</b>
	Current Allocation	% of Allocation	Current Month Expenditures Supp#2	Year-to-Date Expenditures July - June	YTD Actual as % of Allocation	Projected Remaining Expenditures	Total Projected Expenditures	Projected Balance Remaining Amount	Percent
<b>Total Operations - Actual and Projected Expenditures</b>	<b>34,986,084</b>	<b>100.00%</b>	<b>951,980</b>	<b>33,765,700</b>	<b>96.5%</b>	<b>1,328,074</b>	<b>35,093,774</b>	<b>(107,690)</b>	<b>-0.31%</b>
<b>PERSONAL SERVICES (REGULAR OPERATIONS)</b>									
Salaries	20,833,333	65.33%	34,574	20,579,922	64.5%	250,000	20,829,922	3,411	0.01%
Retirement ( includes 403B)	2,562,500	8.04%	1,005	2,537,037	8.0%	20,000	2,557,037	5,463	0.02%
Social Security (OASDI)	302,083	0.95%	82	291,499	0.9%	3,625	295,124	6,959	0.02%
Health Benefits/Long Term Care	1,801,750	5.65%	(25)	1,794,470	5.6%	0	1,794,470	7,280	0.02%
Worker's Comp Insurance	215,417	0.68%	31,613	203,688	0.6%	11,250	214,938	479	0.00%
Unemployment Insurance	30,500	0.10%	27,319	30,307	0.1%	0	30,307	193	0.00%
Non-Industrial Disability/Life Insurance	93,750	0.29%	0	83,768	0.3%	0	83,768	9,982	0.03%
Clinical Consultants - Consumer Services	412,095	1.29%	0	92,224	0.3%	319,871	412,095	0	0.00%
<b>Total Personal Services (Regular Operations)</b>	<b>26,251,428</b>	<b>82.32%</b>	<b>94,568</b>	<b>25,612,914</b>	<b>80.3%</b>	<b>604,746</b>	<b>26,217,660</b>	<b>33,769</b>	<b>0.11%</b>
<b>OPERATING EXPENSES (REGULAR OPERATIONS)</b>									
Equipment Rental	55,000	0.17%	261	53,589	0.2%	0	53,589	1,411	0.00%
Equipment Maintenance	14,000	0.04%	128	13,347	0.0%	0	13,347	653	0.00%
Facility Rent	2,628,000	8.24%	0	2,628,000	8.2%	0	2,628,000	0	0.00%
Facility Maintenance	31,500	0.10%	0	31,114	0.1%	0	31,114	386	0.00%
Communications (postage, phones)	374,000	1.17%	4,419	371,704	1.2%	0	371,704	2,296	0.01%
General Office Expense	159,334	0.50%	6,406	140,712	0.4%	3,707	144,419	14,915	0.05%
Printing	35,820	0.11%	569	35,818	0.1%	0	35,818	2	0.00%
Insurance	181,000	0.57%	0	180,564	0.6%	0	180,564	436	0.00%
Data Processing	108,000	0.34%	10	107,360	0.3%	0	107,360	640	0.00%
Data Processing Maintenance / Licenses	168,000	0.53%	1,852	167,494	0.5%	0	167,494	506	0.00%
Interest Expense	0	0.00%	0	0	0.0%	0	0	0	0.00%
Bank Service Fees	1,000	0.00%	0	953	0.0%	0	953	47	0.00%
Legal Fees	206,000	0.65%	15,853	171,510	0.5%	84,302	255,812	(49,812)	-0.16%
Board of Directors Expense	16,000	0.05%	682	15,099	0.0%	0	15,099	901	0.00%
Accounting Fees	65,000	0.20%	2,000	2,000	0.0%	63,000	65,000	0	0.00%
Equipment Purchases	1,215,000	3.81%	738,931	949,722	3.0%	321,907	1,271,629	(56,629)	-0.18%



SAN GABRIEL/POMONA REGIONAL CENTER  
**OPERATIONS FUND FINANCIAL REPORT**

FISCAL YEAR 2019-20

PAYMENTS THROUGH AUGUST 17, 2020 FOR SERVICES PROVIDED THROUGH JUNE 30, 2020

100.0% OF YEAR ELAPSED

**DRAFT  
 COPY**

						D plus F	A minus G		
	A	B	C	D	E	F	G	H	I
	Current Allocation	% of Allocation	Current Month Expenditures Supp#2	Year-to-Date Expenditures July - June	YTD Actual as % of Allocation	Projected Remaining Expenditures	Total Projected Expenditures	Projected Balance Remaining Amount	Percent
Contractor & Consultants - Adm Services	102,000	0.32%	772	99,964	0.3%	0	99,964	2,036	0.01%
Contract - ABX2 Disparities	269,140	0.84%	15,681	83,338	0.3%	185,802	269,140	0	0.00%
Travel/mileage reimbursement	215,000	0.67%	0	209,843	0.7%	0	209,843	5,157	0.02%
ARCA Dues	80,500	0.25%	0	80,458	0.3%	0	80,458	42	0.00%
General Expenses	41,000	0.13%	1,901	38,473	0.1%	0	38,473	2,527	0.01%
<b>Total Operating Expenses (Regular Operations)</b>	<b>5,965,294</b>	<b>18.71%</b>	<b>789,464</b>	<b>5,381,059</b>	<b>16.9%</b>	<b>658,718</b>	<b>6,039,777</b>	<b>(74,483)</b>	<b>-0.23%</b>
<b>Total Personal Services &amp; Operating Expenses (Regular Operations)</b>	<b>32,216,722</b>	<b>101.03%</b>	<b>884,032</b>	<b>30,993,973</b>	<b>97.2%</b>	<b>1,263,464</b>	<b>32,257,437</b>	<b>(40,714)</b>	<b>-0.13%</b>
<b>OTHER INCOME</b>									
Interest & Other Income	(327,000)	-1.03%	(619)	(367,715)	-1.2%	0	(367,715)	40,715	0.13%
<b>Total Personal Services &amp; Operating Expenses Net of Other Income (Regular Operations)</b>	<b>31,889,722</b>	<b>100.00%</b>	<b>883,413</b>	<b>30,626,258</b>	<b>96.0%</b>	<b>1,263,464</b>	<b>31,889,723</b>	<b>(0)</b>	<b>0.00%</b>
<b>RESTRICTED FUNDS</b>									
Family Resource Center Expenses	154,564	100.00%	25,420	154,555	100.0%	9	154,564	0	0.00%
Foster Grandparent/Senior Companion Expenses	1,140,094	100.00%	15,247	1,063,364	93.3%	64,601	1,127,965	12,129	1.03%
Community Placement Plan Expenses	1,801,704	100.00%	27,901	1,921,523	106.7%	0	1,921,523	(119,819)	-6.24%
<b>Total Restricted Funds</b>	<b>3,096,362</b>		<b>68,567</b>	<b>3,139,442</b>	<b>99.2%</b>	<b>64,610</b>	<b>3,204,052</b>	<b>(107,690)</b>	<b>-3.35%</b>
<b>Total Expenses (Including Restricted Funds)</b>	<b>34,986,084</b>		<b>951,980</b>	<b>33,765,700</b>	<b>96.5%</b>	<b>1,328,074</b>	<b>35,093,774</b>	<b>(107,690)</b>	<b>-0.31%</b>
Less: Balance of Restricted Funds	0							(107,690)	
<b>Total Allocation Balance (Deficit)</b>	<b>0</b>							<b>0</b>	

**SAN GABRIEL/POMONA VALLEYS  
DEVELOPMENTAL SERVICES, INC.**

**COMMUNITY RELATIONS/  
LEGISLATIVE COMMITTEE**

**MINUTES FROM THE AUGUST 19, 2020 MEETING**

The following committee members were present at said meeting:

**PRESENT**

Gisele Ragusa  
Joseph Huang  
Natalie Webber  
Rachel McGrath  
Georgina Molina  
Penne Fode

**STAFF:**

Anthony Hill, Executive Director  
Lucina Galarza, Director of Community Services  
Carol Tomblin, Director of Compliance  
Aaron Christian, Director of Client Services  
Joe Alvarez, Associate Director of Clinical Services  
Willanette Satchell, Executive Assistant –  
Management  
Yvonne Gratianne, Manager of Community & Public  
Relations  
Johnny Pang, IT Manager  
Erika Gomez, Executive Assistant- Board of  
Directors

**ABSENT:**

Daniel Rodriguez (Chair)

**RECOMMENDED BOARD ACTIONS**

**The Community Relations/Legislative Committee recommends the following:**  
None

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**CALL TO ORDER**

Dr. Gisele Ragusa, called the meeting to order at 6:03 pm, on behalf of Daniel Rodriguez, Chairperson. A quorum was established.

The minutes from July 15, 2020 were reviewed and approved.  
**M/S/C (Huang & Molina) The committee approved the minutes.**

**PUBLIC INPUT**

None

## **COMMUNITY OUTREACH MONTHLY REPORT\***

Carol Tomblin, Director of Compliance, presented the monthly Outreach Report.

The Community Outreach Specialist have focused on the following projects:

- Progress/Status of Continuing POS Equity Projects Funded by DDS FY 19-20 Disparity Program Grants
- Ongoing Projects Previously Funded
- Other Equity Related Activities non-supported with Disparity Grant Funds
- Family Support/ Training
- Outreach/ Events Participation
- Other major activities of the Compliance and Outreach Department

**Performance Contract Process Reminder:** There will be a presentation of the Performance Contract process, the Year-End Report for 2019 and a review of current 2020 approved Performance Contract during the Board Meeting on August 26, 2020.

## **SG/PRC BYLAWS DISCUSSION**

Dr. Ragusa emailed the Board and committee members a copy of the amendment Board Bylaws for their review. This is "round one" of revisions, when feedback is provided the ad hoc committee will do a second reading and the Board will likely vote on them in September.

## **LEGISLATIVE ISSUES & OTHER INFORMATION**

- The Hero's Act legislation passed the House and is sitting in the Senate.
- There is an Executive Order modification to the unemployment benefit that will reduce it from \$600 to \$400.
- There hasn't been much movement for the Cares Act.
- There hasn't been much movement at the State level due to Covid-19.

## **SG/PRC UPDATES AND ACTION/RESPONSE TO COVID-19**

*Mr. Anthony Hill, Executive Director shared with the committee about the fires in Northern California and their impact on the regional centers in their catchment area. He also informed the committee that due to potential for rolling blackouts, staff will go in the office as early as 5am to avoid disruption of payments.*

Following that report, Mr. Hill and staff gave updates regarding SG/PRC's response to the current situation to the Coronavirus (COVID-19) health crisis including:

- Workforce is currently at 95% working remotely.
- Established a sophisticated temperature and mask test when entering the

building for those working on-site and for the public.

- Intake and Early Start assessments have start up again.
- Spoke about the “restrictive zones” within the agency that are necessary to protect those staff who perform critical functions.
- Directors continue to meet every morning to assess the latest COVID-19 information.
- SG/PRC continues to host weekly COVID-19 Vendor Advisory Committee Meetings (on Mondays) and weekly Community Meetings (on Tuesdays).
- Joe Alvarez provided individual stats on COVID-19; spoke about the spikes, presented information on the DDS report to the Committee.
- Lucina Galarza reported on hot spots and updated strategies with respect to information technology/remote options such as a Lending Library. 11,000 families were contacted/surveyed. She also reported on the 3 surge registries that are in place and the fourth that staff are working on.
- Aaron Christian discussed PPE distribution. He is working with transporter vendors to make contactless distributions.
- Dr. Larry Yin will do a presentation on the Impact of Covid-19 on Individuals with Developmental Disabilities on August 20, 2020 at 10am.

#### **AGENDA FOR 9/16/2020**

- Bylaws
- Community Outreach Report
- Covid-19 Update
- Strategies for Legislative Outreach

#### **ADJOURNMENT:**

Next meeting is on for September 16, 2020 via videoconference.

## Community Outreach Team Monthly Report

Community Outreach Team	Director: Carol Tomblin
Report Date	Month of July 2020
Report to	Community Relations Committee of the SG/PRC Board of Directors

**Performance Contract Process Reminder:** There will be a presentation of the Performance Contract process, the Year-End Report for 2019 and a review of current 2020 approved Performance Contract during the Board Meeting on August 26, 2020.

<p><b>Progress/Status of Continuing Equity Projects Funded by DDS FY19-20 Disparity Program Grants</b></p>	<ul style="list-style-type: none"> <li> <p>• <b><u>Parent Mentor Initiative (PMI)</u></b> – Please note that Alma Family Services provides monthly reports for the Parent Mentor Initiative (PMI) project on the 15<sup>th</sup> of each month for the previous month. The reports to this committee are prepared the week prior to receipt of the PMI reports. Consequently, this section will always reflect a prior month’s activities.</p> <p>Alma continues to provide support remotely to the families participating in PMI. In the month of June, there were seven (7) additional referrals, for a total of 294 parents referred since the inception of PMI. Six (6) families were matched. There were ten (10) graduates in June. There were 98 hours of mentoring provided to 44 participants. To date, 5,933 hours of PMI mentoring has been provided to 198 SG/PRC families.</p> <p>Some families that have graduated continue to request ongoing support. These families are referred to Xochitl, who encourages them to seek other trainings and attend a support group. Two families were enrolled in NRCS and were also enrolled in OCRA’S series of webinars. The goal is for parents to continue to grow their advocacy skills by branching out to access additional community supports. This has proven to be effective.</p> </li> <li> <p>• <b><u>Navigating the Regional Center System (NRCS)</u></b> – Registration for the August NRCS workshops conducted in Spanish continued. The first workshop series with Axolot Mental Health Services will be conducted in Spanish, starting Saturday, 8/1/2020. All workshops will be conducted via Zoom, with a training on how to participate in Zoom offered in advance of the NRCS workshops. Enhancement to the NRCS materials and translation to Spanish of these new materials are being completed.</p> </li> <li> <p>• <b><u>Webinar development and hosting for parent training</u></b> – Amos continued to create total of 11 Storyline3 files for Navigating the Regional Center System (NRCS) English video presentation. It is planned for all 11 files to be completed and shared with Learning Management Systems (LMS) manager by 8/31/2020 to upload and make it available to users by the end of August.</p> </li> </ul>
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	<ul style="list-style-type: none"> <li>• <b>Vietnamese Outreach Specialists</b> –Vietnamese families were called by Parents’ Place staff to arrange delivery/pick-up of Personal Protective Equipment (PPE). Twenty-two (22) Vietnamese families picked up PPE from the Parents’ Place location and Parents’ Placed delivered PPEs to an additional seven (7) Vietnamese families.</li> </ul>
On-going projects previously funded	<ul style="list-style-type: none"> <li>• <b>Understanding My Child’s Disability (UMCD) Online Series (Previously known as Introductory Curriculum for Families)</b> – Amos posted three of five “Understanding My Child’s Disabilities” (UMCD) modules on SG/PRC Parent Portal of our website for community review. The three modules addressed Down Syndrome, Intellectual Disability, and Cerebral Palsy. Amos continued to work on two more UMCD modules regarding Epilepsy and Autism. These modules which are currently available in English will be provided to MAGNUS, our contracted translation service, for translation in Chinese, Korean, Vietnamese and Spanish.</li> </ul>
Other Equity-Related Activities not supported with Disparity Grant Funds.	<ul style="list-style-type: none"> <li>• <b>Person-Centered Conversations (PCC)</b> – During the pandemic, PCC meetings were conducted remotely, only. On 7/31/2020, Amos had a PCC with Korean parents who needed support to obtain information about transitioning to college life, living options and employment options.</li> <li>• <b>Support of CBO Equity Project</b> – Parenting Black Children (PBC), is a project of Access Nonprofit. The focus of PBC is to support African American/Black children by creating a safe space to openly discuss challenges to overcome barriers (stigmas) and increase access through education and warm supports. Flyers will continue to be shared with Service Coordinators to increase awareness of the supports PBC is providing to all who are raising an African American/Black child.</li> </ul> <p>PBC held its first support group meetings on Thursday 7/9/20 with 12 participants and Saturday on 7/25/20 with 13 participants. Participants had children associated with SG/PRC as young as 7 years and as old as 34. Parents in each group were very enthusiastic about the support group. One parent said, “where was this group 20 years ago!?!”, expressing that this support is greatly needed.</p> <p>The next training scheduled on 8/5/20 will cover the topic of Homeschooling Tips. The main outreach platform will be social media; PBC’s trainings are recorded and will be added to Facebook and Instagram to reach more families. In addition, PBC is actively distributing PPE to families.</p>
Family Support/ Training	<ul style="list-style-type: none"> <li>• <b>Translation for Korean families:</b> Amos regularly provides Korean translation for individuals served and their families, as requested by service coordinators for individuals three years of age through adult. Amos provides translation through telephone calls, emails and Zoom meetings. In July, Amos provided verbal and written translation for one IPP meeting and one annual meeting.</li> </ul>

	<ul style="list-style-type: none"> <li> <b>Filipino American Support Group:</b> The first Zoom meeting of this group was held on Saturday, 7/25/20. The topic was Safety Protocols for in-home services and Behavioral Health Treatment (BHT) access. The Zoom meeting was a success with 12 participants. <p>It is important to point out that the American Filipino Parent Support Group is interested in attracting younger parents to this group, as the "core group" would like to share their knowledge with young families and to offer their support. Having the Zoom meeting was beneficial, as young parents that typically find it hard to attend because they take care of younger children were finally able to attend. Two mothers expressed that Zoom is a good option and they were happy they attended. The core group was very receptive to the challenges faced by these young parents during this COVID-19 pandemic.</p> </li> <li> <b><i>Informate!</i> ( Spanish-language Forum):</b> <i>Informate!</i> met at 6:00 p.m. on Thursday, 7/23/20. The topic was Understanding the IEP document presented in Spanish by SG/PRC Education Specialist via Zoom, with 13 participants. The Participants made request to move this forum to Saturday from the current Thursday evening because there are other Zoom Trainings the parents want to attend that conflict with the current <i>Informate!</i> schedule. This will be taken into consideration. The parents that have attended this group will be surveyed to find a better time. </li> <li> <b>Critical Issues Forum</b> was held on 7/15 at 10:00 a.m., with the topic Understanding the IEP document by SG/PRC Education Specialist. Presented via Zoom with 22 participants. PowerPoint with presenter's notes was shared with the families. Families felt this was an informative presentation. </li> <li> <b>Connecting with existing groups to provide remote training opportunities for families:</b> On 7/27/2020 and 7/30/2020, Amos provided Zoom training regarding the ADEPT ABA learning modules for Korean Parents Support Group-California (KPSG-CA). Total of 45 parents participated in the training and 27 parents enrolled successfully in the ADEPT ABA learning modules following this training. This training opportunity to learn how to enter the Parent Portal and enroll in the ADEPT learning modules will be extended to Chinese and Vietnamese parents, so they can learn ABA principles and techniques in their primary languages. </li> </ul>
<b>Outreach/Events Participation</b>	<ul style="list-style-type: none"> <li> <b>No in-person Outreach Events were conducted in July due to Pandemic.</b> </li> </ul>
<b>Other Major Activities of the Compliance and Outreach Department</b>	<ul style="list-style-type: none"> <li> <b>Weekly Community Meetings:</b> Xochitl assisted Edith Aburto, who provided Spanish translation for the weekly Community Zoom meetings, by managing the questions submitted through the Chat function. </li> </ul>

Carol continues to participate in the weekly Community meetings and announced the Zoom meetings held in July (described above) and for August:

8/12<sup>th</sup> Community Meeting conducted in Spanish at 10:00 a.m. to present FY18-19 Disparity Data and SG/PRC's Equity Projects update

8/26<sup>th</sup> Community Meeting conducted in English at 10:00 to present FY18-19 Disparity Data and SG/PRC's Equity Project update

- Outreach Team participated in the Cultural Specialist call with DDS on July 17<sup>th</sup>.
- Outreach Team completed the quarterly progress reports for our five DDS funded disparity/equity grants and submitted before the end of the month. DDS will be instituting a new grant management system starting in August. The Team participated in a conference call with DDS on 7/31 to discuss how the qualitative and quantitative measures will be tracked using this new system.





