

# **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, December 9, 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, December 9, 2020 at 7:15 p.m.**  
**Videoconference Meeting**

**BOARD OF DIRECTORS**

**Gisele Ragusa, Board President**

**Sheila James 1<sup>st</sup> Vice 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**

<b>7:15 - 7:25</b>	<b>CALL TO ORDER (Gisele Ragusa, President)</b>	None	None	None
	• <b>Roll Call</b>	<b>Quorum</b>	<b>None</b>	<b>None</b>
	• <b>Review Agenda</b>	Info	Attached	White
	• <b>Minutes of September 23, 2020 &amp; October 28, 2020 Meeting</b>	<b>Consent</b>	<b>Attached</b>	<b>White</b>
<b>7:25 - 7:30</b>	GENERAL PUBLIC INPUT	Info	None	None
<b>7:30 - 7:40</b>	EXECUTIVE/FINANCE COMMITTEE (Gisele Ragusa, Anthony Hill & Roy Doronila) - Financial Report - <b>Contracts</b> (Lucina Galarza)	<b>Action</b>	Attached	Ivory
<b>7:40 - 7:45</b>	COMMUNITY RELATIONS/LEGISLATIVE COMMITTEE (Daniel Rodriguez)	Info	Attached	Orange
<b>7:45 - 7:50</b>	CLIENT SERVICES/ADVISORY COMMITTEE (Shannon Hines and Sheila James) <b>Behavior Intervention Policies</b>	<b>Action</b>	Attached	Yellow
<b>7:50 - 7:55</b>	VENDOR ADVISORY COMMITTEE (David Bernstein)	Info	Attached	Goldenrod
<b>7:55 - 8:00</b>	STRATEGIC DEVELOPMENT COMMITTEE (Julie Chetney)	Info	Attached	Green

APPROXIMATE SCHEDULE	ITEM	ACTION	MATERIAL	COLOR
8:00– 8:25	BOARD OVERVIEW (Gisele Ragusa) <b>Special Discussion:</b> Adult Services – Supports for Aging Parents (SG/PRC Staff)	Info	None	None
8:25– 8:35	EXECUTIVE DIRECTOR'S REPORT (Anthony Hill, Executive Director) <ul style="list-style-type: none"> <li>• COVID 19 Update</li> <li>• Positivity Report/Tracking</li> <li>• Hotspots/Surge Resources</li> <li>• PPE Distribution (Video)</li> <li>• Tenant Improvements</li> </ul>	Info	None	None
8:35– 8:40	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)**

**October 28, 2020**

**ATTENDANCE**

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

**PRESENT:**

Gisele Ragusa  
Sheila James  
Julie Chetney  
David Bernstein  
Preeti Subramaniam  
Shannon Hines  
Natalie Webber  
Georgina Molina  
Penne Fode  
Daniel Rodriguez

**GUESTS:**

Sofia Cervantes  
Jacqueline Gaytan  
Maria Ramirez

**STAFF:**

Anthony Hill, Executive Director  
Lucina Galarza, Director of Community Services  
Carol Tomblin, Director of Compliance  
Joe Alvarez, Associate Director of Clinical Services  
Daniela Santana, Director of Client Services  
Roy Doronila, Chief Financial Officer  
Jessi Lagos, Service Coordinator  
Edith Aburto, Translator, Manager of Family Services  
Yaned Busch, Manager of Family Services IV  
Yvonne Gratianne, Communications & Public Relations  
Johnny Pang, IT Manager  
Willanette Satchell, Exec. Assistant in Management  
Erika Gomez, Exec. Assistant BOD

**ABSENT:**

John Randall (LOA)  
Mary Soldato  
Sherry Meng  
Julie Lopez

**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 agenda was reviewed.

**B. PUBLIC INPUT:**

None



### **C. BOARD RECOGNITION**

Dr. Gisele Ragusa, Board President, recognized the Martinez Family with a certificate that will be sent to them in appreciation of their outstanding contributions to improving the lives of persons with developmental disabilities.

### **D. CONTRACT REVIEW**

Presented by Lucina Galarza, Director of Community Services

- *Quick Transport*

The Board reviewed the contracts based on their policy for contracts over \$250,000.

**M/S/C (Hines & Molina)**

**Abstain: Bernstein**

### **E. SPECIAL PRESENTATION**

Dr. Carol Tomblin, Director of Community Outreach and Compliance spoke in detail about the following information regarding the National Core Indicators: (See attached)

#### *National Core Indicators - Child Family Survey FY 2018/19 Selected Findings*

- What is National Core Indicators?
- Trailer Bill Language (TBL) Affecting Statutes of 2019
- Child Family Survey
- Positive Responses – SG/PRC vs. Statewide Average
- Areas in Need of Improvement – Compared with Statewide Averages
- Areas in Need of Improvement – Lower with Statewide Averages
- Next Steps
- Dr. Tomblin asked for feedback in the following areas and her staff captured any responses given
  - Areas of greatest concern
  - What needs to be prioritized?
  - How should SG/PRC make the necessary changes?

#### *National Core Indicators - Child Family Survey FY 2017/18 Selected Findings*

- What is National Core Indicators?
- Trailer Bill Language (TBL) Affecting Statutes of 2019

- Features of the Adult In-Person Survey
- Choices – Higher than CA Average
- Employment – Higher than CA average
- Service Coordinator – Higher or at CA average
- Additional Services Needed/Requested
- Health – Exceeding CA Averages
- Satisfaction/Relationships – Positive Comments
- Cultural Competence – Near or Higher than Statewide Percentages
- Areas Needing Improvement
- Next Steps
- Implementing Recommendations - Dr. Tomblin asked for feedback in the following areas and her staff captured any responses given. She also encouraged people to email her with questions and/or recommendations.
  - Areas of greatest concern
  - What needs to be prioritized?
  - How should SG/PRC make the necessary changes?

**Performance Contract** – The 2021 SG/PRC Performance Contract Plan was reviewed and approved.

**M/S/C (Bernstein & Chetney) The Board approved the Performance Contract Plan.**

**F. EXECUTIVE SESSION**

None

**Next meeting on Wednesday, December 9, 2020 at 7:15 p.m.**

**BOARD MINUTES FROM THE OCTOBER 28, 2020 MEETING**

Submitted by:

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

\_\_\_\_\_  
Date

# National Core Indicators Adult In-Person Survey FY 2017/18 -- Selected Findings

Presented to the SG/PRC Board of Directors  
on October 28, 2020

## What is National Core Indicators?

- ▶ The National Core Indicators (NCI) is a tool that has been used in California since 2010, when the State implemented a nationwide quality assessment survey (Welfare and Institutions Code section 4571). The NCI tool --
- ▶ (1) Provided nationally validated, benchmarked, consistent, reliable, and measurable data for DDS' Quality Management System, and
- ▶ (2) Enabled DDS and all regional centers to compare the performance of California's developmental services system against other states' developmental services systems -- and to assess quality and performance among all of the regional centers.

## Trailer Bill Language (TBL) Affecting Statutes of 2019

- ▶ Welfare and Institutions Code 4571 was amended in 2019 to require regional centers to annually present data collected from the NCI findings.
- ▶ Required presentation at a public meeting of the governing board
- ▶ Required notice to be posted on regional center's internet website and to be sent to individuals served, families and stakeholders
- ▶ Required a report to be sent to DDS 60 days following the meeting regarding implementation of these requirements.

## Features of the Adult In-Person Survey

- ▶ A face-to-face meeting is conducted with a person who receives services from the Regional Center
- ▶ Survey questions cover 60 Outcome Areas
- ▶ Questions include how individuals feel about where they live and work, the kinds of choices they make, the activities they participate within their community, their relationships, and their health and wellbeing

### Choices - Higher than CA Average

The following questions were answered as "yes" --

	CA	SG/PRC
CHOSE OR CAN REQUEST TO CHANGE CASE MANAGER	90%	96%
CHOOSES OR HAS INPUT IN WHAT TO BUY WITH SPENDING MONEY	82%	88%
CHOOSES OR HAS INPUT IN CHOOSING DAILY SCHEDULE	82%	84%
CHOOSES OR HAS INPUT IN CHOOSING HOW TO SPEND FREE TIME	89%	94%

### Employment - higher than CA average

HAS PAID JOB - GROUP WITH OR WITHOUT PUBLICLY FUNDED SUPPORTS	CA	SG/PRC
Yes	29%	56%
NUMBER OF HOURS WORKED DURING TWO-WEEK PERIOD IN PAID GROUP JOB IN COMMUNITY-BASED SETTING	CA	SG/PRC
	34.8%	17%
JOB INDUSTRY	CA	SG/PRC
FOOD PREPARATION AND FOOD SERVICE	13%	20%
BUILDING AND GROUNDS CLEANING OR MAINTENANCE	28%	33%
INDIVIDUAL, COMPETITIVE EMPLOYMENT	11%	30%

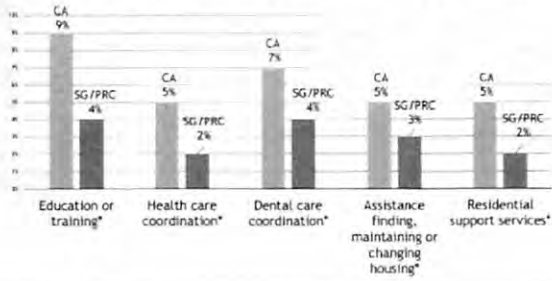
### Service Coordinator - Higher or at CA average

	CA	SG/PRC
MET CASE MANAGER/SERVICE COORDINATOR	93%	94%
CASE MANAGER/SERVICE COORDINATOR ASKS WHAT PERSON WANTS	84%	80%
ABLE TO CONTACT CASE MANAGER/SERVICE COORDINATOR WHEN WANTS TO	84%	82%
STAFF COME AND LEAVE ON TIME	93%	92%

### Service Coordinator - Higher or at CA average - continued

	CA	SG/PRC
TOOK PART IN LAST IPP MEETING	99%	99%
Yes, or had option but chose not to		
KNEW WHAT WAS BEING TALKED ABOUT AT LAST IPP MEETING	84%	84%
Yes		
IPP MEETING INCLUDES PEOPLE PERSON WANTED THERE	93%	96%
Yes		
CHOSE SERVICES GETS AS PART OF IPP	76%	80%
Yes		

**Additional Services Needed/Requested** (\*lower % is better)



**Health - Exceeding CA averages**

	CA	SG/PRC
FLU VACCINE IN THE PAST YEAR	69%	73%
ANNUAL PHYSICAL EXAM IN THE PAST YEAR	85%	91%
PAP TEST IN PAST THREE YEARS (WOMEN 21+)	48%	66%
MAMMOGRAM IN PAST TWO YEARS (40+)	69%	74%
COLONOSCOPY WITHIN PAST TEN YEARS (50+)	31%	50%
HEARING TEST IN THE PAST FIVE YEARS	50%	55%
TAKING 5-10 OR MORE MEDICATIONS FOR MOOD, ANXIETY AND/OR PSYCHOTIC DISORDER* (lower is better)	12%	1%

**SATISFACTION/RELATIONSHIPS - POSITIVE COMMENTS**

- ▶ SAID "YES" TO THE FOLLOWING STATEMENTS -
- ▶ WANTS TO LIVE SOMEWHERE ELSE\* - CA = 26% SG/PRC = 16%
- ▶ HAS PAID JOB AND LIKES JOB - CA = 89% SG/PRC = 93%
- ▶ HAS PAID JOB AND WANTS TO WORK SOMEWHERE ELSE\* -- CA = 31% SG/PRC = 28%
- ▶ CAN GO ON A DATE (OR MARRIED OR LIVING WITH PARTNER) CA = 75% SG/PRC = 82%

THERE IS AT LEAST ONE PLACE WHERE PERSON FEELS AFRAID OR SCARED\*  
CA = 19% SG/PRC = 10%

\* MEANS THAT THE LOWER NUMBER IS A MORE POSITIVE OUTCOME

**SATISFACTION/RELATIONSHIPS - POSITIVE COMMENTS - Cont.**

- SAID "YES" TO THE FOLLOWING STATEMENTS -
- ▶ WANTS MORE HELP TO MAKE OR KEEP IN CONTACT WITH FRIENDS\*  
CA = 39% SG/PRC = 23%
  - ▶ HAS ENOUGH TO DO AT HOME CA = 84% SG/PRC = 86%
  - ▶ GETS TO GO OUT/DO THINGS LIKES TO DO AS MUCH AS WANTS  
CA = 82% SG/PRC = 84%
  - ▶ THERE ARE RULES ABOUT HAVING FRIENDS/VISITORS IN HOME\*  
CA = 31% SG/PRC = 23%
  - ▶ CAN USE PHONE AND INTERNET WHEN WANTS CA = 91% SG/PRC = 96%

\* MEANS THAT THE LOWER NUMBER IS A MORE POSITIVE OUTCOME

## CULTURAL COMPETENCE - NEAR OR HIGHER THAN STATEWIDE PERCENTAGES

RESPONDENTS ANSWERED "YES" --

ARE THERE STAFF AT YOUR JOB WHO SPEAK YOUR PREFERRED LANGUAGE?

CA = 94% SG/PRC = 100%

ARE THERE STAFF AT YOUR DAY PROGRAM OR WORKSHOP WHO SPEAK YOUR PREFERRED LANGUAGE? CA = 96% SG/PRC = 99%

DID YOU GET A COPY OF YOUR IPP IN YOUR PREFERRED LANGUAGE?

CA = 96% SG/PRC = 95%

## AREAS NEEDING IMPROVEMENT

AMOUNT OF TIME WANTS TO SPEND AT DAY PROGRAM\*

▶ WANTS TO SPEND MORE TIME THERE

CA = 18% SG/PRC = 5%

▶ HAPPY WITH AMOUNT OF TIME

CA = 68% SG/PRC = 18%

▶ WANTS TO SPEND LESS TIME THERE\*

CA = 11% SG/PRC = 70%

LACK OF TRANSPORTATION IS REASON CANNOT ALWAYS SEE FRIENDS

CA = 36% SG/PRC = 45%

## AREAS NEEDING IMPROVEMENT - Cont'd.

TYPE OF JOB IS INDIVIDUAL, WITH PUBLICLY FUNDED SUPPORTS

CA = 24% SG/PRC = 7%

CHOSE OR HAD INPUT ON CHOOSING PAID COMMUNITY JOB

CA = 83% SG/PRC = 72%

CHOSE OR HAD INPUT ON CHOOSING DAY PROGRAM OR WORKSHOP

CA = 48% SG/PRC = 34%

WANTS A JOB IN COMMUNITY

CA = 47% SG/PRC = 40%

HAS EMPLOYMENT AS GOAL IN SERVICE PLAN

CA = 29% SG/PRC = 20%

TAKES CLASSES/TRAINING TO GET A JOB OR BETTER JOB

CA = 20% SG/PRC = 13%

## Next Steps

▶ Report to be submitted to DDS within 60 days that includes:

▶ Copies of presentation

▶ Minutes from the community meeting

▶ Attendees comments

▶ Regional Center recommendations and plans to use the information to address regional center priorities and/or strategic directions to improve specific areas of performance, or both

## Implementing Recommendations

- ▶ Areas of your greatest concern
- ▶ What needs to be prioritized?
- ▶ How should SG/PRC make the necessary changes?
- ▶ Remember that these results are from 2017-2018. Changes made now will not be reflected in the 2020-2021 Survey, as that is already in progress. Improvements will not be seen in 2023-2024

# National Core Indicators Child Family Survey FY 2018/19 -- Selected Findings

Presented to the SG/PRC Board of Directors  
on October 28, 2020

## What is National Core Indicators?

- ▶ The National Core Indicators (NCI) is a tool that has been used in California since 2010, when the State implemented a nationwide quality assessment survey (Welfare and Institutions Code section 4571). The NCI tool --
- ▶ (1) Provides nationally validated, benchmarked, consistent, reliable, and measurable data for DDS' Quality Management System, and
- ▶ (2) Enables DDS and all regional centers to compare the performance of California's developmental services system against other states' developmental services systems -- and to assess quality and performance among all of the regional centers.

