## FY 2023 SG/PRC PERFORMANCE CONTRACT PLAN - DDS APPROVED



JANUARY 6, 2023
SAN GABRIEL/POMONA REGIONAL CENTER
75 Rancho Camino Drive, Pomona, CA 91766



## FY 22-23 SG/PRC PERFORMANCE CONTRACT PLAN-APPROVED

#	Public Policy Measures	Statewide	SG/PRC	2023 Planned Activities
1	Individuals supported by SG/PRC who are now residents of a State Developmental Center (SDC) will live in the community.  Note: Statements designated *( ) below quote the public policy measure as stated by DDS.  *(Number and percent of regional center caseload in Developmental Center.)  Also Note: The statewide numbers represent the percentage of the total number of individuals served by the regional center system who reside in SDC institutions. The lower the number, the better the	6-2022 0.06% 12-2020 0.07%	6-2022 0.02% 12-2020 0.03%	a. Implement the Community Placement Plan (CPP) to develop resources to support individuals in the community. b. Provide training to service providers to enhance their skills in serving individuals with challenging behaviors.
:	Children served by SG/PRC live with their families.  *(Number and percent of minors residing with families).  Note: The numbers represent the percentage of the total number of children served by the regional center system who live with their families. The higher the number, the better the outcome.	6-2022 99.60% 12-2020 99.51%		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. b. Continue SG/PRC Bio-Behavioral Clinic and Psychiatric Consultations as well as Crisis Services and Supports through CBEM and Howard Chudler and Associates.  c. Inform families of family support or peer support groups/activities.  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.  e. Advocate for use of generic resources, such as In-Home Support Services (IHSS), mental health services.  f. Offer telehealth services as an option of service modality.  g. Refer to Parent's Place Family Resource Center for generic resources and supports.  h. SG/PRC has LMS modules for parents to learn about ABA trainings.  i. SG/PRC also promotes to families trainings that take place at Parents Places.  j. Continue to offer services to families during home visits to help maintain children in the home.  k. Share information on commonly provided services for 3–17-year-olds.  l. Provide information on resources and trainings through CAC participation and trainings.  Participate in cross trainings with our FRC on a variety of topics (i.e. Regional Center Services, Social Recreational Services)

	Adults live independently with or without paid	6-2022	6-2022	a. Service Coordinators will offer adults and their families an opportunity to discuss various
	supports.	9.48%	5.77%	living options, such as independent living, supported living, and adult family homes and
3	*(Number and percent of adults residing in independent living.)  The higher the number and percentage, the better the outcome.  +Note: Public Policy Measures 3, 4, 5 and 6 were	12-2021 % 12-2020 9.94% 12-2019 10.18%	12-2021 % 12-2020 6.20% 12-2019 6.07%	will provide written information about these living options, upon request.  b. Provide training to Service Coordinators on adult living options.  c. Provide family members with information about adult living options through outreach as well.  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).
	combined and reported collectively in Measure #7 (see below).			f. SG/PRC Housing Specialist to assist with finding affordable housing options. g. Train Service Coordinators on ILS services. h. Resume ILS fair with training sessions for young adults to experience services offered in ILS. i. Share information with individual and their family as they approach their 18th birthday. j. In-service to transition teachers/students on ILS services.
	Adults live in their own home (apartment, etc. ) with paid supported living services.	6-2022 5.02%	6-2022 1.61%	Same as above. In addition,  a. SG/PRC Housing Specialist will assist adults with finding affordable housing options.  b. New staff are required to complete the LMS module on SLS to meet the training
4	*(Number and percent of adults residing in supported living.) The <b>higher</b> the number, the <b>better</b> the outcome.	12-2020 5.23%	12-2020 1.65%	requirement in statute. c. Discuss living options with individual being supported through the IPP process. d. Offer SLS in service to adults and family members. e. Panel forum made up of individuals and/or family members who have gone through the
	+Note: Public Policy Measures 3, 4, 5 and 6 were combined and reported collectively in Measure #7 (see below).			SLS process and their personal experience.