# SAN GABRIEL/POMONA REGIONAL CENTER

## Client Services/Advisory Committee Wednesday, September 23, 2020 at 6:00 p.m. Videoconference Meeting

### Committee Members:

### Staff:

Shannon Hines, Co-Chairperson  
Sheila James, Co-Chairperson  
Mary Soldato  
Preeti Subramaniam  
Daniel Clancy  
Herminio Escalante  
David Grisey (LOA)

Jenny Needham  
Julie Lopez  
Sherry Meng  
Ning Yang  
Louis Jones  
John Randall  
Victor Guzman  
Ardena Bartlett

Anthony Hill  
Lucina Galarza  
Daniela Santana  
Joe Alvarez  
Erika Gomez  
Elisa Herzog

### AGENDA

- **Call to Order – Chairperson, Shannon Hines (6:00 – 6:05)**  
- Approve Minutes of August 26, 2020 Meeting

- Public Comment (6:05 – 6:10)

- Action Item: None

- Client Advocate – Elisa Herzog (6:10 – 6:15)

**(6:15 – 6:45) – Special Presentation “Signs & Symptoms of Mental Health Conditions”** By Joe Alvarez, Director of Clinical Services

#### **(6:45 – 7:00) Committee Information**

Shannon Hines and Sheila James, Chairs, Lucina Galarza, Director of Community Services and Daniela Santana, Director of Client Services

- **Future Training Topics – October – Community Outreach Efforts (Parenting Black Children) By Ardena Bartlett**
- **Board Bylaws**
- **Self Determination Advisory Committee Meetings & Updates**
- **Coronavirus Update by Anthony Hill, Executive Director and Staff**
- **Agenda for October 28, 2020**

**SAN GABRIEL/POMONA REGIONAL CENTER**

**DEVELOPMENTALSERVICES, INC.**

**Minutes of the Meeting of the Client Services /Advisory Committee**

**August 26, 2020**

A regular meeting of the Client Services/Advisory Committee was held on Wednesday, August 26, 2020. The following committee members were present at said meeting:

**PRESENT**

Mary Soldato  
Pretti Subramaniam  
Shannon Hines  
Sheila James  
Ardena Bartlett  
Julie Lopez  
Sherry Meng  
Jenny Needham

**STAFF:**

Anthony Hill  
Lucina Galarza  
Aaron Christian  
Joe Alvarez  
Carol Tomblin  
Amos Byun  
Eliza Herzog  
Erika Gomez  
Lisa Brady

**GUESTS:**

Gisele Ragusa  
Sam Yi

**ABSENT:**

Herminio Escalante  
Victor Guzman  
Daniel Clancy  
David Grisey  
John Randall  
Ning Yang  
Louis Jones

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**ITEMS DISCUSSED**

**A. CALL TO ORDER**

May Soldato called the meeting to order at 6:42 pm  
A quorum was established.

- The minutes of June 24, 2020 and July 22, 2020 were approved with one change: Shannon Hines called the meeting to order.

**M/S/C (Soldato/James) The committee approved the minutes.**

- B. PUBLIC COMMENT** – Sam Yi spoke about his concerns regarding the rate of individuals served hurting themselves and committing suicide being on the rise, Joe Alvarez, Director of Clinical Services, shared that his department

checked in with individuals considered to be high risk and/or with a history of harming themselves and the responses showed that most individuals are doing well and are well supported.

**C. CLIENT ADVOCATE** – Elisa Herzog presented the following:

**Tips while riding Access Services during COVID-19:**

- Access requires both passengers and drivers to wear masks which cover the mouth and nose at all times during your trip.
- Please do not schedule a trip with Access if you are sick or plan to be tested for COVID-19
- Temporarily eliminated shared rides on minivans and implemented physically-distanced shared rides on Access' larger vehicles.
- Temporarily offering same day service to certain locations, such as the grocery store, bank, pharmacy, non-emergency medical appointments and cooling stations.
- Curbside pickup subject to conditions. The fare for a same day trip will be the same as a next day trip.
- Riders are limited to one same day, round trip per day and no more than two same day round trips per week.
- Special service is subject to change based on operational conditions and is not permanent.
- Providing enhanced cleaning and disinfection for all vehicles.
- For additional questions or concerns please call customer service at 800.827.0829.
- 
- August is National #ABLEtoSave Month, and at CalABLE, continues to spread the word about how ABLE accounts can empower Americans with disabilities to save for their futures
  - Activities include podcast, blog posts and links, to additional information-- Learn more and enroll at [CalABLE.ca.gov](http://CalABLE.ca.gov)
- A Parent's Guide to Virtual Learning: 4 Actions to Improve Your Child's Experience With Online Learning & provide some advice and tips
  - There are best practices for children with disabilities who are engaged in online learning. Some of these include:
    - virtual face-to-face interactions with their teachers & other students
    - Online quizzes, chats, and other ways to check understanding
    - Online information needs to be represented in different formats, and students need options for engaging with and demonstrating their understanding
    - Help organizing time

- New ways to access needed services.
  - And remember, You and your child still have rights! COVID-19 did not erase your child's rights to a free and appropriate public education (FAPE) in the least restrictive environment (LRE)
- LA county library's are now offering virtual programming on their website --with different activities each day during the week! Please visit <https://lacountylibrary.org> to explore all that is offered

- D. FOCUS GROUP DISCUSSION: 2020 PERFORMANCE CONTRACT**  
Carol Tomblin, Director of Compliance, spoke about 2020 Local Measures and Planned Activities from the 2020 Performance Contract Plan. Please see the attachment.
- E. COMMITTEE COMPOSITION** – Sheila James sent out a survey to the members to determine who would like to continue on the committee and/or how to help them during the videoconference meetings because many members do not participate but there was not much feedback.
- F. FUTURE TRAINING TOPICS** – The committee asked that the Covid 19 update be shortened and that there start to be monthly trainings. The committee agreed on the following training topics:
- **September 23, 2020 – Mental Health**
  - **October 28, 2020 – Community Outreach: Parenting Black Children**
- G. BOARD BYLAWS** – The Board of Directors are currently in the process of revising Bi-laws. The amendments have been sent to Judy Enright & Associates for their revision. The amendments are being compared with statute. All Board and committee members received a copy of the proposed changes. For this committee, it is being proposed that the name be changed to: Advisory Committee of Individuals Served and Their Families. The committee suggested it be changed to: Advisory Committee *for* Individuals Served and Their Families. After the recommended changes are made, the Board will review the amendments and will vote on the Bylaws in September

or October.

**H. SELF DETERMINATION** - There are biweekly meetings. SG/PRC staff are resuming "meet and greet" sessions. At the last meeting, the "Education Spectrum" was introduced. The session will be offered in Spanish next month. SG/PRC is also having Self Determination clinics for staff.

**I. COVID-19 DIRECTOR'S REPORT -Anthony Hill, Executive Director**  
Due to the time constraint, Joe Alvarez provided his Surveillance Report of the data regarding Covid 19 in the catchment area and its impact.

**J. ADJOURN**

Chairperson Shannon Hines adjourned the meeting.

The next Client Services/Advisory Committee meeting is scheduled for Wednesday, September 23, 2020 via videoconference.

2020 Performance Contract Plan - SG/PRC

2020 SG/PRC PERFORMANCE CONTRACT PLAN

#	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 <b>lower</b> the number, the <b>better</b> the outcome.</p>	<p>a. Implement the Community Placement Plan (CPP) 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 <b>higher</b> the number, the <b>better</b> 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), mental health services.</p>

2020 Performance Contract Plan - SG/PRC

<p>3</p>	<p>Adults live independently with or without paid supports. *(Number and percent of adults residing in independent living.)</p> <p>The <b>higher</b> the number and percentage, the <b>better</b> the outcome.</p> <p>+Note: Public Policy Measures 3, 4, 5 and 6 were combined and reported collectively in Measure #7 (see below). The % for ILS was not reported separately.</p>	<p>a. Service Coordinators to discuss and provide written information about various living options, such as independent living, supported living, and adult family homes, upon request. b. Provide training to Service Coordinators on living options. c. Provide family members with information about adult living options through outreach and educational fairs. d. Resource developers to encourage new providers of living options that are culturally sensitive and address the diverse needs of community members. e. Encourage all existing and new providers to comply with CMS regulations for Home and Community-Based Services (HCBS).</p>
<p>4</p>	<p>Adults live in their own home (apartment, etc. ) with paid supported living services. *(Number and percent of adults residing in supported living.)</p> <p>The <b>higher</b> the number, the <b>better</b> the outcome.</p> <p>+Note: Public Policy Measures 3, 4, 5 and 6 were</p>	<p>Same as above.</p>
<p>5</p>	<p>Adults live in certified family homes along with no more than one other person with developmental disabilities. *(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). The % for individuals living in homes certified by the Adult Family Home Agency was not reported separately.</p>	<p>Same as above.</p>

2020 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). The % for adults living with their families was not reported separately.</p>	<p>a. 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.</p> <p>b. Continue SG/PRC Bio-Behavioral Clinic and Psychiatric Consultations as well as Crisis Services and Supports.</p> <p>c. Inform families of family support or peer support groups/activities.</p> <p>d. 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 <b>higher</b> the number, the <b>better</b> 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 &gt; 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 <b>lower</b> the numbers, the <b>better</b> 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>



2020 Performance Contract Plan - SG/PRC

9	<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 &gt; 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>
10	<p><b>EMPLOYMENT MEASURES</b></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, to advance employment experience options for individuals still eligible for public education.</p> <p>f. See activities listed for Local Measures #1 and #2, related to employment.</p>
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>	<p>a. See activities for Measures 3 and 6 above.</p> <p>b. See activities listed for Local Measures #1 and #2, related to employment.</p>

2020 Performance Contract Plan - SG/PRC

12	<p>*(Annual earnings of individuals ages 16-64 compared to all people with disabilities in California.)</p>	<p>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.  e. See activities listed for Local Measures #1 and #2.</p>
13	<p>*(Number of adults who were placed in competitive, integrated employment following participation in a Paid Internship Program.)</p>	<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.  b. Employment options will be routinely discussed at IPP meetings.  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.  d. Employment following PIP participation will be discussed during quarterly Work Services meetings that includes DOR and employment vendors.  e. SG/PRC Resource Development staff will change the PIP writing guidelines to clarify the intent of the vendor's PIP.  f. SG/PRC Employment Specialist will work with Resource Development staff to have PIP vendors specify the intended outcome in the program/service design.  g. SG/PRC will provide training to service coordination staff to help staff better understand PIP and Competitive Integrated Employment.</p>
14	<p>*(Percent of adults who entered in competitive integrated employment following participation in a Paid Internship Program.)</p>	<p>a. See activities above for Employment Measure 13.</p>

2020 Performance Contract Plan - SG/PRC

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>
17	*(Total number of \$1000, \$1250 and \$1500 incentive payments made for the fiscal year.)	<p>a. SG/PRC will discuss the benefits of incentives and how to qualify 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.</p> <p>b. Information about the CIE incentives will be posted to the SG/PRC website.</p> <p>c. Inform service coordination staff of PIP, CIE and incentive programs.</p>
18	*(Percentage of adults who reported having competitive integrated employment as a goal in their IPP.)	<p>a. SG/PRC will develop Individual Program Plans (IPPs) based on the Person-Centered Thinking and Person-Centered Planning approach.</p> <p>b. Service Coordinators (SCs) will discuss integrated employment with adults as a part of the "important to/important for" conversation.</p> <p>c. For those adults who report an interest in integrated employment, SCs will incorporate integrated employment as an IPP goal.</p>

2020 Performance Contract Plan - SG/PRC

<p>19</p>	<p><b>MEASURES RELATED TO REDUCING DISPARITIES AND IMPROVING EQUITY IN POS EXPENDITURES</b></p> <p>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.</p> <p>*(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 our client population.</p> <p>b. Provide information and training for staff and service providers to promote culturally-competent and person-centered service delivery.</p> <p>c. Seek input from our community regarding barriers to access and utilization of services, and ways to overcome these barriers, especially for Hispanic adults and African-American babies and toddlers living with their families.</p> <p>d. Review annual POS authorization data and monitor progress.</p> <p>e. Service Coordinators to annually review utilization of authorized POS for the individuals assigned to them.</p> <p>f. Continue implementing the Equity Projects funded FY 2017-2018, and later years if funding is continued, to better inform and prepare families to access and utilize regional center services.</p>
<p>20</p>	<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>

2020 Performance Contract Plan - SG/PRC

**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)	

2020 Performance Contract Plan - SG/PRC

**2020 LOCAL MEASURES**

#	Local Measures	Planned Activities
1	<p>Adults served by SG/PRC have jobs that pay minimum wage or better, based on the CDER.</p>	<p>a. Collaborate with Department of Rehabilitation to enhance employment opportunities for individuals supported by SG/PRC.                      b. Collaborate with public schools to prepare students for work and to enhance employment opportunities.                      c. Encourage Supported Employment programs to secure more jobs that are at minimum wage level or above for adults.                      d. Provide information to individuals served and their parents regarding the benefits of work and how work affects SSI and SSA, including the WorkNow website.                      e. Refer individuals to services that have high success rates in securing competitive employment.                      f. Monitor wage statistics for vendors and meet with vendors to review these data.</p>
2	<p>More adults participate in individualized employment services, based on POS for Tailored Day Services (TDS), Employment Facilitation Training Services (EFTS), Individualized Supported Employment (I-SEP), college support and individualized community volunteer activities. (POS data to track change in authorizations and utilization of these services, as defined in A, B and C below.)</p> <p>A= TDS, 055,063,605,102,VP (only vendors that focus on employment training or community volunteer activities -- not all vendors with these service codes)                      B= SEP                      C=CIE</p>	<p>a. Refer adults to programs and services that are successful in promoting individualized employment or volunteer activities, such as Tailored Day Services (TDS) and Employment Facilitation Training Services (EFTS).                      b. Encourage vendors to increase opportunities for adults to achieve inclusive objectives, including college support, tailored day program, and individualized Supported Employment Programs (SEP).                      c. Provide information about the Paid Internship Program (PIP) to individuals served by SG/PRC, their families, and the local business community.</p>

**SAN GABRIEL/POMONA VALLEYS  
DEVELOPMENTAL SERVICES, INC.  
VENDOR ADVISORY COMMITTEE MINUTES**

**September 3, 2020**

The following committee members were in attendance at said meeting:

**PRESENT:**

David Bernstein, Chairperson  
Olaf Luevano  
Nicole Mirikitani  
Michelle Mainez  
Valerie Donelson  
Jay Bhavsar  
Bryan Chacon  
Rosalind Ford  
Nancy Bunker  
Baldo Paseta  
Bryan Chacon  
Jose Mendoza  
Vanessa Besack  
Susan Stroebel  
Charmayne Ross

**STAFF:**

Anthony Hill, Executive Director  
Lucina Galarza, Director of Community  
Services  
Aaron Christina, Director of Client  
Services  
Joe Alvarez, Associate Director of Clinical  
Services  
Dara Mikesell, Associate Director of  
Community Services  
Rosa Chavez, Associate Director of Family  
and Transition Services  
Jaime Anabalon, Manager of Quality  
Assurance  
Johnny Pang, Manager of IT  
Erika Gomez, Exec. Assistant – BOD  
Lisa Brady, Interim Exec. Assistant -  
Management

**MEMBERS ABSENT:**

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**RECOMMENDED ACTIONS**

**THE VENDOR ADVISORY COMMITTEE RECOMMENDATION:**

None

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**A. CALL TO ORDER**

David Bernstein called the meeting to order at 10:01 a.m. A quorum was

via videoconference.

The minutes from the August 6, 2020 meeting were approved with the correction of Aaron Christian's name.

**M/S/C (Mirikitani & Chacon) The committee approved the minutes.**

## **B. STAFFING - SHORTAGES AND STRATEGIES**

There was a discussion among the members about staffing issues that included the following:

- There has not been a lot of change, positively or negatively.
- There seems to be a trend of employees that took a leave have now developed a medical or psychological condition due to Covid 19 that prevents them from returning to work.
- For some programs, there has been a pick up of job interest.

## **C. RE-ENTRY PLANS**

In October, providers will develop their plans to be implemented in November. There participants also talked about what "Alternative Services" means. The following areas were discussed:

- Safety Plans
- Day Program Virtual Services
- Day Program One on One Services
- Day Program Personalized Services

## **D. VENDOR CATEGORY REPORTS**

### **Adult Programs**

*Vocational* – Olaf Luevano suggested that all Day Programs establish an effective remote service platform for continuous services. After that is established, they can branch out and work collaboratively with other providers to ensure that they are providing additional services based on each individuals' needs.

*Adult Day* – Rosalind Ford and Jose Mendoza reported that the subcommittee will meet after the VAC meeting. Day Program providers are personalizing their plans. Supported Employment providers are turning in plans for work programs that are coming off of furloughs.

### **Infant & Children Services**

*Infant Development Program* – Charmayne Ross shared that it is challenging to get families to engage.

### **Transportation**



Baldo Paseta shared that DDS continues to have meetings with the Transportation Taskforce every Wednesday at 11am. He encouraged vendors and individuals served to contact him as he would like to show what the vehicles look like with the modifications that have been made.

### **Independent Living Services**

*ILS Services* – Nicole Mirikitani spoke about her concerns:

- Doctor releases for Day Program
- Knowing the dietary requirements of the individuals served is essential
- Individuals that are high risk should not return to program
- Overlapping billing

*SLS Services* – Nancy Bunker shared that the California Supported Living Network has been expanded and changed to California Community Living Network.

### **Residential Services**

*ICF* – David Bernstein spoke about staffing is challenges for HCBS homes.

*CCF* – Jay Bhavsar and Valerie Donelson shared that some individuals served are confused by Zoom. Some individuals are concerned to go back to their program. There was a brief discussion about creating a dialogue with the Day Program providers.

*Specialized* – Michelle Mainez spoke about the temporary rate relief. Providers are waiting on direction on how rates will be corrected. She also encouraged vendors to do their research on the Payroll Tax Referral.

*Other Vended Services* – Bryan Chacon reported that Respite will not be affected by “Alternative Services.”

*At Large* – Susan Strobel stated that most OT, PT, Slp. social skills programs did not have to submit alternative plans because most were providing the same service live, in alternate locations or remotely. Many families are again opting for live services when provided in a safe way.

## **E. SG/PRC STAFF UPDATEs**

Staff gave updates about the following:

- HCBS Final Rule Compliance Report
- Transportation and Day Programs working together to deliver packages

**PUBLIC COMMENTS**

None

**MEETING ADJOURNED**

The next regular meeting will be held on October 1, 2020 at 10:00 a.m.

**SAN GABRIEL/POMONA VALLEYS  
DEVELOPMENTAL SERVICES, INC.  
STRATEGIC DEVELOPMENT COMMITTEE MINUTES**

**September 9, 2020**

The following committee members were present at said meeting.

**MEMBERS:**

Julie Chetney, Chairperson  
Dr. Gisele Ragusa  
Bruce Cruickshank  
Bill Stewart  
Anabel Franco

**STAFF:**

Anthony Hill, Executive Director  
Lucina Galarza, Director of Community Services  
Aaron Christian, Director of Client Services  
Joe Alvarez, Director of Clinical Services  
Lisa Brady, Interim Exec. Asst. (Mgmt.)  
Erika Gomez, Executive Assistant - BOD

**GUESTS:**

**MEMBERS ABSENT:**

**RECOMMENDED BOARD ACTIONS**

**THE STRATEGIC DEVELOPMENT COMMITTEE RECOMMENDS THAT  
THEY TAKE ACTION ON THE FOLLOWING:**

None.

**ITEMS DISCUSSED**

**A. CALL TO ORDER**

Julie Chetney called the meeting to order at 6:03 p.m. A Quorum was established.

The Minutes from the August 12, 2020 meeting were approved.