## Trailer Bill Language (TBL) Affecting Statutes of 2019

- ▶ Welfare and Institutions Code 4571 was amended in 2019 to require regional centers to annually present data collected from the NCI findings.
  - ▶ Required presentation at a public meeting of the governing board
  - ▶ Required notice to be posted on regional center's internet website and to be sent to individuals served, families and stakeholders
  - ▶ Required a report to be sent to DDS 60 days following the meeting regarding implementation of these requirements

## Child Family Survey

- ▶ Traditionally, the Child Family Survey was only available in paper form, sent to the families to complete and return. More recently, states have the option of providing on-line responses or both paper and on-line options.
- ▶ It is recommended that 1000 families be sampled, in the hopes of getting 40% response to the survey. 400 respondents are needed to get most accurate and reliable data.
- ▶ Survey questions cover demographics as well as Outcome Areas, such as access to healthcare professionals, access to other services, choice, community participation, information, planning, and satisfaction.
- ▶ Questions include how individuals feel about the services and supports that they have received from providers and regional center, and whether regional center services have made a difference.



Positive Responses, continued

CA	SG/PRC
40%	25%
19%	19%
OUT OF POCKET EXPENSES LAST YEAR - NOTHING \$0.00	
32%	24%
SERVICES AND SUPPORTS RECEIVED FROM THE REGIONAL CENTER	
OTHER SERVICES/SUPPORTS BESIDES RESPITE, EARLY INTERVENTION, TRANSPORTATION	
EVER RECEIVED OTHER SERVICES AND SUPPORTS ? - example SSI	
37%	44%
70%	63%
SERVICES OR SUPPORTS FROM OTHER AGENCIES	
92%	91%
ARE SERVICES AND SUPPORTS HELPING YOUR CHILD TO LIVE A GOOD LIFE?	
41%	44%
DID YOU DISCUSS HOW TO HANDLE EMERGENCIES ( MEDICAL OR NATURAL DISASTER) AT YOUR CHILD'S LAST PPV/ISP MEETING?	

AREAS IN NEED OF IMPROVEMENT - COMPARED WITH STATEWIDE AVERAGES

CA	SG/PRC
70%	66%
DOES YOUR FAMILY GET THE SUPPORT IT NEEDS?	
91%	10%
IF YOU ASKED FOR CRISIS OR EMERGENCY SERVICES DURING THE PAST YEAR, WERE SERVICES PROVIDED WHEN NEEDED?	
66%	59%
DOES THE SERVICE COORDINATOR ALWAYS RESPECT YOUR FAMILY'S CHOICES AND OPINIONS?	
25%	32%
DOES THE SERVICE COORDINATOR USUALLY RESPECT YOUR FAMILY'S CHOICES AND OPINIONS	
[NOTE: ALWAYS + USUALLY = 91% FOR BOTH STATEWIDE AND SG/PRC]	

Child Family Survey, continued

- ▶ This review provides a comparison of statewide averages with the percentages from the SG/PRC surveys.
- ▶ Most often, if the differences in percentages on a question are 10 or less, they are not included in this review.
- ▶ In general, DDS highlights the results that are either 5% above the statewide average or 5% below the statewide average. The significance of the difference depends on the number of respondents.
- ▶ Answers of "always" and "usually" are combined to yield a "yes" response. All other responses are considered to be a "no" answer.
- ▶ DDS does not provide the results of the statewide surveys compared with other states.

Positive Responses - SG/PRC vs. Statewide Average

CA	SG/PRC
90%	92%
DO YOU FEEL THAT REGIONAL CENTER SERVICES HAVE MADE A POSITIVE DIFFERENCE IN THE LIFE OF YOUR FAMILY?	
43%	48%
DO YOU KNOW HOW TO FILE A COMPLAINT OR GRIEVANCE ABOUT PROVIDER AGENCIES OR STAFF?	
30%	36%
IF YOUR CHILD DOES NOT COMMUNICATE VERBALLY, ARE THERE SUPPORT WORKERS WHO CAN COMMUNICATE WITH YOUR CHILD?	
40%	35%
DO YOU NEED ADDITIONAL RESPITE SERVICES* (LOWER % IS BETTER)	

## AREAS IN NEED OF IMPROVEMENT - LOWER THAN STATEWIDE AVERAGES-Cont.

	CA	SG/PRC
DOES YOUR CHILD GET ALL SERVICES LISTED IN IPP/IFSP?	87%	79%
DID YOU HELP MAKE YOUR CHILD'S TRANSITION PLAN? (69% SAID THEY HAD A TRANSITION PLAN AT SG/PRC, 66% FOR CA)	84%	79%
DO YOU FEEL PREPARED TO HANDLE THE NEEDS OF YOUR CHILD IN AN EMERGENCY SUCH AS A MEDICAL EMERGENCY OR A NATURAL DISASTER?	71%	62%
DOES YOUR CHILD ALWAYS HAVE THE SPECIAL EQUIPMENT OR ACCOMMODATIONS THAT S/HE NEEDS (E.G., WHEELCHAIR, RAMP, COMMUNICATION BOARD)?	41%	35%

## AREAS IN NEED OF IMPROVEMENT - LOWER THAN STATEWIDE AVERAGES - Continued

	CA	SG/PRC
CAN YOUR CHILD ALWAYS SEE HEALTH PROFESSIONALS (DOCTOR, DENTIST, PSYCHOLOGIST) WHEN NEEDED?	71%	65%
CAN YOUR CHILD GO TO THE DENTIST WHEN NEEDED?	66%	59%
ARE YOU ALWAYS ABLE TO CONTACT YOUR CHILD'S SERVICE COORDINATOR WHEN YOU WANT TO? USUALLY ABLE TO CONTACT...? [NOTE; ALWAYS + USUALLY = CA 83% SG/PRC 81%]	50% 33% 83%	44% 37% 81%
DO SUPPORT WORKERS ALWAYS SPEAK TO YOU IN A WAY THAT YOU UNDERSTAND? USUALLY SPEAK TO YOU IN A WAY THAT YOU UNDERSTAND? [NOTE; ALWAYS + USUALLY = CA 95% SG/PRC 96%]	71% 24%	66% 30%

### Next Steps

- ▶ Report to be submitted to DDS within 60 days that includes:
  - ▶ Copies of presentation
  - ▶ Minutes from the community meeting
  - ▶ Attendees comments
  - ▶ Regional Center recommendations and plans to use the information to address regional center priorities and/or strategic directions to improve specific areas of performance, or both

### SG/PRC Recommendations - How can we improve our service?

- ▶ Areas of your greatest concern
- ▶ What needs to be prioritized?
- ▶ How should SG/PRC make the necessary changes?
- ▶ Remember that these results are from 2018-2019. Changes made now will not be reflected until 2021-2022

2021 SG/PRC PERFORMANCE CONTRACT PLAN - DRAFT

#	Public Policy Measures	Planned Activities
1	<p>Individuals supported by SG/PRC who are now residents of a State Developmental Center (SDC) will live in the community.</p> <p>Note: Statements designated *( ) below quote the public policy measure as stated by DDS.</p> <p>*(Number and percent of regional center caseload in Developmental Center.)</p> <p>Also Note: The statewide numbers represent the percentage of the total number of individuals served by the regional center system who reside in SDC institutions. The <b>lower</b> the number, the <b>better</b> the outcome.</p>	<p>a. Implement the Community Placement Plan (CPP) or Community Resource Development Plan (CRDP) to develop resources to support individuals in the community.</p> <p>b. Provide training to service providers to enhance their skills in serving individuals with challenging behaviors.</p>
2	<p>Children served by SG/PRC live with their families.</p> <p>*(Number and percent of minors residing with families).</p> <p>Note: The numbers represent the percentage of the total number of children served by the regional center system who live with their families. The <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>

Draft 2021 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.)                  The <b>higher</b> the number and percentage, the <b>better</b> the outcome.                  +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 adult living options.                  c. Provide family members with information about adult living options through outreach and educational fairs, as well as through postings on the SG/PRC website.                  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).                  f. SG/PRC Housing Specialist to assist with finding affordable housing options.</p>
<p>4</p>	<p>Adults live in their own home (apartment, etc. ) with paid supported living services.                  *(Number and percent of adults residing in supported living.)                  The <b>higher</b> the number, the <b>better</b> the outcome.                  +Note: Public Policy Measures 3, 4, 5 and 6 were combined and reported collectively in Measure #7 (see below). The % for SLS was not reported separately.</p>	<p>Same as above. In addition, SG/PRC Housing Specialist will assist adults with finding affordable housing options.</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.)                  +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. In addition, SG/PRC will develop a new Adult Family Home Agency to increase number and diversity of certified adult family home options.</p>

<p>6</p>	<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>
<p>7</p>	<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>
<p>8</p>	<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>

Draft 2021 Performance Contract Plan - SG/PRC

<p>9</p>	<p>Adults served by SG/PRC who reside in licensed facilities live with five or fewer other adult residents.</p> <p>*(Number and percent of adults living in facilities serving &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 <b>lower</b> the number, the <b>better</b> the outcome.</p>	<p>a. Continue to work with large facilities to reduce their licensed capacity.</p> <p>b. At least annually, Service Coordinators to discuss with individuals and their families the option to live in facilities with a capacity of six (6) or fewer residents.</p> <p>c. If appropriate and the adult has an interest, discuss other living options, such as Adult Family Home certified homes and supported living arrangements.</p>
<p>10</p>	<p><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, when in-person meetings are allowed or virtually when school personnel are available, to advance employment experience options for individuals still eligible for public education.</p> <p>f. See activities listed for Local Measure #1 , 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 Measure #1, related to employment.</p>
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.</p> <p>b. SG/PRC will calculate the number of individuals served ages 18 through 22 years of age.</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 average annual earnings for the calendar year in comparison to all people with disabilities in CA.</p> <p>e. See activities listed for Local Measure #1.</p>

Draft 2021 Performance Contract Plan - SG/PRC

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



17	<p>*(Total number of \$1000, \$1250 and \$1500 incentive payments made for the fiscal year.)</p>	<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.  b. Information about the CIE incentives will be posted to the SG/PRC website.  c. Inform service coordination staff of PIP, CIE and incentive programs.</p>
18	<p>*(Percentage of adults who reported having competitive integrated employment as a goal in their IPP.)</p>	<p>a. SG/PRC will develop Individual Program Plans (IPPs) based on the Person-Centered Thinking and Person-Centered Planning approach.  b. Service Coordinators (SCs) will discuss integrated employment with adults as a part of the "important to/important for" conversation.  c. For those adults who report an interest in integrated employment, SCs will incorporate integrated employment as an IPP goal.</p>
19	<p><b>MEASURES RELATED TO REDUCING DISPARITIES AND IMPROVING EQUITY IN POS EXPENDITURES</b>  For each age group, the variance in the authorizations and expenditures of Purchase of Services (POS) among ethnic/racial groups -- for individuals living at home with their families -- will be reduced/minimized over previous years.  *(Indicator showing the relationship between annual authorized services and expenditures by individual's residence type and ethnicity.)</p>	<p>a. Recruit and maintain a culturally diverse staff whose ethnicity, language and cultural background reflect that of the collective individuals served by SG/PRC.  b. Provide information and training for staff and service providers to promote culturally-competent and person-centered service delivery.  c. Seek input from our community regarding barriers to access and utilization of services, and ways to overcome these barriers, especially for Hispanic school-aged children and Hispanic adults residing with their families.  d. Review annual POS authorization and expenditure data and monitor progress.  e. Service Coordinators annually review utilization of authorized POS for the individuals assigned to them.  f. Continue seeking DDS funding for successful equity projects and continue implementing the Equity Projects funded by the DDS Disparity Funds Program, to better inform and prepare families to access and utilize regional center services.</p>

20	<p>For each age group, the number and percent of individuals receiving NO POS, when comparing ethnic/racial groups for those living at home with their families, will decrease over previous years.</p> <p>*(Number and percent of individuals receiving only case management services by age and ethnicity: 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>
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**COMPLIANCE MEASURES**

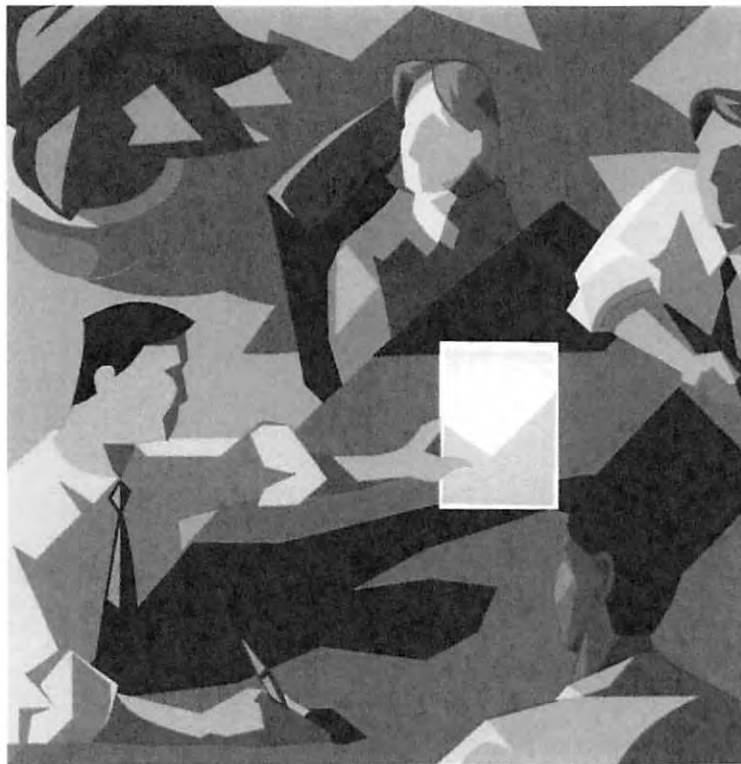
#	Compliance Measures	Planned Activities
1	Unqualified independent audit with no material finding(s).	
2	Substantial compliance with the Department fiscal audit.	
3	Operates within OPS budget.	
4	Certified to participated in Home and Community--Based Services Waiver.	
5	Compliance with Vendor Audit Requirements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

**2021 Draft LOCAL MEASURE**

#	Local Measures	Planned Activities
1	<p>Individuals and their families learn more about employment options well in advance of the individual served leaves the public education system. Upon leaving school, 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. Share community employment opportunities via email to service coordinators and employment vendors to disseminate to individuals served.</p> <p>b. Share information on free or low-cost employment or career training programs offered by public resources such as American Job Centers, Department of Rehabilitation, EDD, with service coordinators and employment vendors to disseminate to adults served by SG/PRC.</p> <p>c. Share information on in-person and virtual job fairs and hiring events via email to service coordinators and employment vendors to disseminate to adults served by SG/PRC.</p> <p>d. Promote education and work-based training programs, such as Project Search.</p> <p>e. Provide information and/or trainings offered virtually or in person to individuals, families, and employment vendors, on employment related topics such as work incentive programs, benefits planning, job assessment and development, etc. Trainings may be offered through SGPRC or other qualified entities such as Department of Rehabilitation, L.A County Workforce Development Board, American Job Centers, Griffin-Hammis, APSE.</p> <p>f. 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).</p> <p>g. Encourage vendors to increase opportunities for adults to achieve inclusive objectives, including college support, tailored day program, and individualized Supported Employment Programs (SEP).</p> <p>h. Provide information about the Paid Internship Program (PIP) to individuals served by SG/PRC, their families, and the local business community.</p>

**S**AN GABRIEL/POMONA  
REGIONAL CENTER

# Committee Reports & Information



**October – November 2020**

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

**November 18, 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

**STAFF:**

Anthony Hill, Executive Director  
Lucina Galarza, Director of Community Services  
Roy Doronila, Chief Financial Officer  
Daniela Santana, Director of Client Services  
Joe Alvarez, Director of Clinical Services  
Yvonne Gratianne, Manager, Communications &  
Public Relations  
Willanette Steward-Satchell, Exec. Asst. (Mgmt.)

**GUESTS:**

**ABSENT:**

Daniel Rodriguez, Director

**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 the month of September 2020, for services paid through October 19, 2020.

**ITEMS DISCUSSED**

**A. CALL TO ORDER**

Gisele Ragusa, Board President, called the meeting to order at 7:18 pm. A quorum was established.

The committee reviewed the agenda and added the following topics:

- Internet security
- New updates regarding Covid-19



The committee reviewed and approved the minutes from the October 14<sup>th</sup> meeting with the following correction

- Section D of the minutes should say “decided”.