Adults live in certified family homes along with no more than one other person with developmental disabiltiies.  *(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).	6-2022 0.82% 12-2020 0.91%	6-2022 0.50% 12-2020 0.76%	SG/PRC has developed a new Adult Family Home Agency to increase number and diversity of certified adult family home options. SG/PRC now has a new AFHA – LEAP. SG/PRC will make appropriate referrals to the new AFHA- LEAP through Living Options Committee.  a. Provide training to case management staff on AFHA services. b. Discuss living options with individuals as part of the IPP process.
Adults live with their families.  *(Number and percent of adults residing in family homes (home of parent or guardian.)  +Note: Public Policy Measures 3, 4, 5 and 6 were combined and reported collectively in Measure #7 (see below).	6-2022 67.43% 12-2020 65.55%	6-2022 68.55% 12-2020 66.51%	a. As part of the IPP process, SCs will assess the supports needed by families to maintain the adult served by SG/PRC within the family home and will discuss additional service and support options, such as additional respite and independent living skills training.  b. Provide training to parents on topics such as behavior intervention and adaptive skills that increases families' capabilities to maintain their adult family member in the home. This includes on-line training and IHSS training.  c. Continue SG/PRC Bio-Behavioral Clinic and Psychiatric Consultations as well as Crisis Services and Supports.  d. Inform families of family support or peer support groups/activities.  e. Advocate for use of generic resources, such as In-Home Support Services (IHSS), mental health services.  f. Continue to offer services to adults during home visits and offer supports to maintain them in their family home.  g. Share commonly funded services for 18+ year olds.  h. Offer topic specific trainings on services and resources for adults residing at home (i.e. ILS, personal assistance, adult day programs)

	Adults live in home settings, including with their	6-2022	6-2022	See activities for Measures 3 through 6 above.
	own family, or with supports from other people.	82.75%	76.43%	
7	*(Number and percent of adults residing in home settings.) The <b>higher</b> the number, the <b>better</b> the outcome.	12-2021 % 12-2020	12-2021 % 12-2020	
		81.63%	75.12%	
		12-2019	12-2019	
		80.84%	74.09%	

8	Children served by SG/PRC who require licensed residential care live in small, home-like settings.  *(Number and percent of minors living in facilities serving > 6.)  Note: the numbers represent the percent of total minors served by SG/PRC, including those placed by LA County Department of Children and Family Services (DCFS) living in large facilities. The lower the numbers, the better the outcome.	6-2022 54 (0.03%) 12-2020 64 (0.04%)		a. Continue to work with large facilities to reduce their licensed capacity. b. Provide assistance to the Los Angeles Department of Children and Family Services (DCFS) in locating appropriate, smaller facilities for mutually served minor clients. 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. d. Assure that all residential services for children complies with CMS regulations for HCBS. e. Continue to collaborate with Los Angeles Department of Children and Family Services (DCFS) in locating appropriate, smaller facilities for mutually served minor clients. f. Provide training on POS available to meet the needs of mutually served individuals (i.e. ext. day, ext. year, in-home respite, day care for foster care youth not in large settings).
9	Adults served by SG/PRC who reside in licensed facilities live with five or fewer other adult residents.  *(Number and percent of adults living in facilities serving > 6.)  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.  Also Note: The numbers represent the percent of total adults served in the regional center system living in large residential facilities. The lower the number, the better the outcome.	6-2022 1.71% 12-2020 1.94%	6-2022 4.99% 12-2020 5.87%	a. Continue to work with large facilties to reduce their licensed capacity. 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. c. If appropriate and the adult has an interest, discuss other living options, such as Adult Family Home certified homes and supported living arrangements.

EMPLOYMENT MEASURES	a. SG/PRC will calculate the number of individuals served aged 16-17.
The number and percentage of individuals aged	b. SG/PRC will calculate the number of individuals served ages 18 through 22 years of age
16 -64 with earned income will increase over the	and determine the number of individuals still eligible for public education separately from
previous calendar year.	those who are no longer eligible for public education.
	c. SG/PRC will calculate the number of individuals served aged 23-64.
*(Number and percentage of individuals, ages 16-	d. Using these age groups, SG/PRC will review the number and percent of individuals who
64 with earned income.)	are eligible to work in terms of their earned income during the calendar year.
	e. When invited, 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.
	f. SGPRC will participate in quarterly local partnership (LPA) meetings with local education
	agencies, Department of Rehabilitation, and community partners, either virtually or in-
10	person when available, to promote, discuss and plan pathways to advancing competitive
	integrated employment for youth and adults.
	g. SGPRC will participate in quarterly Work Services meetings with the Department of
	Rehabilitation, and Supported Employment Programs, either virtually or in-person when
	available, to promote competitive integrated employment services.
	g. SGPRC will participate in Transition Fairs and other resource/information fair hosted by
	local education agencies to promote and encourage competitive integrated employment
	for youth exiting the education system who wish to pursue employment.
	i. SGPRC will encourage day / work programs to consider adding on Tailored Day Services,
	since this is a 1:1 service and there is a focus on employment and volunteerism. Work
	Programs could use TDS for job development.
	j. Annual participation in Transition Taskforce meetings during academic school year and
	Virtual Transition Fair where post educational options are offered to graduating and exiting students.

