

Fiscal Year 2017-2018

Purchase of Services (POS) Disparity Data

Community Meetings Report

Draft Report sent to Department of Developmental Services by May 31, 2019

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Background

As of June 27, 2012, the Lanterman Developmental Disabilities Services Act (commonly called the Lanterman Act) was amended requiring the Department of Developmental Services (DDS) and Regional Centers to annually collaborate to compile data in a uniform manner relating to purchase of service (POS) authorization, utilization and expenditure by each regional center. These data have become known as the POS disparity data.

Based on later amendment, the Lanterman Act, as incorporated into Section 4519.5 of the Welfare and Institutions Code (WIC), now requires the data to address all of the following:

- (1) Age of consumer categorized by birth through age two, three through 21 years, and 22 years and older;
- (2) Race or ethnicity of the consumer;
- (3) Primary language of the consumer;
- (4) Disability detail, based on the diagnosis (or diagnoses) for which the consumer is made eligible to receive regional center services;
- (5) Residence type, categorized by age, race or ethnicity and primary language; and
- (6) The number and percentage of individuals who are eligible for regional center services but did not receive purchased services, categorized by age, race or ethnicity, disability and by residence type.

These reports shall be posted by each regional center on its own website by December 31st of each year.

Within three months of posting the data, each regional center shall hold public meetings to receive community input regarding the disparity data based on authorizations and expenditures from the previous fiscal year (meaning from July 1 through June 30th of the previous year).

Following these meetings, the regional center shall submit a draft report to DDS by May 31st which meets the requirements of WIC 4519.5 (f)(1), including the following: the regional center's efforts to improve public attendance and participation at the stakeholder meetings; copies of minutes from the meetings and attendee comments; a determination if there is a need to reduce disparities in the purchase of services among the consumers in the regional center's area; and if there is disparity, the regional center's recommendations and plan to promote equity, and reduce disparities, in the purchase of services.

The next step in the process is that the regional center shall post a report by August 31st addressing the requirements specified in WIC 4519. Then the process begins again with the compiling and posting of the disparity data for the subsequent fiscal year by December 31st.

SG/PRC Demographics

Below is the Census Data for 2010 for the SG/PRC's service area (which DDS uses for Board Composition Survey comparison). In addition, the data from the 2015 American Community

	2010 Census Data		2015 ACS Data American Community Survey		FY 2018 SG/PRC	
Ethnic/Racial Group	Number	%	Number	%	Number	%
White	266,985	21.1%	282,293	20.8%	2,592	17.5%
Hispanic	661,973	52.4%	708,278	52.1%	8,355	56.4%
Black / African-American	48,310	3.8%	42,899	3.2%	784	5.3%
American Indian / Alaskan Native	4,286	0.3%	3,362	0.2%	20	0.1%
Asian (w/ Filipino)	272,183	21.5%	295,286	21.7%	1,802	12.2%
Polynesian / Pacific Islander	1,903	0.2%	2,528	0.2%	13	0.1%
Other	8,708	0.7%	24,553	1.8%	1,243	8.4%
TOTAL	1,264,348		1,359,199		14,809	+1.5%

Survey are included which shows adjusted numbers to reflect anticipated growth or decline in each of these ethnic/racial groups since 2010. These census data are compared with the numbers and percentages of eligible SG/PRC clients in Fiscal Year 17-18. The SG/PRC numbers and percentages are the same as those used in the disparity data contained in this report.

Please note that the 2010 census data did not separate out the Filipino group from the overall Asian group. The most recent SG/PRC data for FY17-18 also includes Filipino in the Asian group.

The majority of individuals served by SG/PRC self-reported as Hispanic, with the number of Hispanic individuals growing at the most rapid rate in comparison to all other ethnic/racial groups. Over the past year, the number of Asian individuals served by SG/PRC has also grown in percentage and actual numbers of individuals served, relative to other ethnic groups (except Hispanic). The number of those self-reported as Black/African-American and white declined in both actual numbers and in percentages of total individuals eligible for SG/PRC POS.