**(M/S/C James & Hines) The committee approved the minutes with noted correction.**

**ABSTAIN: Julie Chetney**

**B. PUBLIC INPUT:**

None

**C. FINANCIAL REPORT**

Roy Doronila, Chief Financial Officer, reported on the following:

**Financial Report**

Operations

- In regional center operations, and based on the B-1 contract amendment, our allocation is projected to not meet expenditure projections, pending receipt of B-2. Our operations allocation for fiscal year 2020-21 is currently \$31,674,844 with projected expenditures of \$31,954,331. The current month's expenditure amounted to \$2,578,655 and our year-to-date expenditures is \$7,555,748, with projected remaining expenditures of \$24,713,398. This reflects a deficit of \$279,487, we expect to get full allocation in B-2.
- 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.
- The Lanterman Foster Grandparent/Senior Companion program has a current allocation in the amount of \$1,209,748, we expect to spend the full amount. The Fairview program's is included in this amount.
- The Community Placement Plan (CPP) and DC ongoing Workload operations allocation is currently allocated at \$889,472. Expenditures for the year are projected to be \$1,298,603 resulting in an allocation deficit of \$409,131 which we expect to be funded in future allocations.



### Purchase of Service

- The Purchase of Service Projections were based on the B-1 contract amendment and actual expenditures through October 19,2020 claim. The B-1 POS allocation is at \$271,307,068. The current month's claim amounted to \$20,772,875 bringing the year-to-date expenditures for services to \$59,075,664. Projected expenditures and late bills remaining are in the amount of \$276,687,037 leaving a deficit of \$5,379,969. We expect to be funded in full in future allocations. POS expenses directly related to COVID19 are included in this projections, under the other items section.
- CPP POS is in a separate line item and projected to be within the allocated amount.

The prior fiscal year continues to maintain a modest reserve for both Operations and POS. There were no significant change in projected expenditures.

**(M/S/C – James & Hines ) The committee approved the Financial Report.**

### **D. INDEPENDENT AUDIT**

Mr. Doronila shared information about the final audit report for July 2017/2019 (2 years). He Spoke about the three specific findings, which are 2 overpayments and 1 underpayment. Specifics were provided and discussions were held, including discussions about prior reportings of such issues.

### **E. CONTRACTS FOR REVIEW**

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

- Total Life - Evolve
- Brilliant Corners
- RSCR California – Andover Home

The committee is recommending the above-mentioned contracts to be presented to the Board for their review and approval.

### **F. BOARD OVERVIEW**

Board President Dr. Gisele Ragusa reported on the following:

- Board Mentorship
- Agenda for the December 9, 2020 Board Meeting:
  - Review of recommended vendor contracts
  - Covid-19 Updates – new developments, surge updates, vaccine updates and advocacy efforts, updates on pediatrics



- Part 2 – Adult Services Issues Forum Training
- Agenda items for the January 13, 2021 Executive Finance Committee meeting:
  - Financial Report
  - Board Mentorship
  - Covid-19

**G. INFORMATION**

Anthony Hill, Executive Director reported the following:

- Heroes Act – This was passed. It will have an impact on our Budget with an expected \$14 million.
- Cares Act – SG/PRC applied for this additional funding opportunity through Medicaid service hours.

**H. COVID-19 UPDATE:**

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

- Workforce is currently at 95% working remotely.
- 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 surge capacity.

**MEETING ADJOURNED**

The meeting adjourned. The next regular meeting will be held on January 13, 2021 at 7:15 p.m. via teleconference.

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

FISCAL YEAR 2020-21

PAYMENTS THROUGH OCTOBER 19, 2020 FOR SERVICES PROVIDED THROUGH SEPTEMBER 30, 2020

25.0% OF YEAR ELAPSED

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CONTRACT ALLOCATIONS	Regular	CPP/CRDP DC Ongoing	Family Resource Center	Foster Grandparent Senior Companion	Covid	Total			
							D plus F	A minus G	
Preliminary Allocation	25,975,869					25,975,869			
B-1 Allocation	5,698,975	889,472	154,564	1,209,748		7,952,759			
						0			
						0			
						0			
						0			
<b>Total Operations Contract Allocation</b>	<b>31,674,844</b>	<b>889,472</b>	<b>154,564</b>	<b>1,209,748</b>	<b>-</b>	<b>33,928,628</b>			
	A	B	C	D	E	F	G	H	I
	Current Allocation	% of Allocation	Current Month Expenditures September	Year-to-Date Expenditures July - Sept	YTD Actual as % of Allocation	Projected Remaining Expenditures	Total Projected Expenditures	Projected Balance Amount	Remaining Percent
<b>Total Operations - Actual and Projected Expenditures</b>	<b>33,928,628</b>	<b>100.00%</b>	<b>2,711,446</b>	<b>8,068,344</b>	<b>23.8%</b>	<b>26,863,118</b>	<b>34,616,647</b>	<b>(688,019)</b>	<b>-2.03%</b>
<b>PERSONAL SERVICES (REGULAR OPERATIONS)</b>									
Salaries	21,380,952	67.50%	1,672,081	5,069,928	16.0%	16,630,750	21,385,863	(4,911)	-0.02%
Temporary Staff	6,615	0.02%	1,652	1,652	0.0%	1,652	3,303	3,312	0.01%
Retirement ( includes 403B)	2,672,619	8.44%	207,464	628,660	2.0%	2,062,874	2,691,534	(18,915)	-0.06%
Social Security (OASDI)	310,024	0.98%	19,661	49,928	0.2%	252,019	301,947	8,077	0.03%
Health Benefits/Long Term Care	2,046,157	6.46%	356,857	493,051	1.6%	1,553,856	2,046,908	(751)	0.00%
Worker's Comp Insurance	210,000	0.66%	0	32,629	0.1%	167,662	200,291	9,709	0.03%
Unemployment Insurance	103,649	0.33%	0	0	0.0%	103,000	103,000	649	0.00%
Non-Industrial Disability/Life Insurance	106,905	0.34%	8,300	6,372	0.0%	91,897	98,269	8,636	0.03%
Clinical Consultants - Consumer Services	169,117	0.53%	(3,642)	0	0.0%	169,117	169,117	0	0.00%
<b>Total Personal Services (Regular Operations)</b>	<b>27,006,038</b>	<b>85.26%</b>	<b>2,262,374</b>	<b>6,282,220</b>	<b>19.8%</b>	<b>21,032,827</b>	<b>27,000,232</b>	<b>5,806</b>	<b>0.02%</b>
<b>OPERATING EXPENSES (REGULAR OPERATIONS)</b>									
Equipment Rental	60,000	0.19%	11,871	25,231	0.1%	35,324	60,555	(555)	0.00%
Equipment Maintenance	20,000	0.06%	1,708	6,862	0.0%	13,724	20,586	(586)	0.00%
Facility Rent	2,628,000	8.30%	219,000	876,000	2.8%	1,752,000	2,628,000	0	0.00%
Facility Maintenance	40,000	0.13%	7,138	8,592	0.0%	30,777	39,370	630	0.00%
Communications (postage, phones)	428,500	1.35%	25,361	91,543	0.3%	336,715	428,257	243	0.00%
General Office Expense	368,286	1.16%	21,852	34,290	0.1%	332,871	367,161	1,125	0.00%
Printing	27,000	0.09%	1,788	3,543	0.0%	23,628	27,170	(170)	0.00%
Insurance	195,000	0.62%	0	94,357	0.3%	100,357	194,714	286	0.00%
Data Processing	125,000	0.39%	7,091	8,693	0.0%	116,080	124,773	227	0.00%
Data Processing Maintenance / Licenses	164,000	0.52%	26,337	116,973	0.4%	45,374	162,347	1,653	0.01%
Interest Expense	20,000	0.06%	0	15,285	0.0%	1,390	16,675	3,325	0.01%
Bank Service Fees	1,500	0.00%	35	65	0.0%	195	260	1,240	0.00%
Legal Fees	215,000	0.68%	0	0	0.0%	215,000	215,000	0	0.00%
Board of Directors Expense	16,000	0.05%	0	0	0.0%	16,000	16,000	0	0.00%
Accounting Fees	65,000	0.21%	0	0	0.0%	65,000	65,000	0	0.00%



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

FISCAL YEAR 2020-21

PAYMENTS THROUGH OCTOBER 19, 2020 FOR SERVICES PROVIDED THROUGH SEPTEMBER 30, 2020

25.0% OF YEAR ELAPSED

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	150,000	0.47%	2,625	5,084	0.0%	144,753	149,837	163	0.00%
	A	B	C	D	E	F	D plus F G	A minus 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
Equipment Purchases									
Contractor & Consultants - Adm Services	212,520	0.67%	3,863	17,153	0.1%	194,978	212,131	389	0.00%
Contract - ABX2 Disparities	0	0.00%	0	0	0.0%	269,140	269,140	(269,140)	-0.85%
Travel/mileage reimbursement	85,000	0.27%	1,144	1,379	0.0%	83,335	84,715	285	0.00%
ARCA Dues	80,500	0.25%	0	0	0.0%	80,500	80,500	0	0.00%
General Expenses	27,500	0.09%	1,029	2,689	0.0%	26,066	28,755	(1,255)	0.00%
<b>Total Operating Expenses (Regular Operations)</b>	<b>4,928,806</b>	<b>15.56%</b>	<b>330,844</b>	<b>1,307,740</b>	<b>4.1%</b>	<b>3,883,206</b>	<b>5,190,945</b>	<b>(262,139)</b>	<b>-0.83%</b>
<b>Total Personal Services &amp; Operating Expenses (Regular Operations)</b>	<b>31,934,844</b>	<b>100.82%</b>	<b>2,593,218</b>	<b>7,589,960</b>	<b>24.0%</b>	<b>24,916,032</b>	<b>32,191,177</b>	<b>(256,333)</b>	<b>-0.81%</b>
<b>OTHER INCOME</b>									
Interest & Other Income	(260,000)	-0.82%	(14,563)	(34,212)	-0.1%	(202,635)	(236,846)	(23,154)	-0.07%
<b>Total Personal Services &amp; Operating Expenses Net of Other Income (Regular Operations)</b>	<b>31,674,844</b>	<b>100.00%</b>	<b>2,578,655</b>	<b>7,555,748</b>	<b>23.9%</b>	<b>24,713,398</b>	<b>31,954,331</b>	<b>(279,487)</b>	<b>-0.88%</b>
<b>RESTRICTED FUNDS</b>									
Family Resource Center Expenses	154,564	100.00%	9,917	22,800	14.8%	131,764	154,564	0	0.00%
Foster Grandparent/Senior Companion Expenses	1,209,748	100.00%	96,654	210,213	17.4%	998,936	1,209,149	599	0.05%
Community Placement Plan Expenses	889,472	100.00%	26,221	279,582	31.4%	1,019,020	1,298,603	(409,131)	-31.51%
<b>Total Restricted Funds</b>	<b>2,253,784</b>		<b>132,791</b>	<b>512,596</b>	<b>99.2%</b>	<b>2,149,720</b>	<b>2,662,316</b>	<b>(408,532)</b>	<b>-15.34%</b>
<b>Total Expenses (Including Restricted Funds)</b>	<b>33,928,628</b>		<b>2,711,446</b>	<b>8,068,344</b>	<b>23.8%</b>	<b>26,863,118</b>	<b>34,616,647</b>	<b>(688,019)</b>	<b>-1.99%</b>
<b>Total Allocation Balance (Deficit)</b>								<b>(688,019)</b>	

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

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FISCAL YEAR 2020-21

PAYMENTS THROUGH OCTOBER 19, 2020 FOR SERVICES PROVIDED THROUGH SEPTEMBER 30, 2020

25.0% OF YEAR ELAPSED

CONTRACT ALLOCATIONS	Regular POS	CPP	HCBS	Total			
Preliminary Allocation (Regular POS)	200,879,483			200,879,483			
B-1 Allocation	70,427,585	100,000		70,527,585			
				0			
				0			
				0			
<b>Total Contract Allocation</b>	<b>271,307,068</b>	<b>100,000</b>	<b>0</b>	<b>271,407,068</b>			
	C plus E						
	A	B	C	D	E	F	G
		Current Month	Year-to-Date	YTD Actual	Projected	Total Projected	YTD &
		Expenditures	Expenditures	as percent of	Remaining	Expenditures	Projected as
				Allocation	Expenditures		percent of
							Allocation
<b>Total POS Actual &amp; Projected Expenditures</b>		<b>20,772,875</b>	<b>59,075,664</b>	<b>21.8%</b>	<b>217,711,373</b>	<b>276,787,037</b>	<b>102.0%</b>
<u>OUT OF HOME CARE</u>							
Community Care Facilities		5,556,820	22,389,689	8.3%	83,731,232	106,120,920	39.1%
ICF/SNF Facilities		8,365	42,202	0.0%	467,573	509,774	0.2%
<b>Total Out of Home Care</b>		<b>5,565,184</b>	<b>22,431,890</b>	<b>8.3%</b>	<b>84,198,804</b>	<b>106,630,695</b>	<b>39.3%</b>
<u>DAY PROGRAMS</u>							
Day Care		787,046	1,657,450	0.6%	10,182,340	11,839,790	4.4%
Day Training		4,206,217	12,578,996	4.6%	41,499,425	54,078,422	19.9%
Supported Employment		479,705	1,098,879	0.4%	4,760,766	5,859,645	2.2%
Work Activity Program		66,399	286,664	0.1%	2,348,350	2,635,014	1.0%
<b>Total Day Programs</b>		<b>5,539,369</b>	<b>15,621,990</b>	<b>5.8%</b>	<b>58,790,880</b>	<b>74,412,870</b>	<b>27.4%</b>
<u>OTHER SERVICES</u>							
Non-Medical: Professional		672,771	1,557,296	0.6%	6,425,912	7,983,208	2.9%
Non-Medical: Programs		1,245,096	3,668,192	1.4%	13,233,311	16,901,503	6.2%
Home Care: Programs		283,571	582,585	0.2%	2,564,367	3,146,952	1.2%
Transportation		479,788	1,631,489	0.6%	5,468,206	7,099,694	2.6%
Transportation Contracts		555,282	1,894,383	0.7%	6,169,848	8,064,231	3.0%
Prevention		795,777	2,411,973	0.9%	9,340,887	11,752,860	4.3%
Other Authorized Services		1,481,493	3,771,478	1.4%	12,907,517	16,678,996	6.1%
Personal and Incidentals		12,896	39,134	0.0%	129,304	168,438	0.1%
Hospital Care		100,950	247,975	0.1%	2,381,868	2,629,844	1.0%



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

FISCAL YEAR 2020-21

PAYMENTS THROUGH OCTOBER 19, 2020 FOR SERVICES PROVIDED THROUGH SEPTEMBER 30, 2020

25.0% OF YEAR ELAPSED

**DRAFT  
COPY**

	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	8,567	9,961	0.0%	49,856	59,818	0.0%	
Medical Service: Professional	132,398	343,704	0.1%	1,742,365	2,086,070	0.8%	
Medical Service: Programs	143,093	371,252	0.1%	1,251,653	1,622,905	0.6%	
Respite: In Own Home	1,097,701	2,790,489	1.0%	15,332,011	18,122,500	6.7%	
Respite: Out of Home	0	541	0.0%	14,234	14,775	0.0%	
Camps	0	0	0.0%	4,847	4,847	0.0%	
Total Other Services	7,009,385	19,320,455	7.1%	77,016,186	96,336,641	35.5%	
Total Estimated Cost of Current Services	18,113,938	57,374,335	21.1%	220,005,871	277,380,206	102.2%	
<u>OTHER ITEMS</u>							
Estimated Cost of COVID19 expenses	3,149,781	3,149,781	1.2%	2,557,050	5,706,831	2.1%	
Total Other Items	3,149,781	3,149,781	1.2%	2,557,050	5,706,831	2.1%	
Total Purchase of Services	21,263,719	60,524,116	22.3%	222,562,921	283,087,037	104.3%	
Deduct: Estimated Receipts from Intermediate Care Facilities for State Plan Amendment Services	(490,843)	(1,448,452)	-0.5%	(4,951,548)	(6,400,000)	-2.4%	
<b>Expenditures Regular POS (Net of CPP)</b>	271,307,068	20,772,875	59,075,664	21.8%	217,611,373	276,687,037	102.0%
<b>Projected Allocation Balance (Deficit) Regular POS</b>					(5,379,969)	-2.0%	
<u>COMMUNITY PLACEMENT PLAN</u>							
Community Placement Plan (inc. CRDP)	100,000	0	0	0.0%	100,000	100,000	100.0%
<b>Allocation Balance (Deficit) CPP and HCBS</b>					0	0.0%	
<b>Total Projected Allocation Balance (Deficit) Regular &amp; Community Placement Plan POS</b>					(5,379,969)	-2.0%	



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

**COMMUNITY RELATIONS/  
LEGISLATIVE COMMITTEE**

**MINUTES FROM THE NOVEMBER 18, 2020 MEETING**

The following committee members were present at said meeting:

**PRESENT**

Gisele Ragusa  
Joseph Huang  
Rachel McGrath  
Georgina Molina  
Natalie Webber

**GUESTS**

Berenice Sanchez

**STAFF:**

Anthony Hill, Executive Director  
Lucina Galarza, Director of Community Services  
Daniela Santana, Director of Client Services  
Joe Alvarez, Associate Director of Clinical Services  
Yvonne Gratianna, Manager of Communications &  
Public Relations  
Willanette Steward-Satchell, Executive Assistant  
(Management)

**ABSENT:**

Daniel Rodriguez (Chair)  
Penne Fode

**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 5:07 pm, on behalf of Daniel Rodriguez, Chairperson. A quorum was established.