	The average annual wages for individuals aged 16-	a. Service Coordinators to monitor and report competitively employed client's wages in
	64 will increase over the previous calendar year.	SANDIS.
		b. Service Coordinators will encourage clients to obtain competitive integrated
	*(Annual annual wages for individuals ages 16-	employment in the community with employers that that prevailing wage or higher.
	64.)	c. Monitor and encourage Supported employment vendors to pay at minimum wage or
		better and to increase client wages at state or local level.
11		d. Monitor Supported employment wages through vendor wage report documentations (DS1964 & DS1972).
' '		e. Work with Work programs at receiving incentives when employment at minimum wage
		has been obtained.
		f. Encourage work programs to add Tailored Day Services, which is a 1;1 service which can
		be used for job development.
		g. SGPRC will collect wage reports as part of employment data collection.
		h. SG/PRC will continue to track CDER/Sandis and educate case management staff on
		importance of updating information.
	*(Annual earnings of individuals ages 16-64	a. SG/PRC will calculate the number of individuals served ages 16 through 17 years of age.
	compared to all people with disabilities in	b. SG/PRC will calculate the number of individuals served ages 18 through 22 years of age.
	California.)	c. SG/PRC will calculate the number of individuals served from 23 years through 64 years
12		of age.
'-		d. Using these age groups, SG/PRC will review the average annual earnings for the
		calendar year in comparison to all people with disabilities in CA.

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PIP) potentially leading to employment will
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be discussed during quarterly Work Services
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16	*(Average wages and hours worked for adults engaged in competitive integrated employment on behalf of whom incentive payments have been made.)	2021 - \$13.44/h, 27 h/w 2020 - \$13.44/h, 27 h/w 2019 - \$12.59/h, 25.5 h/w	<ul> <li>a. SG/PRC will utilize the same activity plans for competitive, integrated employment (CIE) as for PIP, indicated above.</li> <li>b. As appropriate, SCs will list CIE as an IPP goal.</li> <li>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.</li> <li>d. SG/PRC will inform service coordination staff of PIP, CIE and incentive programs through a group training.</li> </ul>
17	Total number of 30-day, 6-month and 12-month  *(Percentage of adults who reported having	12-2021 \$1000 = 27 \$1250 = 10 \$1500 = 3 \$2000 = 19 \$2500 = 21 \$3000 = 3 12-2020 \$1000 = 21 \$1250 = 8 \$1500 = 14 12-2019 \$1000 = 34 \$1250 = 27 \$1500 = 25	a. SG/PRC will discuss the benefits of incentives and how to quality for incentives during Vendor Advisory Committee (VAC) meetings, VAC employment subcommittee meetings, as part of Technical Assistance Trainings for vendors, and during Work Services meetings. b. Information about the CIE incentives will be posted to the SG/PRC website. c. Inform service coordination staff of PIP, CIE and incentive programs.
18	competitive integrated employment as a goal in their IPP.)	IVA	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.

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	MEASURES RELATED TO REDUCING DISPARITIES	See	a. Recruit and maintain a culturally diverse staff whose ethnicity, language and cultural
	AND IMPROVING EQUITY IN POS EXPENDITURES	Disparity	background reflect that of the collective individuals served by SG/PRC.
	For each age group, the variance in the	Report	b. Provide information and training for staff and service providers to promote culturally-
	authorizations and expenditures of Purchase of		competent and person-centered service delivery.
	Services (POS) among ethnic/racial groups for		c. Seek input from our community regarding barriers to access and utilization of services,
	individuals living at home with their families will		and ways to overcome these barriers, especially for hispanic school-aged children and
	be reduced/minimized over previous years.		Hispanic adults residing with their families.
			d. Review annual POS authorization and expenditure data and monitor progress.
	*(Indicator showing the relationship between		e. Service Coordinators annually review utilization of authorized POS for the individuals
19	annual authorized services and expenditures by		assigned to them.
	individual's residence type and ethnicity.)		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.
			g. SG/PRC will run a query of NO POS numbers for Family, Transition, and Adult Services
			Departments to establish a baseline and begin focusing on those individuals that are not
			accessing or utilizing services and resources.
			h. Review annually progress made on those with most disparity.
			i. In-service training with staff on services available, cultural barriers to accessing services,
			sharing of resources.
	For each age group, the number and percent of	See	Plans same as above in Measure #19.
	individuals receiving NO POS, when comparing	Disparity	
	ethnic/racial groups for those living at home with	Report	Also run periodic reports of NO POS to track progress and identify trends.
	their families, will decrease over previous years.		l and the periodic reported of the creating regions and recording the creating
	and talkings, this does ease over promote years.		For children in Early Intervention who show no POS, clearly identify those children that are
	*(Number and percent of individuals receiving		being serviced under their medical insurance plan.
	only case management services by age and		being serviced under their medical modifice plans
	ethnicity:		
20	)		
	Age three to 21, inclusive.		
	Twenty-two and older.)		
	Twenty-two and older.)		

