



STATEWIDE SELF-DETERMINATION ADVISORY COMMITTEE MEETING NOTICE/AGENDA

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DATE: Monday, August 28, 2017
TIME: 10:00 a.m. – 3:30 p.m.
LOCATION: Crowne Plaza Sacramento Northeast
5321 Date Avenue
Sacramento, CA 95841

Pursuant to Government code Sections 11123.1 and 11125(f), individuals with disabilities who require accessible alternative formats of the agenda and related meeting materials and/or auxiliary aids/services to participate in this meeting should contact Robin Maitino at (916) 322-8481 or email robin.maitino@scdd.ca.gov. Requests must be received by 5:00 pm, August 20, 2017.

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1. CALL TO ORDER	A. Lopez
2. ESTABLISH QUORUM	A. Lopez
3. WELCOME AND INTRODUCTIONS	All
4. APPROVAL OF OCTOBER 2016 MEETING MINUTES	A. Lopez 3
5. PERSON CENTERED PLANNING TRAINING MODEL <i>Presenter: Trudy Marsh Grable, Parents Helping Parents, Inc.</i>	
6. MEMBER UPDATES	All

For additional information regarding this agenda, please contact Robin Maitino, 1507 21st Street, Ste. 210, Sacramento, CA 95811, (916) 322-8481. Documents for an agenda item should be turned into SCDD no later than 12:00 p.m. the day before the meeting to give members time to review the material. The fax number is (916) 443-4957.

7. **UPDATE ON SELF-DETERMINATION WAIVER** J. Knight
8. **OVERVIEW OF THE REGIONAL CENTER STAFF SELF-DETERMINATION TRAININGS** J. Knight
9. **TRAIN-THE-TRAINER FOR SSDAC MEMBERS ON THE PRE-ENROLLMENT TRAINING** J. Knight
10. **PUBLIC COMMENTS**
Each person will be afforded up to three minutes to speak. Written requests, if any, will be considered first.
11. **INFORMATIONAL MATERIAL FROM WRC** 24
12. **ADJOURN** A. Lopez

MEETING MINUTES



DRAFT

**Statewide Self-Determination Advisory Committee
Meeting Minutes
October 27, 2016**

Members Present

Ronald Allan (CVRC)
Joyce Clark (SDRC)
Lisa Cooley (ACRC)
Ronda Dever (FNRC)
Richard Dier (NLACRC)
Cheryl Hewitt (SARC)
Vi Ibarra (RCEB)
Sherry Johnson
(SCLARC)
Sonia Jones (NBRC)
Miriam Kang (HRC)
Claire Lazaro (VMRC)
Robert Levy (RCRC)
April Lopez (SCDD
CHAIR)
Judy Mark (WRC)
Howard McBroom (FLRC)
Peter Mendoza (GGRC)
Virgilio Orlina (ELARC)
Maia Pawooskar (IRC)
Bruce Wasson (SGPRC)
Rick Wood (KRC)

Others Attending

Aaron Carruthers
Gabriel Rogin
Mary Ellen Stives
Riana Hardin
Sonya Bingaman
Armando Villegas
Jim Knight
Darlene Kilmartin
Lilly (Cheryl's facilitator)
January Crane
Diana Hernandez
BJ Thompson
Alexander Williams
Tess Franas
Connie Lapin
Jason Lane
Ashley Allen
Sarah Spring
Joseph Hernandez
Sidney Jackson
Robin Maitino

Others Attending (continued)

Jessica Gutierrez
Latrice Simmons
Deborah Simms
Laura Larson
Mark Polit
Louise Sylvester
Darlene Kilmartin
Christine Fitzgerald
Amy Westling

1. CALL TO ORDER

Chairperson April Lopez called the meeting to order at 12:15 p.m.

2. ESTABLISHMENT OF QUORUM

A quorum was present.

3. WELCOME AND INTRODUCTIONS

Chairperson Lopez welcomed everyone. SSDAC members and others attending introduced themselves. Chairperson Lopez explained that travel reimbursement forms and a sample of a new SDAC brochure are at each member's table. The

recent Trailer Bill language underscores the relationship of the local SDAC, the Regional Centers, and the SCDD. Please continue to forward SDAC notes, agendas, packets, flyers, handouts, and training materials to post on the SCDD website.

4. **MARCH AND JUNE MEETING MINUTES**

Minutes from the March 3, 2016 and June 21, 2016 meetings were reviewed.

It was moved/seconded (P. Mendoza)/R. Allen) and carried to approve the March 3 and June 21, 2016 meeting minutes as presented. Members listed above on page one were in favor with the exception of Robert Taylor who abstained.