The minutes from October 21, 2020 were reviewed and approved.

**M/S/C (Molina & Huang) The committee approved the minutes.**

**Abstain: Webber**

**PUBLIC INPUT**

None



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

Carol Tomblin briefly spoke about the Performance Contract requirements and then proceeded to give her 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
- Family Support/ Training

## **LEGISLATIVE ISSUES & OTHER INFORMATION**

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

- Reported on the current surge in our catchment area and in L.A. County.
- Reported on the status of the agency workforce working remotely.
- Staff that are working in the office are required go through a temperature and mask check upon entering the building.
- Gave an updated on the decision to close building access to staff during the Thanksgiving holiday.
- Efforts will continue on legislative outreach to meet with local legislators/

## **COVID-19 UPDATE:**

- 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 surge homes.
- Joe Alvarez reported vaccines and drug trials occurring. He also shared how local advocacy groups are advocating for individuals with developmental disabilities that are at a higher risk to be prioritized on the list of recipients of a Covid vaccine once its approved.
- Yvonne Gratianne reported that she reached out to ARCA to see if there were any plans on having a support letter for the individuals served through regional center who may be at a higher risk to be a priority on the list of recipients of the Covid vaccine once approved..

## **ADJOURNMENT:**

There will be no meeting in December. Next meeting is on January 20, 2021.



# Community Outreach Team Monthly Report

<b>Community Outreach Team</b>	Director: Carol Tomblin
<b>Report Date</b>	Month of October 2020
<b>Report to</b>	Community Relations Committee of the SG/PRC Board of Directors
<p>Reminder: There will be discussion of the Performance Contract and a request for input into the activities to achieve public policy measures during a portion of the weekly Community Meeting on October 27<sup>th</sup>. Also as part of the Board training on October 28<sup>th</sup>, there will be a presentation of the National Core Indicators (NCI) results for SG/PRC compared with statewide NCI averages from the most recently available Child Family Survey and Adult In-Person Survey.</p>	
<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>• <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>Alma continues to provide support remotely to the families participating in PMI. In the month of August, there was one (1) additional referral, for a total of 396 parents referred and 323 initially matched to a mentor since the inception of PMI. Six (6) families were matched this month. There were nine (9) graduates in August, for a total of 123. There were 63 hours of mentoring provided to 47 participants. To date, 6,064 hours of PMI mentoring has been provided to 198 SG/PRC families who have participated since the start of this project. Families that graduated have offered positive feedback about their productive participation in PMI. Parents who have graduated are encouraged to seek other trainings and/or participate in a support group. The goal is for parents to continue to grow in their advocacy for their family member.</p> </li> <li>• <b><u>Navigating the Regional Center System (NRCS)</u></b> – NRCS-2 Spanish was completed in the month of October, with nine (9) parents participating in all five modules. <p><b>NRCS-2 Spanish Attendance:</b> Modules 1-3 completed in September and reported last month.</p> <p style="padding-left: 40px;">Module 4 (10/03) – 19 Participants Module 5 (10/10) – 14 Participants</p> <p><b>NRCS-3 English began in October:</b> A total of 41 persons were registered. All those registered, 21 individuals verbally confirmed.</p> <p><b>Attendance:</b> Module 1 (10/24) – 16 Participants; Module 2 (10/31) -- 14 participants; Modules 3-5 are scheduled in November and will be reported in December</p> </li> <li>• <b><u>Webinar development and hosting for parent training</u></b> – Amos completed modifying five modules of Navigating Regional Center System (NRCS) English version and posted to SG/PRC Parent Portal. All five NRCS Modules are available for enrolled participants to use through the SG/PRC Parent Portal. <p>On 10/19/20, the video and audio recording in English for the Appeal and Fair Hearing Process was completed with project contractor, Quantum Illumination, and with Daniel Ibarra, SG/PRC's Fair Hearing Specialist. Quantum Illumination provided a draft for review. The Spanish version of Appeal and Fair Hearing Process webinar will be recorded on 11/13/20, with the final product scheduled to be provided in December 2020. Amos will modify and post on the SG/PRC Parent Portal by the end of December 2020.</p> </li> </ul>



	<ul style="list-style-type: none"> <li>• <b><u>Vietnamese Outreach Specialists (VOS)</u></b> – VOS started work with Amos to provide support for SG/PRC Vietnamese individuals and families. On 10/20/20, VOS came to the regional center to call all 24 families previously known to the Vietnamese Support Group (VSG) that had been meeting prior to the pandemic. VOS also translated VSG October meeting flyer and revised SG/PRC Whistleblower Policy in Vietnamese to be posted to the SG/PRC website.</li> </ul>
<p>On-going projects previously funded</p>	<ul style="list-style-type: none"> <li>• <b><u>Understanding My Child’s Disability (UMCD) Online Series</u></b> (Previously known as <u>Introductory Curriculum for Families</u>) – On 10/31/20, Amos completed creating five modules in English of “Understanding My Child’s Disability” (UMCD) and posted on SG/PRC Parent Portal. All of five English modules are available to all parent portal users at this time. The English Captivate files were sent to our project contractor, MAGNUS, for translating to Spanish, Korean, Chinese (both Mandarin and Cantonese), and Vietnamese. We are on schedule to post the final, English and translated UMCD modules on the SG/PRC Parent Portal by the end of December 2020.</li> </ul>
<p>Other Equity-Related Activities not supported with Disparity Grant Funds.</p>	<ul style="list-style-type: none"> <li>• <b>Person-Centered Conversations (PCC)</b> – During the pandemic, PCC meetings were conducted remotely through telephone call or Zoom meeting. On 10/2/2020 and 10/20/2020, Amos had two (2) PCC with two different Korean parents.</li> <li>• <b>Support of CBO Equity Project- Parenting Black Children (PBC)</b> – SG/PRC continues to distribute information about the PBC meetings and activities.</li> </ul>
<p>Family Support/ Training</p>	<ul style="list-style-type: none"> <li>• <b>The Vietnamese Support Group (VSG) meeting through Zoom</b> – Amos organized a VSG Zoom meeting to resume VSG meetings, beginning with a meeting on 10/29/20. The topic of ‘Available POS Under COVID-19’ was presented by Yaned Busch, one of the SG/PRC Managers of Children Services. Four (4) Vietnamese parents participated in the Zoom meeting. The next VSG Zoom meeting will be held on 11/19/20.</li> <li>• <b>Translation for Korean families</b> – Amos provided verbal translation for a Dental Clinic/Desensitization Assessment for a Korean child, a Zoom psychiatric consultation meeting with Dr. Osman, and a quarterly meeting for a Korean adult residing in a Community Care Facility. Amos worked on translating the revised Paid Internship Program (PIP) brochure about employment and SG/PRC’s Whistleblower Policy to Korean. These translated documents will be available in November.</li> <li>• <b>Filipino American Support Group</b> - The Group is considering a Zoom Holiday Festivities celebration. Dates have not been set.</li> <li>• <b>Critical Issues Forum</b> - On 10/26/20, this educational form hosted speaker Dara Mikesell, Associate Director of Community Services, on “Alternative Service Delivery Model and Protocol for Re-Engagement”. Simultaneous translation in Spanish was provided. There were 42 participants. Based on requests from Service Coordinators, this presentation was recorded and has been made available, along with the power point presentation, on the SG/PRC Parent Portal.</li> <li>• <b>Facilitating ADEPT ABA Korean Study Group</b> – Amos facilitated the last small group ADEPT ABA Korean study group on 10/3/2020 with four Korean mothers. All participants provided very positive response to the five facilitated meetings. The participants asked to continue receiving facilitation by Amos for the remaining ADEPT modules, as they encountered many challenges when they tried to continue reviewing by themselves.</li> </ul>



<p><b>Outreach/ Events Participation</b></p>	<ul style="list-style-type: none"> <li>• <b>Connecting with existing groups to provide remote training opportunities for families –</b> On 10/10/2020, Amos participated with California State University-Fullerton professor Dr. Seung, who is an active member of the Korean Parent Support Group for Southern California (KPSG CA) to provided information about Online Training Opportunities available through SG/PRC's Parent Portal. Total of eleven (11) parents (including three SG/PRC parents) and two (2) professionals participated with the Zoom meeting.</li> </ul>
<p><b>Other Major Activities of the Compliance and Outreach Department</b></p>	<ul style="list-style-type: none"> <li>• <b>Weekly Community Meetings:</b> Xochitl continues to assist Edith Aburto, who provides Spanish translation for the weekly Community Zoom meetings, by managing the questions submitted through the Chat function.</li> <li>• The Department of Developmental Services (DDS) has transitioned to a new reporting format for what used to be called the disparity grants, now called the Service Access and Equity (SAE) Grants. This program is called GrantVantage. Xochitl participated in a pilot by DDS to test the system and Carol completed the training to become certified as the license holder for SG/PRC and participated in the DDS introduction to GrantVantage on 10/21/20. Carol also participated in the DDS Bidders Conference on 10/23/20 regarding the FY20-21 SAE grant application process.</li> <li>• The Community Outreach and Compliance Department oversees the activities of the Foster Grandparent/Senior Companion Programs (FG/SCP). The Manager, Maria Vargas, worked with the volunteers who chose to participate in SG/PRC's most recent "Check-in" project. These volunteers successfully made contact with 125 families and attempted to contact an additional 50 families. A few volunteers are "pen-pals" with individuals served and have written birthday cards and Thanksgivings greeting cards to students and adults.</li> <li>• Carol conducted a Zoom New Staff Onboarding session for Service Coordinators for "Helping Individuals and Families become Prepared for Emergencies". This was recorded and will be made available for other staff members to review.</li> <li>• Carol presented the draft 2021 Performance Contract between SG/PRC and DDS as part of the Community Meeting on Tuesday, 10/27/20. During the Board meeting on 10/28/21, there were a few suggestions to change the wording of two activities. These were incorporated into the draft, and the draft was adopted by the Board. The draft can now be submitted to DDS for review and approval, well in advance of the December 1<sup>st</sup> deadline.</li> <li>• On 10/28/20, Carol presented a training to the Board of Directors on the National Core Indicators (NCI) results for the Child Family Survey from FY 18-19 and the In-Person Adult Survey from FY 17-18. SG/PRC has 60 days to submit a plan to DDS addressing areas in need of improvement.</li> </ul>





**SAN GABRIEL/POMONA**  
REGIONAL CENTER

**Client Services/Advisory Committee**  
**Wednesday, December 9, 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 September 23, 2020 & October 28, 2020 Meeting

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- Public Comment (6:05 – 6:10)

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- Action Item: None

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

**(6:15 – 6:45) – Special Presentation - Alternative Services – By SG/PRC Staff**

**(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 – To be determined by Committee Members**
  - January – Self Determination
  - February -
- **Behavioral Intervention Policies – To be presented to Board**
- 
- **Self Determination Advisory Committee Meetings & Updates**
- **Coronavirus Update** by Anthony Hill, Executive Director and Staff
- **Agenda for January 27, 2020**



**SAN GABRIEL/POMONA REGIONAL CENTER**

**DEVELOPMENTAL SERVICES, INC.**

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

**October 28, 2020**

A regular meeting of the Client Services/Advisory Committee was held on Wednesday, October 28, 2020. The following committee members were present at said meeting:

**PRESENT**

Pretti Subramaniam  
Shannon Hines  
Sheila James  
Ardena Bartlett  
Jenny Needham

**STAFF:**

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

**GUESTS:**

None

**ABSENT:**

Victor Guzman  
Daniel Clancy  
David Grisey (LOA)  
John Randall  
Ning Yang  
Louis Jones  
Mary Soldato  
Julie Lopez  
Sherry Meng  
Herminio Escalante

**ITEMS DISCUSSED**

**CALL TO ORDER**

Shannon Hines called the meeting to order at 6:04 pm  
A quorum was not established.

The minutes of the September 23, 2020 meeting were tabled.

**PUBLIC COMMENT** – None

**CLIENT ADVOCATE** – Elisa Herzog spoke about the following:

- The new online SGPRC group is currently under construction.



- Purpose: To give adult clients an opportunity to check in with peers through zoom to find out how they are coping with the pandemic.
    - This is to be in a casual setting with a focus on socialization to alleviate some of the stressors of isolation.
  - Schedule: To meet once a month for 1 hour – Tentatively to be held on Thursday evenings at 7 p.m. If there is a feeling that participants need more and there is a buy in from everyone, then maybe it can go to a bi-weekly check-in.
  - Guidelines:
    - This is intended solely for adult clients (18 and over).
    - Must be able to access meeting through zoom or telephone
    - Must RSVP in advance
    - English speaking forum
    - Be courteous and respectful – SG/PRC has the right to disconnect anyone not being respectful of others.
    - Have fun!
  - Themes/Topics: Since the focus will be primarily on socialization--Come up with ways to discuss pop culture, Covid awareness/concerns with a sense of lightheartedness or elements of humor creating a more humanistic environment. Create an open, relaxed, safe forum for clients— creating a sense of fellowship and support.
- Make time to Vote!
    - On Election Day, November 3, your Access Services trip is free if you are going to and/or from an election polling site or to drop off a ballot.
    - The Access Services driver will wait for you to drop off your ballot up to fifteen (15) minutes and will take you to your next destination.
    - Visit <https://lavote.net> for a list of LA County Vote By Mail Drop Boxes and polling locations or [accessla.org](http://accessla.org) for any additional details
  - Assistance in Voting
    - Under California law, any voter who needs help in casting a ballot is entitled to request assistance.



- A poll worker can provide assistance, or the voter may select a person of his or her choice.
- If you are unable to mark your ballot yourself--
  - you may select up to two people to help you cast your vote.
  - The persons may not be your employer, your employer's agent or your labor union leader or agent.
  - The Accessibility Program has also been enacted by the County of Los Angeles to ensure the following—
    - polling place accessibility
    - accessible voting machines
    - assistive devices
    - curbside voting
    - accessible parking
    - entrances
    - Disability Awareness Training for Poll workers to include Sensitivity Guidelines & an Awareness Video
  - accessible voting materials, election information in large font, audio sample ballot, online voter registration, translated election material, & assist voters with registration
- SG/PRC & Parents' Place Family Resource & Empowerment Center in West Covina are proud to present our new Technology Lending Library Program!
- If so, please be sure to speak with your Service Coordinator in order to be referred to the Parents' Place Family Resource & Empowerment Center
- Parents' Place will be providing a technological device and/or connectivity through our Technology Lending Library Program
- Los Angeles County in partnership with 211 LA County, gives its residents a free tool to help find Internet access.
- Visit: [findwifi.lacounty.gov](http://findwifi.lacounty.gov) or dial 211 and search for Internet related services based on your physical address.



## **SPECIAL PRESENTATION – Community Outreach Efforts – Parenting Black Children**

Ardena Bartlett, Founder, Director and Member shared the following about her program:

- History
- Discrimination against black children
- The importance of parenting black children
- Programs, services and resources

**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:

- **December 9, 2020 – Alternative Services**
  - **January 27, 2021 – Self Determination**
- **SELF DETERMINATION** – The committee met yesterday and agreed to allocate \$4000 to education spectrum.
  - **COVID-19 DIRECTOR'S REPORT -Anthony Hill, Executive Director**

Mr. Hill, Executive Director and staff shared the following:

- There has been no potential of transmission among staff in the office
- Staff continue to have their temperatures checked upon arriving in the building and required to wear masks
- SG/PRC continues to provide full scope intake and eligibility services
- There was a dental clinic on Saturday where 30 individuals were served
- The Parents' Place in partnership with SG/PRC is distributing iPads for families as a part of the Lending Library program
- Mr. Alvarez shared the weekly surveillance report of Covid 19 data of cases
- Mrs. Santana gave an update of the check in program

## **ADJOURN**

Chairperson Shannon Hines adjourned the meeting.