**M/S/C (Stewart & Cruickshank) The committee approved the minutes.**

**Abstain: Franco**

## **B. PUBLIC INPUT**

None

## **C. GOALS AND OBJECTIVES**

- *Bylaws Feedback Discussion* – The amendments will be ready for final review at the September or October Board meeting.
- *Mentorship* – This project is still in development.
- *Strategic Timeline Related to the Website* – Staff will meet with Juile Chetney and Dr. Ragusa to come up with a plan for this project.
- *Board Training Plan*

Dr. Ragusa spoke about the letter sent to DDS about SG/PRC's 2020-2021 Board Training Plan which consisted of the following:

- Needs Assessment and Topic Selection Process
- 2020-2021 Topics, Schedule and Speakers
- Training Evaluation and Reporting
- Additional Training Opportunities and Issues Forums

## **D. BOARD COMPOSITION**

The annual Board Composition was sent to DDS. The SG/PRC Board of Directors is short on Hispanic and Asian representation.

## **E. COVID-19 UPDATE**

Anthony Hill, Executive Director reported the following regarding Covid-19:

- The Bobcat Fire is impacting SG/PRC's catchment area. Staff did a survey and found out 500 individuals served, and six Residential Facilities are impacted and may have to evacuate. An Everbridge message was sent to those impacted and the Quality Assurance staff is in contact with the Residential Facilities.
- Workforce is currently at 95% working remotely.
- 300 staff will receive a new laptop to facilitate their work offsite.
- Intake and Early Start assessments are operating at full scope and by appointment only.
- Directors continue to meet every morning to assess the latest COVID-19 information.
- SG/PRC continues to host weekly COVID-19 Vendor Advisory Committee Meetings (on Mondays) and weekly Community Meetings (on Tuesdays).
- Joe Alvarez provided individual stats on COVID-19; spoke about the spikes, presented information on the DDS report to the Committee.

- Lucina Galarza reported on hot spots and updated on the Reengagement Plan for Providers.
- Aaron Christian discussed PPE distribution. He also spoke about new guidance from the California Department of Public Health Care Services that allows for schools to deliver in person services with small school cohorts.

**F. AGENDA FOR OCTOBER 14, 2020**

- Mentorship
- Board Orientation
- Website Update

**G. ADJOURNED**

Meeting adjourned.

The next Strategic Development Committee meeting is scheduled for Wednesday, October 14, 2020.

# SAN GABRIEL/POMONA REGIONAL CENTER

August 24, 2020

LeeAnn Christian, Ph.D.  
Deputy Director  
Community Operations Division  
Department of Developmental Services  
P.O. Box 944202  
Sacramento, CA 94244-2020

Dear Dr. LeeAnn Christian:

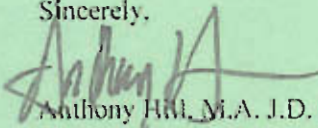
I am writing in response to your letter dated July 20, regarding San Gabriel/Pomona Regional Center's (SG/PRC) compliance with the composition of the Board of Directors. Based the Board Composition Survey, there are some areas that may not be in compliance with one or more of the requirements in WIC Section 4622. Specifically, I would like to respond to the following requirements that we are out of compliance in:

- The composition of SG/PRC's board does not completely reflect the ethnic characteristics of the community served. Based on the data, the Asian and Hispanic community appear modestly under represented.

Efforts have been and continue to be on-going in the recruitment of Board members. Specifically, we have been prioritizing the efforts and outreach to the Asian and Hispanic community. In the last year, SG/PRC hosted separate "Meet and Greet" events that targeted both above-mentioned communities. Due to Covid-19, we had to stop hosting these events in person. However, the Strategic Development Committee started discussing hosting virtual "Meet and Greet" sessions for targeted communities where recruiting will be one of the priorities.

SG/PRC will continue to make efforts to obtain community involvement on the Board of Directors. We believe that the representation on the Board of Directors in the areas mentioned above will positively be affected in the next year or so. If you require any additional information, please feel to contact me.

Sincerely,



Anthony Hill, M.A. J.D. Esq.  
Attorney at Law  
Executive Director  
San Gabriel Pomona Regional Center

L.G/eg

cc: Gisele Ragusa, Board President  
Amy Westling, Department of Developmental Services  
Brian Winfield, Department of Developmental Services

75 Rancho Camino Drive, Pomona, California 91766  
(909) 620-7722 [www.sgprc.org](http://www.sgprc.org)

Program of San Gabriel/Pomona Valleys Developmental Services, Inc.

Ernie Cruz, Department of Developmental Services  
Uvence Martinez, Department of Developmental Services  
Amy Westling, Association of Regional Center Agencies  
Board File

75 Rancho Camino Drive, Pomona, California 91766  
(909) 620-7722 [www.sgprc.org](http://www.sgprc.org)

Program of San Gabriel/Pomona Valleys Developmental Services, Inc.

# SAN GABRIEL/POMONA REGIONAL CENTER

September 16, 2020

TO: Dr. Gisele Ragusa, Board President & Board of Directors  
San Gabriel / Pomona Valleys Developmental Services, Inc.

FROM: Anthony Hill, M.A. J.D. Esq.  
Executive Director

RE: Executive Director's Report

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## SG/PRC Critical Business Functions

Our remote workforce is 90% as we remain committed to delivery of essential intake and eligibility services. SG/PRC continues to lead the way, as SG/PRC remains alone as the only regional center that has delivered intake and eligibility services without modifications throughout the COVID-19 health pandemic. We are very proud of this important distinction.

Our office is closed to the public, and remains open for scheduled appointments. Our critical business functions, including Intake and Eligibility, Fiscal Services, Client Services, Clinical Services, Human Resources, and Information Technology, are meeting the needs of our stakeholders. SG/PRC employees have adapted well to our new business model and have demonstrated flexibility in making adjustments to the frequent shifts in how Individual Family Service Plan or Individual Program Plan services are to be delivered and or claimed during the COVID-19 health pandemic.

All staff, Consultants and visitors are required to wear a face mask, pass a temperature check before entry, and practice [six feet] physical distancing when within the SG/PRC office. The office is cleaned and sanitized throughout business hours and after business hours. As an additional layer of protection, we are implementing restrictive zones of entry within internal departments to protect our ability to perform critical business functions at optimal levels.

## CFO Announcement

We are pleased to announce Mr. Roy Doronila as our Chief Financial Officer (CFO) effective September 14, 2020. Mr. Doronila has over 40 years of regional center experience in fiscal operations. Mr. Doronila has served as the CFO for (4) regional centers beginning 20 years ago at SG/PRC, including ACRC, NBRC and more recently retiring as the Chief Operating Officer with SCLARC. Mr. Doronila has acquired unparalleled specific regional center expertise, concurrently acquiring a diverse array of hands on experience with regional centers' fiscal systems, procedures, policies, asset protection devices, budgetary/ projection models, and regulatory/statutory requirements. Mr. Doronila's goal is to modernize SG/PRC's fiscal systems, practices, projection models, and policies while developing talent within to assure SG/PRC's fiscal services deliver optimal service outcomes for the long-term.



#### Director of Client Services Announcement

We are equally pleased to announce Mrs. Daniela Santana as our Director of Client Services effective September 14, 2020. Mrs. Santana is a homegrown leader developed within SG/PRC. Mrs. Santana has served our San Gabriel/Pomona Regional Center (SC/PRC) community for at least 21 years in the roles of Service Coordinator, Fair Hearings Specialist, and more recently as Behavioral Services and Fair Hearings Manager. Mrs. Santana's educational background includes a Bachelor of Arts in Applied Business Management, Master of Arts in Human Resource and Organizational Development, Master of Arts in Teaching, and she is a Board-Certified Behavior Analyst (BCBA).

Mrs. Santana has deeply anchored Service Coordinator beliefs, demonstrated through her relentless advocacy to assure choice, preference and equity are always delivered as a result of decisions that are made related to funding and securing services that promote self-sufficiency, inclusion, and normalcy for individuals served in all aspects of daily life. Without fail, Mrs. Santana will roll up her sleeves, and step in the front of the line..... ahead of everyone else to help any endeavor that supports our shared mission of service for our community.

#### Current California Wildlife Fires

There are 20 wildfires impacting (7) regional centers, including ACRC, CVRC, FNRC, IRC, RCRC, SDRC, and SG/PRC. In particular, the Bobcat fire is impacting cities within SG/PRC's service region. The Bobcat fire is at 3% percent containment.

An evacuation order was issued on September 13, 2020 for sections of the city of Arcadia. There were (3) individuals served with their families that were required to evacuate, (1) SG/PRC employee that voluntarily evacuated with his family, and (7) SG/PRC employees that live within impacted areas that are on an alert status.

There are no Family Home Agencies vendored through SG/PRC within the impacted areas. However, there is a residential facility (census 50) and at least (5) individuals served supported within independent living arrangements in the impacted area.

SG/PRC representatives have made phone contact with the individuals served and their families and the facility administrator or caregivers to assess current service needs and to assure any unmet needs are met, and to confirm viable relocation plans have been developed. Everyone is safe and well.

#### COVID-19

On July 28, 2020, Governor Newsom announced a 4-tier model for Counties to reopen specific business sectors. Movement between tiers is based on the overall positivity rate and the daily new cases per 100,000 individuals tested. The 4-tier model, includes widespread, substantial, moderate and minimal (please see COVID19.CA.GOV). Los Angeles County is within the "widespread" tier, with a positivity rate less than 8% and greater than (7) positive cases per 100,000 tests.

According to data, archived within the Los Angeles County Public Health Dashboard, the 7-day average testing positivity rate ending September 6, 2020 is 3.4% (see publichealth.lacounty.gov), through 8:00 p.m. on September 13, 2020.

Los Angeles County meets one prong of the two-prong metric (4-tier model), "widespread" for movement to a lower tier. However, the second prong has not been met, because Los Angeles County has daily new COVID-19 cases above (7) per 100,000 tested, currently at (16) .....more than twice the prescribed indicator. At first glance the testing data collected and reported demonstrates we have made significant progress. However, the lag factor remains unaccounted. Testing results over the next (14) days will give us a more accurate measurement of the extent of progress we have made through our collective efforts.

#### SG/PRC Workplace Exposure

There have been zero incidences of potential exposure of COVID-19 within the workplace. There are no incidences of potential exposure to report since my prior report dated July 22, 2020.

#### COVID-19 Risk Management/Mitigation Strategies

We continue to review, assess and adjust our policies, practices, clinical resources, and surge capacity incorporated as our risk mitigation strategy to protect the health and safety of individuals served as follows:

1. We are holding daily SG/PRC leadership meetings to monitor SG/PRC's critical business functions, and to triage COVID-19 related service needs for individuals served, and securing supports for them, their families and Service Providers.
2. We are triaging COVID-19 residential settings hot spots, with quality assurance, nursing supports clinical supports, and leadership oversight that coordinate optimal use of allocated resources.
3. We are partnering with the Local Public Health Department, Department of Health Care Services and the Department of Developmental Services in alignment of resources, technical support, and prevention strategies to manage the spread of COVID-19 in residential settings.
4. We are meeting every Monday through Zoom with our Vendor Community for review of Department of Developmental Services (DDS) Directives, public health policy guidance and updates, Best Practices, and planning for re-entry of service delivery (averaging 230 participants).
5. We are meeting every Tuesday through Zoom with the SG/PRC Community to clarify the meaning of DDS Directives, and to connect families with SG/PRC resources and resources available in our community (averaging 150 participants).
6. We have distributed 150,000 pieces of Personal Protective Equipment.
7. We completing special incident reports and conducting COVID-19 surveillance.
8. We are conducting remote quality assurance visits, facility inspections, and investigations.
9. We are providing daily clinical and nursing consultation and supports for individuals served.
10. We are reviewing and approval reengagement alternative service delivery plans.
11. We are monitoring budget policy and legislation impacting the developmental services system.

#### Re-Engagement of Non-Residential Service Delivery

The Department of Developmental Services (DDS) issued a directive dated August 31, 2020 (see attachment) offering both a framework for non-residential service delivery and a new funding methodology pivoting from the retainer payment model. Telehealth therapies are defined as traditional services under most circumstances. Aply, traditional non-residential services, in person are not impacted by this directive.

This directive requires compliance with a certification process, and specific billing procedures, disallows absence billing, and requires some form of service delivery. DDS representatives are creating a frequently asked questions document specifically for individuals served and their families to inform them of their rights as the decision maker, offering an overview of the types of services that are included, and the process that regional centers and service providers are required to implement before "Alternative Services" are delivered.

The SG/PRC Community Services Team is currently receiving and reviewing Service Provider's Program Design addendums or modifications related to "Alternative Services" and are approving Program Designs that are not vendored as licensed day program settings. SG/PRC's approval of COVID-19 Program Design modifications |Alternative Services| for licensed settings are held in abeyance until Community Care Licensing Division Officials' issues guidance related to census, square footage, and social cohort restrictions.

All non-residential services aside from Telehealth therapies that are modified or changed are defined as "Alternative Services" and fall within the scope of this DDS directive and will be part of a modified rate structure effective November 1, 2020.

#### Regional Center Reporting Requirements Pursuant to Contract

All regional centers are required report to the Department of Developmental Services (DDS) on a monthly basis ongoing, any minor or non-minor dependent resident of California residing out of state, when their services are not funded by the regional center and any minor at risk of out of state placement. Also, within (3) business days regional centers are required to report to DDS any known occurrences of an individual served residing for (5) days or more in an emergency room or psychiatric facility, and any unaccompanied minor residing in a shelter (see attachment, DDS Letter, August 31, 2020).

#### SG/PRC Budget 19/20

Our Purchase of Services (POS) budget shows a year-end balance of \$3,257,957. Our Operations budget (OPS) projects within our FY 19/20 budget allocation year-end. Our (OPS) CPP budget will result in a deficit year-end resulting from a fixed allocation methodology applied against staff salaries and benefits.

#### SG/PRC Budget 20/21

Our (POS) budget encumbrances have begun to accrue beginning August 1, 2020, establishing the base projection model that will frame future expenses. Mr. Doronila, CFO is conducting an analysis of prior year (OPS) expenses comparing growth allocation and projected cost moving forward. Preliminary analysis, projects that anticipated costs non COVID-19 related will remain within our budget allocation.



Home / Learning Support / Health / Health Services & School Nursing

## Special Education Guidance for COVID-19

[Coronavirus \(COVID-19\) Main Web Page](#)

### COVID-19 School Closures and Services to Students with Disabilities

#### New Guidance (Posted 09-Apr-2020)

The United States is currently experiencing a pandemic emergency due to the threat of novel coronavirus (COVID-19). On March 13, 2020, Governor Newsom signed Executive Order N-28-20 requiring the California Department of Education (CDE) to issue guidance on several topics, including ensuring students with disabilities (SWD) receive a free appropriate public education (FAPE) consistent with their individualized education program (IEP) and meeting other procedural requirements under the Individuals with Disabilities Education Act (IDEA) and California law. Initial guidance on services to students with disabilities was provided on March 20, 2020.

The following guidance provides additional information based on questions received by the CDE in recent weeks. We will continue to update the guidance on this web page as necessary in response to any guidance from the U.S. Department of Education or waivers of any laws or regulations pertaining to special education services.

#### 1. Must all Individualized Education Programs (IEPs) be amended to reflect the change to distance learning?

No, not all IEPs will need to be amended. In response to the Governor's Executive Order, schools are physically closed, and local educational agencies (LEAs) are to provide educational services through alternative options such as distance learning. Under this unique circumstance, in the CDE's view it is not necessary for an LEA to convene an IEP team meeting, or propose an IEP amendment without a team meeting, for every student, solely for the purpose of discussing the need to provide services away from school, because that change must necessarily occur due to the COVID-19 pandemic. Similarly, in the CDE's view, it is not necessary for an LEA to obtain the parent's written consent to provide previously agreed-upon services, away from school. The IEP that was in effect at the time of physical school closure remains in effect, and LEAs should, to the greatest extent possible, continue to provide the services called for in those IEPs in alternative ways.

According to the United States Department of Education (USDOE) Office of Special Education Programs' (OSEP) March 21, 2020 guidance, "[T]hese exceptional circumstances may affect how all educational and related services and supports are provided . . . the provision of [free and appropriate public education (FAPE)] may include, as appropriate, special education and related services provided through distance instruction provided virtually, online, or telephonically . . . schools may not be able to provide all services in the same manner that they are typically provided . . . federal disability law allows for flexibility in determining how to meet the individual needs of students with disabilities. The determination of how FAPE is to be provided may need to be different in this time of unprecedented national emergency." To review OSEP's March 21, 2020 guidance titled "Supplemental Fact Sheet Addressing the Risk of COVID-19 in Preschool, Elementary and Secondary Schools While Serving Children with Disabilities", visit the USDOE website at <https://bit.ly/2VdoIn8>.

However, there may be instances when amending the IEP to reflect the change to distance learning might be necessary and/or appropriate. LEAs may convene an IEP team meeting, or propose an IEP amendment without a team meeting, particularly where it is deemed necessary to address unique circumstances related to alternative service delivery. (See 20 USC 1414 (d)(4)(A); 20 USC 1414 (d)(3)(D); 34 C.F.R. § 300.324.) Parents too may request an IEP meeting or propose an IEP amendment, pursuant to Education Code § 56343, subdivision (c). Some LEAs and parents have agreed to amend the IEP by incorporating a distance learning plan outlining the special education and related services being provided to the student during the temporary, emergency situation created by the COVID-19 pandemic.

At this time, LEAs should necessarily be focused on serving each and every student. OSEP's March 21, 2020 guidance clarifies that "ensuring compliance with the Individuals with Disabilities Education Act . . . should not prevent any school from offering educational programs through distance instruction." The CDE recognizes that due to the emergency situation created by the COVID-19 pandemic, it will take time for LEAs to determine their continuum of services during school site closures and provide information to parents and students about the services being offered. As such, communication and collaboration are vital. It is recommended that LEAs maintain regular communication with parents of students with disabilities about their efforts to transition to distance learning, plans to ensure access for all students, and to identify and address any immediate support needs when feasible.

#### 2. Is an LEA precluded from providing services to students with disabilities in-person or in the home for the purpose of supporting the student in accessing the alternative options for learning being offered?

No. In some exceptional situations, LEAs may need to provide certain supports and services to individual students in-person in order to maintain students' mental/physical health and safety for the purpose of supporting the student in accessing the alternative options for learning being offered (e.g. distance learning). With that said, alternative service delivery options should seek to comply with federal, state, and local health officials' guidance related to physical distancing, with the goal of keeping students, teachers and service providers safe and healthy as the primary consideration.

In such cases, service providers may be considered "Essential Critical Infrastructure Workers" under [Executive Order N-33-20](#). To review the list of "Essential Critical Infrastructure Workers", see the California Coronavirus (COVID-19) Response website at <https://covid19.ca.gov/img/EssentialCriticalInfrastructureWorkers.pdf>.

For example, the list of essential workers in the healthcare/public health sector includes:

- Health care providers and caregivers (e.g. physicians, psychologists, mid-level practitioners, nurses and assistants, physical and occupational therapists and assistants, social workers, speech pathologists, and diagnostic and therapeutic technicians and technologists).
- Behavioral health workers (including mental and substance use disorder) responsible for coordination, outreach, engagement, and treatment to individuals in need of mental health and/or substance use disorder services.
- Workers who provide support to vulnerable populations to ensure their health and well-being including family care providers.

In addition, other community-based government operations and essential functions includes:

- ◆ Workers supporting public and private childcare establishments, pre-K establishments, K-12 schools, colleges, and universities for purposes of distance learning, provision of school meals, or care and supervision of minors to support essential workforce across all sectors.

Therefore, if an individualized determination is made that a student needs services or supports in-person to maintain their mental/physical health and safety for the purpose of supporting the student in accessing the alternative options for learning being offered (e.g. distance learning), an LEA is not necessarily precluded from providing that service by Governor Newsom's stay at home order.

### 3. I'm a parent of a student with a disability and I have questions about my child's IEP. Where can I go for information and support?