5. **UPDATE ON SELF-DETERMINATION WAIVER**

a. Feedback on SD Questions

Jim Knight, Department of Developmental Services (DDS), explained that getting approval for a Waiver through the Federal government is a lengthy process. DDS is working on responses to questions asked by the CMS. DDS plans to provide more feedback to CMS by next week. DDS is still waiting on clarification on a few issues, but they want to keep the process moving.

Mr. Knight asked for input from the SSDAC to address three areas of concern highlighted by CMS.

Issue #1: Page 30. The Waiver needs to define and outline the crisis services participants can receive. CMS wants a time limit specified for placement into a crisis facility. They are suggesting 30 days. They also want California to define and describe the parameters of what will be allowed and what measures will be taken to review crisis placements in a facility and how they will be monitored. There are two similar placement types now, one at the Acute Crisis Facilities at Sonoma Developmental Center or Fairview Developmental Center where the maximum time someone can reside there is 1 year (after 6 months an extension is required). The other is a placement in an Institution for Mental Disease with a maximum of 6 months with a review after the first 90 days.

Miriam Kang (HRC SDAC) - Is there discussion of whether the crisis is regarding a child or adult?

Jim Knight (DDS) - It could be any age.

Bruce Wasson (SGPRC SDAC) - How do you answer 16a?

Jim Knight (DDS) - We did answer that one already. Crisis placement is a last resort. Less intrusive options should be tried first.

Peter Mendoza (GGRC SDAC) - Whatever the timelines are, all community supports and options should be exercised first.

Lisa Cooley (ACRC SDAC) - Shouldn't the timelines for crisis intervention be dependent on an individual's diagnosis?

Jim Knight (DDS) – CMS wants “short term” defined. Let's say 180 days is the maximum but if a person needs more, what is the process. If supports and services are not ready for the person to move back to the community, what happens on day 181. We want a safety net.

Cheryl Hewitt (SARC SDAC) - In Santa Clara County if the police are called because of a behavioral issue, the police have to take them to a psychiatric unit at the county hospital. But San Andreas does not have a system set up to deal with I/DD clients and they have been put into the county system and the families are really angry about this.

Jim Knight (DDS) - There are two new models of care: Enhanced Behavioral Supports Home and Community Crisis Facilities. DDS is trying to increase services available for I/DD in crisis situations.

Howard McBroom (FLRC SDAC) - Do you think there should be one specific time limit for everyone or different time limits for people with different problems?

Jim Knight (DDS) - We need to set a maximum. Individual needs will vary but we need a maximum for everyone.

Ronda Dever (FNRC SDAC): What are they asking for?

Jim Knight (DDS) - They suggested 30 days but it seems too short. What is reasonable? For example, what do we do at day 181 when we can't draw Federal money for continued services?

Claire Lazaro (VMRC SDAC) - Do we want 180 days or longer to cover options?

Jim Knight (DDS) - I don't know the right number but we can make a case that 30 days is too short.

Claire Lazaro (VMRC SDAC) - If we do 180 days compared to 1 year what is the chance of CMS accepting it?

Judy Mark (WRC SDAC) - Can you ask the Feds what time line they will approve?

Richard Dier (NLARC SDAC) - I think 180 or 365. Even 30 days may be a budget buster. There would need to be a review of the SDP budget. Is there an opportunity for the consumer to return to traditional services if the crisis placement time is exceeded or is all funding cut off?

Jim Knight (DDS) - Same rules are going to apply in traditional system as in SDP. Programs beyond the limit would not be funded.

Bruce Wasson (SGPRC SDAC) - Why not go for 365 and see what we can get without delaying further – pick longest date so we are worrying about 365 and not 180?

Jim Knight (DDS) - I don't mind asking Feds the question.

Peter Mendoza (GGRC SDAC) - Services are individualized so we make our best effort to keep our people in the community as much as possible. Also, putting on my Olmstead hat we want to assure that no one get lost if they move into a crisis setting. We want to track folks so they get back to the community as fast as possible.

Jim Knight (DDS) - With current timelines comes requirements for reevaluations and routine assessments. These would be a part of that.

Maia Pawooskar (IRC SDAC): If consumer is pregnant and needs an emergency placement, how do we go from 30 to 365 days. We want whole gestation period.