The largest and fastest growing ethnic group served by SG/PRC is the Hispanic/Latino group. Hispanic/Latinos represented 56.4% of all individuals served by SG/PRC in FY 2018. The Asian group is also increasing steadily. While there are fluctuations in the number of African Americans served, there is essentially no growth in the African-American/Black group, as the actual number of individuals served in 2018 is less than those served in FY 2005. The actual number of individuals in the white group has declined steadily and is close to the number served in 2000.

Outreach Efforts

SG/PRC serves a diverse population of people with disabilities. With the exception of significantly under-representing the Asian community, the percentages of individuals served by SG/PRC in each ethnic/racial group is fairly representative of the overall diversity of the community at large. Also noteworthy is that the SG/PRC "Other" ethnic/racial group is several times larger than the "Other" group for the general population and has increased in percentage and actual numbers of individuals over the past year.

In an effort to reach out to the community, SG/PRC arranged to meet with the members of a number of local parent support groups at one of their regularly scheduled meetings at their regular meeting location. The groups included a predominantly Korean Parent Support Group, called Circle of Friends (COF), the Vietnamese Parent Support Group, the Chinese Support group called Foundation for Disabled Youth (FFDY), and The Nuevo Dia Spanish Support Group through The Parents' Place. To accommodate families, two community meetings were held during the day on Saturdays, one at night during the work week, and one during the day when children were in school. For one of the Saturday meeting, child supervision was arranged for the parents attending the meeting.

Presentations of the data were made and discussed at the SG/PRC Vendor Advisory Committee (VAC), the Client Services Committee of the Board, and the full Board of Directors Meeting, all of which were open to the public.

Also, there were separate sessions of the SG/PRC Critical Issues Forum conducted separately in English and Spanish, during which the two-hour format for the Forum allowed for a more thorough review and discussion of the disparity data and analysis. The community was informed that other language translations would be available upon request, but no other language was requested as part of the Critical Issues Forum.

To optimize attendance, a flyer listing all of the scheduled meetings was posted to the SG/PRC website in both English and Spanish. In addition, the flyer was handed out at Board meetings and Board committee meetings, the Vendor Advisory Committee meetings, the LICA meeting, made available in the lobby of the regional center, and was made available at The Parents' Place FRC.

Service Coordinators were requested to encourage families to attend one of these meetings. There was an email blast advertising the meeting to all those signed up for the SG/PRC E-Link. The SG/PRC website featured the community meeting notice and provided a link to all of the meeting dates and times, including which languages would be utilized at the meetings.

New this year, SG/PRC also utilized the RCAPS – Regional Center Automated Phone System – to notify the community of the appropriate meeting date, time, and location in English, Spanish, Mandarin, Vietnamese, and Korean. SG/PRC found that the phone message and/or text message about the meetings was effective in increasing the attendance at several of the meetings – including some families that had not previously participated in support groups or had attended any regional center meetings in the past.

Attachment 1 is the flyer that included the listing of the meetings. This flyer was prepared in English and Spanish and both languages were posted to the SG/PRC website.

In terms of making the presentations accessible to the audiences, a power point presentation was prepared in English and translated into Spanish, Korean and Chinese for audiences for whom English was not the primary language. Handouts at the meeting were available in English and the predominant language of the group in attendance, as many families requested to have an English version plus the version in their primary language. This included Spanish, Korean, Vietnamese and Chinese for the audience, as appropriate.

Two of the meetings were conducted entirely in Spanish: the one for Nuevo Dia and the Spanish presentation of the Critical Issues Forum.

For the meeting with both Vietnamese and Chinese parents, a Vietnamese translator was available, but parents stated that they could understand English. They were reminded that Vietnamese translation for any portion of the presentation could be provided, if they wished it. Mandarin translation was provided for each part of the presentation and discussion. For the second Chinese-language meeting, the presentation was made in English, and then the verbal presentation was translated into Mandarin and Cantonese.

For the meeting with COF, most of the parents in attendance were Korean-speaking; but there was one parent whose primary language was Chinese and two other parents whose primary language was English. For this COF meeting, the presentation was made in English and translated into Korean.