Questions about your student's IEP and educational program in light of school site closures and the COVID-19 pandemic should be discussed with your school or district. Schools across the state are responding to the COVID-19 pandemic in different ways, specific to the school's regional context. The CDE encourages parents to reach out to their school or district office to have a conversation about the impact of the pandemic on their student's education and collaborative ways to support the student during this time.

Parents of students with disabilities may also reach out to California's parent organizations offering support and resources to families of students with disabilities. Information on parent organizations can be accessed on the CDE website at <https://www.cde.ca.gov/sp/se/ga/capmtorg.asp>.

In addition, the Understood.org website is an example of numerous state and national organizations offering practical advice and strategies for parents and caregivers during this crisis. A link to COVID-19 resources for parents and families developed by Understood can be accessed on the Understood.org website at <https://www.understood.org/en/school-learning/coronavirus-latest-updates>.

### 4. What should an LEA do if it has closed school sites due to COVID-19 and is unable to meet the obligation to have an IEP or an Individual Family Service Plan (IFSP) in effect for a child transitioning from Part C to Part B no later than the child's third birthday?

34 C.F.R. §§ 300.101(b) and 300.124(b) require that an IEP or IFSP is developed and is being implemented by the third birthday of a child participating in Part C programs and who will participate in Part B preschool programs. The U.S. Department of Education has not waived or exempted this requirement. Either an IEP or IFSP must be developed and implemented by the child's third birthday. To meet this obligation, teams may conduct meetings virtually via telephone, videoconference, or other means.

### 5. If IEP teams meet virtually while school sites are closed due to COVID-19, how should parent consent be obtained? Is verbal consent sufficient?

34 C.F.R. § 300.9(b) states that "consent" means in part ". . . the parent understands and agrees in writing. . .". Thus, verbal consent alone is not sufficient. However, the IDEA does not specify how written consent must be obtained. Therefore, LEAs that wish to utilize electronic or digital signatures for consent may do so if they choose. Options for electronic signatures or digital signatures could include but are not limited to use of applications such as HelloSign, DocuSign, Adobe Sign, as well as scanned copies or photographs of signed signature pages. For record keeping purposes, it is recommended that LEAs maintain documentation as proof of consent, including printed or mailed copies of signed documents. For more information on general electronic signature requirements for public agencies in California, please refer to Government Code § 16.5, and Title 2 of the California Code of Regulations, §§ 22000 et seq.

## Earlier Guidance

### March 20, 2020

The United States is currently experiencing a pandemic emergency due to the threat of novel coronavirus (COVID-19). On March 13, 2020, Governor Newsom signed Executive Order N-26-20 ensuring State funding for Local Educational Agencies (LEA) in the event of physical closure due to the threat of COVID-19. The Executive Order requires the California Department of Education (CDE) to issue guidance on several topics, including ensuring students with disabilities (SWD) receive a free appropriate public education (FAPE) consistent with their individualized education program (IEP) and meeting other procedural requirements under the Individuals with Disabilities Education Act (IDEA) and California law.

At this time, the federal government has not waived the federal requirements under the Individuals with Disabilities Education Act (IDEA). To review guidance from the USDOE titled "Questions and Answers on Providing Services to Children with Disabilities During the Coronavirus Disease 2019 Outbreak," visit the USDOE website at <https://www2.ed.gov/policy/speced/guid/idea/memosdcirts/ga-covid-19-03-12-2020.pdf>. The CDE and the California

State Board of Education (SBE) are working with the United States Department of Education (USDOE) to determine what flexibilities or waivers may be issued in light of the extraordinary circumstances. Until and unless USDOE ultimately provides flexibilities under federal law, LEAs should do their best in adhering to IDEA requirements, including federally mandated timelines, to the maximum extent possible. LEAs are encouraged to consider ways to use distance technology to meet these obligations. However, the CDE acknowledges the complex, unprecedented challenges LEAs are experiencing from the threat of COVID-19. As such, the CDE is committed to a reasonable approach to compliance monitoring that accounts for the exceptional circumstances facing the state.

The CDE appreciates the difficult decisions that LEAs and families are faced with as we grapple with this unprecedented crisis. The CDE has formed a workgroup of special education practitioners and other experts to help brainstorm best practices that we plan to share in the coming weeks. In addition, resources for addressing the needs of students with disabilities are provided in this guidance and in the CDE's guidance on distance learning at <https://www.cde.ca.gov/ls/he/hn/guidance.asp>. We will update this guidance as necessary in response to any guidance from the U.S. Department of Education or waivers of any laws or regulations pertaining to special education services.

The following answers to frequently asked questions received by the CDE provides guidance on topics relevant to serving students with disabilities.

**1. If an LEA offers distance learning for instructional delivery in lieu of regular classroom instruction during a school site closure for students, what is the obligation to implement the IEP for students with disabilities?**

As a result of Governor Newsom's Executive Order N-26-20, schools will receive funding to continue delivering educational opportunities to students to the extent feasible through, among other options, distance learning and/or independent study. When an LEA continues to provide educational opportunities to the general student population during physical school site closures, the LEA must ensure that students with disabilities have equitable access to comparable opportunities, appropriately tailored to the individualized need of a student to ensure meaningful access, as determined through the IEP process to the extent feasible.

If the LEA can continue providing special education and related services as outlined in the IEP, or an agreed upon amendment to the existing IEP, through a distance learning model, they should do so. The LEA can also consider alternative service delivery options such as in-home service delivery, meeting with individual students at school sites, or other appropriate locations to deliver services. Further, LEAs are encouraged to work collaboratively with Nonpublic Schools and Agencies (NPS/As) to ensure continuity of services, including moving to virtual platforms for service delivery to the extent feasible and appropriate.

These alternative delivery options should seek to comply with federal, state, and local health official's guidance related to social distancing, with the goal of keeping students, teachers and service providers safe and healthy. Teachers and specialists should work collaboratively to ensure instruction is accessible for the student based on the student's individualized needs. Given the unprecedented situation created by the threat of COVID-19, exceptional circumstances may affect how a particular service is provided under a student's IEP. In such a situation, the IEP team will need to make individualized decisions regarding whether compensatory services are required when the regular provision of services resumes.

Further guidance on distance learning, including considerations for students with disabilities, can be accessed on the CDE website at <https://www.cde.ca.gov/ls/he/hn/guidance.asp>.

**2. What is considered equitable access for students with disabilities?**

When an LEA provides services to students during a school site closure, the LEA must provide equitable access to those services for students with disabilities, with services appropriately tailored to the individualized needs of students, to the greatest extent possible. When LEAs are providing instruction through a distance learning model to replace what would have been provided in the classroom, LEAs must create access to the instruction for students with disabilities, including planning for appropriate modifications or accommodations based on the individualized needs of each student and the differences created by the change in modality (e.g. virtual vs. classroom-based). Educational and support services provided should be commensurate with those identified in the IEP for each student to ensure educational benefit.

For example, LEAs may consider the use of accessible distance technology, instructional phone calls, and other curriculum-based activities that have been scaffolded based on student need. More information on accessibility and distance learning can be accessed on the CDE website at <https://www.cde.ca.gov/ls/he/hn/appendix2.asp>.

In some cases, it may be appropriate for LEAs to consider providing classroom-based instruction to small groups of students with disabilities that have extensive support needs, despite the fact that the school site has closed, consistent with federal, state, and local health directives related to COVID-19. Alternative service delivery options should seek to comply with federal, state, and local health official's guidance related to social distancing, with the goal of keeping students, teachers and service providers safe and healthy. There is no single service delivery method that will meet the needs of every student. Therefore, LEAs should consider employing a variety of service delivery options. The CDE has convened a work group of special educators to develop more specific guidance for operationalizing such strategies, including examples from California LEAs.

**3. If distance learning is provided in some capacity but does not mirror the offer of FAPE in the IEP, will compensatory services be required once an LEA resumes the regular school session?**

Once the regular school session resumes, LEAs should plan to make individualized determinations, in collaboration with the IEP team, regarding whether or not compensatory education and services may be needed for a student. Educational need can be measured by assessing whether or not the student continued making progress in the general education curriculum, or alternative course of study specified in their IEP, or toward meeting

their individualized IEP goals and/or if any regression occurred during the period of school site closure.

**4. Is the CDE encouraging continued utilization of and payment to Nonpublic Schools and Agencies (NPS/As)?**

Yes. California NPS/As provide critical programs and related services to students with disabilities. LEAs should work collaboratively with NPS/As to ensure continuity of services, including moving to virtual platforms for service delivery to the extent feasible and appropriate. In an effort to ensure that the full continuum of placements and service delivery options remains available to students and LEAs subsequent to these unprecedented school site closures, CDE encourages LEAs to continue to use the services of NPS/As during school site closures, including distance learning options made available by NPS/As, so that NPS/As may continue to receive payment in accordance with pupils IEPs and the Master Contracts/Individual Service Agreements between LEAs and NPS/As.

**5. When school sites are closed and no services or instruction are being provided for a period of time, can LEAs consider providing some special education services to some students? How should LEAs determine what services can or should be provided?**

Yes. To be clear, CDE is not recommending this as an option. Consistent with Executive Order N-26-20, LEAs are continuing to receive ADA funding during school site closures so they will continue to provide services to all students, including students with disabilities. Should services be discontinued for a period of time, LEAs and IEP teams would be required to make an individualized determination as to whether compensatory services are needed once services resume.

At this uncertain time, it is imperative to keep the safety of students as the primary consideration for every decision made. As LEAs strive for equitable supports and services for students, in some exceptional situations, LEAs may need to provide certain supports and services to individual students with extensive support needs in order to maintain their mental/physical health and safety. The LEA may provide such services, even if the services are not available to all students with disabilities during a school site closure. As such, LEAs should make individualized determinations about the need to provide services to ensure the mental/physical health and safety of a student with a disability, even during a school site closure, if those services are able to be provided consistent with federal, state, and local health directives.

**6. How will state and federal grants be impacted by school site closures (e.g. Alternative Dispute Resolution, Workability, Supporting Inclusive Practices, etc.)?**

Federal and state grants already funded should continue with their program deliverables. In cases where grant deliverables cannot be provided, grantees should work with their CDE program and fiscal contact to determine next steps. If grants have scheduled in-person conferences, institutes, training, or workshops they should be rescheduled or delivered virtually. Any grant amendments or change in due date for expenditure reports will need to be done on a case by case basis due to the specific requirements of funding sources.

**7. What is the impact of school site closures on special education monitoring timelines and processes?**

At this time, the federal government has not waived the federal requirements under the IDEA. The CDE and SBE are working with the USDOE to determine what flexibilities or waivers may be issued in light of the extraordinary circumstances. Until and unless USDOE ultimately provides flexibilities under federal law, LEAs should do their best in adhering to IDEA requirements, including federally mandated timelines, to the maximum extent possible. LEAs are encouraged to consider ways to use distance technology to meet these obligations. However, the CDE acknowledges the complex, unprecedented challenges LEAs are experiencing from the threat of COVID-19. As such, the CDE is committed to a reasonable approach to compliance monitoring that accounts for the exceptional circumstances facing the state.

In general, for purposes of determining LEA compliance with special education timelines, the CDE will consider the days of school site closure as days between the pupil's regular school session, similar to school breaks in excess of five days planned in the instructional calendar (e.g. Thanksgiving break). For annual or triennial IEP reviews that fall on a day when the LEA is closed due to COVID-19, the CDE will take the exceptional circumstances causing the delay into consideration for purposes of LEA compliance monitoring.

In addition, due dates issued by the CDE for Special Education Division monitoring activities, including Targeted Monitoring, Intensive Monitoring, and Significant Disproportionality have been extended for a minimum of two months from the date of this notice. The CDE will continue to evaluate the need for further extensions and will work with LEAs to be reasonable and accommodating given these exceptional circumstances. At this time, the USDOE has not extended the allowable Comprehensive Coordinated Early Intervening Services budget period of 27 months. If an LEA is having difficulty meeting timelines or has questions related to timelines, please contact your regional Intensive Monitoring Consultant. A list of regional consultants is available at <https://www.cde.ca.gov/sp/se/qa/rtm/taconent.asp>.

**8. What is the impact of school site closures on state complaints and due process hearings under the IDEA?**

Regarding the state complaint process, in light of widespread school site closures and the inability of LEAs to meaningfully respond to complaint investigations, the CDE will be extending current complaint investigation timelines for good cause by the length of any school site closure during the stated emergency. It is anticipated that once LEAs reopen and are available to participate in the investigation process, the 60-day timeline will recommence and both the complainant and LEA will be notified. The CDE will continue to receive complaints that allege violations of the IDEA and complainants will be notified of any delay that may impact the investigation.

Currently, California's system for due process hearings and mediation through the Office of Administrative Hearings (OAH) remains operational, although some processes and/or timelines may be impacted by widespread school site closures and in order to maintain compliance with federal, state, and local health directives related to COVID-19. Updated information on the impact of COVID-19 on special education due process hearings

can be accessed on the OAH's website at <https://www.dgs.ca.gov/OAH/Case-Types/Special-Education/Resources/SE-Coronavirus-Update#@ViewBag.JumpTo>.

#### 9. What is the impact on services to students with disabilities served by Part C of the IDEA?

For information related to the impact of the COVID-19 response on services to students with disabilities, ages 0 to 3, served under Part C of the IDEA, please visit the California Department of Developmental Services website at <https://www.dds.ca.gov/corona-virus-information-and-resources/>.

In addition, IDEA Part C and COVID-19 are addressed in guidance from the USDOE's Office of Special Education Programs, which can be accessed on the USDOE website at <https://www2.ed.gov/policy/speced/guid/idea/memosdcitra/qa-covid-19-03-12-2020.pdf>.

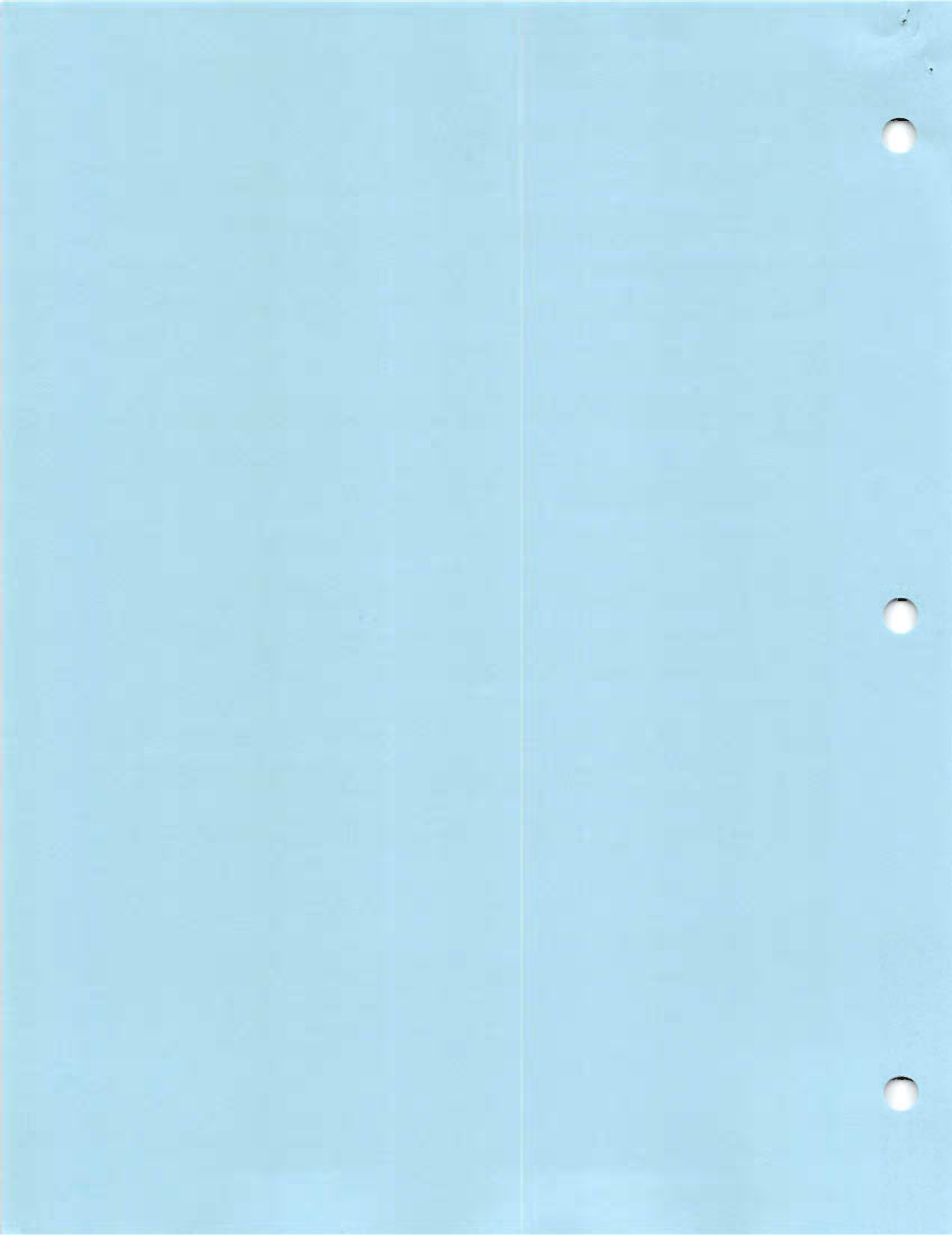
#### 10. Where can I find more guidance and resources related to serving students with disabilities, distance learning, and online accessibility?

- To review previous guidance related to COVID-19 and services to students with disabilities, issued by the CDE on March 13, 2020, visit the CDE website at <https://www.cde.ca.gov/sp/se/ir/cm031320.asp>.
- For updated information and resources from the CDE related to the COVID-19 response, visit the CDE website at <https://www.cde.ca.gov/ls/ha/hn/coronavirus.asp>.
- To review federal guidance from the USDOE titled "Questions and Answers on Providing Services to Children with Disabilities During the Coronavirus Disease 2019 Outbreak," visit the USDOE website at <https://www2.ed.gov/policy/speced/guid/idea/memosdcitra/qa-covid-19-03-12-2020.pdf>.
- To review federal guidance from the USDOE Office of Civil Rights on how to protect students' civil rights, visit the USDOE website at [https://www2.ed.gov/about/offices/list/ocr/docs/ocr-coronavirus-fact-sheet.pdf?utm\\_content=&utm\\_medium=email&utm\\_name=&utm\\_source=govdelivery&utm\\_term](https://www2.ed.gov/about/offices/list/ocr/docs/ocr-coronavirus-fact-sheet.pdf?utm_content=&utm_medium=email&utm_name=&utm_source=govdelivery&utm_term).
- Guidance issued by the CDE on distance learning, including considerations for students with disabilities, can be accessed on the CDE website at <https://www.cde.ca.gov/ls/ha/hn/guidance.asp>.
- For research on how online learning can be made more accessible, engaging, and effective for K-12 learners with disabilities, visit the Center on Online Learning and Students with Disabilities webpage at <http://www.centerononlinelearning.res.ky.edu/>.
- Common Sense Media has curated a list of the Best Special Education Applications and Websites based on recommendations by educators who work with students with disabilities, which can be accessed on the Common Sense Media website at <https://www.commonsense.org/education/top-picks/best-special-education-apps-and-websites>.
- The Council for Exceptional Children (CEC) has developed COVID-19 information for Special Educators, including a forum for members on how to adapt IEP services during school closures, which can be accessed on the CEC website at [https://www.cec.sped.org/~media/Files/News/A%20Message%20on%20COVID19\\_%20Supporting%20Students%20with%20Exceptionalities.pdf](https://www.cec.sped.org/~media/Files/News/A%20Message%20on%20COVID19_%20Supporting%20Students%20with%20Exceptionalities.pdf).
- The Council of Administrators of Special Education (CASE) has developed a resource page for Special Education Administrators, which can be accessed at <https://docs.google.com/document/d/1zEH-ggchSI7sRQy5jnPEC0FaP4Vw5Wm0uUjoccuNFmrI/preview>.
- The State Educational Technology Directors Association (SETDA) offers strategies and resources for ensuring that online learning supports students with disabilities, which can be accessed on the SETDA website at <https://www.setda.org/main-coalitions/elearning/accessibility/>.