Judy Mark (WRC SDAC) – It is essential for DDS to informally ask CMS what they are looking for before we put it in writing. It could delay the process if we throw in a number without it being approved. The reason we are facing this issue is because of new HCBS Rules requiring people to have full access to the community in the settings where they receive federally funded services. This will

be required by all by March 2019. Those in SDP must abide by the new rules immediately. So, our answer to SDP will affect the answer for all 300,000 I/DD in California's system. We need to get the answer correct and not delay it and go back and forth because we got it wrong. No other states' plans refer to out of home placements in a crisis center. Where they do mention it, they refer to crisis intervention supports in their home. They flood them with behavioral or psychiatric services in the home to prevent them from going to more restrictive setting. I think we need to stick with a pretty low number to get it approved. Usually crises are not sudden. In SDP, we should have a fluid system of PCP. We are not limited to vendored services. I suggest we put in 180 days with exceptions.

April Lopez (SSDAC Chairperson) - Have we spoken to a clinician in a crisis setting so we can give good feedback regarding this?

Jim Knight (DDS) - Yes. To Judy's point, we are looking at what other states have been approved for in their Waivers or Transition Plans. There hasn't been a lot of approval of plans with crisis plans discussed. California may be blazing the trail.

Issue #2: Question 56, page 48. In traditional vendored services, the vendor is required to give a copy of any Special Incident Report (SIR) or abuse/neglect report to the Regional Center. Because providers in SDP are not necessarily vendored, they do not have this obligation. How will reports be provided to the Regional Center so they can monitor them and address issues as needed.

With SDP, there is only one vendored provider and that is the Fiscal Management Service (FMS). The majority of providers won't be vendored and won't have the requirement to report. But the Regional Center needs to have oversight and know what is going on to make sure appropriate service are in place and to manage risk. Even if there are not regulations, providers do fall under "mandated reporter" requirements to report to Adult or Child Protective Services. Should we ask that if providers under SDP make a report, they also give a copy of the report to the Regional Center. The Regional Center needs to be aware of these incidents.

Ronald Allan (CVRC SDAC) – What if I fall and don't get hurt but skin my head. Then my helper comes in and sees me reports to his boss and his boss reports to the Regional Center. I called my counselor and told her that I fell myself. I think the clients should report incidents themselves.

Bruce Wasson (SGPRC SDAC) - If you can add this to FMS without costing more that is a great outcome.

Cheryl Hewitt (SARC SDAC) - I don't understand how you feel that getting a copy of the paperwork submitted to APS or CPS should go anywhere other than into a confidential file for the consumer. The FMS shouldn't be involved, they should just manage money.

Jim Knight (DDS) – The FMS would not respond to the incident, they would just inform the regional center who would still have a case manager responsible for oversight of services and to see if there is a need to address risk.

Cheryl Hewitt (SARC SDAC) - I don't see how it fits.

Jim Knight (DDS) – The Regional Center will still be involved with the IPP and the Federal government wants to know if the regional center still has the job of being aware of things that could present a risk to the individual in SDP.

Cheryl Hewitt (SARC SDAC) - I don't think the regional center should have it, there is an issue of confidentiality.

Peter Mendoza (GGRC SDAC) - I have no problem with the FMS reporting financial issues but I do have an issue with them reporting issues other than finances. We may not want them to know about other issues. They are not open 24 hours a day. Regional centers are open 24 hours a day. This issue needs to go back for more research. There needs to be agreement between APS and the regional center. Giving the report to the FMS is out of their scope and ability.

Maia Pawooskar (IRC SDAC) - In school we had an issue with privacy and information being shared inappropriately. There were serious violations reported. School staff should receive training on HIPPA violations. Privacy is a serious concern. Information sharing is a violation of your ethics. There should be some oversight entity to ensure that people in SDP can go to if there are violations.

Richard Dier (NLARC SDAC) - I've made dozens of reports to APS and I've never completed a written report. Some providers maybe not even be familiar with the regional center. In every IPP, there should be a plan specific to that consumer to make sure everyone is aware, trained, and maybe have access to

a hotline. Dependence on vendored providers is absent. Some of them may not be aware.

Jim Knight (DDS) - Issues of confidentiality and responsibilities of providers. We'll need to work out these details.

Issue #3: Question 69, page 53. CMS is concerned that there is not a cap on rates. What protection or assistance is in place to help the participant determine a "reasonable" rate? They are concerned that participants might be taken advantage of. There is a limit to the annual budget so people need to negotiate within that amount. What are the supports in place to help negotiate rates?

Bruce Wasson (SGPRC SDAC) – Develop a way to flag vendors who charge too much.

Maia Pawooskar (IRC SDAC) - Currently rates are too low so many providers don't want to provide the service.

Jim Knight (DDS) - Don't want to have the current rate limits in SDP.

Miriam Kang (HRC SDAC) – For example, respite workers are making \$9-10 an hour and if someone says they want to pay \$50 an hour, the FMS has oversight, do they approve the budget?

Jim Knight (DDS) - They approve the budget.