The handout version of the power point presentation in English is included as Attachment 2. (The full Prezi/power point presentation in English and the power point presentations in the other languages will be available on the SG/PRC website for public review. If they were added to this report, their length would make this report too cumbersome). Handouts of the presentations that were made available in English, Spanish, Korean, Vietnamese and Chinese are also posted.

Issues Identified in the Data

The power point presentations of the Annual POS Expenditure Data are included as attachments (as indicated above). The graphs and charts helped to highlight the issues that were identified in the review of the data. The major factors that influenced POS authorizations and expenditures were identified as age, living arrangement, and language. As will be discussed later, culture cannot be assessed directly, but culture and its influence on POS authorizations, expenditures and utilization can be inferred from a combination of language and ethnicity.

Age, Ethnicity and POS

Funding for the majority of services provided to school-aged individuals is the responsibility of the public schools and other generic services, such as California Children Services (CCS). Therefore, a relatively lower amount of POS in this age group should be expected (when compared to adults or early start) as it is anticipated that the majority of the service needs of this age group are met by generic resources or by natural supports provided by the family.

It was not surprising to see a "dip" in POS expenditures for the 3-21 age group over the past three years, given that behavioral health services (i.e., behavior intervention) started to be funded by private insurance and Medi-Cal during that time.

Given that so many individuals (3,593) in the Hispanic group are school-aged, the overall expenditures for Hispanic individuals would be unduly influenced by the <u>appropriately</u> limited POS expenditures for this age group. Therefore, during the community presentations, SG/PRC was careful to only compare ethnic groups based on the same age group or compare previous years to the current year for a given ethnic/age group.

Across <u>all ages</u>, the white group continued to have the highest percentage (82.2%) of all individuals receiving at least some POS expenditures. (As will be discussed below, this has direct relationship to the number of white individuals living in residential care.) There has been steady progress in the percentage of Hispanic/Latino individuals receiving POS, which is now at 79.2%. The group with the lowest percentage of individuals receiving some POS is now the Asian group, at 78.2%.

In terms of POS utilization across <u>all ages</u> living at home, the Hispanic/Latino group is at 74%, which is the average utilization percentage for all ages of those living at home. However, the average dollar amounts for authorization and expenditure for Hispanic/Latino individuals remain below the overall average and below the levels of all other ethnic groups. Although the dollar amount has increased for Hispanic/Latino individuals for both authorizations and expenditures over time, those amounts remain the lowest of the groups.

In contrast, the patterns seen in Early Start (rather than over all or for school-aged or adult individuals) are dramatically different for Hispanic/Latino babies compared to the patterns seen across the other age groups. In FY 17-18, Hispanic/Latino babies received greater dollar value of authorizations and greater expenditures than three other ethnic/racial groups -- African American, Other, and White -- as well as greater than the average across all ethnic groups.

Both Asian and Hispanic individuals served by SG/PRC are predominantly of school-age, from three through 22 years of age. Forty-three percent (43%) of all Asians are school-aged, identical to the 43% of all Hispanic individuals who are school-aged. The numbers of Asian and Hispanic clients receiving Early Start Services (23% and 24%) and services for adults (34% and 33%) were very similar. [See graph titled "Comparison of Ages by Ethnicity FY 2018".]

Based on the similar number of individuals living with their families in each age group living for Hispanic and Asian individuals, one might anticipate that the authorizations and expenditures of the two ethnic groups would be similar. This might be particularly true because these two groups also include many first-generation immigrant families. Also, about half of the Hispanic and half of the Asian families primarily speak their native language rather than English. However, the data show that for ages 3-17 and for adults, Hispanic individuals receive a lower than average authorization and lower than average expenditure, while Asian individuals receive a higher than average authorization and higher than average expenditure.

However, rather than jump to any unfounded assumption that the regional center "prefers" Asian over Hispanic families in light of POS expenditures, one must remember that SG/PRC serves about 12% Asians of all the individuals served, which is about half of the percentage that would be reflective of the general public in the SG/PRC area (22% to 25%). It is estimated that at least another 1,500 – and possibly 2,000 more -- individuals and their families from the Asian community should be served to be representative of the general public. One could speculate that SG/PRC is currently serving only those Asian families who are most capable of navigating the complexities of the service delivery system. The other half is still hidden from SG/PRC, too disconnected to even begin the intake process or too ashamed or embarrassed to step forward to acknowledge to others that they have a family member with a developmental disability.