Questions: California Department of Education | 916-319-0800

Last Reviewed: Thursday, April 9, 2020





**DEPARTMENT OF DEVELOPMENTAL SERVICES**

1600 NINTH STREET, Room 240, MS 2-13  
SACRAMENTO, CA 95814  
TTY (916) 654-2054 (For the Hearing Impaired)  
(916) 654-1897



August 31, 2020

TO: REGIONAL CENTER EXECUTIVE DIRECTORS

SUBJECT: DEPARTMENT DIRECTIVE 01-083120: POLICIES AND PROCEDURES  
FOR UTILIZING ALTERNATIVE NONRESIDENTIAL SERVICES DURING  
THE COVID-19 STATE OF EMERGENCY

***This supersedes the Department of Developmental Services' (Department) July 17, 2020, Directive titled, "Department Directive 01-071720: Providing and Claiming for Nonresidential Services During the State of Emergency."***

This Directive outlines the policies and procedures for reimbursement of claims for providing nonresidential services using alternative approaches during the COVID-19 State of Emergency.

Governor Gavin Newsom's Executive Order N-75-20 issued on August 24, 2020, suspends Title 17, California Code of Regulations section 54326(a)(11), as applied to payments that would otherwise be made in connection with the COVID-19 State of Emergency. The Executive Order directs the Department to develop and implement policies and procedures to allow provision of nonresidential services to individuals with developmental disabilities.

Beginning September 1, 2020, regional centers and providers shall follow the policies and procedures outlined in this Directive when utilizing Alternative Nonresidential Services (Alternative Services). The purpose of these policies and procedures is to permit Alternative Services that meet the individual needs of consumers, sustain the state's developmental services provider network, and continue receipt of federal reimbursement for services provided to consumers during the COVID-19 State of Emergency.

Alternative Services do not apply to the following:

1. Services to a consumer that are able to continue as they did before the COVID-19 State of Emergency that meet the needs of the consumer; or
2. Services to a consumer that are able to continue as they did before the COVID-19 State of Emergency via remote delivery or in alternate locations that meet the needs of the consumer. Refer to Department-issued Directives regarding the provision of services via remote delivery or in alternate locations.

**"Building Partnerships, Supporting Choices"**

### **I. Alternative Nonresidential Services Model (Alternative Services)**

Providers of nonresidential services, as defined in Title 17 section 54302(a)(49), may utilize Alternative Services, if needed, to meet a consumer's service needs. When providing services to consumers during the COVID-19 State of Emergency, providers shall be creative, resourceful and make modifications as needed to how existing services are delivered. Any Alternative Services used shall be responsive to each consumer's current needs and be mindful of the importance of safety during the COVID-19 State of Emergency, including compliance with applicable state and local health orders and licensing requirements. Details on implementation of Alternative Services are in Section V of this Directive.

Alternative Services shall include the following:

- a. Supports related to minimizing the exposure to or impact of COVID-19 on the consumer;
- b. Completion of an individual assessment of skills, preferences, and service needs for the consumer;
- c. Completion of an individualized service plan to provide needed services for the consumer;
- d. Alternative services delivered to the consumer via telephone, video or other electronic communication;
- e. Delivery of supplies or other items to the consumer's home needed to provide services or supports;
- f. Use of self-guided training and educational materials supplied to the consumer by the provider intended to support the consumer's service;
- g. Skills training to individuals within the consumer's household who are specifically designated to support the consumer;
- h. Alternative services provided in-person at the consumer's home, in a community setting, or at the provider's facility, modified to comply with the most protective state or local COVID-19 safety guidelines in effect at the time the service is to be delivered;
  - o Provider staff must be trained on COVID-19 safety precautions prior to the delivery of in-person services.
- i. Supports for transition to the Self-Determination Program; and
- j. Other modifications to nonresidential services that are approved by the consumer that further or achieve his or her service needs.

Provider staff should receive training necessary for Alternative Services. This training may include, but is not limited to, the following:

- a. COVID-19 safety precautions for both staff and the consumer;
- b. Delivering services using the person-centered planning and approach criteria set forth in Title 42, Code of Federal Regulations section 441.540;

- c. Informed decision-making so that consumers can understand what choices they have in receiving services and understand the benefits, risks and responsibilities associated with the service choices available to them;
- d. Self-Determination Program requirements;
- e. Developing written materials using plain language that can be readily understood by consumers;
- f. Using alternative communication technology, tools or methods to deliver services;
- g. Delivering services in a manner accommodating the cultural and linguistic needs of the consumer; or
- h. Use of technology utilized to deliver services.

## **II. Certification**

Alternative Services shall be permitted where the provider certifies in writing to the regional center prior to seeking reimbursement, that:

- a. The provider has engaged consumers about their need for and interest in Alternative Services as an option;
- b. The provider has advised consumers of the specific steps they can take if they disagree with the Alternative Services offered by the provider;
- c. The provider has or will prepare an individual service plan that specifies the Alternative Services identified through the consumer engagement;
- d. The provider has trained staff on COVID-19 safety precautions prior to the delivery of in-person services;
- e. The provider will continue to comply with the most protective state or local COVID-19 safety guidelines in effect at the time in-person services are to be delivered;
- f. The provider will maintain a specified phone number and email address and be responsive during the time services are being provided;
- g. The provider will maintain documentation of services provided as required by Title 17 section 54326(a)(3);
- h. The provider will maintain staff to provide services; and
- i. The provider will identify one or more of the Alternative Services to be offered.

For the purpose of certification, providers will use the Enclosure. Certification must be provided to the regional center prior to submitting the first claims for each vendorization that includes provision of Alternative Services. The provider shall update the certification only if there are changes to the Alternative Services offered prior to submitting claims.

## **III. Reporting**

On or before the fifth day of each month the provider shall submit to the regional center a written report for each vendorization of the Alternative Services provided for the prior month.

This requirement applies to any provider that provides Alternative Services to one or more consumers. The initial report, covering the period of September 1, 2020 through October 31, 2020, shall be submitted by November 5, 2020. Each report shall include, but not be limited to:

- a. The total number of consumers with service authorizations.
- b. The number of consumers with service authorizations for traditional services.
  1. The number of consumers who received traditional services.
  2. The number of consumers who did not receive traditional services.
- c. The number of consumers with service authorizations for Alternative Services.
  1. The number of consumers who received Alternative Services.
  2. The number of consumers who did not receive Alternative Services.
  3. The number of consumers who received each type of Alternative Service.
  4. For each consumer, the number of days an Alternative Service was received.
- d. The provider's verification of compliance with the most protective state or local COVID-19 safety guidelines in effect at the time in-person services were delivered.

For the purpose of monthly reporting, providers shall use a reporting format issued by the Department. Further guidance is forthcoming.

#### **IV. Service Rate**

For September and October 2020:

- a. Providers shall use the current authorized rate and each consumer's average monthly attendance over the prior 12 months ending February 2020 for each consumer who received Alternative Services and the provider complied with Section V.
- b. Providers shall not submit reimbursement claims for consumers who did not receive services.

For November 2020 and subsequent months:

- a. The monthly unit rate will be uniform for all consumers served by the provider within each vendorization.
- b. Providers shall use the monthly unit rate (described below) for each consumer who received Alternative Services.
- c. Providers shall not submit reimbursement claims for consumers who did not receive services.
- d. Further guidance is forthcoming for providers not reimbursed by individual consumer service authorizations (i.e. service contracts).

For vendorizations prior to March 2020, the monthly unit rate calculated by the Department shall use the following methodology:

- a. Taking the total amount billed over the 12 months ending February 2020, divided by the total number of consumer months of service during the 12 month period.
- b. The total number of consumer months of service is the sum of the number of consumers receiving services each month during the 12 months ending February 2020.
- c. Rate calculations shall only include months in which reimbursement to the provider for a consumer is greater than zero.
- d. The calculation shall include adjustments for rate changes that occurred during or subsequent to the 12 months ending February 2020.

For vendorizations March 2020 and thereafter, the monthly unit rate calculated by the regional center shall use the following methodology:

- a. First, establish the unit rate (e.g. daily, hourly, etc.) based on the type of service to be provided utilizing the rate setting methodologies in Welfare and Institutions Code and Title 17.
- b. Then establish the monthly rate for Alternative Services by utilizing the calculated monthly rate for providers of the same service with both similar rates as established in step one and anticipated similar utilization levels.

Prior to November 1, 2020, providers will be notified of the monthly rate for Alternative Services, along with the data and methodology used for the calculation. Providers should contact their vendoring regional center for any rate questions.

#### **V. Alternative Services Implementation**

To facilitate an inclusive and individualized implementation of Alternative Services, providers shall offer Alternative Services and:

- a. In the month of September 2020, the provider shall engage the consumer about his or her need for and interest in Alternative Services as an option.
  1. With the consumer's or authorized representative's permission, the provider is encouraged to work with other providers that also have service authorizations for the same consumer to best support the consumer's needs.
  2. The provider shall document the consumer engagement including at minimum, the date, the participants, and a description of the consumer's input.
  3. The provider shall notify the regional center of each consumer engaged and interested in receiving Alternative Services.

Regional Center Executive Directors

August 31, 2020

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- b. In the month of October 2020, complete or review and amend as needed, an individual service plan specifying the type and amount of Alternative Services to be provided for each consumer.
  1. The individual service plan may involve services provided in collaboration with other service providers, including residential service providers, to enhance the consumer's participation.
  2. The provider shall give the consumer a copy of the individual service plan.

Within 30 days of notification of a consumer's interest in Alternative Services, the regional center shall send a follow-up letter to the consumer, in their preferred language, confirming that at their request, Alternative Services will be provided by the provider. The letter shall include contact information for the consumer's service coordinator and their supervisor.

Support will be provided to consumers, families, regional centers, and service providers throughout this transition using a variety of communication methods, with written materials in plain language and other languages on information regarding Alternative Services. Additional information is forthcoming.

#### VI. Next Steps

The Department will continue working with stakeholders on next steps, including but not limited to:

- Monthly reporting requirements
- Identifying additional accountability and outcome measures
- Developing, posting and updating Frequently Asked Questions (FAQs) on its website
- Rolling out the Family Member and Self-Advocate Engagement Guide
- Technical Assistance and Training
- Ongoing evaluation of Alternative Services

Self-advocates, family members or providers should contact their local regional center with any questions. Questions from regional centers only should be directed to [DDSC19Directives@dds.ca.gov](mailto:DDSC19Directives@dds.ca.gov).

Sincerely,

*Original Signed by:*

NANCY BARGMANN  
Director

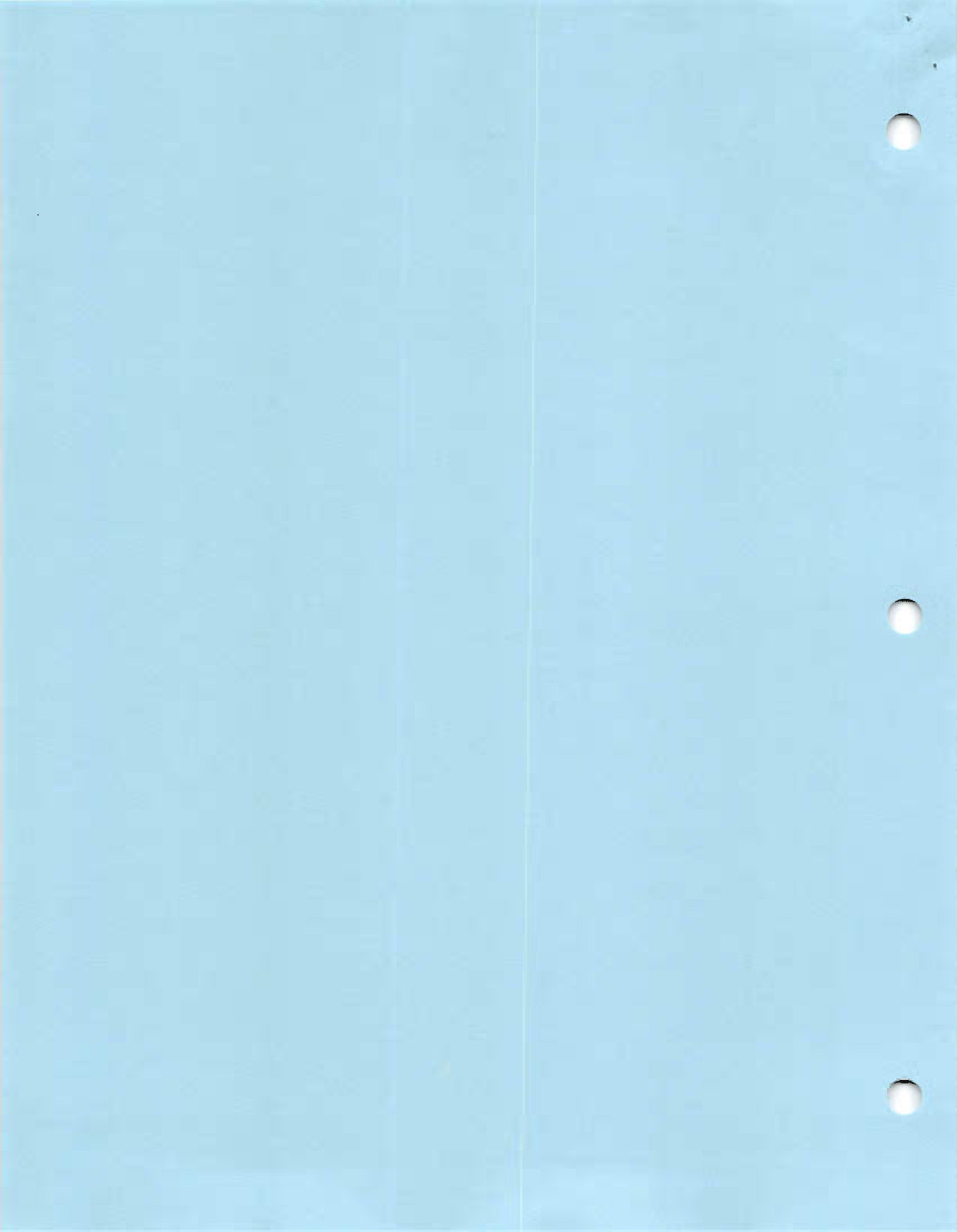
Enclosure

cc: See next page.

Regional Center Executive Directors  
October 31, 2020  
Page seven

cc: Regional Center Board Presidents  
Regional Center Administrators  
Regional Center Directors of Consumer Services  
Regional Center Community Services Directors  
Association of Regional Center Agencies





**DEPARTMENT OF DEVELOPMENTAL SERVICES**

1600 NINTH STREET, Room 320, MS 3-9  
SACRAMENTO, CA 95814  
TTY (916) 654-2054 (For the Hearing Impaired)  
(916) 654-1958



August 31, 2020

TO: REGIONAL CENTER EXECUTIVE DIRECTORS

SUBJECT: REPORTING ON SPECIFIED CONSUMERS

As stated in the 2020-2021 Regional Center Contract, Article VII, Section 10, regional centers must report to the Department of Developmental Services (Department) the following:

- a. On an ongoing basis and at least monthly, information on:
  1. If known, any minor or non-minor dependent who remains a resident of California and is residing out-of-state, whose services are not funded by regional center; and
  2. If known, any minor at risk of out-of-state placement, whether the placement would be funded by the regional center or another agency.
- b. Within three business days of any known occurrence, information on any minor or adult residing for five days or more in an emergency room or psychiatric facility, or any minor not accompanied by their parent or legal guardian residing in a shelter.

Information must be reported to the Department in a mutually agreed-upon format, to include consumer name, UCI, age, legal status, and a summary of the current circumstances and resources that have been explored. A mutually agreed-upon reporting format is under development. You may use the enclosed sample or create your own format that includes the information identified above.

Pursuant to Article VII, Section 10(d), the regional center must provide to the Department, by August 31, 2020, the name and contact information for any employee who will serve as a point-of-contact for this information. Please submit the name and contact information and ongoing reports to:

[SafetyNet@dds.ca.gov](mailto:SafetyNet@dds.ca.gov)

**“Building Partnerships, Supporting Choices”**

REGIONAL CENTER EXECUTIVE DIRECTORS

August 31, 2020

Page two

If you have questions regarding this correspondence, please contact Angela Munoz, Safety Net Manager, at (916) 698-9736 or the email above.

Sincerely,

*Original signed by:*

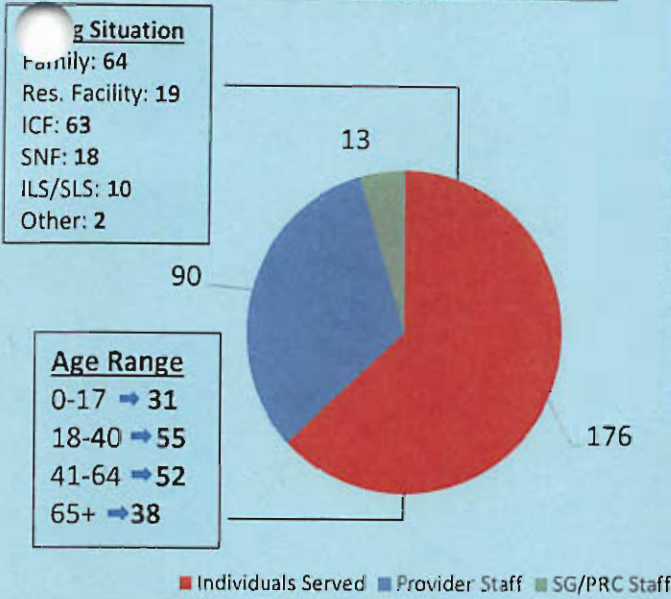
LEEANN CHRISTIAN  
Deputy Director  
Community Services Division

Enclosure

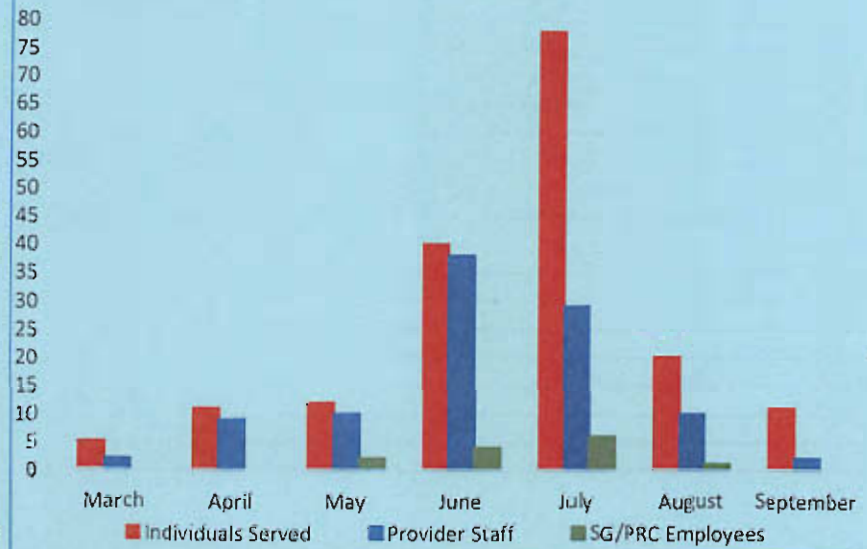
cc: Regional Center Directors of Consumer Services  
Regional Center Community Services Directors  
Amy Westling, Association of Regional Center Agencies  
Brian Winfield, Department of Developmental Services  
Ernie Cruz, Department of Developmental Services  
Angela Munoz, Department of Developmental Services