Miriam Kang (HRC SDAC) – For ABA, regional centers pay about \$50 an hour, insurance companies pay \$150. If there are caps, we have a basis to go on.

April Lopez (SSDAC Chair) – Acceptable rates also depends on where people live.

Rick Wood (KRC SDAC) - From experience in the pilot over the years. We need to trust the market. Self Determination is just that, let's not describe caps or minimums. The market takes care of itself. Role of Independent Facilitator is very important, finds services and supports and finds out what the going rates are. I don't mean to minimize role of FMS. We want to limit FMS to financial issues and leave it to the Independent Facilitator to assist the consumer in making the right choices.

April Lopez (SSDAC Chair) – I’m referring to a standard list that exists for everyone as a guide.

Judy Mark (WRC SDAC) – One of the principles of SDP is “Confirming” we can make choices and learn from our mistakes. We made mistakes for our 19-year-old son. There were ineffective therapies, we’ve learned to assess what will work and not. This question shows me CMS doesn’t understand what SD is and they don’t understand that people make choices and learn from mistakes and it is a finite budget. I think this is an easy answer.

Peter Mendoza (GGRC SDAC) - When I moved out at 18 I made a lot of mistakes and learned from them. I suggest that it would be stated that people can’t charge more for services to people with disabilities than to the general public for the same service. It should be in our SD principles.

Bruce Wasson (SGPRC SDAC) - Any market based system can benefit from a handful of wise restraints. Some clients will have conservators. Have some way to flag outliers for follow up, gives some protection.

Claire Lazaro (VMRC SDAC) - Could we ask for a range of certain services that the regional center pays so consumers would have an idea of average costs. For example, for respite, the range is \$9-25. With that information, then it would be up to the consumer to work out a rate with the provider.

Virgilio Orlina (ELARC SDAC) - Can the consumer choose for the regional center to pay for the rates that he wants?

Judy Mark (WRC SDAC) - Yes, participant decides on the rates, not the regional center

6. **REVIEW & COMMENT ON DDS SD WORKGROUP TRAINING MATERIALS** Jim Knight (DDS) - Still working on FMS module. And the last module we are working on is Person Centered Planning (PCP). PCP is very important. Hopefully it will be complete within the month. The modules will be able to be used as is or modified and they will be posted on the regional center websites.

April Lopez (SSDAC Chair) - Any questions or concerns on the modules? Start on page 64.

Judy Mark (WRC SDAC) – We want to clarify that the target audience is regional center staff, these are not intended for parents and consumers.

Rick Wood (KRC SDAC) - At our meetings we are not training parents. We are sharing information so they know what is coming. I agree with Judy. The presentation to a parent needs to be a little different than this format.

April Lopez (SSDAC Chair) - First module is Program Services.

Maia Pawoskar (IRC SDAC) – I'm not sure if our regional center is using these materials.

Jim Knight (DDS) - A lot of centers are sharing information and that is good but we are required by law to provide this to the regional centers.

Maia Pawoskar (IRC SDAC) - Sometimes we have heard the SCs may not have received training.

Jim Knight (DDS) - Law requires training to be provided to the regional centers. That is what we will be doing.

Peter Mendoza (GGRC SDAC) - Need these materials quickly so we can share consistent information. Need clear blueprint.

April Lopez (SSDAC Chair) – Is DDS going to do a webinar?

Jim Knight (DDS) - That is still the plan.

Rick Wood (KRC SDAC) - Look at page 66, it says to go to DDS website to find a list of the services. Exposure around the state has not been enough yet. In the end, it is up to us to encourage regional center staff to develop the information to continue outreach about SD, help people understand what will be available under the Waiver.

April Lopez (SSDAC Chair) - 99% of people don't know about how SDP will work or could look.

Rick Wood (KRC SDAC) - It is not as complicated as it seems. Even though we only have 36 participants in the SDP pilot, I don't think they are that different from the rest of the state.

Jim Knight (DDS) – These modules have been through the work groups several times. We are very committed as a department to making this happen. We will get there.

April Lopez (SSDAC Chair) - Do all the case workers know about SDP?

Jim Knight (DDS) - All regional centers are aware. When the Department goes out and provides the training the knowledge level will increase.

April Lopez (SSDAC Chair) - Should we write a letter to the regional centers about training their staff?

Judy Mark (WRC SDAC) – A key piece is the Person-Centered Planning Training Module. A new module on HCBS settings rules is being developed too. This document is not complete and not in 100% final form. You can't do a training without talking about PCP. We are in our 4th month of developing simple language training on Self Determination with pictures and photos and focus grouping it. When we are done, we will share it to be edited and used around the state.