Both the African-American and white groups were predominantly over the age of 22 years of age, with 63% of all African Americans and 71% of all white individuals served by SG/PRC being older than 22 years. Proportionately, the white group has more adults (1,840) who depend on regional center POS as the primary source of funding for work supports, day programs, transportation and residential living options than the other ethnic groups.

The one striking exception to SG/PRC's overall steady positive progress is seen in the downward trend noted in the Early Start data for the African American/Black group. In FY 17-18, the average

expenditure for African American babies was \$3,794 per person, in contrast to \$5,805 for the average across all ethnic/racial groups.

While expenditures were greater than the per capita expenditures for African Americans in Early Start during the previous three years, the negative difference from the average increased each of the three fiscal years since FY 14-15. In FY17-18 the negative difference was \$2,011 below average, down from \$1,799 below average in the previous FY 16-17, \$1,247 below average in FY15-16, and \$799 below average in FY14-15. [See the graph from the presentations titled "Variance from Average -- Comparison of Per Person Expenditures Data FY15 to FY18 [for] African-American Living at Home."]

Living Arrangement and POS

In addition to the influence of age (and its association with generic resources available) on POS expenditures and authorizations, living arrangement continues to have a significant impact on POS authorizations, expenditures and utilization. Fifty percent (50%) of all SG/PRC individuals who are considered white live in licensed residential care facilities. Forty percent (40%) of all African-Americans served by SG/PRC live in residential care. Only 10% of all SG/PRC Hispanic individuals live in residential care, and only 8% of all SG/PRC Asians reside in licensed residential care. Again, this preponderance of Out-of-Home living arrangements by white and African-American/Black individuals served by SG/PRC is a long-term historic fact and necessitates that discussions of the POS data during community meetings focuses on the individuals living with family in the family home. Approximately 80% of all individuals served by SG/PRC live at home with family.

Factoring Out Age and Living Arrangement

Due to the significant influences of age and living arrangement on the POS authorization, expenditures and utilization, SG/PRC determined that it was more effective to focus on potential differences between ethnic/racial groups that might exist specifically for individuals older than 22 years of age and living at home with their parents/family.

When age and living arrangement are factored out of the overall data, there is clear evidence that there continues to be a disparity in the per capita authorization, expenditure and utilization percentage for Hispanic adults that has persisted since FY15. There appeared to be steady improvement from FY 15 through FY17, but the expenditures dropped to a negative \$526 below average in FY 2018. [See graph titled "Variance from Average Comparison of Per Person Expenditures Data FY 15 to FY18 Hispanic Living at Home."]

The average for African-American adults was a negative \$243 below average across all ethnic group in FY 18, but there had been a big improvement over the FY 17 average of negative \$840 in FY 17. [See graph titled "Variance from Average Comparison of Per Person Expenditures Data FY 15 to FY 18 African-American Living at Home."]

The "Other" Ethnic Group, white, and Asian adult groups had above average expenditures for all years from FY15 through FY18, with the Other group averaging \$2,060 per person in FY18, which was more than three times the average amount for either the Asian or white adult groups.

Language and POS data (NO POS)

In reviewing NO POS expenditures in terms of language for all ages, there was a significant improvement since FY15 in terms of those whose primary language was Spanish. In FY 14-15, 25.2% of individuals whose primary language was Spanish had no POS expenditures; while in FY 15-16, this was reduced to 18.1% without POS. The NO POS percentage in FY17 was 17.3% and 17.4% in FY18.

When looking at individual Asian languages rather than Asian languages collectively, Mandarin was the language group with the highest NO POS percentage across all ages at 23.3% -- up from 19.1% in FY16 and FY17. The next highest group was Vietnamese at 20.5% in FY18.

Most striking was that 38.7% of all Mandarin-speaking families with school-aged children had NO POS in FY18. That was a 2.2% increase from FY17. The next highest percentage of NO POS in FY18 was Vietnamese families with school-aged children at 31.3%, up 3.1% increase from FY17.