# San Gabriel Pomona Regional Center COVID-19 Report Week of 9/14/20

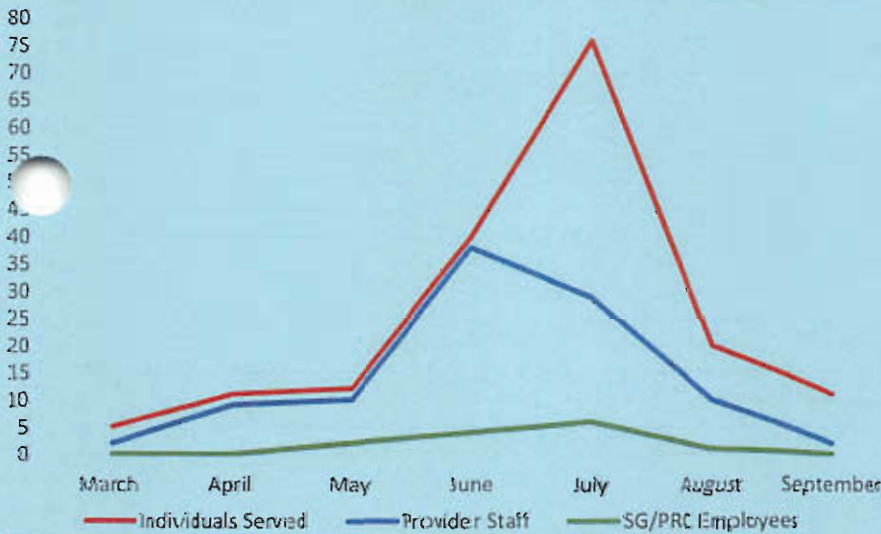
## SG/PRC TOTAL COVID-19 CASES 2020



## San Gabriel Pomona Regional Center Positive COVID-19 Cases 2020



## San Gabriel Pomona Regional Center Positive COVID-19 Cases 2020



## COVID-19 Deaths of Individuals Served

March	4
April	1
May	3
June	2
July	4
August	1
September	1
<b>TOTAL</b>	<b>16</b>

## Los Angeles County Public Health Data

New Cases (Weekend Total)	1,993
7 Day Average	11,245 / 3.4% Positivity Rate
Total Cases	253,985
Current Hospitalizations	793
Total Deaths	6,208
<b>SG/PRC SERVICE AREA HOTSPOTS / TOTAL CASES</b>	
Pomona	5,232
El Monte	4,191
Baldwin Park	2,803
West Covina	2,738

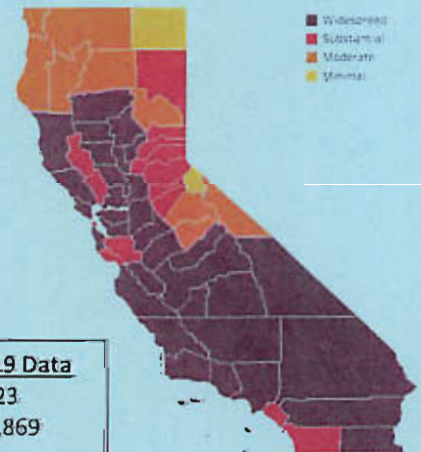
## Statewide Metrics

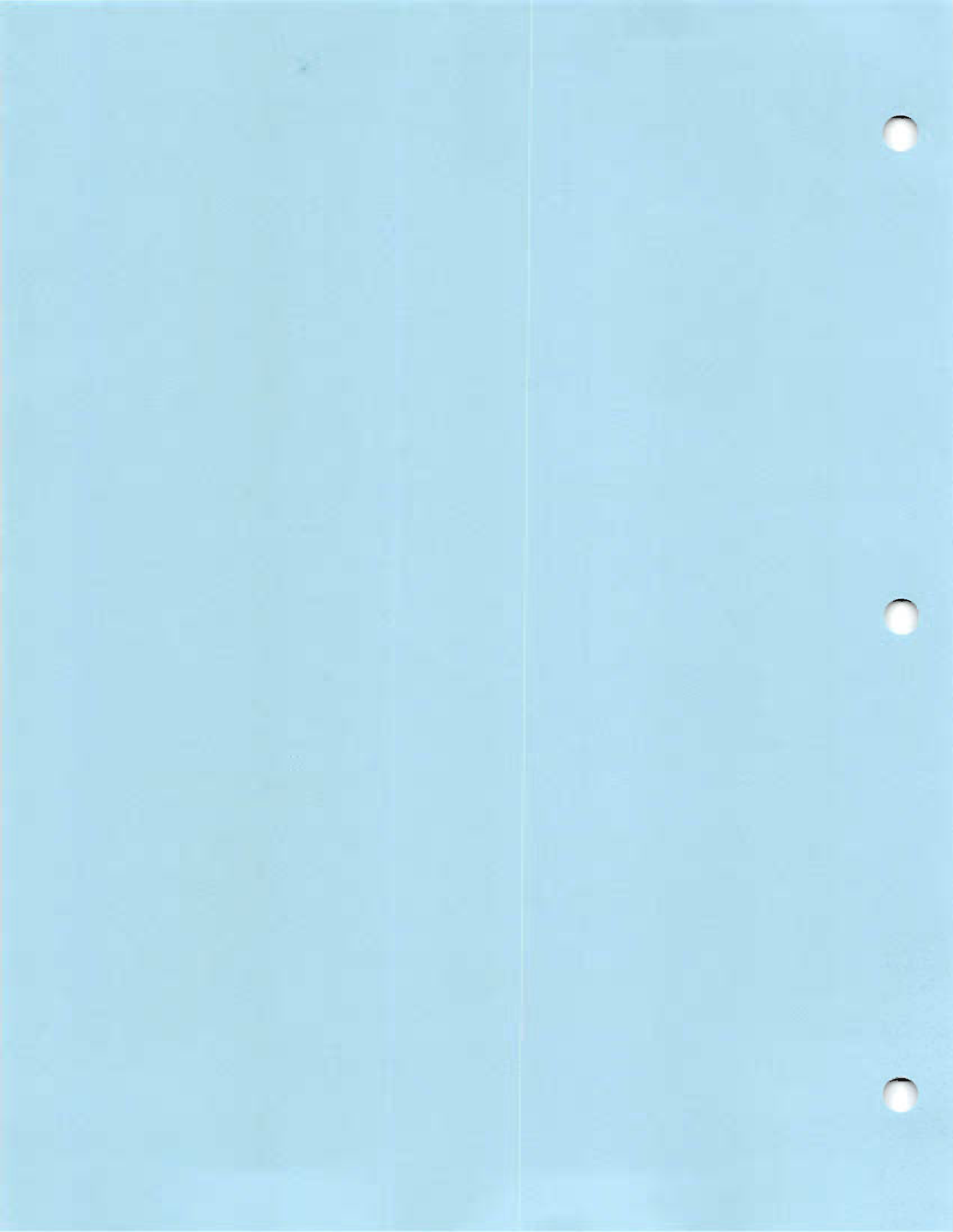
**9.1**  
New COVID-19 Positive cases per day per 100K

**5.3%**  
Positivity Rate

## California COVID-19 Data

Total Cases: 754,923  
Hospitalizations: 2,869  
Deaths: 14,339





## **COVID-19 GLOBAL SURVEY: Exploring the Impact Of COVID-19 On Individuals with IDD & Their Caregivers**

**Research Leader:** Christine Linehan, Ph.D. Director of the UCD Centre for Disability Studies, Dublin Ireland

**16 Countries Participating:** Australia, Brazil, China, Czech Republic, France, Greece, India, Ireland, Japan, Netherlands, Norway, Portugal, Spain, United Kingdom, United States, & Zambia.

**Participants:** Caregivers of individuals with IDD (family members 18+ or paid staff)

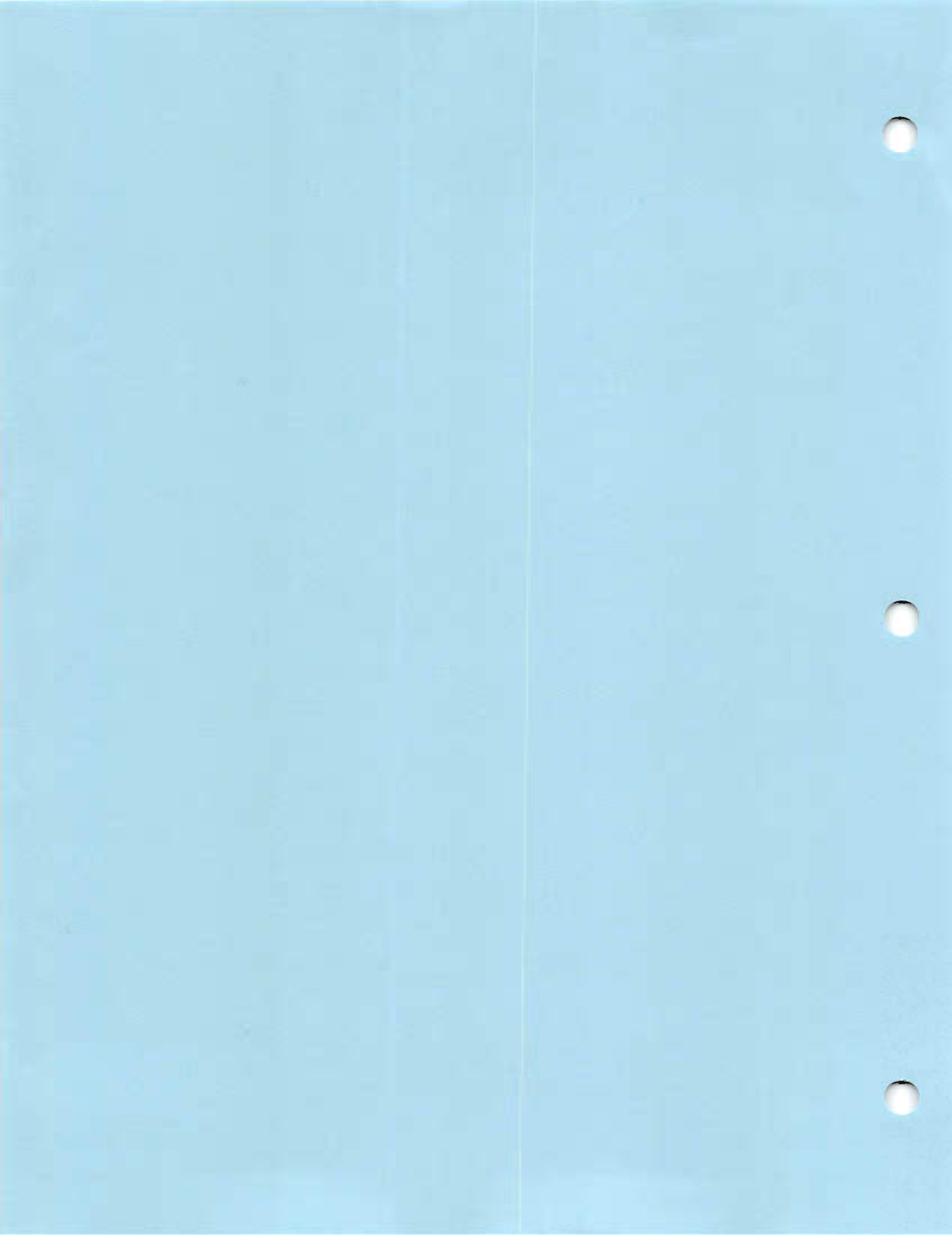
**Anonymous Survey Link:** <https://tinyurl.com/COVID19IDD> (25 Minutes to take)

**Objective:** The objective of the anonymous online survey is to gather information in terms of demographics, living arrangements, access to services, the impact of social distancing from family members and paid staff to explore the impact of COVID-19 on people with developmental disabilities

**Focus:** The survey will include seven sections for participant completion:

- characteristics of respondents (e.g. gender, age, status of family member or staff);
- characteristics of person(s) supported (e.g. level of intellectual disability, presence of additional disability, living arrangements);
- local practices during the pandemic in family home or workplace (e.g. restrictions to typical activity, introduction of new practices, equipment);
- access to information and training;
- experience of symptoms, testing, treatment;
- impact of social distancing; and,
- two standardized scales for caregivers measuring mood and the impact of pandemic.

**Conclusion:** Researchers are interested in determining possible disparities based on living arrangement, and by Country, and whether lessons can be learned to inform policy and practice to better support Individuals with IDD/ Caregivers during future pandemics.



**NEWLY REPORTED POSITIVE COVID-19 CASES AND DEATHS OF COVID-19-POSITIVE CONSUMERS**

Weekly data for figures provided by regional centers as of 9/05/20; data for tables as of 9/04/20

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Table 4. Number of consumers reported as COVID-19 positive per 10,000 consumers, by regional center ..... 7

These tables and charts compile data provided to DDS by California's 21 regional centers (RCs). Updates received from each regional center every business day include information for individuals known to them to have tested positive for COVID-19; data is provisional and may change as regional centers provide updates. Weekly data reflects RC reports through Saturday for weeks that start on Sunday. DDS implemented a surveillance data tracking tool on 3/16/20, and this report begins the week of March 15, 2020. (Governor Newsom declared a State of Emergency related to COVID-19 on 3/4/20.)



Figure 1. Number of consumers newly reported as COVID-19 positive, by week

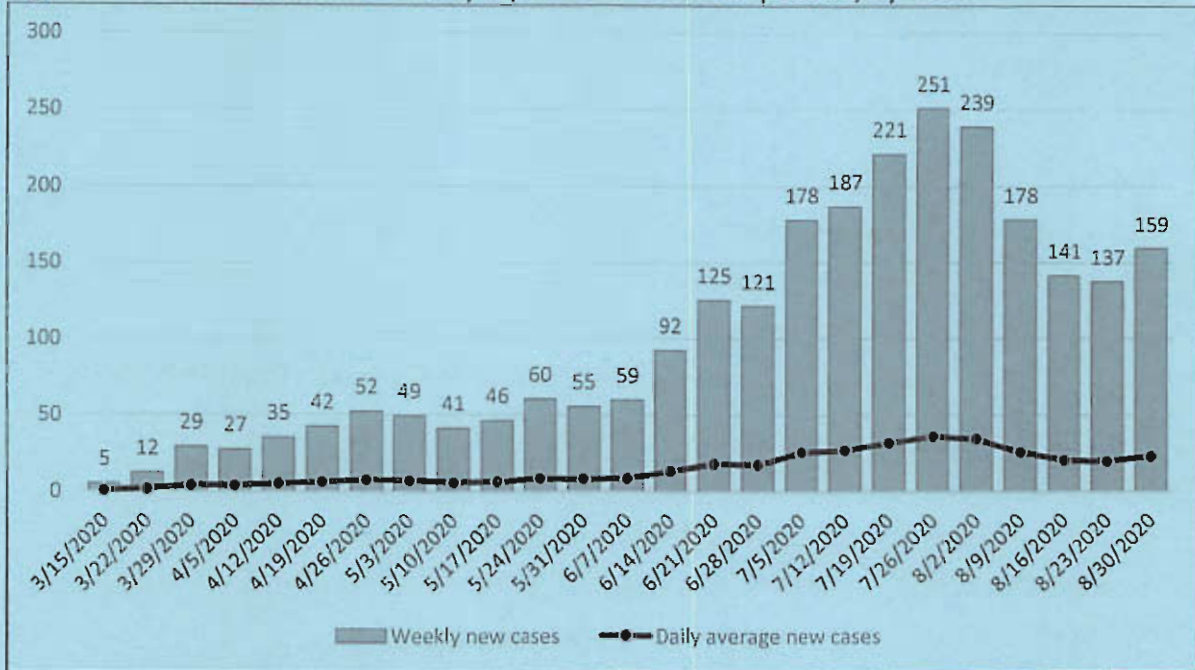
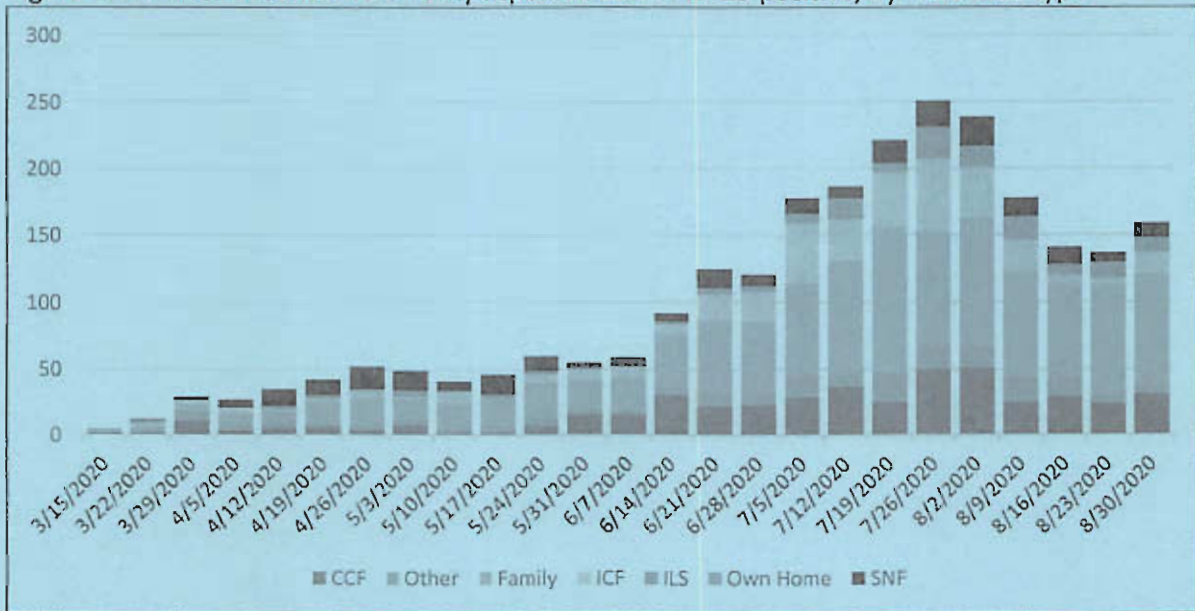


Figure 2. Number of consumers newly reported as COVID-19 positive, by residence type



Notes: CCF includes ARF, ARFPSHN, CCH, CCF-Level 3S/4I/113, RCFE, SRF; ICF includes ICF/DD-H, ICF/DD-N and ICF-DD. Family includes family, parent's home, group home, FFA, FHA; Other includes county child welfare placement, jail, homeless, EBSH, SLS. Consumers categorized in ILS may live with families or independently.

Table 1. Number of consumers reported as COVID-19-positive, by residence type

RESIDENCE TYPE	NUMBER OF CONSUMERS REPORTED AS HAVING TESTED POSITIVE FOR COVID-19	THIS GROUP AS A SHARE OF ALL CONSUMERS REPORTED AS COVID-19 POSITIVE	FOR COMPARISON: NUMBER OF CONSUMERS AT ALL REGIONAL CENTERS	FOR COMPARISON: THIS GROUP AS A SHARE OF ALL CONSUMERS
Community Care Facility (CCF)	467	18%	23,744	7%
ICF for the Developmentally Disabled (ICF-DD)	104	4%	566	0%
ICF/DD-Habilitative (ICF/DD-H)	177	7%	3,767	1%
ICF/DD-Nursing (ICF/DD-N)	78	3%	2,177	1%
Family Home Agency (FHA)	15	1%	1,634	0%
Supported Living Services (SLS)	147	6%	9,248	3%
Independent Living Services (ILS)	126	5%	17,655	5%
Family	1,083	43%	286,812	81%
Own home	26	1%		
Skilled Nursing Facility (SNF)	264	10%	1,049	0%
Other	54	2%	7,721	2%
<b>Total</b>	<b>2,541</b>	<b>100%</b>	<b>354,373</b>	<b>100%</b>

Table 2. Number of deaths of consumers who tested positive for COVID-19, by residence type

RESIDENCE TYPE	NUMBER OF DEATHS IN CONSUMERS REPORTED AS HAVING TESTED POSITIVE FOR COVID-19	THIS GROUP AS A SHARE OF ALL DEATHS IN CONSUMERS REPORTED AS COVID-19 POSITIVE	FOR COMPARISON: NUMBER OF CONSUMERS AT ALL REGIONAL CENTERS	FOR COMPARISON: THIS GROUP AS A SHARE OF ALL CONSUMERS
Community Care Facility (CCF)	21	15%	23,744	7%
ICF for the Developmentally Disabled (ICF-DD)	5	3%	566	0%
ICF/DD-Habilitative (ICF/DD-H)	11	8%	3,767	1%
ICF/DD-Nursing (ICF/DD-N)	13	9%	2,177	1%
Family Home Agency (FHA)	0	0%	1,634	0%
Supported Living Services (SLS)	11	8%	9,248	3%
Independent Living Services (ILS)	5	3%	17,655	5%
Family	22	15%	286,812	81%
Own home	2	1%		
Skilled Nursing Facility (SNF)	52	36%	1,049	0%
Other	1	1%	7,721	2%
<b>Total</b>	<b>143</b>	<b>100%</b>	<b>354,373</b>	<b>100%</b>

Table 3. Number of deaths of consumers who tested positive for COVID-19, by ethnicity

CONSUMER CHARACTERISTICS	NUMBER OF DEATHS IN CONSUMERS REPORTED AS HAVING TESTED POSITIVE FOR COVID-19	THIS GROUP AS A SHARE OF ALL DEATHS IN CONSUMERS REPORTED AS COVID-19 POSITIVE	FOR COMPARISON: NUMBER OF CONSUMERS AT ALL REGIONAL CENTERS	FOR COMPARISON: THIS GROUP AS A SHARE OF ALL CONSUMERS
Asian	6	4%	33,108	9%
Black/African American	23	16%	30,369	9%
Hispanic	42	29%	141,410	40%
Other <sup>1</sup>	2	1%	43,732	12%
White	70	49%	105,754	30%
TOTAL	143	100%	354,373	100%

<sup>1</sup>"Other" includes multiple ethnicities and individuals with no recorded ethnicity.