Robert Taylor (RCRC SDAC) - It should be in plain language.

Richard Dier (NLARC SDAC) - I'm curious about how service coordinators are going to be trained. Is it the train the trainer model? What is role of the SDAC in this process?

Jim Knight (DDS) - It will be more of a train the trainer model. Not all regional center staff can or will be trained. Not just DDS. Some people from the pilot or workgroup may come and help with the training.

Richard Dier (NLARC SDAC) – I am hoping the SDAC can have the same training as the service coordinators.

Joyce Clark (SDRC SDAC) - Our SDAC has also discussed our role in this process. Is there a budget for outreach materials for trainings, mailings to consumers, printing documents, and so on?

Jim Knight (DDS) - Work with your regional center to see what support and funding is available. The SD program must be cost neutral so we are working within constraints.

Howard McBroom (FLRC SDAC) - Can we use these materials for trainings?

Judy Mark (WRC SDAC) - We'll need to adapt the materials to take to the community.

Peter Mendoza (GGRC SDAC) – Could you add a Glossary of Terms or an Appendix to the training modules?

Lisa Cooley (ACRC SDAC) – Training modules need to be put in simplified format and common threshold languages of California.

Joyce Clark (SDRC SDAC) - Several different initiatives statewide are working on similar system change processes, is there any coordination among these agencies?

Jim Knight (DDS) – We are trying to coordinate with other initiatives as much as possible.

7. **REVIEW AND COMMENT ON PRE-ENROLLMENT PROCESS**

Jim Knight (DDS) - Page 145. For the first three years of SDP the enrollment is limited to 2,500 statewide. We want them to have an idea of what Self Determination is before they express interest in being selected. So we came up with idea of a Pre-Enrollment meeting. DDS wants to be sure that information provided is consistent. And we want to know who attended meetings. DDS will provide training to regional center staff and will provide a core set of tools for what will be presented at Pre-Enrollment Meetings. The process describes how people express continued interest in Self Determination. Attendance does not guarantee being selected for Self Determination. There will be a random selection from around the state to represent the state at large. The Department will send a letter to everyone who attended a training to let them know they are on the list.

Ronald Allan (CVRC SDAC) - Sometimes people don't pay attention in trainings.
January for Sonja Jones (NBRC SDAC) - One question that keeps coming up. When does the 3 years start?

Jim Knight (DDS) - 3 years from when the Waiver is approved.

Miriam Kang (HRC SDAC) – Can a person attend a Pre-enrollment training anywhere in CA?

Judy Mark (WRC SDAC) - on Number 3, the meetings are not just led by regional centers. I don't see the SDAC on this list. Regional centers should put on these meetings in partnership with the SDAC. There may be a trust issue with regional center staff. If only regional center staff give the training, they may hear things differently. Spanish or Chinese Language Support Groups could lead the presentation for example. When the regional center is in charge of the meeting, they should be in partnership with the local SDAC.

April Lopez (SSDAC SDAC) - State Council should be listed here because we are already doing outreach.

Ronald Allan (CVRC SDAC) – The chairperson of the SDAC goes with the regional staff to do presentations.

Howard McBroom (FLRC SDAC) – I agree that local SDAC should be involved. We have experience and knowledge and are committed to making Self Determination successful.

Cheryl Hewitt (SARC SDAC) - The problem with my SDAC is that the regional center keeps taking the definition of “advisory” as you can give us advice but we won't do it that way. They are not telling us what they are going to do. The regional center staff did not attend our meeting last Thursday. How is my SDAC supposed to get the word out? We have a Powerpoint that the committee developed and we identified agencies we want to go to but we are not getting assistance from our regional center.

Ronda Dever (FNRC SDAC) - DDS is developing materials for pre-enrollment meeting. Is DDS training the other organizations that can lead the meetings?

Jim Knight (DDS) - Others can get the training from DDS or the regional centers.

Ronda Dever (FNRC SDAC) - When will those materials be available?

Jim Knight (DDS) - In the next couple weeks.

Ronda Dever (FNRC SDAC) - We are not waiting for the Waiver to be approved to start the Pre-Enrollment meetings.

Claire Lazaro (VMRC SDAC) - If we have enough materials can we start now?

Jim Knight (DDS) - We will give the training materials to everyone at the same time so you need to wait for DDS to provide the (official) materials and training of the trainers.

Peter Mendoza (GGRC SDAC) - How will DDS know who attends trainings?

Virgilio Orlina (ELARC SDAC) - Will service providers be a part of the trainings?

Jim Knight (DDS) - Many people will be involved in the trainings.

April Lopez (SSDAC SDAC) - They may be recordings on YouTube and elsewhere online, etc.