However, it should be noted that when comparing NO POS <u>across all ages and all languages</u>, English was the primary language with the highest percentage of NO POS in FY18, at 21.3% or 2,209 individuals. There was a dramatic 36.6% of English-speaking school-aged children with NO POS (1,393).

NO POS and Ethnicity

There has been a steady decline in the NO POS percentages for Hispanic individuals, from FY14 when there was 28.3% NO POS to FY18, when the NO POS percentage dropped to 20.8%. African American clients had 19.9% of individuals with NO POS expenditures in FY18, an improvement from 22.0% in FY17 and 23.7% in FY14.

Comments and Recommendations by Community Members

The date, location, attendance, and feedback for each of the meetings are indicated on the Meeting Minutes, all of which are attached to this report. The comments from family members are incorporated in each of the Meeting Minutes.

While the comments from previous years' community meetings may still be valid, the comments gathered this past March were much different in emphasis. The general themes of the comments and concerns are grouped into the following broad categories:

Families were overwhelmingly positive about the changes that SG/PRC has made in terms of implementing suggestions from previous community meetings. Families were particularly happy to hear about the Parent Mentor Initiative (PMI) and Navigating the Regional Center System (NRCS) workshops and were eager to know more about these equity projects and how they could participate in and learn from these projects. They wanted to see these projects continue and/or expand.

Many families indicated that more outreach was needed with local pediatricians and other physicians to help them learn more about the regional center, encourage them to complete developmental screenings and refer to the regional center.

Another suggestion was to outreach through pre-schools and other early childhood/day care settings, so that families could find out about the regional center earlier in the life of their child.

The other recurrent recommendation was for SG/PRC to get more engaged in social media (e.g., YouTube or live (or recorded) broadcasts of training) as a means of distributing information to the community and advertising training and other regional center-related activities. It was surprising that many families that previously were considered less familiar with technology, such as accessing the SG/PRC website or using email, seemed to be adept at using social media. There were also some specific recommendations on improving the SG/PRC website, to make it easier for parents to access information about support group meetings and training for parents. Families requested that SG/PRC provide more training information via our E-Link blasts and our website calendar.

Additional Input

In addition to the information gathered through the community meetings in March, SG/PRC has gathered information from families through support group meetings and through the disparity projects. SG/PRC has done some in-depth analysis of current POS data to better understand trends, as well.

Additional Information from Parents and Vendors

On April 11, 2019, there was a meeting with the LICA – Local Interagency Coordinating Area for Early Start. Hand-outs were provided that showed the trends in Early Start for various ethnic and language groups. A listing of the many languages spoken by families of individuals served by SG/PRC was shared to show that there are growing numbers in Arabic and Farsi, as well as in Cantonese.

The main point was to encourage providers to recruit staff to communicate with our families of diverse cultures and backgrounds. It was pointed out that there was an increase in NO POS for Mandarin-speaking families, as well as a smaller but important increase in NO POS for Cantonese-speaking families. The vendor community stated that the wages that can be paid to early

intervention direct service providers is insufficient to attract and retain qualified bi-lingual staff — those who speak Asian languages. In addition, SG/PRC was told that Asian families in the general public do not value jobs in the area of disabilities services. Asian parents are encouraging their family members to become physicians and pharmacists and to plan for "professional" jobs and careers that are more highly valued in the Asian community. This lack of vendor staff members that speak the various needed languages needs to be addressed systemically, as SG/PRC cannot sufficiently address the rate issue.

Understanding the Downward Trend in Early Start POS Expenditures for African Americans

The number reported for ages 0-2 in FY 17-18 was 76 African American babies and toddlers, including those who come and go out of our system quickly. The concern, as can be seen from the graph is that the Authorizations for African-Americans is \$6,291.00 per capita, while the average across all ethnic groups is \$8,256.00. That is the lowest for all Early Start eligible groups by ethnicity. The expenditures in FY 17-18 for African Americans were \$3,794 compared with the average of \$5,805. This problem is compounded by the fact that the utilization is only 60%, which is 10% or more lower than for other groups.