NUMBER OF CONSUMERS NEWLY REPORTED AS COVID-19 POSITIVE, BY WEEK AND REGION

Figure 3. Northern CA excluding the Bay Area

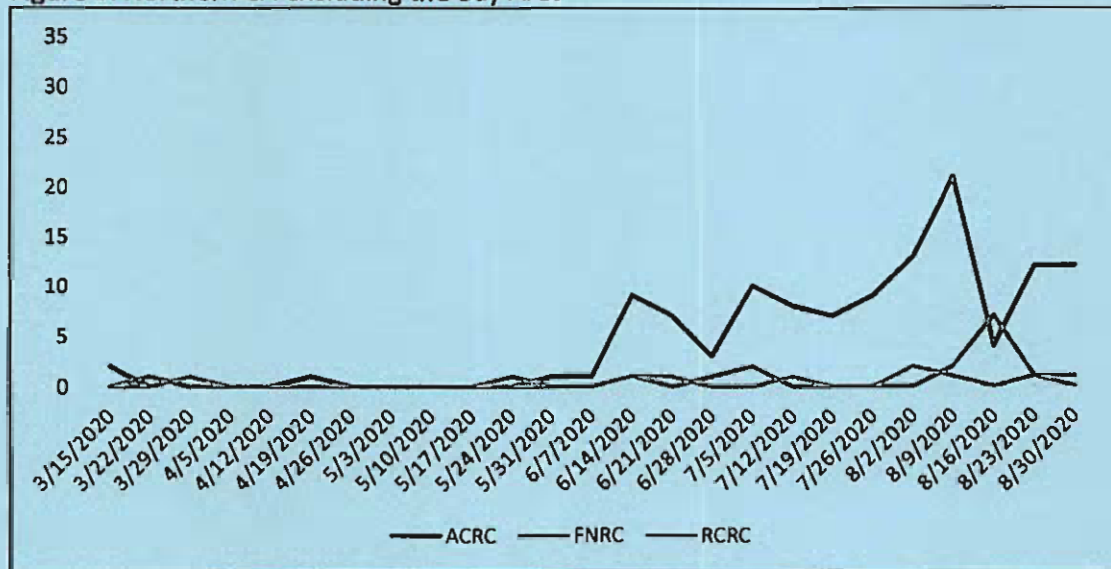


Figure 4. Bay Area

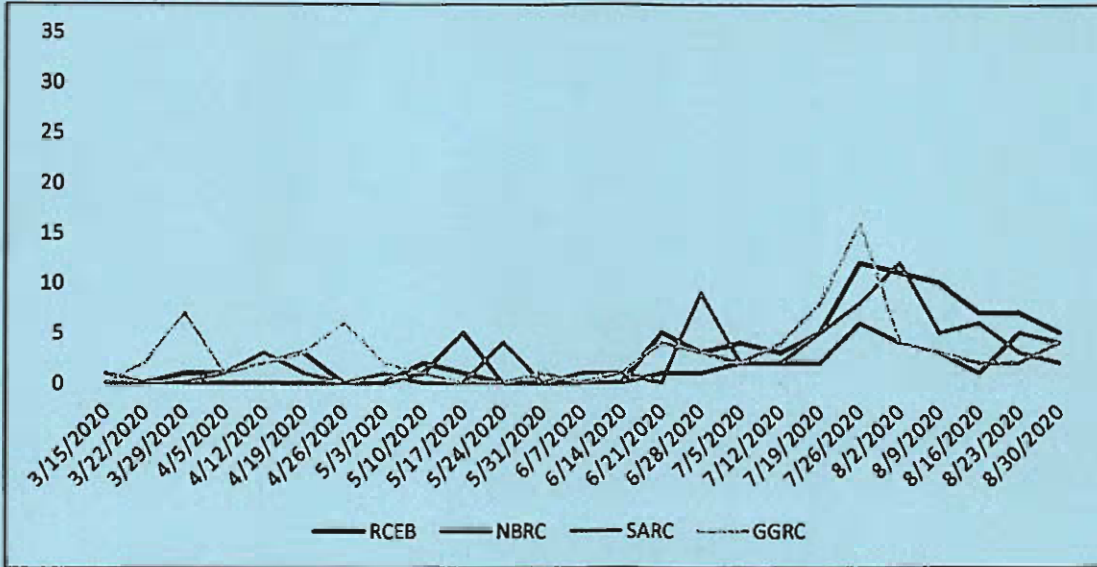


Figure 5. Central CA

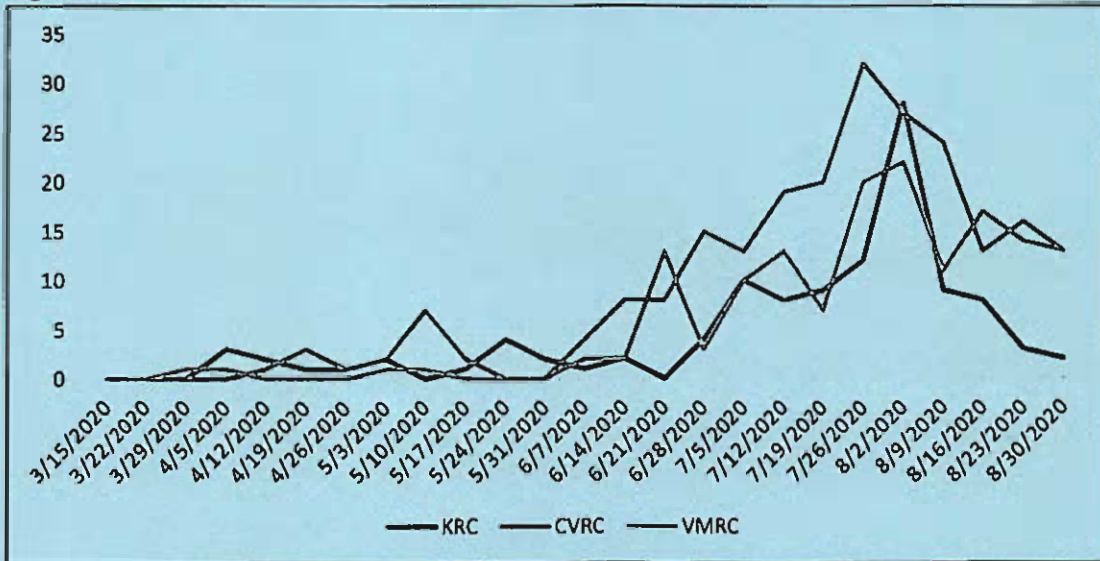


Figure 6. Southern CA excluding Los Angeles

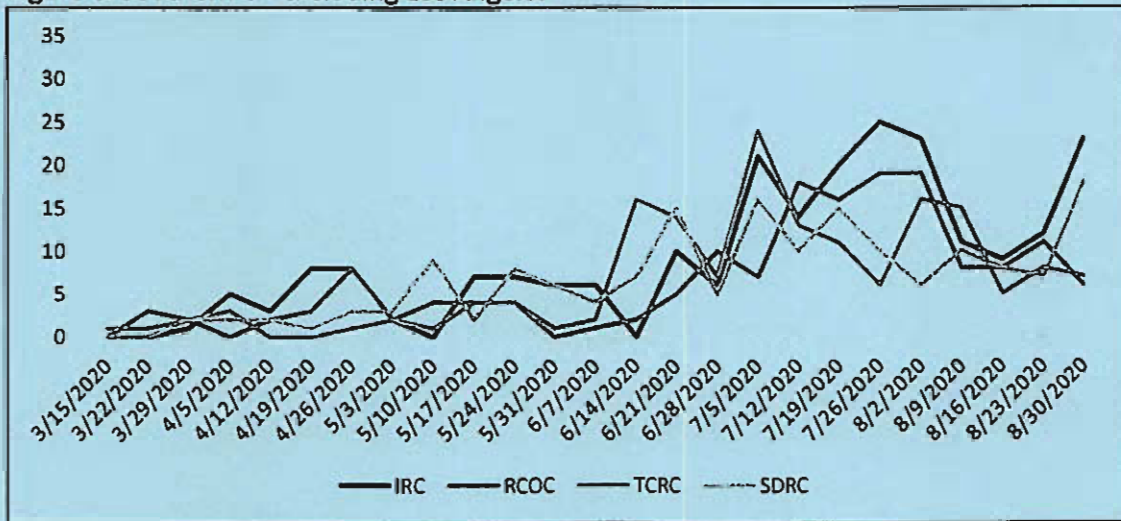


Figure 7. Los Angeles

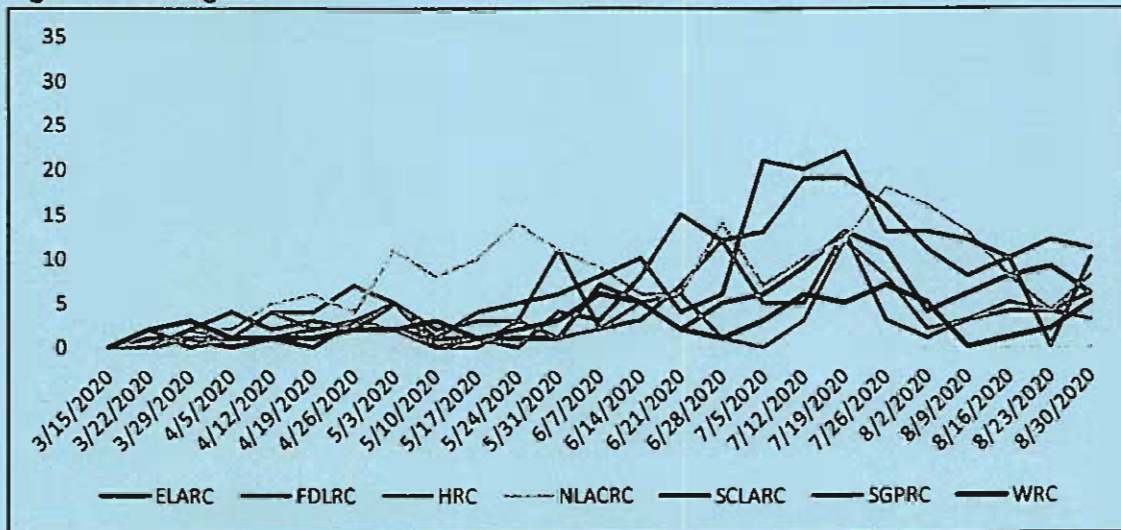
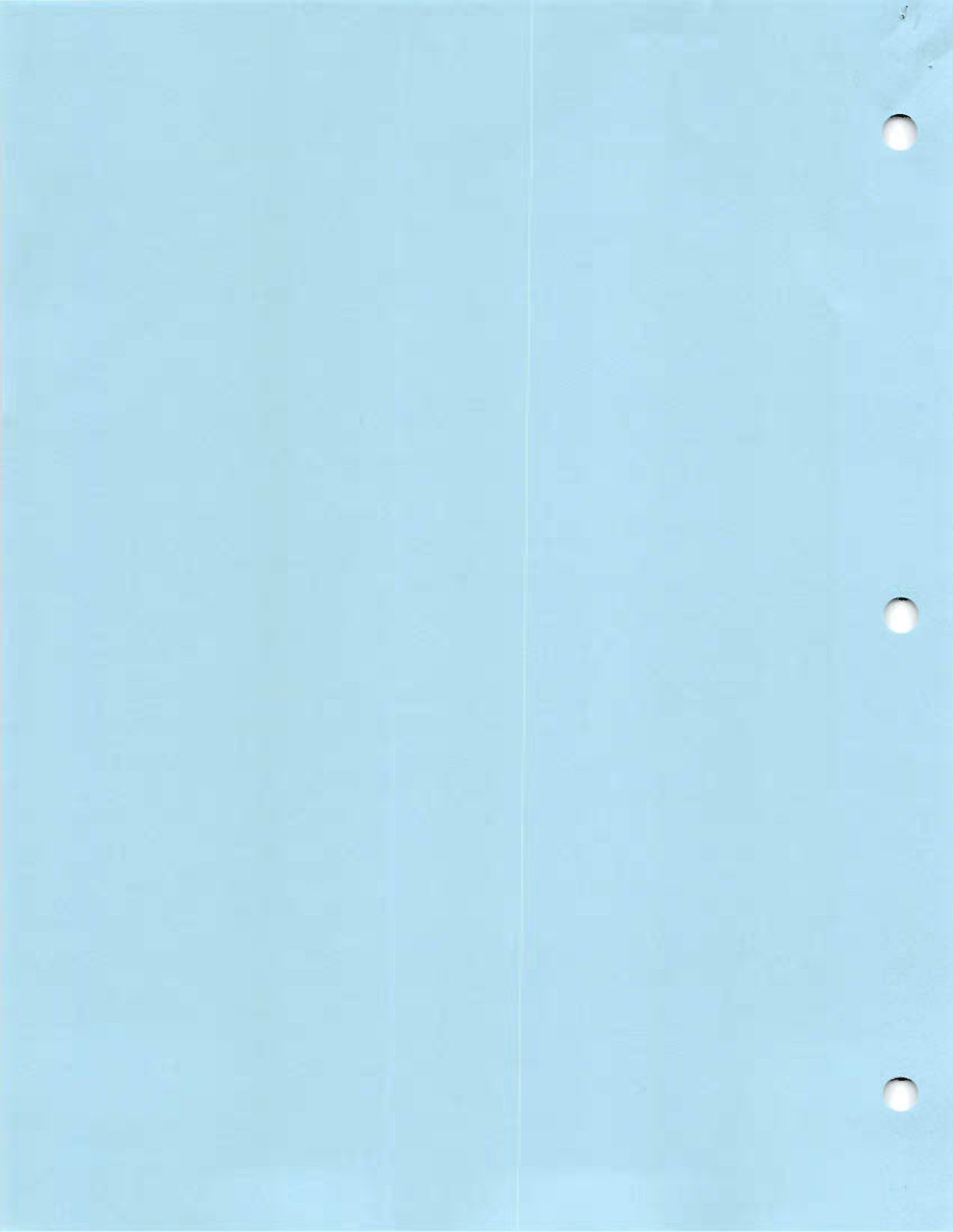


Table 4. Number of consumers reported as COVID-19 positive per 10,000 consumers, by regional center

REGIONAL CENTER	NUMBER OF CONSUMERS	THIS REGIONAL CENTER AS A SHARE OF ALL CONSUMERS REPORTED AS COVID-19 POSITIVE	FOR COMPARISON: NUMBER OF CONSUMERS AT ALL REGIONAL CENTERS	FOR COMPARISON: THIS GROUP AS A SHARE OF ALL CONSUMERS
ACRC	121	5%	25,343	7%
CVRC	228	9%	21,460	6%
ELARC	102	4%	12,354	3%
FDLRC	110	4%	10,896	3%
FNRC	17	1%	8,039	2%
GGRC	78	3%	9,498	3%
HRC	72	3%	14,657	4%
IRC	227	9%	38,158	11%
KRC	112	4%	10,039	3%
NBRC	38	1%	9,219	3%
NLACRC	204	8%	26,732	8%
RCEB	83	3%	21,511	6%
RCOC	162	6%	22,288	6%
RCRC	8	0%	4,025	1%
SARC	67	3%	17,481	5%
SCLARC	192	8%	17,531	5%
SDRC	169	7%	31,532	9%
SGPRC	167	7%	13,693	4%
TCRC	164	6%	15,339	4%
VMRC	151	6%	15,397	4%
WRC	69	3%	9,181	3%
<b>Total</b>	<b>2,541</b>	<b>100%</b>	<b>354,373</b>	<b>100%</b>

Source: DDS analysis of COVID-19 surveillance data provided by regional centers as of 9/05/20 and Client Master File data as of July 2020.





Sandra Shewry  
Acting Director

State of California—Health and Human  
Services Agency  
**California Department of  
Public Health**



GAVIN NEWSOM  
Governor

August 25, 2020

**TO:** All Californians

**SUBJECT:** Guidance for Small Cohorts/Groups of Children and Youth

This guidance applies to groups of children and youth in controlled, supervised, and indoor environments operated by local educational agencies, non profits, or other authorized providers, including, but not limited to, public and private schools; licensed and license-exempt child care settings; organized and supervised care environments, i.e., "distance learning hubs"; recreation programs; before and after school programs; youth groups; and day camps. **Guidance and directives related to schools, child care, day camps, youth sports, and institutions of higher education are not superseded by this document and still apply to those specified settings.**

**Purpose:** To provide guidance for necessary in-person child supervision and limited instruction, targeted support services, and facilitation of distance learning in small group environments for a specified subset of children and youth, and for those programs to understand the required health and safety practices needed to prevent the spread of COVID-19 in their settings.

#### **Definitions:**

**Cohort:** a cohort is a stable group of no more than 14 children or youth and no more than two supervising adults in a supervised environment in which supervising adults and children stay together for all activities (e.g., meals, recreation, etc.), and avoid contact with people outside of their group in the setting.

**Supervising adult:** an adult assigned to one cohort of children or youth, who does not physically interact with any other cohorts. This includes child care staff, certificated or classified school staff, volunteers, participating parent or caregiver, or other designated supervising adult(s).

**Supervised care environment:** an environment where multiple children or youth, from multiple families or households, are being supervised simultaneously by an adult. This includes, but is not limited to, licensed child care facilities, licensed exempt child care programs, supervised programs on a school site while a school is not in session or is providing curriculum in a distance-learning format, or where some educational services are being offered to a subgroup of students as identified by a local educational agency on a school campus.

#### **Considerations for Cohorts**

Utilizing cohorts minimizes the number of people exposed if a COVID-19 case is identified in a child or youth attendee, provider, other instructional support provider, or staff member of a particular cohort.



Children or youth, attendees and adults in supervised care environments during the COVID-19 pandemic must be in groups as small as possible. This practice decreases opportunities for exposure to or transmission of the virus; facilitates more efficient contact tracing in the event of a positive case; and allows for targeted testing, quarantine, and isolation of a single cohort instead of an entire population of children or youth and supervising adults in the event of a positive case or cluster of cases.

While present at the supervised care environment, children or youth and supervising adults in one cohort must not physically interact with children or youth and supervising adults in other cohorts, other child facility staff, or parents of children or youth in other cohorts.

