

SAN GABRIEL/POMONA REGIONAL CENTER

October 28, 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

SG/PRC Critical Business Functions

SG/PRC employees are resilient, and we admire their “goodwill”, follow-through and commitment to serving our community and each other. Our consultants, and service providers are our frontline heroes that have always been there, every second, every minute and every day making certain that individuals served do not have unmet needs. We admire all of you. Your leadership model is inspirational and heartfelt.

Our office is open for all business functions on an appointment basis. We are practicing and implementing robust health and safety protocols, including cleaning and sanitizing our office space throughout the day. All SG/PRC employees, consultants and visitors are required to pass a temperature screening check station relying on touch free technology before entry into the SG/PRC business office.

We are meeting the needs of our community. Ninety percent of SG/PRC employees are working remotely as a feature of our risk management strategy to manage the spread of COVID-19 and to protect SG/PRC's critical business functions assuring that the needs of our community are met.

SG/PRC staff are completing business functions, including developing Individual Program Plans (IPP) and Individual Family Service Plans (IFSP), processing purchases for services, processing vendor applications, processing payments for services, supporting each other and our remote workforce, completing intake and eligibility assessments and many other tasks that support individuals served and their families.

SG/PRC retains a prominent distinction as being the only regional center that has continued to deliver full scope intake and eligibility services throughout the COVID-19 Pandemic. The volume of our intake and eligibility assessments and reviews for both Early Intervention and Lanterman Act services are near the level of activity that existed prior to Governor Newsom's **stay at home** order issued on March 18, 2020. The following summarizes our results for the first quarter of FY20/21.

Early Start Referrals (396)	Lanterman Referrals (76)
Early Start Eligibility Reviews (377)	Lanterman Eligibility Reviews (180)
Found Eligible for Early Start Service (354)	Found Eligible for Lanterman Services (146)

CARES ACT

On June 9, 2020 the U.S Department of Health and Human Services (HHS) announced the distribution of approximately \$15 billion from the Provider Relief Fund to eligible providers that participate in the State and Children’s Health Insurance Program (CHIP). Regional Centers are eligible for these funds. The payment to each provider will be approximately 2% percent of reported gross revenue from patient care. SG/PRC submitted its application on August 19, 2020 relying on the ICF/ SPA amount reflecting \$6,947,669. SG/PRC has not received this funding, anticipating \$138,953. Soon, SG/PRC will modify its application, reflecting DDS reported gross revenue, after receipt of its initial funding, according to program rules. (See Attachment A)

SG/PRC Budget 19/20

Our Operations Budget (OPS) projects within our FY19/20 Budget allocation year-end. We are anticipating a A7 allocation including COVID-19 expenses incurred during the final quarter of FY19/20. We do not know the exact amount. DDS representatives will likely notify SG/PRC in the new future. Our POS budget shows a year-end balance of \$3,257,957. Our budget cycle is three-year term and remains open to accommodate claims made throughout.

SG/PRC Budget 20/21

Our Purchase of Services (POS) Budget encumbrances have begun to accrue beginning August 1, 2020, establishing the base projection model that will frame future expenses. Now that we have surpassed the first quarter of FY20/21, our fiscal reports will show actual expenses incurred including projected POS and OPS costs moving forward.

Parent’s Place/SG/PRC Technology Lending Library

We imagined our technology lending library as a mere dream and possibility. We did not have any resources or funding sources to make this dream a reality. Through our imagination, diligence and assessment of resources we had on hand we made it happen. Our winning strategy included collecting a fleet of 250 iPads allocated to Service Coordinators for release to the Parent’s Place, partnering with the Parent’s Place, and getting permission from the Department of General Services to release those iPads (state property) to the Parent’s Place.

We found money through a resulting trust (SG/PRC as the beneficiary) held by a third-party entity as a method to fund internet connectivity. Parent’s Place, Executive Director, Ms. Elena Sanchez without hesitation developed a telehealth project on a moment’s notice, creating justification for the release of money held in the resulting trust. Your regional center,SG/PRC is the first regional center in the [state] to have a technology lending library.

The Parent’s Place technology lending library is a resource that is intended for the exclusive use for individuals served by SG/PRC. We are so very excited about this positive outcome. (See Attachment B)

SG/PRC Check-In Program

The needs of our community are constantly changing as the COVID-19 Health Pandemic unfolds. We are deeply committed to assuring that the needs of individuals served are met. We are pleased to report that we are currently engaged in our third Check-In program, and we have contacted at least 11,795 individuals served that live in either their own home, their family home or in a non-licensed residential setting.