As the data are almost two years old at the time of this report, SG/PRC analyzed more currently available data. In March 2019, there were about 55 African American babies eligible for Early Start services, and 21 of them had Department of Children and Family Services (DCFS-Child Protective Services in LA County) involvement. There have been difficulties and delays with obtaining consent to initiate Early Start services for children involved with DCFS. The judge involved with these children does not want to take away the educational rights from the biological parents, although the children have been removed from the parents' home for their protection. The judge is not permitting the "foster mom" to sign the IFSP and consent to services; therefore, the consent to initiate services is delayed or does not get completed because of depending on these biological parents to complete the consent forms in a timely manner.

SG/PRC has a large number of foster care homes and more licensed group homes for children than other areas. Consequently, DCFS places children in SG/PRC's area, although the parents continue to reside outside of the SG/PRC service area and may live anywhere in Los Angeles County, including places like Antelope Valley. The distance and disconnection with the parents are other complicating factors in obtaining timely services. Delayed services result in less services for the children over the course of their first three years of life. These issues lead to lower authorizations and lower expenditures for this group.

An in-depth analysis of EI services was completed for the time period from 7/1/18 through 12/31/18, specifically reviewing those babies/families who had less than 80% utilization of authorized services in hopes of better understanding the African American trends seen over the past three years. Unfortunately, only nine (9) children out of the 588 cases reviewed were African

American. This was not a large enough number to provide reliable insight into what may be the factors affecting the FY17-18 data.

In two (2) of the nine cases, the vendor billed late or has not billed at all for the service. This late billing may be a factor that affects the utilization and expenditures for all EI recipients, not just those who are African American. Other examples of underutilization include the following: vendor having a shortage of staff to provide the services or unable to meeting the availability of the family; change in provider or early discharge from Early Start but POS authorization not terminated in a timely manner; parent terminating service because they felt overwhelmed; lack of parent follow-up with appointments or rescheduling. These factors affect all families receiving Early Start services and did not shed light on the particular problem with decreasing Authorization and Expenditures for Early Start African Americans.

SG/PRC will need to continue exploring the potential factors affecting Authorizations and Expenditures for African Americans participating in Early Start.

<u>How Prior Annual Report Recommendations have been Implemented – (Implementation of Prior Recommendations)</u>

All of the FY16-17 disparity grant funded projects were directly inspired by the feedback provided during the community meetings held in February and March prior to the submission of the initial proposals. Most of these initial proposals have been continued with FY 17-18 or FY 18-19 funds. They include the following:

- Providing individualized support to families through the Parent Mentor Initiative (PMI), for monolingual Spanish-speaking families, as well as bilingual families and those who speak English;
- Offering small-group educational workshop series called Navigating the Regional Center System (NRCS) in English and Spanish;
- Conducting outreach activities and promoting the development of parent support groups for the Asian community through the full-time SG/PRC Community Outreach Specialist (who is Korean-speaking);
- Funding The Parents' Place Resource Center to employ Vietnamese Family Support Specialists to assist with the outreach and parent support, specifically for the Vietnamese community;
- Supporting additional hours of the Chinese Family Support Specialist employed by The Parents' Place who is fluent in Cantonese and Mandarin;
- Funding child supervision so that families can attend meetings and participate in trainings
 provided at The Parents' Place, as child supervision was identified as one of the barriers to
 families in accessing in-person trainings and meetings;

- Developing online modules for families to understand their child's disability, including an additional module for Down Syndrome, that will be translated into Spanish, Chinese, Korean and Vietnamese;
- Providing translations of ADEPT behavior management training modules in Mandarin,
 Korean and Vietnamese;
- Developing and maintaining a Parent Learning Portal through the SG/PRC website so that
 families can access the "Understanding Your Child's Disability" and ADEPT modules -- and
 soon the webinars of the Critical Issues Forum and online version of the Navigating the
 Regional Center System workshops. The request for online access to training information
 came from parents requesting this option, as their work schedule prevented their
 attending in person.

The focus of the current year's NRCS on Communities of Color and the Symposia on the "Developmental Journey of Children in the African American Community" both came from SG/PRC's concern about the lack of gains demonstrated in the data over the last several years for African-American/Black individuals living at home.