Rick Wood (KRC SDAC) - I attended a meeting at the regional center called a Self Determination Orientation, there were very few materials. The goal of pre-enrollment is to get the word out. The program will develop momentum. You don't have to have all the answers. Maybe those who are not regional center staff can do this in a more interesting and compelling way. You don't need to know all the details to be effective in spreading the word.

April Lopez (SSDAC Chair) - Presentations should depend on your audience. I went to a training where the history of the SD pilot was described and people thought this was going to be a pilot still.

Ronda Dever (FNRC SDAC) - What is the process for people to prove they attended or watched a training?

Judy Mark (WRC SDAC) – We need to figure out how to get the training into rural areas and help all people access the technology.

Joyce Clark (SDRC SDAC) - SDACs are ready to be involved in this process.

Bruce Wasson (SGPRC SDAC) – This is the second statewide meeting where Cheryl has described a relationship between her SDAC and regional center. Can we assign Chairperson Lopez or someone to help with the regional center/SDAC relationship?

Jim Knight (DDS) - I will contact Cheryl and we can discuss it further.

Cheryl Hewitt (SARC SDAC) - OK, because it is awful. Everything we want to do is shot down by the RC and they don't attend meetings regularly. Committee wants to meet monthly, the regional center wants to meet every 2 months.

Peter Mendoza (GGRC SDAC) - Even though things are in statute, it is good for DDS to send out "what does advisory mean". We need more support from SCDD and DDS on what regulations mean. Thanks, Chairperson Lopez and Jim Knight for stepping in and helping out. We need help to interpret the nuance of some words.

Maia Pawoskar (IRC SDAC) - We have only one self-advocacy position filled and this person has difficulty attending the meetings. Not sure where the gap is. We do receive excellent support from SCDD. Because of lack of movement of SDP, they started meeting less frequently. Maybe the regional center doesn't want to pay for the travel of members to attend more frequent meetings. Our area is very large. We are working on trainings on Person Centered Planning but it is a challenge. Tamica Fouts-Rachal, SCDD is trying to organize with Rick Wood (KRC SDAC) to come provide a training. We set up an 800 number for people to listen in.

Howard McBroom (FLRC SDAC) - We do have the authority to take an active role in the process.

April Lopez (SSDAC Chair) – I will put "what is oversight" on the agenda for the next meeting.

Judy Mark (WRC SDAC) – Self Determination is about self-empowerment. We need to take control over our SDACs and not wait for approval from the regional center. We as chairs have authority and can set up extra meetings, as needed. We should feel empowered. If there is push back, then reach out to Jim Knight or April Lopez (SSDAC Chair) for assistance. We don't ask, we just do things and there has not been a problem. This is a paradigm shift in how we control the future of Self Determination and we have the power to do that.

April Lopez (SSDAC SDAC) - Information about the Statewide SSDAC meetings is going out to ALL SDAC members, not just the chairs and vice-chairs. If there is a problem, let us know.

Miriam Kang (HRC SDAC) - At Harbor Regional Center we have 2 locations and we go back and forth every other month. It helps give opportunity for all to attend.

Joyce Clark (SDRC SDAC) - Training and enrollment process. How are we bringing in the regional center boards, because they establish policy and practice of services?

Jim Knight (DDS) - It is a good point to be sure boards are being informed.

8. **SURVEY LOCAL SELF DETERMINATION ADVISORY COMMITTEE'S OUTREACH EFFORTS AND RESULTS**

Virgilio Orlina - East Los Angeles Regional Center. 11,000 clients, 110 SDP slots. 85 are open, 25 are reserved for current self-determination participants. Those interested, attend public meetings on SDP, signing up at online mail box. In 2015-2016 there were many meetings to the public. POS data meetings and at board meetings. Continue to implement "Let's Learn Together" approach at SDAC meetings. Website pages on SDAC and SDP. Trainings to staff and providers and board of directors. ELARC estimates 75% of clients are familiar with SDP. Gap, people don't want to deal with it until it is available. Resources to reach: English, Chinese, Fiesta Educativa. No Data being collected. Will do more outreach.

Robert Taylor - Redwood Coast Regional Center. 7,032 clients, 56 SDP slots (27 remaining from pilot, so 29 available slots. Not sure how many interested. Meeting monthly to develop outreach plan. 25% are familiar with SDP. Gaps, plans to distribute brochure more widely. Plan to reach others who don't speak English. Inviting bilingual self-determination participants to help with presentations, translations at meetings. No data on effectiveness.