We have reached 85.6% percent of individuals served. This initiative will end within the next 10 days. Thus far, we have found that 42 individuals served have health related needs, 30 individuals served do not feel safe due to COVID-19, and 1,175 individuals served are experiencing challenges related to remote learning, delivery of educational services, and increased behaviors. We are responding to these needs through delivery of clinical services, connecting families with resources available through community partners, purchasing services, and supporting families through attending remote Individual Educational Plan (IEP) meetings. (See Attachment C)

SG/PRC Clinical Services

A. Dental Clinic

We are pleased to announce that on October 24, 2020, we are re-opening the SG/PRC Dental Clinic. The Service Coordinator should be contacted if an individual served needs dental services. Our Dental Clinic has a primary focus on meeting unmet oral health care needs for individuals served that do not have a Dentist or access to dental care. The SG/PRC Dental Clinic is offering dental treatment on an appointment basis only.

With our goal to manage the spread of COVID-19 and safely deliver dental services, we have created health and safety protocols in consultation with Dr. Banner and Cristina Macasaet our very own Dental Hygienist and through use of recommendations and published guidance from the Centers for Disease Control and Prevention (CDC), local public health authorities, and the California Dental Board.

Before receiving dental services, individuals served, and their parent or caregiver must pass a health screening, wear PPE and pass a temperature check before entry into the SG/PRC office building and only one parent or caregiver is permitted to attend the clinic. Appointments are staggered. We are using our large conference rooms to assure 6ft clearance for physical distancing. The Dentist, Dental Hygienists, Dental Assistants and SG/PRC staff are required to wear PPE and adhere to SG/PRC’s COVID-19 Operations Contingency Plan.

B. Bio Behavioral Consultation Clinic

We are pleased to announce that on November 17, 2020 our Bio Behavioral Consultation Clinic (BBCC) will resume supporting individuals served through telehealth. The BBCC’s primary purpose is to prevent involuntary psychiatric hospitalizations or instability within or loss of living arrangements and to avoid law enforcement intervention in response to managing psychiatric conditions of individuals served. The BBCC treatment team includes Dr. Madduri, Pediatrician (Consultant), Jacqueline Niedzwiecki SG/PRC ,MFT, Joshua Trevino, SG/PRC, BCBA and our Clinical Director, Joe Alvarez, MFT.

Caseload Ratio Survey

Every year regional centers are required to complete a survey regarding their caseload ratios in accordance with Welfare and Institutions Code Section 4640.6(c). The caseload ratio for individuals with complex needs is a new reporting criterion. The Department of Developmental Services (DDS) in its letter dated September 16, 2020 acknowledges that a discrepancy in the methodology used to calculate this ratio has created a finding that is unreliable. With regard to this category, SG/PRC received a special allocation to hire (2) Service Coordinators after the survey due date on March 1, 2020. We appreciate DDS' support and release of this special allocation near the cost for full funding for both of these positions.

When examining the remaining three categories, SG/PRC outperformed the statewide average. Remarkably, SG/PRC's caseload ratios are near statutory thresholds frustrated through the antiquated core staffing funding methodology applying the allocation of the Service Coordinator position at \$37,000 annually including benefits and other costs. As expected when accommodating the described insufficient budget allocation, SG/PRC's caseload ratio did not comply with WIC Section 4640.6 for two consecutive reporting periods. Given this occurrence, SG/PRC is required to complete a Plan of Correction incorporating input from stakeholders. On November 3, 2020, we will allocate our weekly Zoom Community Meeting for the exclusive purpose of discussing our caseload ratios, DDS' findings, and our plan of correction. (See Attachment D)

COVID-19 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. We have recently updated our COVID-19 Operations Contingency Plan, adjusting practices and policies specific to staff visits to community settings, In-person IPP and IFSP meetings, residential facility investigations, and health and safety visits.

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 400,000 pieces of Personal Protective Equipment.
7. We are 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 approving reengagement alternative service delivery plans.
11. We are monitoring budget policy and legislation impacting the developmental services system.

(See Attachment E. Weekly COVID-19 Report and Attachment F. Hotspots Report)

Re-Engagement of Non- Residential Service Delivery

DDS issued a directive dated August 31, 2020 offering both a framework for non-residential service delivery and a new payment platform pivoting from the retainer payment model. Aptly, traditional non-residential services, In-Person are not impacted by this directive.

During the month of September 2020, non-residential service providers can claim for service delivery, if the service provider delivered an alternative service or contacted the individual served to determine if the individual served is interested in receiving an alternative service. During the month of October 2020, the service provider can claim for service delivery, when the service provider has met with the individual served telephonically or through electronic video conference, discussed alternative service delivery options, agree to an option and thereafter develop an Individual Service Plan or equivalent. (See Attachment G)