Conclusions

The issue of disparity in the developmental disability system is complex and cannot be completely addressed by regional centers. Disparity is rooted in many socio-economic, ethnic/racial, demographic, societal and cultural histories, traditions, values and realities beyond the influence of regional centers.

Nevertheless, SG/PRC will continue to address this issue along two major themes: reducing as many barriers as possible within control of the regional center so that individuals and families can access the services and supports to which they are entitled; and to educate and empower individuals and families to access and utilize the opportunities that are offered to help promote choice, independence, a happy, healthy, and safe productive life, and full inclusion in the community for individuals with developmental disabilities.

As stated in previous annual reports, the regional center POS Expenditures does not provide to whole picture of whether there is disparity within a specific diagnosis, age, language, or ethnic/racial group. Regional center expenditures do not reflect or include the cost of generic resources (including public schools, Medi-Cal and insurance), community services or the cost to families for natural support. It seems that it is often forgotten that regional centers are required to access generic services before accessing RC paid services. Therefore, "NO POS" for a particular individual may in fact be a declaration of a "success story" -- that the regional center partnership with the family has been successful in achieving all the supports needed through generic resources.

In addition, the legislature and others need to remain mindful that regional center services are voluntary. Families can refuse to have their child assessed and made eligible for regional center as well as refuse any of the services that are offered. We currently have no way to track the number of services that are offered and refused or situations in which the family fails to follow through with the recommendations.

Also, the currently available data are only total amounts and per capita averages. We do not know the range for a given group, nor the mode (most common or frequent amount) nor the median. Therefore, for example, an individual might only have one IPP translation done during a fiscal year for \$150 and another person could have \$10,000 worth of services in the same fiscal year. The per capita amount would be \$5,075, which would not be a realistic representation for either person. This is one reason that SG/PRC has focused as much as we do on the NO POS data. We are able to make comparisons of equal value. However, as mentioned above, one cannot assume that an individual with NO POS has unmet service needs.

There are three major conclusions that SG/PRC can make based on these past years of analyzing disparity data and working directly with families who have previously been disenfranchised:

- While speaking a primary language other than English can be a barrier to accessing services (especially vendored services), SG/PRC data show that ethnicity which is as close as we can currently measure "culture" with these data appears to be a more powerful influence than language in accessing and utilizing regional center paid services (POS).
- Building relationships and sometime repairing relationships with families is important in building trust. That trust leads to the families' willingness to access services. SG/PRC is finding that using the Person-Centered Thinking approach is instrumental in building and repairing relationships. Both PMI and NRCS have also contributed to building and repairing the relationships with many families.
- Focusing on strengthening the relationship between families and regional center helps families overcome their barriers to using regional center services.

Proposed SG/PRC Implementation Plan for FY 19-20

There has been overall improvement since more attention has been directed toward ameliorating the disparities between and among ethnic/racial and language groups. However, there continues to be a very real discrepancy between the authorizations and expenditures of POS for Hispanic individuals in the 3-17 age group and for adults in comparison to other ethnic/racial groups. The one exception noted was for infants and toddlers younger than three years of age. It was also clear that outreach to the Asian community continues to be needed.

SG/PRC has committed to implement the following actions as part of our implementation plan.