Sherry Johnson – South Los Angeles Regional Center. 13,000 clients, 108 SDP slots. 146 submitted interest cards, they regularly receive monthly minutes and agendas for SDAC. Trying to develop better relationships with family resource centers and other committees and agencies. Had a Person-Centered Planning training by Judy Mark. At Disparity Hearing, there was a brief summary of SDP. Under 25% are familiar. Created a summary flyer, translated into Spanish, created short YouTube video for consumers. There is an SDP link on regional center website. No data effectiveness being collected. There are gaps. Only getting information to the 146 people who expressed interest.

Richard Dier - North Los Angeles Regional Center. 24,000 clients, 174 SDP slots. Tracking people, 100 have submitted names, tracking data on these people. The regional center has done one presentation to every family known to the regional center. Some other group presentations may happen, organizational boards, other family groups. Most of outreach is done by regional center staff, bilingual, getting

information out through website, agendas, notices of meetings. E-blast goes to all on regional center email list about each SDAC meeting. 100 interested people get emailed in English and Spanish. 25% of families have some idea about SDP. Gap - how to reach those who don't know about the regional center and those not getting services. Ask service coordinators about people that don't get any services, where are they? Materials are translated professionally in Spanish, our only other threshold language. Have demographic information on the 100 already. Had trainings on the general SDP areas, looking into more detail in some areas. Difference between PCP and IPP and how they will interface. Many rumors about vendorization.

Rick Wood - Kern Regional Center. 8,000 clients, 103 SDP slots (36 filled already, 67 available). 170 signed interest list. Very spread out geographically. Regular meetings, agendas and minutes posted on regional center website, agency wide orientation in anticipation of formal training. Information shared at IPPs, line item, to discuss upcoming SDP. Report out to Board the substance of the SDAC meetings. Encourage Chairs to go to Board Meetings. Estimate 30% familiar with SDP. Gaps - staff is looking to DDS to provide the training materials. There is a large Spanish speaking population, bilingual manager, directors, and support staff. Not collecting any data.

Ronda Dever - Far Northern Regional Center. 7400 clients, 62 SDP slots. Not tracking interested people. Keeping community informed in process of SDP Waiver, annual publications, public meetings, emails, county meetings in coming months. Self-Directed Life. In trainings talk about HCBS, subminimum wage, etc. Have mailed 100% of clients information about SDP. Bilingual staff and multicultural committee (community members, headed by PTI Rowell). Not collecting data on effectiveness. People frustrated it is so far away. Want suspended services back that were cut in 2009. Reports SDAC and SSDAC information to regional center board.

Ronald Allan, Central Valley Regional Center. # of clients? # of slots? There are 141 on interested list. They are doing community presentations. They made a self-determination skit and presented it in the community and to the Board of Directors of the Regional Center.

Cheryl Hewitt - San Andreas Regional Center. 16,012 clients, 124 SDP slots. Wants regional center to increase participation in the SDAC meetings. Wants DDS to give direction to the regional center about their involvement with SDAC and SDP. Direction in areas: staff training, review of training data, outreach – inform non-

white and diverse communities about SDP, promotion materials, content, help to develop materials. No list being kept. SDAC meets monthly, developed materials. Did SDP conference – 100 people attended. SCDD did several trainings including bilingual presentations. One training offered in Mandarin. SDAC members met at large provider to do trainings. No data on those familiar with SDP. Service Coordinators often don't know about SDP and can't inform families. Outside regional center, such as IHSS, others don't know about SDP or don't understand. Spanish language materials. No data on effectiveness.

Judy Mark, Westside Regional Center. 8600 clients, 67 SDP slots. Not keeping a list, intentionally. 3 parents who helped write the law are from WRC so they have many resources. They have been meeting since 2014, every month, never skipped a month, still have issues to discuss. All agendas will be posted on SCDD website. Don't want people to think that signing up for list means they are on the lottery list. Activities: 20 community trainings in English, Spanish, Japanese, African-American Support Group, Ethiopian Support Group, Family Resource Center. Small geographic base, but very diverse. Regional center made SDAC an official committee of Board of Directors, so she makes official report at every Board meeting. Asked by Chief Counselor to train service coordinators, trained 200 service coordinators, 30-minute training for just the basics. Encourage service coordinators to share information with clients to attend monthly SDAC meetings. Average 50 people attend. All can speak. Everyone sits at the table. Starting January, there will be a check off box to address SDP at every IPP. All consumers will be familiarized with the concept and the fact of the monthly SDAC meetings. Developing plain language training in cooperation with SCDD office. Going through Powerpoint slide by slide to assess its effectiveness. Asking in English and Spanish. Harbor and Westside and South Central have all attended focus groups. Under 50% know about SDP. Goal is 100%. Meeting is right after CAC so many of the CAC members attend. Need to reach families with younger children who may not receive any services. Many materials in Spanish.