The next Client Services/Advisory Committee meeting is scheduled for Wednesday, December 9, 2020 via videoconference.



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

**November 5, 2020**

The following committee members were in attendance at said meeting:

**PRESENT:**

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

**STAFF:**

Anthony Hill, Executive Director  
Lucina Galarza, Director Community  
Services  
Daniela Santana, Director of Client  
Services  
Joe Alvarez, Director of Clinical Services  
Rosa Chavez, Associate Director, Family  
& Transition Services  
Jaime Anabalon, Manager of Quality  
Assurance  
Johnny Pang, Manager of IT  
Erika Gomez, Exec. Assistant – BOD  
Willanette Satchel, Exec. Assistant -  
Management

**MEMBERS ABSENT:**

Michelle Mainez  
Vanessa Besack

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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 10:04 a.m. A quorum was established. Introductions were made of the VAC members.

The minutes from the October 1, 2020 meeting were approved.



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

**B. IMPACT OF COVID 19 AREAS TO DISCUSS**

Encryption – At a previous meeting, there was discussion about the issues with SG/PRC’s new encryption system. Since then, the IT manager, Johnny Pang, and a couple of members of the VAC met to discuss this further. Mr. Pang gave an explanation and provided a resource to help those with questions.

**C. VENDOR CATEGORY REPORTS**

**Adult Programs**

*Vocational* – Olaf Luevano asked that those interested in a subcommittee meeting email him. He provided his email address.

*Adult Day* – Rosalind Ford and Jose Mendoza shared that the subcommittee would meet following the VAC meeting. Licensing will be present to address the group. They also encouraged everyone to not be complacent. Mr. Mendoza initiated a brief discussion about how residential providers are navigating family visits.

**Infant & Children Services**

*Infant Development Program* – Charmayne Ross informed that there will not be LICA meetings in November and December. Also, Early Start regulations came out earlier this week.

**Transportation**

Baldo Paseta reported that the monthly rates are still being finalized; DDS will issue a directive. The subcommittee couldn’t meet yesterday, he hopes that they can meet next Wednesday. The Transportation Taskforce has not met since October 9, 2020.

**Independent Living Services**

*ILS Services* – Nicole Mirikitani had nothing to report.

*SLS Services* – Nancy Bunker informed she is open to meeting with the subcommittee if others are interested. Mrs. Bunker and staff spoke about a rate increase that was supposed to happen in January. According to staff, that changed when Covid 19 hit. There was also a discussion about the individuals served that do not want to have their temperature checked every day. Lastly, there was a discussion about EVV and the options for providers.

**Residential Services**



*ICF* – David Bernstein share that the subcommittee will meet next week. He requested a list of contact information for residential providers so he can reach out to them.

*CCF* – Jay Bhavsar and Valerie Donelson spoke about the challenges of unannounced virtual visits from Service Coordinators. There were also questions about unannounced virtual visits from Quality Assurance and Mr. Hill, Executive Director, said it will be discussed further internally. Lastly, Mrs. Donelson shared that the weekly wellness checks are getting to be a bit much for some providers.

*Specialized*- Michelle Mainez was not present.

**Other Vendored Services**- Bryan Chacon shared that EVV got extended to 2020, however, it has been fully integrated in his program.

**At Large**- Susan Strobel reported the following:

- Clients are getting used to masks and not touching their face
- There are about 30 students per class at Mt. Sac
- Individuals served are generalizing their skills like cooking and painting a lot better
- Registration for winter class is now open and they are free
- Registration for fall classes is still open enrollment
- The program now has 2 counselors who are doing great job guiding students

D. **SG/PRC STAFF UPDATES**

Mr. Hill received an email from Brian Winfield, DDS Chief Deputy Director, about alternative rates that said information will be forthcoming. As soon as staff get something it will be shared.

**PUBLIC COMMENTS**

None

**MEETING ADJOURNED**

The next regular meeting will be held on December 3, 2020 at 10:00 a.m.



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

**November 18, 2020**

The following committee members were present at said meeting.

**MEMBERS:**

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

**STAFF:**

Anthony Hill, Executive Director  
Lucina Galarza, Director of Community Services  
Joe Alvarez, Director of Clinical Services  
Daniela Santana, Director of Client Services  
Yvonne Gratianna, Manager of Communications &  
Public Relations  
Willanette Steward-Satchell, Executive Assistant  
(Management)

**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 6:04 p.m. A quorum was established.

The Minutes from the September 9, 2020 meeting were approved.

**M/S/C (Stewart & Ragusa) The committee approved the minutes from  
September since there was no quorum at the October meeting.**

The Minutes from the October 14, 2020 meeting were approved.

**M/S/C (Ragusa & Stewart) The committee approved the minutes from  
October meeting with the following amendments. ABSTAIN: Julie Chetney &  
Anabel Franco**

- Gisele Ragusa called the meeting to order.
- A quorum was not established.
- Julie Chetney and Anabel Franco were absent at the October meeting.

**B. PUBLIC INPUT**

None



### **C. GOALS AND OBJECTIVES**

Bruce Cruickshank asked Bill Stewart about his experience with Strategic Plans. He asked about creating, implementing and evaluating strategic plans. Bill Stewart provided some feedback about his experience and shared how part of the plan included quarterly check-ins to evaluate progress.

The committee discussed strategic timelines.

**Mentorship** – The committee discussed that they had a plan in place and they also shared that new members already have been assigned a mentor. Some additional discussion was held about what should qualify a mentor.

- **Orientation** – Discussion was held about the proposal for an orientation packet by Bruce Cruickshank. Possibly given to board members after the one on one meeting. Discussion was held about what information should be given to new committee members vs. board members. Discussion was held as to what is useful for new board members – helpful vs daunting.
- **Recruitment Ideas** – Committee briefly discussed ways to promote opportunities to the community to apply for the Board. Yvonne Gratianne shared some ideas with the group and the committee continued for a bit about what they thought would be beneficial.

### **D. BOARD COMPOSITION**

Mr. Anthony Hill reported on the response letter received from DDS about the census for the compliance of the current composition of the Board. The committee held a discussion about how to use recruitment efforts to help, but ultimately it was something that seems to be an issue with most regional centers and their own Board compositions.

### **E. AGENDA FOR NEXT MEETING**

- Orientation and Mentorship Assessment of these items
- Board and Committee Needs Assessment/Training Questionnaire
- Recruitment strategies

### **F. ADJOURNED**

Meeting adjourned.


The next Strategic Development Committee meeting is scheduled for January 13, 2021.



# SAN GABRIEL/POMONA REGIONAL CENTER

December 2, 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

The SG/PRC office remains open to the public on an appointment only basis. We are pleased to report that all critical functions including Intake/Eligibility, Fiscal, Clinical, Human Resources, Quality Assurance and Information Technology are at optimal levels.

SG/PRC is an essential business, according to "Essential Workforce Coronavirus Covid-19 Response", under Healthcare/Public Health Sector as a business that supports social workers serving individuals with developmental disabilities.

In response to the anticipated surge in COVID-19 transmission, we have increased our remote workforce to 95%. We have reviewed our internal practices and are now in our "abundance of caution" monitoring phase, in that if work related tasks can be performed remotely, regardless of the tasks with the exception of intake and eligibility, supervisors are instructed to advise their direct reports to work from home and only come to the office when necessary to pick-up work-related documents. Additionally, we have temporarily suspended our policy allowing Service Coordinators to visit the office at least one day weekly for at least two weeks following the Thanksgiving Holiday, as a risk mitigation strategy to slow the spread of COVID-19 through employee contacts. All visitors to the SG/PRC office and staff are required to pass a contactless, scanner temperature check and face masks monitoring station upon entry into the building. There are no reported transmissions of COVID-19 within the SG/PRC office.

SG/PRC retains the distinction of being the only regional center in California that offers full scope intake and eligibility services throughout the COVID-19 Health Pandemic. The following reflects our data ending October 31, 2020.

### **Early Intervention/Intake**

159 New Referrals  
105 Reviews  
100 children found eligible

### **Lanterman/Intake**

36 New Referrals  
16 Reactivations  
47 Eligible (Including EI transitions)



As many of you are aware, Los Angeles County is experiencing a surge of COVID-19 transmissions. Recently, Los Angeles County has implemented “Targeted Temporary Safer at Home Health Officer Order” effective November 30, 2020 through December 20, 2020 (please see Attachment A). In short, this Order mandates that individuals stay at home with exceptions to travel to and from essential businesses to work or to provide work at an essential business or engage in an essential activity.

During the past reporting period, there has been a 28% percent increase in total COVID-19 cases in Los Angeles County. Hospitalizations have increased, and the overall positivity rate was 12 percent as of December 1, 2020 (see [publichealth.lacounty.gov](http://publichealth.lacounty.gov)).

With regard to SG/PRC’s efforts that support our community, we are conducting check-in programs, securing and delivering PPE, conducting weekly Zoom meetings with our Service Providers and Community, and daily we are performing COVID-19 risk mitigation tasks through a multidisciplinary approach including our Nurse Advocates, Quality Assurance Staff, Leadership staff, DDS representatives and Public Health officials. The following table illustrates SG/PRC’s PPE distribution efforts throughout the COVID-19 Pandemic.

Face masks (N95 & surgical masks)	1,250,400
Gowns	182,000
Hand sanitizer bottles	40,176
Gloves	668,000
Face shields	48,384
Total number of PPE units distributed	2,188,960

During the past two weeks, SG/PRC’s COVID-19 cases have increased 7.4 percent or alternatively stated at 20 additional new cases (please see Attachment B). There are at least 10 residential hotspots. A residential hotspot is operationally defined as a licensed setting with at least (1) positive COVID-19 testing outcome for any individual served within that setting (please see Attachment C). Also, as part of our risk mitigation strategy, we are tracking licensed settings, where only staff working in that residential or a day program setting have tested COVID-19 positive. As a result of the surge our resources including licensed residential settings, and registry staffing are nearly full or have limited remaining capacity. We are currently exploring options with partnering regional centers to expand our surge capacity.

### **Parents’ Place /SG/PRC Technology Lending Library**

The Parents’ Place technology lending library in collaboration with SG/PRC is the first lending library created within the entire regional center system of care. SG/PRC allocated 250 iPads to Parents’ place and secured \$24,000 from a resulting trust. We are thrilled to announce that individuals served are now receiving remote telehealth services that were not accessible due to economic barriers or the lack of technology.



This technology lending library is only available for individuals served through SG/PRC. Please contact your SG/PRC Service Coordinator, if you need to access the Parents' Place Technology Lending Library.

### **SG/PRC Budget 19/20**

Our Operation Budget (OPS) projects within our FY 19/20 Budget allocation at year-end. On November 30, 2020 we were notified by the Department of Developmental Services (DDS) that SG/PRC will receive \$149,130 in OPS allocation for COVID-19 OPS expenses and subsequent claims. SG/PRC anticipates an OPS deficit in its CPP Budget due to the funding allocation applied by DDS that does not allow for claims that incorporate staff raises or annual increases in the costs for their benefits. Our POS budget shows a year-end balance of \$3,257,957.

### **SG/PRC Budget 20/21**

Our OPS allocation is \$31,674,844 with current month expenditures ending October 19, 2020 representing \$2,578,655 and year to date is \$7,555,748 representing a deficit of \$279,487. However, SG/PRC and all regional centers within the B1 were only allocated 50% of their CPP Operations Budget relying on prior year as the base. SG/PRC anticipates receiving the remaining CPP allocation in subsequent allocations throughout current year.

Our POS allocation within the B1 is \$271,307,068 with year-to-date expenditures at \$59,075,664 projecting at a deficit of \$5,379,969 including COVID-19 expenses. We are tracking COVID-19 POS cost monthly. We are anticipating full funding in subsequent allocations as current year moves forward.

SG/PRC applied for CARES ACT (Provider Relief Funding) and received \$138,953, representing 2% of the ICF/DD-SPA revenue from FY18-19. SG/PRC has modified its claim representing the full amount reported by DDS, nearly \$27 million, less grant dollars received. These funds are for operations cost related to COVID-19 expenses and specific cost centers in accordance with issued guidelines.

### **Caseload Ratios**

On September 16, 2020, SG/PRC received a letter from DDS regarding SG/PRC's compliance with the caseload ratio requirements as expressed in Welfare & Institutions Code Section 4640 (c). SG/PRC outperformed the statewide caseload average in (5) of the (7) categories measured. SG/PRC as required by law conducted a public meeting on November 25, 2020, and incorporated input from the public within its corrective action plan. SG/PRC submitted its plan of correction to DDS and is currently awaiting a reply. Contingent upon DDS approval of SG/PRC's plan of action, afterward, SG/PRC's plan will be implemented and referenced within my Director's report (please see Attachment D).

### **Department of Developmental Center Updates**

#### **Survey**

DDS is currently conducting a survey tailored for self-advocates and family members for the purpose of gathering information and feedback regarding the impact of COVID-19 on service delivery. Please participate in the survey.



Feedback from individuals served and their family members is essential because it helps us understand what is working well and gives us insight on what is not working well within the regional center system of care in response to the COVID-19 Pandemic. This survey is located at [www.SGPRC.org](http://www.SGPRC.org) and at [www.DDS.CA.Gov](http://www.DDS.CA.Gov). The survey is available in threshold languages.

#### Participant Directed Services (PDS)

On November 5, 2020, DDS conducted a Zoom training tailored for individuals served and their families regarding Participant Directed Services. This service model is bridge between traditional services and the Self-Determination service delivery model. On March 30, 2020, DDS issued a directive expanding Participant Directive Services to include personal assistance, independent living services, and supported employment services. Participant Directive Services that remain available prior to this new directive includes respite, day care, non-medical transportation, nursing, and community-based training services. If individuals served or their family members are interested in receiving services through the Participant Service Delivery model, they should contact their Service Coordinator.

#### Alternative Non-residential Services

On August 31, 2020, DDS issued a directive defining Alternative Non-residential Services, including covered activities, certification procedures, and the methodology to compute service rates. On October 28, 2020, DDS issued further guidance with a requirement that claims must be supported through alternative or traditional service delivery. The goal is to encourage reengagement of services while also creating a monthly Alternative Non-residential Service rate. DDS is working with Burns & Associates (Consulting entity) and various stakeholder groups to create the new monthly rate model. Implementation is scheduled to occur effective January 1, 2021.

#### Holiday Gatherings

On November 25, 2020, DDS issued guidance regarding "Holiday Gatherings." Guidance recommended incorporates risk mitigation strategies to help slow the spread of COVID-19. It encourages everyone to explore alternative and virtual options to connect with family members and others, to avoid travel, to wear face masks, and to engage handwashing for at least 20 seconds (please see Attachment E).

#### Association of Regional Center Agencies (ARCA) Updates

The Association of Regional Center Agencies (ARCA) represents the 21 non-profit regional centers that advocate on behalf of and coordinate services for California's over 350,000 people with developmental disabilities. The Association functions as a leader and advocate in promoting the continuing entitlement of individuals with developmental disabilities to achieve their full potential and highest level of self-sufficiency. The Association participates in the development of public legislative policy that impact individuals with developmental disabilities and their families.

#### Bills with Operational Impact 2020

AB 2257- clarifies the business or employee/employer relationship that traditionally existed with independent contractors. Simply put, the California Supreme Court "Borello" test is applicable that is aligned with the "right of control" test used by the Internal Revenue Service.



The "Borello" test is controlling legal authority, if the contractor establishes their rate of pay, and remains free from control of the contracting entity, and is engaging in that work independently and publicly. AB-5 was a concern for regional centers and many business entities that rely on independent contractors. Specifically, for regional centers, AB-5 created pressure on regional centers to develop new unsustainable cost centers in Operations Budget not included in the core staffing formula, frustrating regional center's compliance with meeting caseload ratio requirements, and existing statutory obligations (please see Attachment F).