## **COMPLIANCE MEASURES**

#	Compliance Measures	Last Period	Current Period	Planned Activities
1	Unqualified independent audit with no material finding(s).	Yes		
2	Substantial compliance with the Department fiscal audit.	Yes		
3	Operates within OPS budget.	Yes		
4	Certified to participated in Home and Community Based Services Waiver.	Yes		
5	Compliance with Vendor Audit Requirements per contract, Article III, Section 10.	Met		
6	CDER/ESR Currency	96.60%		
7	Intake/assessment and IFSP timelines (ages 0-2).	N/A		
8	Intake/assessment timelines for individuals ages 3 or older.	100%		a. The Admission and Assessment department has recently hired additional staff that will support with the high volume of calls and electronic requests for evaluations and eligibility consideration b. SGPRC will upgrade to a new software system that will support with having an electronic system to meet Intake timelines. c. Admission and Assessment managers continue to streamline procedures as well as enhance others that will create a better customer service experience for applicants and their families. d. SG/PRC continues to work towards securing additional clinical consultants that will support with the current timeline for assessment and eligibility determination.
9	IPP Development (W&I Code requirements)	%		
10	IFSP Development (Title 17 requirements)	87.40%		

## SAN GABRIEL/POMONA REGIONAL CENTER PERFORMANCE MEASURES - FISCAL YEAR 2022-2023

Focus Area	Measure	Measure Description	Incentive Type
Early Start			Recognition
	Timely Access to Early Start Services	Rate of Individual Family Service Plan (IFSPs) completed within the federally required 45-day timeframe from receipt of referral.	Baseline
Employment	Participation in Competitive Integrated Employment (CIE)	Number of consumers who participate in competitive integrated employment (CIE) for at least 30 days during the reporting period stratified by:  Students enrolled in or attending secondary education Adults who are no longer enrolled in or attending secondary education	Pay-for-Performance
	Data Points and Reporting for CIE	RCs will work with DDS to establish data points and reporting in SANDIS regarding interest in or actively participating in CIE	Baseline
Equity and Cultural Competency	Linguistic Diversity	Number of bilingual Service Coordinators (SCs) including intake staff and first line supervisors for each language     Language distribution across people receiving RC services	Pay-for-Reporting     Pay-for-Performance
	Language Access	Number of requests for translated IPP documents and length of time to complete request	Baseline

Focus Area	Measure	Measure Description	Incentive Type
	Service Coordinator Competency in Cultural and Ethnic Diversity	Percentage of Service Coordinators (SCs) including intake staff and first line supervisors participating in training related to cultural and linguistic competency.	Baseline
Individual and Family Experience and Satisfaction	Consumer /Family Satisfaction with Regional Center Services	RCs will work with DDS to establish annual feedback from individuals receiving RC services and family members, with eight or more common components agreed upon across all 21 RCs	Baseline
Person-Centered Services Planning	Service Plans Demonstrate Person-Centered Criteria	RCs commit to the development and use of a consistent person-centered service plan document.	Baseline
	Service Coordinator Facilitation Skills	Number of certified Person-Centered Plan Facilitation Trainers employed by the RC and qualified to deliver plan facilitation training	Pay-for-Reporting
Service Coordination and Regional Center Operations	Choice of Services within Regional Center	Number of vendors for each service type within the RC catchment area, reported by zip code	Baseline
	Timely Service Authorizations	Number of days between annual individual program plan (IPP) review and service authorization, reported as an average and range.	Baseline
	Service Coordinator Competency	Develop a set of Service Coordinator (SC) training standards and competencies approved by DDS for use statewide     Establish data elements for reporting on number of SCs who completed all requirements within the standards	Baseline
	Intake Process	RCs agree to develop and utilize a standard intake process that includes core elements articulated by DDS, focused on customer service.	Baseline