- ▶ SG/PRC will seek continued funding for our highly successful and effective equity projects, especially: (1) the Parent Mentor Initiative (PMI) requesting expansion to assist all those who have had difficulty in access and utilizing POS services; (2) Navigating the Regional Center Services workshops, expanding the current in English workshop series to include Spanish, Cantonese, Mandarin and Vietnamese; and (3) our Community Outreach Specialist for our Asian family support and outreach efforts.
- ▶ SG/PRC will continue to develop and disseminate written material in a variety of languages, including information to help families understand:
 - What to expect from regional center at each age group;
 - o The transition from Early Start to school-age services;
 - The transition from school-age services to adult services and the options available, including employment;
 - Living options for adults, including training for adults to acquire independent living shills while living with family, as well as living outside of the family home. Also to help families understand long-term living options.
- ▶ SG/PRC will provide training to new Service Coordinators on Person-Centered Thinking (PCT) and will continue to support and promote implementing Person-Centered practices in the way we conduct regional center business. Using Person-Centered Thinking tools in the IPP and IFSP process is an effective way to build better working relationships with individuals and their families as well as an excellent approach to identifying and validating the priorities and cultural values of the individuals we serve and their families.
- SG/PRC will continue to prepare periodic reports comparing POS authorizations with actual expenditures, distributed to service coordinators (SCs) and reviewed by the SCs and their managers. Discrepancies in utilization (i.e., underutilization) will prompt the SC to contact the families and vendors, as appropriate, to discuss possible reasons for the discrepancies and to develop a plan to ameliorate the lack of utilization.
- SG/PRC will continue to post to our website and make available current Purchase of Service (POS) Policies and POS summaries of service options organized by age groups, in English, Spanish, Chinese, Korean, and Vietnamese.
- ▶ In response to comments during several different community meetings and from those who spoke a variety of languages SG/PRC will explore increasing our use of social media

(including YouTube videos) to increase communication about parent training and support opportunities and other events associated with the regional center

- ▶ SG/PRC will collaborate with the Vendor/Provider Community to do the following:
 - Encourage them to recruit and hire more office staff and direct service providers who speak languages other than English.
 - Encourage vendors to bill in a timely manner so that utilization reports are as accurate as possible.
- ▶ Request DDS to obtain translations of the formal appeal request form into Simplified and Traditional Chinese, Korean and Vietnamese. Currently the Notice of Proposed Action is being translated by SG/PRC into the family language, but the official state form for submitting to the Office of Administrative Hearings is only available in English and Spanish.

List of Attachments – including Community Meeting Minutes

Attachment 1 – Community Meeting Flyer

Attachment 2 - Minutes for all of the Community Meetings

Attachment a – Minutes of 3/11/19 Meeting of Circle of Friends Support Group

Attachment b – Minutes of 3/13/19 Meeting of Nuevo Dia Spanish Support Group

Attachment c – Minutes of 3/16/19 Meeting of Vietnamese and Chinese Group

Attachment d – Minutes of 3/20/19 Critical Issues Forum – English

Attachment e – Minutes of 3/20/19 Critical Issues Forum – Spanish

Attachment f -- Minutes of 3/30/19 Meeting of FFDY Chinese Group

Attachment g – Official Minutes of the Vendor Advisory Committee on 3/7/19

Attachment h – Official Minutes of the Client Service Committee on 3/27/19

Attachment I – Official Minutes of the SG/PRC Board Meeting on 3/27/19

SG/PRC COMMUNITY MEETINGS -- ATTACHMENTS OF PRESENTATIONS AND HAND-OUTS

Attachment 3 – English language Prezi/Power Point Presentations

- 3-a Critical Issues Forum topic on 3/20/19 (full presentation)
- 3-b Client Services Committee of SG/PRC Board meeting on 3/27/19
- 3-c Board of Directors meeting on 3/27/19
- 3-d Asian community meetings on 3/11th, 3/16th and 3/30th -- all 2019
- 3-e Power Point Presentation for Vendor Advisory Committee on 3/07/19

Attachment 4 -- English language Hand-outs provided at Community Meetings

- 4-a Critical Issues Forum on 3/20/19
- 4-b Vendor Advisory Committee on 3/7/19
- 4-c Board meeting on 3/27/19
- 4-d For Asian Audiences who prefer to read English 3/11/19, 3/16/19, and 3/30/19

Attachment 5 – Spanish language Prezi/Power Point Presentation

Attachment 6 – Spanish language Hand-out for Community Meetings on 3/13/19 and 3/20/19

Attachment 7 – Prezi/Power Point Presentation for Asian audiences Presented on 3/11/19, 3/16/19, and 3/30/19

Attachment 8 – Korean Language Hand-out, provided on 3/11/19

Attachment 9– Chinese Language Hand-out provided on 3/16/19 and 3/30/19

Attachment 10 – Vietnamese Language Hand-out provided on 3/16/19