#### Bills that Impact Public Health Policy

AB 1544 (Gipson) gives Counties the discretion to develop a "triage" program. If such program is developed, the County may allow paramedics to take individuals to a sobering facility or mental health facility instead of an emergency room. ARCA strongly opposed this bill, because an individual served that might present with a behavioral crisis, in fact, might have an underlying health related crisis that might go both undetected, and untreated. ARCA is currently developing strategies that will inform Counties Officials with the goal to shape local public policy should a County decide to develop a "triage" program (see Attachment G).

SB 1159 (Stern) provides worker compensation protections for workers during the period of March 19, 2020 through January 1, 2023 for a special class of employees that will be eligible for disability/worker's compensation if they contract coronavirus within the above-mentioned time frame. There is a rebuttal presumption. Specific rules are applicable with strict timeline requirements (see Attachment H).

#### ARCA COVID-19 Vaccine Statement

On November 29, 2020, ARCA submitted a Vaccine Prioritization Statement to inform public policymakers on their need to prioritize Californians with developmental disabilities, their families and service providers when developing guidelines regarding the distribution of FDA and CDC approved COVID-19 vaccines (see Attachment I). As many of us are aware, Operation Warp Speed, has been effective in developing promising vaccines with high efficacy rates in preventing the infection, transmission and spread of COVID-19. On November 23, 2020 the California Department of Public Health announced membership in the Community Vaccine Advisory Committee including 64 entities. Disability Rights of California, and the State Council on Developmental Disabilities are members the broad coalition that will guide statewide public policy (see Attachment J).

In closing, we are so very thankful for the efforts and unyielding commitment of our staff, Board of Directors, Service Providers, ARCA, DDS, and Community Partners throughout 2020 with serving the SG/PRC community of individuals with developmental disabilities that we deeply cherish. We have remained united throughout. We have been very successful in managing the spread of COVID-19 through our soul force, kindness, love and countless actions demonstrating goodwill and support for each other. Our mission of serving others is .....the purpose that gives us fuel to do even more for each other. SG/PRC Community have a wonderful, peaceful and restful holiday season! Stay safe and remain well!



## TARGETED TEMPORARY SAFER AT HOME HEALTH OFFICER ORDER

### SUMMARY OF SAFETY MEASURES

Safety measures included in this new HOO outline directives that promote individuals remaining in their homes as much as possible, reduce capacity at sites where non-household members mingle, and curtail non-essential activities. All activities where individuals will be or can be in contact with non-household members require an appropriate face covering unless medically exempt. **The Order will be in effect November 30, 2020 through December 20, 2020.**

1. **Leaving Home:** Individuals must stay home, except to travel to and from essential businesses, to work at or provide services to a healthcare operation or essential business/infrastructure, to engage in Essential Activities, or to participate in permitted individual or household outdoor and indoor activity while practicing required social distancing, infection control and masking. Sector protocols detail specific operating directives.
  - **Exemption for essential businesses:** Essential businesses/activities include health care, government, courts, infrastructure (energy, transportation, IT, chemical materials), defense, financial services, food & agriculture (production, manufacturing, preparation, retail), manufacturing and sale of essential goods, emergency services, communications (including film/tv/music production), and services for vulnerable populations.
  - **Gatherings:** All public and private gatherings and events with individuals not in your household are prohibited except for church services and protests.
  - **Occupancy limits for permitted activities:**
    - Permitted activities at facilities that operate outdoors where everyone is masked are at 50% max occupancy
    - Essential Retail that operates indoors where everyone is masked is at 35% max occupancy
    - Non-essential retail that operates indoors where everyone is masked is at 20% max occupancy
  
2. **Permitted Outdoor Recreation for Individuals:**
  - Beaches, trails and parks remain open for active recreation; running, biking, walking, swimming, playing outdoors are permitted with distancing, infection control and masking (except while swimming). Gatherings are prohibited with members outside of your household
  - Shared outdoor facilities for recreational activities already operating remain open for individuals or members of a single household with required distancing, infection control and masking; this is limited to golf courses, tennis courts, pickleball, archery ranges, skate parks, bike parks, community gardens. Outdoor



and indoor pools that serve members from more than one household are closed except for regulated lap swimming (one swimmer per lane).

3. **Permitted Retail and Businesses** -- Individuals are also permitted to work at or procure the following:

- **Indoor facilities** (masking, distancing, infection control required)
  - Essential retail businesses at 35% max occupancy
  - Non-essential retail businesses at 20% max occupancy (includes indoor malls); distancing, infection control and masking are required.
  - Personal Care services at 20% max occupancy; distancing, infection control and masking are required.
  - Restaurants, bars, breweries and wineries are closed for in-person dining/drinking as customers are unmasked most of their visit; these sites are open for pick-up and delivery. Breweries and wineries are open for retail at 20% max occupancy.
- **Outdoor facilities/activities** (masking, distancing, infection control required)
  - Fitness centers outdoors at 50% max occupancy
  - Museums, galleries, zoos, aquariums, botanical gardens outdoors at 50% max occupancy
  - Mini-golf, batting cages, go-cart racing outdoors at 50% max occupancy
  - Drive-in movies/events/car parades permitted provided occupants of each car are members of one household

4. **Closed non-essential businesses/activities**

- Non-essential office-based businesses (minimum basic operations permitted)
- Playgrounds (exception for playgrounds at childcare and schools)
- Cardrooms
- Bars, clubs, lounges
- Theatres, spectator performances/sporting events/events, bowling alleys, arcades

5. **Permitted activities that continue under current re-opening protocols:**

- Childcare/day care
- K-12 Schools and Day Camps with new requirement for 14-day closure with any outbreak (3 cases or more over 14 days)
- Institutes for Higher Education
- Libraries (20% max occupancy)
- Youth Sports (conditioning and skill building only)
- Pro- Sports (spectator free)



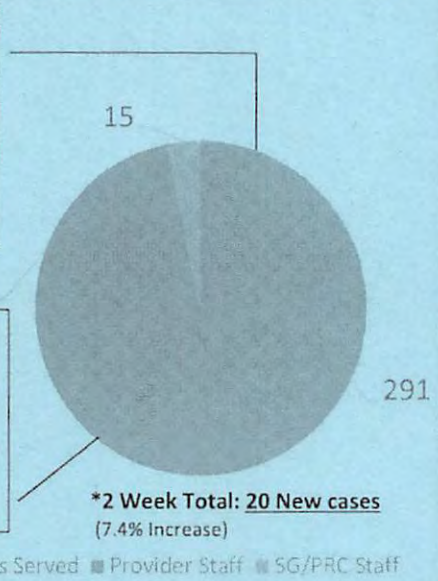
6. **Curfew:** Curfew requirements mirror the State HOO requiring that all gatherings with members of other households and all activities conducted outside the residence with members of other households cease between 10PM – 5AM, except for essential activities and those activities required by law. People experiencing homelessness are not subject to this curfew. Any number of persons from the same household may leave their residence if they do not engage in any interaction with individuals from other households.



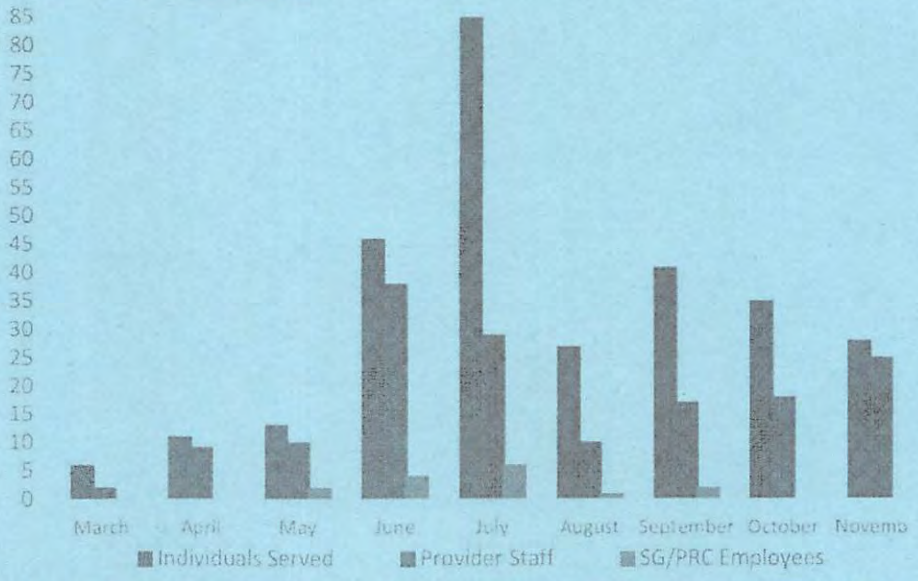
Total Cases: 1,198,934 (8.7%) ↑  
Hospitalizations: 7,415  
Deaths: 19,121

**SG/PRC TOTAL COVID-19 CASES 2020**

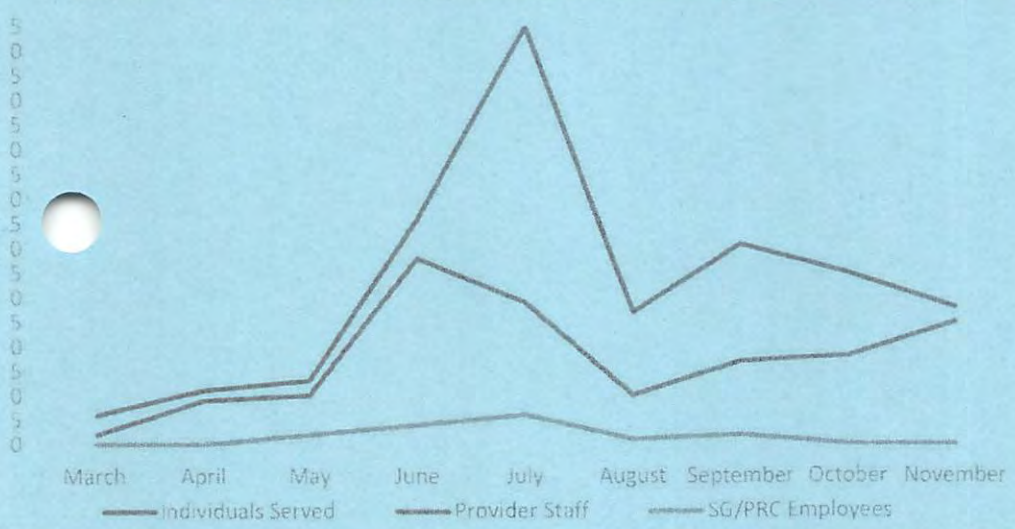
**Living Situation**  
Family: 137  
Res. Facility: 45  
ICF: 70  
SNF: 22  
ILS/SLS: 17  
Other: 2



**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
October	0
November	1
<b>TOTAL</b>	<b>17</b>

**Los Angeles County Public Health Data**

New Cases (Weekend Total)	8,157
Total Cases	395,843 (+31,915 cases) 28% ↑
Current Hospitalizations	2,049 (24% - ICU)
Total Deaths	7,639
7 Day Daily Testing Average	71,363
Positivity Rate	7.6%
New Cases per 100,000	30.5 total daily
<b>SG/PRC SERVICE AREA HOTSPOTS / TOTAL CASES</b>	
Pomona	8,418
El Monte	6,199
Baldwin Park	4,397
West Covina	4,234

**WIDESPREAD**

Most non-essential indoor business operations are closed.

**More than 7**

Daily new cases (per 100k)

**More than 8%**

Positive tests

**SUBSTANTIAL**

Some non-essential indoor business operations are closed.

**4-7**

Daily new cases (per 100k)

**5-8%**

Positive tests

**MODERATE**

Some business operations are open with modifications.

**1-3.9**

Daily new cases (per 100k)

**2-4.9%**

Positive tests

**LOW**

Most business operations are open with modifications.

**Less than 1**

Daily new cases (per 100k)

**Less than 2%**

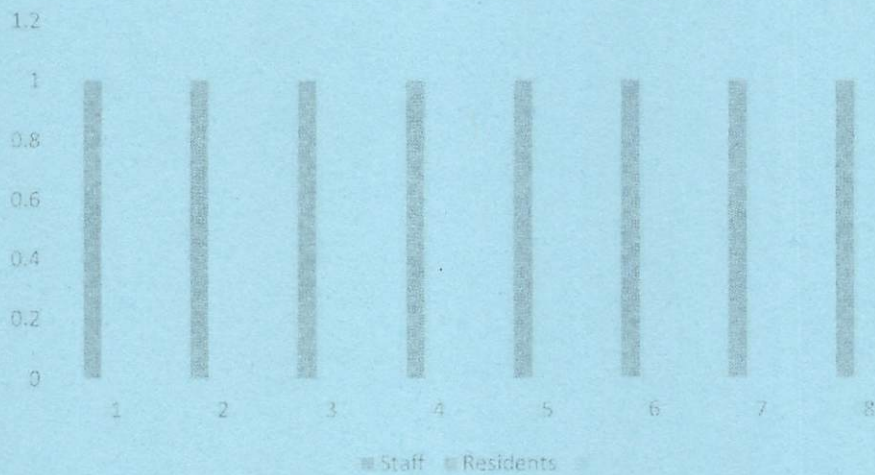
Positive tests



### COVID POSITIVE HOMES



### HOT SPOTS



Data as of November 29, 2020



## DEPARTMENT OF DEVELOPMENTAL SERVICES

100 NINTH STREET, Room 340, MS 3-12  
 SACRAMENTO, CA 95814  
 TTY (916) 654-2054 (For the Hearing Impaired)  
 (916) 651-6309



September 16, 2020

Anthony Hill, M.A., Esq., Executive Director  
 San Gabriel/Pomona Regional Center  
 75 Rancho Camino Drive  
 Pomona, CA 91766

Dear Mr. Hill:

Thank you for your service coordinator caseload survey emailed to the Department of Developmental Services (Department) on March 4, 2020. The data you provided indicate that, as of March 1, 2020, San Gabriel/Pomona Regional Center (SG/PRC) did not meet all the required caseload ratios mandated by Welfare & Institutions (W&I) Code §4640.6(c). This year the service coordinator caseload survey included reporting on a new, mandated caseload ratio requirement for individuals with complex needs. W&I Code §4640(c) was amended in July 2019, to require an average caseload ratio of 1:25 for individuals with complex needs, and this category is reflected in the table below. Specifically, SG/PRC did not meet required caseload ratios for the highlighted categories. Of the highlighted categories, SG/PRC caseload ratios for individuals age thirty-six months and younger, and over three years old, non-waiver, non-mover individuals have been out of compliance for two consecutive reporting periods.

Regional Center	On Waiver	Under 3 Years*	Movers Over 24 Months	Movers Between 12 and 24 Months	Movers Within Last 12 Months	Over 3 Years, Non-Waiver, Non-Mover*	Complex Needs
W&I Code Required Ratios	1:62	1:62	1:62	1:45	1:45	1:66	1:25
SG/PRC Number of Individuals Served	4,553	1,980	112	3	1	7,142	25
<b>SG/PRC Ratios</b>	<b>1:65</b>	<b>1:64</b>	<b>1:35</b>	<b>1:31</b>	<b>1:18</b>	<b>1:71</b>	<b>1:65</b>
CA Average	1:75	1:64	1:56	1:35	1:23	1:79	1:37

\*out of compliance for two consecutive reporting periods

“Building Partnerships, Supporting Choices”



Anthony Hill, M.A., Esq., Executive Director  
September 16, 2020  
Page two

Please note this is the first year in which regional centers were required to report caseload ratios for individuals with complex needs as per W&I Code §4640(c). Upon evaluation of the statewide data, the Department recognizes the methodology used to calculate the 1:25 caseload ratio may not be accurate for individuals with complex needs. The Department will work with the Association of Regional Center Association on a revised methodology.

This letter is to notify you that, as specified by W&I Code § 4640.6(f), SG/PRC is required to submit a plan of correction for the caseload ratio categories that were not met for two consecutive reporting periods. The plan of correction must be developed with input from the State Council on Developmental Disabilities, local organizations representing the individuals you serve, their family members, regional center employees, including recognized labor organizations, service providers, and other interested parties. Please include in your plan of correction how you incorporated feedback from all required stakeholders.

We encourage you to review your process for determining service coordinator caseload assignments to assist in meeting the required caseload ratios and in developing your plan of correction.

Please email your plan of correction within 60 days from the date of this letter to:

Email: [OCO@dds.ca.gov](mailto:OCO@dds.ca.gov)

The Department is available to provide technical assistance with the development of your plan of correction. If you have questions, please contact Danielle Hurley, Research Data Specialist I, Office of Community Operations, at (916) 654-3228, or by email, at [danielle.hurley@dds.ca.gov](mailto:danielle.hurley@dds.ca.gov).