#### *Cohort Size*

- Cohorts must be limited to no more than 14 children and youth.
- Cohorts must be limited to no more than two supervising adults.
- Requirements for adult to child ratios continue to apply for licensed child care programs.
- Cohorts can be divided, as needed, into subgroups of children and youth from the same cohort, as long as the 14-to-2 ratio is not exceeded.
- The maximum cohort size applies to all children and youth in the cohort, even when all children are not participating at the same time. For example:
  - A cohort may not include 6 children or youth who attend full-time, 6 children on Mon/Wed/Fri, and 6 children on Tue/Thu (total of 18).
  - A cohort may not include 8 children or youth who attend for the entire day, 4 who attend mornings only, and 4 who attend afternoons only (total of 16).

#### *Cohort Mixing*

- Prevent interactions between cohorts, including interactions between staff assigned to different cohorts.
  - Assign children and youth who live together or carpool together to the same cohort, if possible.
  - Avoid moving children and youth from one cohort to another, unless needed for a child's overall safety and wellness.
  - Cohorts must be kept separate from one another for special activities such as art, music, and exercise. Stagger playground time and other activities so that no two cohorts are in the same place at the same time.
- One-to-one specialized services can be provided to a child or youth by a support service provider that is not part of the child or youth's cohort.
- Specialized service includes but not limited to occupational therapy services, speech and language services, and other medical, behavioral services, or educational support services as part of a targeted intervention strategy.
- Services must be provided consistent with the industry guidance for Limited Services (PDF).

#### **Considerations for Staff**

Supervising adults should be assigned to one cohort and must work solely with that cohort. Avoid changing staff assignments to the extent practicable. Substitute providers who are covering for short-term staff absences are allowed but must only work with one cohort of children per day.

Meetings among the staff from different cohorts must be conducted remotely, outdoors, or in a large room in which all providers wear cloth face coverings and maintain at least 6 feet distance from other providers. Outdoor meetings and meetings in large rooms with the windows open are preferred over meetings in small rooms with windows closed.

**Precautions and Considerations**

Physical distancing, in combination with the use of face coverings, decreases the risk of COVID-19 from respiratory droplets. Physical distancing between adults must be maintained as much as possible, and adults and students must use face coverings at all times, pursuant to the CDPH Schools Guidance regarding face coverings. Physical distancing between young children in the same cohort should be balanced with developmental and socio-emotional needs of this age group. Supervised care settings should follow applicable industry guidance on appropriate use of face coverings by children and youth.

See the CDPH Guidance on Schools and School Based Programs (PDF) and on Child Care (PDF) for additional considerations regarding, face masks, meals, cleaning, drop off and pick up and health screening.

California Department of Public Health  
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Department Website (cdph.ca.gov)



Page Last Updated : August 25, 2020





## **Providing Targeted, Specialized Support and Services at School**

**August 25, 2020**

On August 25, 2020, the California Department of Public Health (CDPH) issued Guidance Related to Cohorts (Cohorting Guidance), which sets minimum health and safety guidelines across multiple sectors serving youth, including childcare and schools (public and private). The following is intended to supplement the Cohorting Guidance with responses to frequently asked questions specific to the provision of school-based targeted, specialized support. Insofar as a question is not addressed, local school officials—in collaboration with local health departments and school-based staff (including, if applicable, organized labor)—should implement measures consistent with local operations and needs.

**Background:** On March 4, 2020, the Governor proclaimed a State of Emergency in California as a result of the impacts of COVID-19 to make additional resources available and help the state prepare to respond to an increasing number of individuals requiring medical care and hospitalization as a result of a broader spread of COVID-19. Since that time, the State Public Health Officer and the CDPH have issued multiple public health directives to combat the COVID-19 pandemic, including, on July 17, 2020, the COVID-19 and Reopening In-Person Learning Framework for K-12 Schools (Framework).

The Framework prohibits in-person instruction at schools operating in a county on the State's Monitoring List due to high rates of COVID-19, and permits elementary schools in those counties to request a waiver to permit reopening for in-person instruction where conditions and safety plans permit. On August 3, 2020, CDPH provided further guidance to the July 17 reopening framework and detailed information regarding the elementary school waiver process. The August 3 guidance noted that additional guidance was forthcoming to identify conditions in which schools otherwise prohibited from reopening for full in-person instruction can offer in-person services to small groups of students. On August 25, 2020, CDPH issued the Cohorting Guidance regarding permissible small-group in-person services.

### **Does the Cohorting Guidance apply to K-12 school settings?**

Yes. The Cohorting Guidance authorizes small-group, in-person services in controlled, supervised, and indoor environments, such as those operated by local educational agencies (LEAs). The Cohorting Guidance applies to schools that cannot reopen for in-person instruction pursuant to the July 17 Framework, including elementary schools in



those jurisdictions that have not received an elementary school waiver through the local public health office. Under these circumstances, school officials should develop and implement plans in collaboration with local health officials and school-based staff (including, if applicable, organized labor), but are not required to receive express approval from the local health department. They are, however, required to adhere to any applicable, more restrictive local public health directive.

Schools that have been authorized to reopen for in-person instruction under the July 17 Framework, including elementary schools operating pursuant to a waiver, must adhere to the industry guidance for K-12 Schools and any applicable order or directive of the local public health office.

**Is the intent to allow for in person instruction for all students?**

No. The purpose of this guidance is to establish minimum parameters for providing specialized services, targeted services and support for students while schools are otherwise closed for in-person instruction in ways that maintain the focus on health and safety to minimize transmission.

**If a school is closed for in-person instruction, is it permissible for a small set of students to receive in-person targeted, specialized support and services on campus?**

Yes. In-person targeted, specialized support and services in stable cohorts is permissible when the school is able to satisfy all of the conditions detailed in the Cohorting Guidance, including:

- Limiting cohort size
- Restricting cohort mixing
- Maintaining proper physical distancing, masking, cleaning and other safety measures

**Does the Cohorting Guidance require schools to provide small-group, in-person services if they are otherwise prohibited to reopen under the July 17 Framework?**

No. It clarifies the conditions that must be met to offer in-person services for small groups of students if a school is otherwise unable to reopen under state public health directives. This guidance enables schools to provide supervision and care for students, including specialized services for students with disabilities and English learners, access to internet and devices for distance learning, and in-person support for at-risk and high-need students.



**Which students can be served in cohorts during school closures?**

The determination is made at the LEA- and school-level based on the needs of students. Students with disabilities should be prioritized by the LEA and school for receiving targeted supports and services. In addition, English learners, students at higher risk of further learning loss or not participating in distance learning, students at risk of abuse or neglect, foster youth and students experiencing homelessness may also be prioritized.

**What qualifies as a specialized and targeted support services?**

Specialized services are determined by LEAs and include but are not limited to occupational therapy services, speech and language services, and other medical services, behavioral services, educational support services as part of a targeted intervention strategy or assessments, such as those related to English learner status, individualized educational programs and other required assessments.

**What are cohorts?**

In the K-12 Schools setting, cohorts are stable groups of students with no more than two supervising adults, who are meeting for targeted supports and intervention services, under the direction of the LEA, while the school is closed to in person instruction and in addition to distance learning. Regardless of the name (e.g., "learning hubs" or "pods"), all of the provisions in the Cohorting Guidance must be followed for such cohorts to meet, whether they are operated by LEAs, non-profits, or other providers.

**How should stable cohorts be established?**

As outlined in the Cohorting Guidance, stable cohorts are groups of students, with the same supervising adult(s), that stay together throughout the day. The cohort must operate so that students and supervising adults within the group only have physical proximity with members of their cohort during the day. Supervising adults and students must not interact with other cohorts. This practice decreases opportunities for exposure to or transmission of the virus; facilitates more efficient contact tracing in the event of a positive case; and allows for targeted testing, quarantine, and isolation of a cohort instead of requiring the suspension of all such groups operating on a site in the event of a positive case or cluster of cases.

**What is the maximum size for cohorts?**

Cohorts are limited to no more than 14 students, with no more than 2 supervising adults in a supervised environment. The number of students and staff who make up a cohort should be based on student needs. Cohorts can – and often will – be smaller than 14, staffed by 1 or 2 consistent adults. For example, a cohort could be 6 students with 1 adult or 8 students with two adults that stay together throughout the day. In addition, a cohort can be divided into subgroups of students that may interact with one another



during the day, as long as there are no more than 14 students and no more 2 supervising adults in that cohort overall.

**Can students receive additional specialized services or targeted support and services if they are not part of a cohort or outside of their cohort from a different supervising adult(s)?**

Yes. Students may receive one-on-one services and supports from other qualified adults. These additional supports and services must be done individually and cannot be done with other students. Staff who are providing specialized services or targeted support – such as speech or occupational therapy or intensive tutoring -- should be assigned to work with students in as few cohorts as possible and must observe appropriate precautions to prevent transmission, including wearing appropriate personal protective equipment (PPE), as specified in the industry guidance for Limited Services. It is also important to prevent other staff people (e.g., administrators, counselors, or nurses) who not a supervising adult in a cohort or providing one-on-one services from interacting with cohorts unless necessary to respond to exigent health or safety issue, as they can transmit the virus from one cohort to another, thus greatly increasing the number of contacts for any given case.

**Can different cohorts of students interact with each other?**

No. Group stability is important to minimize exposure and for effective contact tracing so students and supervising adults cannot interact with different cohorts. Separation between cohorts is maintained either by having each cohort in a separate room or in its own space created by partitions. Given the layout of K-12 schools with multiple classrooms, schools should generally maintain separation between cohorts by assigning each cohort to its own classroom. Outdoor space or other dedicated space may be used when it allows for separation from other cohorts and adequate physical distancing.

**Can schools have different cohorts on different days?**

Yes. Schools can have cohorts of students who participate only on certain days or certain times during the day. Proper cleaning must be done in between different cohorts of students occupying the same space. For example, a school can have cohort(s) of students receiving services and supports Monday and Tuesday with separate cohort(s) on Wednesdays and Thursdays.

**Can students change cohorts?**

Students changing cohorts must be avoided, unless a change is needed for the student's overall safety and wellness.



**How many cohorts can be established on a single school site?**

The number of cohorts will depend on the school's enrollment size and available building capacity. Local school officials – in collaboration with local health departments and school-based staff – should determine the number of cohorts that can be safely established to avoid interactions between cohorts. In general, given the need for physical distancing and separation of cohorts, the number of students on a given school site should generally not exceed 25% of the school's enrollment size or available building capacity.

**How will physical distancing be maintained within cohorts?**

Groups must be no larger than can be accommodated by the space available in the facility to provide at least 6 feet of distance between each person, including staff, but in no instance larger than 14 students and 2 supervising adults. The smaller the group, the less risk of spreading disease. As cohort groups increase in size, or as they have any contact with other cohorts, the risk of spreading disease increases.

**Can staff meet?**

Group meetings with staff from different cohorts should be done remotely, outdoors or in large spaces such as gymnasiums or multipurpose rooms, with windows open, as much as possible, avoiding small spaces with windows closed. All staff must wear appropriate face coverings and maintain at least 6 feet of physical distancing.

**How often should cleaning be done while students are on campus?**

Cleaning and wiping surfaces (e.g., desks, door handles, etc.) must be maintained between multiple student uses, even in the same cohort. For additional guidance around health and safety standards including cleaning and masking, refer to CDPH and local health guidance.



# Board/Committees Attachments & Community Announcements

**For materials shared at meetings, please go to [www.sgprc.org](http://www.sgprc.org)**

# SAN GABRIEL/POMONA REGIONAL CENTER

## BOARD OF DIRECTORS

### MEMORANDUM

**TO:** Department of Developmental Services

**FROM:** Board of Directors (Gisele Ragusa, Ph.D., Board President) *Gisele Ragusa*

**SUBJECT:** 2020-2021 Board Training Plan: *Process, Topics, Schedule, and Evaluation*

**DATE:** September 1, 2020

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Pursuant to Welfare and Institutions Code 4622(g) and in concert with the Directive dated August 28, 2020, the San Gabriel/Pomona Regional Center (SG/PRC) Board of Directors is pleased to inform the Department of Developmental Services (DDS) about our 2020-2021 Board of Director's Training Plan.

#### Needs Assessment and Topic Selection Processes

The SG/PRC Board's Training Plan is revised annually, and its topic and speaker selection results from an annual Board Training Needs and Topic Selection E-Survey completed by all Board and its Committee members. This e-survey data collection was initiated in Fall 2017 and occurs annually. Topics and trainings from past two years' surveys have included: *Working with Legislators (two sessions- ARCA leadership + legislative staff)*, *Self-determination (intro. and update sessions- SG/PRC leadership staff)*, *Understanding the Lanterman Act- (Enright and Associates + SGPRC/staff)*, *Legacy Planning- (two Consultative Agencies)*, *Board Responsibilities- (Enright and Associates)*, among other Board/Committee selected topics.

Generally, there are at least four formal Board training sessions annually which occur during scheduled Board meetings and are open to all Board and its Committee members and the general public. The Board Training Needs and Topic Selection E-Survey is generated out of the Board's Strategic Development Advisory Committee. This e-survey was most recently completed in July 2020 by all Board and Committee members. The results of the 2020 e-survey were compiled and a report was presented to the Strategic Development Advisory Committee for topic and potential speaker selection at their August 2020 meeting. The topics and associated speakers for each topic were selected by the Strategic Development Advisory Committee. These topics and speakers were presented to the Full Board of Directors at the August 26<sup>th</sup> Board Meeting and were approved by full Board vote at the meeting. All Board members are required to attend each training, and Committee members and the general SG/PRC community is invited to all trainings.

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Program of San Gabriel/Pomona Valleys Developmental Services, Inc.

### **2020-2021 Topics, Schedule, and Speakers**

October 28, 2020 - *National Core Indicators and Performance Contract*. Speaker: Dr. Carol Tomblin, SG/PRC (Qualifications: Ph.D. Degree, 25 + years regional center leadership experience)

February 24, 2021 - *Understanding Roles and Services of Vendors*. Speakers: Panel of Vendors across service delivery type (Qualifications: vary by vendor type, generally panelist will be non-profit vendor leadership with advanced degrees).

April 28, 2021 - *Communication of Board Members*. Speaker(s): Communication and Leadership Consultant. (Qualifications: speaker is under selection process, likely to hold advanced degree in a communications related field)

July 28, 2021 - *Engaging in and Understanding Board Strategic Planning Processes*. Speakers: Strategic Development Consultant with Board's Strategic Development Advisory Committee Leadership (Qualifications: speaker/consultant is under selection process, likely to hold advanced degree in a communications related field; Strategic Development Advisory Committee members hold bachelor's, masters' and Ph.D. degrees depending on member).

Each of these Board trainings will be approximately 90 minutes long and will occur during regularly scheduled board meetings (4<sup>th</sup> Wednesday of month commencing at 7:15 PM). These topics and the schedule are available on the SG/PRC website for public review and access.

### **Training Evaluation and Reporting**

A brief evaluation of each Board training session will be completed at the close of each training session via e-survey and discussion with the Board's Strategic Development Committee. Results of this evaluation will be summarily reported to DDS in addition to a training update.

### **Additional Training Opportunities and Issues Forums**

In addition to the described SG/PRC Board training effort, the Board and its Committees will participate in all ARCA Board related training, as they did in 2019. The Board's current President is a member of ARCA's Board Delegate's ad hoc training planning group. Moreover, beginning in Fall 2019, at each Board meeting, the SG/PRC Board has an *issues forum* which serves as a formative training and exchange forum in which Board members discuss pertinent topics that have been generated by the Board and its Committee members in consultation with SG/PRC staff members and vendors/service providers. Each *issues forum* lasts approximately 15-20 minutes during regularly scheduled Board meetings and most topic discussions extend across two-three Board meetings. In Fall 2019, the Board generated a listing of issues to be discussed at future Board *issues forums*. To date, there have been *issues forums* on vendor/service provider issues (staffing needs and fiscal difficulties). Resulting from these *issues forum* discussions (3), the Board intends to co-support, (along with SG/PRC staff and vendors), a few targeted job fairs to generate future service provider staffing interests. Other *issues forums* were tabled in Spring 2020 and were replaced by monthly COVID-19 discussions, which emerged as *issues forums* as a consequence of the pandemic. In the coming Fall 2020-Winter 2021 Board meetings, the Board will discuss issues and challenges associated with adult services and associated transitions, which is a topic area that has been generated by the Board as an *issues forum* topic.

## PERFORMANCE CONTRACT MEASURE DATA IN PLAIN ENGLISH – June 2020

The Department of Developmental Services (DDS) establishes an annual Performance Contract with each regional center. This Performance Contract includes objectives based on public policy, compliance and may include local measures added by the regional center. Each year, regional centers identify activities to achieve meaningful outcomes for the individuals served. After the end of the calendar year, the regional center prepares an Year-End Report, based on the DDS format, to show if the regional center did better than it had done the previous calendar year and if it surpassed the statewide averages for the measures.

The annual Performance Contract is approved by our Board of Directors and DDS. The Performance Contracts and the End-of-Year Reports for each calendar year are posted to our website under Governance => Transparency & Access to Public Information => Performance Contract & Year-End Reports.

Every six months, DDS provides each regional center data for review to help the regional center determine if its activities are helping the regional center achieve improvement on performance measures and to alert the regional center if changes are needed. The semi-annual update only contains the most "traditional" measures and does not include measures related to employment or to reducing disparity in POS.

Below is a summary of how SG/PRC is doing as of June 2020.

- **Children live with family or in home-like settings:**
  - SG/PRC serves 6,492 children. 99.34% live with their family (95.63%) or in foster care (3.71%). Statewide average = 99.48%

How did we do? Our percentage has steadily increased in small increments over the past several years. Continues to be lower than the statewide average.

- Only nine (9) children (0.14%) live in licensed facilities with more than six beds: Community Care Facility (CCF) = 0.06%; Intermediate Care Facility (ICF) = 0.08%; and no child placed in a Skilled Nursing Facility (SNF). Statewide average = 0.02%

How did we do? Our percentage has steadily decreased over the past several years. Overall continues to be higher than the statewide average.

- **Adults live in home-like settings:**
  - SG/PRC serves 7,187 adults. 74.55% live in homelike settings (65.95% with family; 6.08% in Independent Living-ILS; 1.73% in Supported Living-SLS; and

0.79% in Adult Family Home Agency-AFHA certified homes). Overall Statewide average = 81.25%. Statewide average of adults living with family is 64.98%, which is about 1% lower than the SG/PRC percentage for adults living with families.

How did we do? Overall % has steadily increased over time. Currently better than previous year. However, all of the gains have been with adults living with family. ILS % has reduced steadily. SLS has increased only slightly over time; and SG/PRC SLS % remains the lowest in the state. AFHA is staying about the same with minor fluctuations over time. Overall % significantly lower than statewide average.

Most of the other adults live in licensed facilities with 6 or fewer beds. A total of 443 adults live in licensed facilities with more than six beds: three (3) adults at State Developmental Center-SDC (0.02%); CCF (2.43%); ICF (2.94%); and SNF\*(0.75%) and combined % for CCF, ICF and SNF = 6.12%. . Statewide average = 0.08% for SDC; 2.06% combined for all other settings.

[\*NOTE: Some individuals were moved to SNF due to complications from COVID-19. % for SNF higher than previous years and now higher than statewide average.]

How did we do? SG/PRC did better than the statewide average for the % of individuals at SDC. Tied with San Andreas RC and FD Lanterman RC for lowest % of adults living at SDC. For rest of adults living in facilities, SG/PRC's % is higher than statewide average (inverse corollary to adults living in home-like settings which is lower than statewide average).

- Compliance measure for CDER completion:
  - 11,675 of 11,725 for 99.57% CDER completion rate. Statewide average = 98.34%

How did we do? SG/PRC did better than the statewide average. Only one regional center had a higher %.

- Compliance measure for timely Intake completion:
  - 117 of 123 completed within 142 days for 95.12% compliance. Statewide average = 91.29% For the six that were not completed within the 142 days, families had cancelled and rescheduled the psychological assessments needed to complete Intake – two or three times.

How did we do? SG/PRC did better than the statewide average.

**Legend:** **Green** means that we did better than we did last year and/or than the statewide average. **Red** means that we did not perform as equal to or better than the statewide average. DDS' expectation is that we do better than the statewide average OR we do better than we did the previous year.