Sincerely,

*Original signed by:*

ERNIE CRUZ  
Assistant Deputy Director  
Office of Community Operations

cc: Gisele Ragusa, San Gabriel/Pomona Valleys Developmental Services, Inc.  
Amy Westling, Association of Regional Center Agencies  
Brian Winfield, Department of Developmental Services  
LeeAnn Christian, Department of Developmental Services  
Uvence Martinez, Department of Developmental Services  
Jacqueline Gaytan, Department of Developmental Services  
Danielle Hurley, Department of Developmental Services



**DEPARTMENT OF DEVELOPMENTAL SERVICES**

1000 NINTH STREET, Room 240, MS 2-13  
SACRAMENTO, CA 95814  
TTY (916) 654-2054 (For the Hearing Impaired)  
(916) 654-1897



November 25, 2020

**HOLIDAY GATHERINGS****MESSAGE TO SELF-ADVOCATES, FAMILIES, PROVIDERS AND REGIONAL CENTERS**

The holiday season provides an opportunity for us to give thanks, reflect on the events of the past year and consider the possibilities a new year will bring. We want to thank you for collaborating and supporting each other during this pandemic. When called upon to be creative, innovative and to support each other, you responded and continue to respond. We are aware there are continued support needs and we are working daily to enhance current efforts on behalf of self-advocates, families, service providers and regional centers.

The holiday season is also a time when family and friends enjoy gathering, but this year it is necessary for all of us to modify or pause usual traditions, to minimize risk, keep each other safe and help stop the spread of COVID-19. The safest way to celebrate holidays this year is to stay at home with members of your own household. It is strongly encouraged that everyone take necessary precautions. This includes exploring alternative and virtual methods of connecting with those outside of the immediate household (such as using Zoom or FaceTime), avoiding travel, respectfully declining situations that potentially increase risk and offering kindness by dropping off meals for individuals who are elderly or have underlying health conditions so they can stay home more easily.

Throughout the holiday season, it is important to remain diligent in our efforts to reduce the spread of the virus. Please continue to wear a mask or face covering when in public or with those outside of your home, stay at least six feet away from others and wash your hands often with soap and water for at least 20 seconds.

The Centers for Disease Control and Prevention and the California Department of Public Health have issued guidance on keeping your holiday celebrations safe for all.

- <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/holidays.html>
- <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/holidays/thanksgiving.html>
- <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Guidance-for-the-Prevention-of-COVID-19-Transmission-for-Gatherings-November-2020.aspx>

On behalf of the Department, we wish everyone a safe and uniquely special holiday season.

Sincerely,

NANCY BARGMANN  
Director

**“Building Partnerships, Supporting Choices”**



## Bills With Operational Impacts – 2020

All listed bills take effect January 1, 2021, unless otherwise noted

### Client Services

AB 2257 (Gonzalez) – Independent contractors – This bill clarifies the “business-to-business” relationships that have traditionally been deemed independent contractors, but were put into uncertainty by AB 5 (Gonzalez, Ch. 296, Statutes of 2019). See “2019 – Bills With Operational Impact.docx,” previously shared by ARCA, for more information on AB 5. Concerns had arisen about the disruptive potential of individuals/entities that had operated as contractors being reclassified by AB 5 as employees.

With AB 2257, it is now clarified that for sole proprietors, LLCs, limited liability partnerships, and corporation contracts with another business, the earlier “Borello” test will hold if various provisions are met. In broad strokes, if the contractor gets to set their rate of pay, is free from control and direction, serves the contracting business (not its individual clients), is normally engaged in this work independently and publicly, and can negotiate their pay/hours/place of work, they will be subject to the Borello test.

### Service Providers

AB 979 (Holden) – Boards of publicly-held corporations – By the end of the 2021 calendar year, any publicly-held corporation with the main office in California will have to have on its board at least one director from an “underrepresented community.” This builds on existing requirements for such corporations to already have at least one woman as a director, and pending requirements raising that minimum based on the size of the board to two (board of five) or three (board of more than five).

AB 1577 (Burke) – Loan forgiveness – This will let businesses that took out federal Paycheck Protection Program (PPP) loans avoid counting that loan as income. This is already the case for federal income considerations, and thus only applies to CA corporate gross income tax calculations. It also only applies if the PPP loan is forgiven. However, double-counting is prohibited. If a business that received (forgiven) PPP loan money uses some of it for business expenses, that money can either be excluded from state taxes or booked as a normal deductible business expense.

SB 275 (Pan) – PPE stockpiles – This will require the CA Department of Public Health to obtain a stockpile of Personal Protective Equipment (PPE) for use by essential workers (defined to include “in-home support providers”). It also requires various health facilities to obtain their own 45-day stockpile. Health facilities include skilled nursing facilities, but not intermediate care facilities. Details will be developed through regulations.



## SB 1159 (Hill, 2020, Ch. 85)

### *COVID-19 and Workers' Compensation for various employees*

The following summary is broken into five sections covering background, health facilities, all other employees, outbreak definitions, and next steps. The Department of Industrial Relations FAQs, "Workers' Compensation Presumption," may help with this issue <<https://www.dir.ca.gov/dwc/Covid-19/FAQ-SB-1159.html>>.

#### **BACKGROUND**

California provides protection for workers who are injured in the course of their employment through the Workers' Compensation (workers' comp) system. It is done through a form of insurance, where premiums are based on the type of work being done and an individual employer's track record.

The COVID pandemic has created unique health and safety concerns, with employees in certain occupations being disproportionately at risk of contracting the disease. In May, Gov. Newsom addressed this with Executive Order N-62-20, creating a presumption that certain employees, if they contracted COVID-19, would be eligible for workers' comp under various circumstances. It also provides a more general set of presumptions that cover all workers in California.

Given the ongoing nature of the pandemic, Sen. Hill (D, GGRC and SARC catchments) authored SB 1159. This bill made the Executive Order into state law; Governor Newsom signed it on September 17, 2020. It included an "urgency clause," a feature that makes a bill go into law immediately upon signing. Most bills do not go into effect until the beginning of the next calendar year. That means this is now law.

The bill enshrines the Order into law by covering injuries that occurred during the time the Order was in effect (March 19 – July 5), and extends it to cover any new injuries dating from July 6, 2020, through January 1, 2023. The law specifically states that its rules will sunset at that time.

This means that, for workers in California, if they contract coronavirus between March 19, 2020 through January 1, 2023 in the course of their work, they may be eligible to claim temporary disability/workers' comp.

#### **HEALTH/FIRST RESPONDER EMPLOYEES– Who's affected**

A special class of employees, including first responders and various health care workers, are provided a higher level of coverage. Those relevant to the developmental disabilities services system are:

1. Employees who provide direct patient care, or are custodial employees in contact with COVID-19 patients, at specific health facilities, including SNFs or ICF/DD-CNs;
2. Other employees of specific health facilities, including SNFs or ICF/DD-CNs (exceptions apply; see below);
3. Employees providing direct patient care for home health agencies; and,
4. IHSS workers (when working outside their own homes).

Every employee of the health facilities referenced in numbers 1 and 2 above is covered by the new protections. But if they aren't direct care or custodial staff, the presumption of liability doesn't apply when the employer can show the infected worker didn't have contact with a COVID-positive resident in the prior 14 days.

It is important to note that some Supported Living Services (SLS) agencies that support people using a combination of SLS and IHSS hours have been advised by their legal counsel that in some instances the SLS agency may be considered a joint employer for IHSS workers that they do not pay but they actively supervise, train, or schedule.



## Bills Advisory – 2020

All listed bills take effect January 1, 2021

A number of bills have been signed into law that may impact regional centers and those they serve. This list is separate from the traditional “Operational Impact” bill list, which is sent to the CFOs, Community Services Directors, and Executive Directors. The 2020 version of that list will be sent in the near future.

AB 1544 (Gipson) – Paramedic triage – **Short story: A county 911 program can do triage instead of just taking someone to an emergency room.**

**The details:** If a county decides to, they can develop a “triage” program. It would allow paramedics to take someone to a sobering facility or mental health facility instead of an emergency room. ARCA strongly opposed this bill due to the potential for, among other things, an individual to present with a behavioral crisis that is actually an expression of an underlying physical health crisis.

AB 1766 (Bloom) – ARF/RCFE data collection – **Short story: CDSS will get more information about ARFs and RCFEs that are in the process of closing.**

**The details:** The Department of Social Services (CDSS) will be required to collect data on all Adult Residential Facilities (ARFs) and RCFEs that accept federal SSI rates and accept residents with a serious mental disorder. Note that only Level 1 ARM facilities accept this payment rate. CDSS will also have to report to counties on ARFs and RCFEs that closed each quarter (by county), including the number of licensed beds and the reason for closing. CDSS has to give notice to a county when they learn of a planned closure of an ARF or RCFE. Additionally, all CCF licensees/applicants will have to keep a current email address on file with CDSS.

AB 2276 (Reyes) – Blood lead screenings – **Short story: Blood lead screening data will be improved.**

**The details:** This requires the Department of Health Care Services (DHCS) to, when contracting for Medi-Cal managed care plans, have those plans identify children who have not had blood lead screenings. Health plans will have to keep track of children who have missed screenings, and make efforts to notify the child’s parent or other appropriate individual. DHCS will also develop new “environmental” risk factors for screening, including (among other things) proximity to freeways, lead paint, industrial lead sources, and “the likelihood of a child placing nonfood items in the mouth.”

AB 2377 (Chiu) – Adult Residential Facility (ARF) information reporting – **Short story: ARFs have to better support residents when they plan to close.**

**The details:** Per this year’s Trailer Bill, AB 79, ARFs must give 180s days notice prior to sale or closure. This has been law since July 1<sup>st</sup>, 2020. This bill expands on that requirement by adding a raft of new notification and preparation requirements, to the benefit of the residents, that must also be met prior to sale or closure. Additionally, ARF licensees/applicants must keep a current email on file with CDSS.

SB 653 (Chang) – Dental hygienists – **Short story: This improves access to dental care.**

**The details:** SB 653 expands the scope-of-practice rules on dental hygienists. It will allow them to do more work without direct supervision of a dentist, including applying fluoride, providing preventative services and oral health screenings at what amount to dental health events, and doing their normal work at medical settings where residential facility patients have been transferred for outpatient services. Dental hygienists can already do a type of deep cleaning called “soft-tissue” (gingival) curettage, and administer local anaesthesia. This bill will let them do that at new locations, including “residences of the homebound,” the aforementioned medical settings for transferred patients, areas of officially-designated dental health professional shortages, and dental offices. Some other new work, in new locations, is also permitted.



## Bills Advisory – 2020

All listed bills take effect January 1, 2021

SB 855 (Wiener) – Mental health parity – ***Short story: This strengthens mental health/substance use parity rules for health insurance.***

***The details:*** Existing law requires health plans to treat mental and physical health with equal seriousness. This bill overhauls that law by expanding it to cover a broader scope of patients and needs. It also requires that coverage include “medically necessary treatment,” defined as “preventing, diagnosing, or treating an illness, injury, condition, or its symptoms, including minimizing the progression of that illness, injury, condition, or its symptoms.” This must be done in keeping with generally accepted standards of care. While this includes treatment by a variety of health care professionals, it also includes social workers, psychologists, and (nationally certified) qualified autism service providers/professionals. Care cannot be limited to short-term or acute treatment, and can include residential treatment and intensive outpatient treatment.

SB 1123 (Chang) – Elder and dependent adult abuse – ***Short story: Clarifies abuse definitions.***

***The details:*** This bill will require local law enforcement to, when they next update their policy manuals, include a new definition of elder and dependent adult abuse. All the current definitions (*e.g.*, physical abuse, isolation, etc.) are retained. However, a number of these terms did not, until this bill passed, have clear and specific definitions in this part of state law (Penal Code). Now, they are defined to mean the same thing they mean in a list of terms found in Welfare and Institutions Code §15610 et seq.



## SB 1159 (Hill, 2020, Ch. 85)

### COVID-19 and Workers' Compensation for various employees

#### **HEALTH/FIRST RESPONDER EMPLOYEES – What this means**

These new workers' comp provisions apply when a covered employee gets COVID under certain circumstances, and describe what must happen as a result. The bottom line is, if one of these employees gets COVID-19, the default assumption is that it was work-related.

- If an employee tests positive within 14 days of being on the clock, they are eligible for full hospital, surgical, medical treatment, disability indemnity, and death benefits.
- While sick, the employee first must use up their COVID-specific sick leave (created under various laws).
- Once those are used, or if none are available, normal temporary disability benefits kick in, without a waiting period.

The presumption that the injury occurred on the job is "disputable," but it's up to the employer to make a case to the appeals board. Building on that, this presumption stays in effect for 14 days after an employee is terminated. However, that clock starts on the last date of actual work at a facility.

When an employee files a claim, unless it is rejected within 30 days, the injury is presumed to be covered. This can only be reversed if new evidence (for instance, that an employee contracted COVID off the job) is found after the 30-day period.

It should be noted that "testing positive" means testing positive for an active infection. Antibody tests, which show that you previously had COVID-19, are not sufficient (as these tests do not indicate when the infection occurred with a level of precision that is useful here).

#### **ALL OTHER EMPLOYEES – Who's affected**

For every employee in California who's not in that special set of health workers/first responders, a more general set of rules applies. These create workers' comp coverage for COVID-19 under certain circumstances, defined around there being an "outbreak" at a place of work (defined below).

#### **ALL OTHER EMPLOYEES – What this means**

- If an employee tests positive for COVID-19 within 14 days of working at a jobsite, and there is an "outbreak" at the jobsite, they are eligible for full hospital, surgical, medical treatment, disability indemnity, and death benefits.
- While sick, the employee first must use up their COVID-specific sick leave (created under various laws).
- Once those are used, or if none are available, normal temporary disability benefits kick in, without a waiting period.

The presumption that the injury occurred on the job is "disputable," so employers can bring forward evidence (defined below) to make their case. But unless an appeals board rules for the employer, they have to find in favor of the employee. This requirement stays in effect for 14 days after an employee is terminated. However, that clock starts on the last date of actual work at a facility.

When an employee files a claim, unless it is rejected within 45 days, the injury is presumed to be covered. This can only be reversed if new evidence (for instance, that an employee contracted COVID off the job) is found after the 45-day period.



## SB 1159 (Hill, 2020, Ch. 85)

### COVID-19 and Workers' Compensation for various employees

#### **AN OUTBREAK – Obligations, definitions, evidence**

**Obligations:** In general, when an employer finds out (or should reasonably know) an employee has tested positive, they must report this to their claims administrator. They must provide that fact, along with the date the (positive) test was taken and what job site(s) the employee was at in the 14 days prior to the test being taken. They also have to report the highest number of employees working at the job site(s), covering the 45 days prior to the test. Lying about any of this can yield a fine up to \$10,000. This data is to be used by the claims administrator to figure out if there is an “outbreak,” for the purposes of workers’ comp claims.

**Definitions:** An outbreak is defined as 4 employees testing positive, if there are 100 or fewer employees at a site, or 4% of employees testing positive at a site with >100 employees. These positive tests must occur in a *continuous* 14-day period (calendar days). So, if three employees test positive on the first of the month, and a fourth tests positive on the 16<sup>th</sup>, it would not qualify as an outbreak. An outbreak is also considered to exist, for these purposes, if a place of employment has been ordered closed by state or local public health authorities, OSHA, or a school superintendent due to infection risk.

It should be noted that if an employee who tests positive works at *multiple* locations, they are counted at each. And if that count brings any of those locations over the “outbreak” threshold, that place qualifies as the “specific place of employment” for these purposes.

**Evidence:** An employer can bring up evidence to dispute a finding that a COVID-19 infection was work-related. Two examples are if the employer has measures in place to reduce possible transmission, or if they can show an employee had a “nonoccupational” risk of infection. Other examples are not given in the law, but are allowed.

#### **NEXT STEPS**

All employers should refer to state guidance on reopening, available through the official COVID-19 website <<https://covid19.ca.gov/industry-guidance>>. Please also consult with their city or county public health agency. A full list is available online <<https://www.cdph.ca.gov/Pages/LocalHealthServicesAndOffices.aspx#>>.

Your workers’ comp insurance provider should also be consulted to better understand requirements that may be unique to your insurance policy.

It is noted that in July, the California Department of Insurance approved (retroactive) changes that ensure COVID-19 claims will not be counted against a business for the purposes of their “experience modification,” which affects insurance premiums.

While this summary provides the most significant elements of this law, there are some nuances that have not been addressed, including infections occurring on or before July 5, 2020. It is not meant to be an exhaustive description, nor should it substitute for legal advice!





980 9th Street, Suite 1450, Sacramento, California 95814 • 916.446.7961 • www.arcanet.org

November 29, 2020

Dr. Nadine Burke Harris, Chair, Community Vaccine Advisory Committee  
Dr. Oliver Brooks, Co-Chair, COVID-19 Vaccine Drafting Guidelines Workgroup  
Dr. Robert Schechter, Co-Chair, COVID-19 Vaccine Drafting Guidelines Workgroup

**RE: COVID-19 Vaccine Prioritization And Californians With Developmental Disabilities**

Honorable Drs. Burke Harris, Brooks, and Schechter:

The Association of Regional Center Agencies (ARCA) represents the network of 21 community-based non-profit regional centers that coordinate services for, and advocate on behalf of, well over 350,000 Californians with developmental disabilities.

We urge the inclusion of people with developmental disabilities, as well as direct support professionals (DSPs) and families in the priority list of those who will first access a COVID-19 vaccine.

COVID-19 has profoundly impacted life for Californians. People with developmental disabilities are particularly vulnerable to its impacts. Additionally, the DSPs who make integrated community life possible are **one of the most important** elements of ensuring daily life can continue. Similarly, for the many people with developmental disabilities who live at home, particularly those with aging caregivers, their parents are often in high-risk groups.

ARCA urges the Department of Public Health to prioritize people with developmental disabilities in accessing COVID-19 vaccines. We are fortunate to have had a robust, collaborative response by regional centers, service providers, and families in adapting to this temporary "new normal." Because of this diligence, those served by regional centers are reporting lower morbidity and mortality rates than congregate settings that support many other vulnerable populations.

As of November 13, 2020, the California Department of Developmental Disabilities (DDS) reported<sup>1</sup> 179 deaths of the 3,600 COVID-19 confirmed positive cases, which compares favorably to the statistics from Skilled Nursing Facilities (SNFs) and assisted living facilities. Those facilities have recently reported 6,364 deaths amongst the 67,551 confirmed positive COVID-19 cases,<sup>2</sup> which makes up 34% of the state total. In short, California's system of services and supports for people with developmental disabilities that keeps them out of institutional settings keeps them safer and healthier.

<sup>1</sup> [https://www.dds.ca.gov/wp-content/uploads/2020/11/DDS\\_COVID-19\\_demographics-and-residence\\_10302020.pdf](https://www.dds.ca.gov/wp-content/uploads/2020/11/DDS_COVID-19_demographics-and-residence_10302020.pdf)

<sup>2</sup> <https://www.latimes.com/projects/california-coronavirus-cases-tracking-outbreak/nursing-homes/>



However, this success is not a reason to overlook our community. The following findings highlight that COVID-19 patients with developmental disabilities are far more likely than developmentally typical individuals to die from it:

- A recent journal article noted that “people with IDD had higher prevalence of specific comorbidities associated with poorer COVID-19 outcomes.”<sup>3</sup>
- The death rate among all patients with COVID-19 is 0.6%, but for people with developmental disorders the percentage is 1.22%, and for those with intellectual disabilities the reported percentage is 3.37%.<sup>4</sup>
- Researchers concluded that for every 100,000 confirmed COVID-19 cases in people with developmental disabilities there would be an estimated 4,500 deaths.<sup>5</sup> Comparatively, the findings suggest approximately 2,700 out of 100,000 people without developmental disabilities within the same age range would expire from complications associated with COVID-19.

Because of this, those with developmental disabilities and those who support them should be among those prioritized for vaccination. This priority should also be extended to two other groups, DSPs and family members who live with and support people with developmental disabilities. First, DSPs provide constant support, including communication, mobility, personal hygiene, and other elements of self-care. Their close and extended proximity to those they serve means they are at exceptional risk of being infected by, or transmitting, COVID-19. We cannot overstate the need to ensure DSPs can be an ongoing part of the lives of those they support.

Second are the family members people with developmental disabilities live with. Like DSPs, families provide critical daily support to people served by the regional centers. As of September 2020, nearly 80% of people with developmental disabilities lived in the home of a parent/guardian<sup>6</sup>. For these individuals, family members are critical support workers. Their health and safety must also be prioritized. Additionally, by virtue of age, many parents of adults with developmental disabilities are often in one or more high-risk groups. Any illness – let alone mortality – would be both tragic and unspeakably disruptive. They, too, must be early candidates for any vaccine.

We thank you for considering the health and safety of people with developmental disabilities, the committed professionals who serve them, and the families that are integral parts of their lives. If you have any questions regarding our position, please do not hesitate to contact Daniel Savino in our office at [dsavino@arcanet.org](mailto:dsavino@arcanet.org) or (916) 446-7961.

Sincerely,

/s/Amy Westling  
Executive Director

Cc: Nancy Bargmann, Director, Department of Developmental Services  
Dr. Mark Ghaly, Secretary, Health and Human Services Agency

<sup>3</sup> <https://www.sciencedirect.com/science/article/abs/pii/S1936657420300674?via%3Dihub>

<sup>4</sup> <https://s3.amazonaws.com/media2.fairhealth.org/whitepaper/asset/Risk%20Factors%20for%20COVID-19%20Mortality%20among%20Privately%20Insured%20Patients%20-%20A%20Claims%20Data%20Analysis%20-%20A%20FAIR%20Health%20White%20Paper.pdf>

<sup>5</sup> <https://www.upstate.edu/hloa/2020/060520-turk-landes-interview.php>

<sup>6</sup> <https://www.dds.ca.gov/transparency/facts-stats/quarterly-client-characteristics-reports/>



## OFFICE OF PUBLIC AFFAIRS

# California Department of Public Health Announces Membership in the Community Vaccine Advisory Committee to Ensure Equity in COVID-19 Vaccine Access

*Committee Members Advise State on  
Advancing the Principles of Safety, Equity  
and Transparency in COVID-19 Vaccine  
Distribution and Allocation*

Date: November 23, 2020

Number: NR20-311

Contact: CDPHpress@cdph.ca.gov

SACRAMENTO – Today, the California Department of Public Health (CDPH) announced membership in the Community Vaccine Advisory Committee with broad representation from organizations throughout California to provide input into the distribution and allocation of the COVID-19 vaccine. The committee will help guide the state's decision making and build equity into decisions about vaccine distribution and allocation.

"While the COVID-19 vaccine is new, we are not starting our planning process from scratch. This is an area of expertise we have strong partnerships in, building on



lessons learned from previous vaccination campaigns, including H1N1 and seasonal flu," said Governor Newsom. "We've been planning and thinking about this for months, and we are being guided by some of the world's best experts in this field."

California is leveraging its well-established existing immunization framework and emergency response infrastructure to coordinate efforts between state, local, and territorial authorities to distribute and administer the vaccine.

The Community Vaccine Advisory Committee will build on the work of the Scientific Safety Review Work Group and the Drafting Guidelines Work Group. The Committee will provide input and feedback for the ongoing planning and engagement efforts to ensure equitable vaccine distribution and allocation. In the beginning, vaccine supplies will be limited and will be distributed to those at highest risk.

"We must work together to ensure that vulnerable Californians, those most at risk, have equitable access to the vaccine," said Dr. Erica Pan, Acting State Public Health Officer. "All of our preparations for the vaccine are guided by the need for safety, equity and transparency in the process. The members of the Community Vaccine Advisory Committee will provide critical input to ensure we are making the best possible decisions representing broad stakeholder perspectives."

California's planning process for the eventual distribution and administration of COVID-19 vaccines continues to be guided by three overarching principles. They include ensuring the COVID-19 vaccine meets safety requirements, ensuring the vaccine is distributed and administered equitably, at first to those with the highest risk of becoming infected and spreading COVID-19, and making transparency a top priority by bringing in community stakeholders from the beginning.

California's COVID-19 vaccination plan is being implemented in several phases. In the beginning, vaccine supplies will be limited and it likely will be well into 2021 before vaccine is widely available.



The Community Vaccine Advisory Committee will be chaired by California Surgeon General Dr. Nadine Burke Harris. Below is a partial list of organizations that will have representation on the Community Vaccine Advisory Committee:

- AARP
- American Civil Liberties Union (ACLU)
- American Federation of State, County and Municipal Employees (AFSCME)
- Alzheimer's Association
- Asian and Pacific Islander American Health Forum (APIAHF)
- Asians Advancing Justice
- Association of California School Administrators (ACSA)
- California Advocates for Nursing Home Reform (CANHR)
- California Area Indian Health Service
- California Assisted Living Association (CALA)
- California Association of Area Agencies on Aging (C4A)
- California Association of Family Physicians (CAFP)
- California Association of Health Facilities (CAHF)
- California Association of Health Plans (CAHP)
- California Association of Long-Term Care Medicine (CALTCM)
- California Association of Public Hospitals and Health Systems (CAPH)
- California Association of Rural Health Clinics (CARHC)
- California Association of Veteran Service Agencies
- California Behavioral Health Directors Association (CBHDA)
- California Black Health Network
- California Chamber of Commerce



- California Conference of Local Health Officers (CCLHO)
- California Consortium for Urban Indian Health, Inc. (CCUIH)
- California Foundation for Independent Living Centers (CFILC)
- California Hospital Association (CHA)
- California Immunization Coalition
- California Labor Federation
- California LGBTQ Health and Human Services Network
- California Long-Term Care Ombudsman Association (CLTCOA)
- California Manufacturers & Technology Association (CMTA)
- California Medical Association (CMA)
- California Nurses Association (CNA)
- California Pan-Ethnic Health Network (CPEHN)
- California Primary Care Association (CPCA)
- California Rural Indian Health Board
- California Rural Legal Assistance, Inc. (CRLA)
- California School Nurses Organization (CSNO)
- California State Parent Teachers Association (CAPTA)
- California Superintendent of Public Instruction
- Catholic Charities
- Comite Civico del Valle
- County Health Executives Association of California (CHEAC)
- Disability Rights California
- Disability Rights Education and Defense Fund (DREDF)
- Emergency Medical Services Administrators of California (EMSAC)
- Faith in the Valley
- First African Methodist Episcopal Church



- First Five Association
- Health Access
- Housing California
- Jakara Movement
- Justice in Aging
- Latino Coalition for a Healthy California
- Local Health Plans of California (LHPC)
- Mixteco Indigena Community Organizing Project (MICOP, Central Coast/Indigenous Farmworker population)
- Service Employees International Union (SEIU) California State Council
- Service Employees International Union Local 1000 (SEIU 1000) (Unit 17-Nurses)
- State Council on Development Disabilities
- The California Endowment
- The Children's Partnership
- UFW Foundation
- United Domestic Workers (UDW/AFSCME)
- Vision y Compromiso
- Western Center on Law and Poverty

The Community Vaccine Advisory Committee is part of the state's initial COVID-19 vaccine plan, which was submitted to the CDC in October 2020. Many vaccine candidates are in clinical trials currently, and California is putting a system in place for the safety review, prioritization, distribution and administration of vaccines as supply becomes available.

Information about California's vaccine planning is available on the California Department of Public Health's COVID-19 Vaccination Planning web page.

Page Last Updated : November 24, 2020



**DEPARTMENT OF DEVELOPMENTAL SERVICES**

1000 NINTH STREET, Room 240, MS 2-13  
SACRAMENTO, CA 95814  
TTY (916) 654-2054 (For the Hearing Impaired)  
(916) 654-1897



November 19, 2020

TO: REGIONAL CENTER EXECUTIVE DIRECTORS

SUBJECT: DEPARTMENT DIRECTIVE 01-111920: WAIVER OF SELF-  
DETERMINATION PROGRAM BUDGET RESTRICTIONS FOR  
FINANCIAL MANAGEMENT SERVICES

Pursuant to Governor Gavin Newsom's Proclamation of a State of Emergency dated March 4, 2020, and under the authority of Governor Newsom's Executive Order N-25-20 issued on March 12, 2020, the Director of the Department of Developmental Services (Department) waives the requirement that the cost of the financial management service is paid by the participant from his or her individual budget as described in Welfare and Institutions Code section 4685.8(c)(1).

This waiver is effective October 1, 2020, and is necessary to allow participants of the Self-Determination Program (SDP) to repurpose waived fees for different and/or additional SDP services during the COVID-19 State of Emergency.

This Directive remains in effect for 30 days unless extended by the Director of the Department. Consumers, family members or providers should contact their local regional center with any questions regarding this Directive. Questions from regional centers should be directed to [sdp@dds.ca.gov](mailto:sdp@dds.ca.gov).

Sincerely,

*Original Signed by:*

NANCY BARGMANN  
Director

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**

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



October 28, 2020

TO: REGIONAL CENTER EXECUTIVE DIRECTORS

SUBJECT: UPDATE ON MONTHLY RATES FOR ALTERNATIVE NONRESIDENTIAL SERVICES

The Department of Developmental Services' (Department) August 31, 2020 Directive regarding Alternative Nonresidential Services (Alternative Services) during the COVID-19 State of Emergency indicated that prior to November 1, 2020, providers would be notified of the monthly unit rates for Alternative Services and the monthly unit rates would be used for November 2020 and subsequent months.

In the interest of an effectual implementation, use of the monthly unit rates for Alternative Services will instead become effective December 1, 2020. The Department will provide guidance on use of the monthly unit rates in a forthcoming correspondence.

For November 2020, providers shall continue to follow the methodology and rules outlined in the August 31, 2020 Directive for September and October 2020, as follows:

*"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."*

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

Sincerely,

*Original Signed by:*

BRIAN WINFIELD  
Chief Deputy Director

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

**"Building Partnerships, Supporting Choices"**



# SAN GABRIEL/POMONA REGIONAL CENTER

COPY

November 16, 2020

Mr. Robert Diaz, MBA  
2125 19<sup>th</sup> Street Suite F12  
Sacramento, Ca 95818

Re: Funding for Parents' Place (Telehealth Project)

Dear Mr. Diaz,

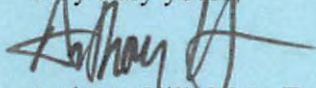
As you are aware, San Gabriel /Pomona Regional Center (SG/PRC) is currently partnering with Parents' Place to close disparities rooted through the digital divide that prevents individuals with developmental disabilities from accessing Telehealth services based on income.

We are pleased to inform you that 250 iPads have been allocated to Parents' Place and are being assigned to families that need this technology that are unable to attain these devices due to the of lack income or a family member's loss of employment.

The cost of implementation of this Parents' Place technology lending library and internet service are not fixed and accrues throughout the entirety of this Telehealth project. It is my understanding, approximately \$4,300 or perhaps a balance slightly higher remains in the resulting trust. SG/PRC is requesting release of the entire remaining balance in full, less applicable administrative cost.

Mr. Diaz attached you will find a copy of Parents' Place invoice detailing reasonable costs supporting our request that you release funds at your earliest convenience. Indeed, we value our partnership with your agency. Please stay safe and remain well.

Very truly yours,



Anthony Hill, M.A. Esq.  
Attorney at Law  
Executive Director  
[ahill@sgprc.org](mailto:ahill@sgprc.org)





ANNOUNCING...

## The Early Start Webinar Series

To address the needs of Early Start during the coronavirus pandemic, this Webinar Series offers:

- **Telepractice Series** which focuses on web-based strategies to support the development of infants and toddlers in Early Start.
- **Wellness, Mental Health, and Resilience Series** which focuses on preventing, recognizing, and addressing stressors for children, families, and professionals.

December 2020  
thru May 2021

**Register now for the first Webinar in the Telepractice Series,  
*Using Video to Enhance Early Intervention Services***

Larry Edelman, Senior Clinical Instructor, Pediatrics-JFK Partners  
Monday, December 7, 9-11:30 a.m.

To learn more or to register, visit Early Start Online at <https://www.cpeionline.net>

- 1 Login or create an account
- 2 Enroll in a Webinar Series
- 3 Sign up for individual webinars in the series as they become available

**DDS** Department of  
Developmental  
Services

CALIFORNIA  
EARLY START

Early Start Personnel Development is a collaborative effort of the California Department of Developmental Services and California Department of Education, administered by WestEd Center for Prevention and Early Intervention (CPEI).