Howard McBroom - Frank Lanterman Regional Center. 9,000 clients, 74 SDP slots. Not sure how many are interested. They are spreading the word. Service coordinators are aware. Information is on the regional center website. Several presentations to the regional center. SDAC Chair is also Chair of CAC, found most people didn't know SDP but now they know. Continue efforts to promote it. Gap - working on diversity, working on translation to other languages such as Armenian, Spanish, and Japanese. Information is getting out slowly. Meet bimonthly. Executive director comes to every meeting. Meetings open to all, but not many public attend. 2-4 people drop in.

Joyce Clark - San Diego Regional Center. 25,400 clients, 200 SDP slots. Large and diverse area. Good relationships with SCDD and family support groups. 3rd annual Leading the Charge Conference. HCBS, WIOA, and SDP have been discussed. DD Provider Network, had Catherine Blakemore and Olivia Raynor give presentations. 11/30 is the next Conference. Invited center based and larger programs to begin discussion. No data on who knows. Some members of public attend, asking detailed questions. Communication hasn't been frequent from DDS. Gap - develop materials and strategies in multiple languages. Outreach e-newsletter. At every conference, they are sharing information. Discussed adding a check box on the IPP form, but it hasn't happened yet. Outreach and presentations on PCP. Hosted CalPromise Annual Institute. Mary Ellen Stives, SCDD did a presentation on SDP. Translations at some of the presentations. OCRA working to translate some materials to Spanish.

Miriam Kang - Harbor Regional Center. 12,000 clients, 98 SDP slots. Not tracking interested list. Made flyer, translated into 7 languages, all staff trained, bring it up at every IPP. By next year 100% of families will know about SDP. All support groups at HRC will be trained. Agenda posted on website and get eblast emails. Gap - lack of information to share. Hiring service coordinators who speak Japanese, Korean Arabic, and other languages. SDAC member on board gives update every month.

Maia Pawoskar - Inland Regional Center. 32,300 clients, 244 SDP slots. Interested 269. Autism Society, Special Olympics, church groups, other local groups. Regional center staff attend SDAC meetings. Meets monthly. Posted on website. SCDD sends out eblast. Not large attendance. Encourage participation from all people. Flyer provided to every client during IPP meeting. Regional center will send out flyer in English and Spanish. SCDD very active, offered several trainings. Encouraging regional center to reach out to Fiesta Educativa. SCDD to translate materials into 4 languages. Requested to attend board meetings but their request was turned down. Send minutes from SDAC meetings to board. 800# set up for calling into meetings.

Sonia Jones - North Bay Regional Center. 7,291 clients, 85 SDP slots. 124 interested. 6 months ago, 46 on list. Weekly email blast. Met with every service coordinator, Resource Development and QA units. SCDD Manager Lisa Hooks and Joe Hernandez from Premier doing presentations to the community as well. Reaching out to Spanish community. If interested in SDP, this is written into the IPP. SDAC meets at various times and days to increase attendance. 3 self-advocates on the committee. Two co-chairs who are also self-advocates now.

Video conferencing of all meetings. Updates of SDAC to quarterly report of board. Gaps: Spanish, Asian, African-American communities, Transition aged Youth. No effectiveness data. 10 service coordinators from NBRC showed up today!

Vi Ibarra - East Bay Regional Center. 19,000 clients, 155 SDP slots. No interest list being kept. Monthly meetings with call in number. Agenda and minutes posted on website. Presentations at conferences. Family resource center events. No data on outreach or effectiveness. Working with diversity and equity committee at regional center to address any gaps. Using older information sheets translated into Asian languages and Spanish. Regional center will provide translation.

Bruce Wasson - San Gabriel Pomona Regional Center. 12,600 clients, 103 SDP slots. 249 expressed interested. Bimonthly SDAC meetings. Presentations in Cantonese, Spanish, Mandarin, 12-15 meetings. About 2% familiar level. Efforts to get interested list be more diverse. List is 50% Hispanic, 30% white, and only 3 African-Americans on list. People on SDAC speak other languages so that is helpful.

Lisa Cooley - Alta California Regional Center. 21,000 clients, 174 SDP slots. 2,053 on interested list. Presentations to schools, SELPAs, CAC, People's First, Pacific Islander Aloha Festival, Lanterman50 Celebration, Regional PAC, Supported Life Conference, presentations by SCDD, and others by committee members to various groups. Members actively distributing flyer which is in many threshold languages. SCDD and regional center are collaborating to do more targeted outreach in coming months. Members of SDAC will be invited to participate. Service coordinators have all been informed and share flyer with all clients at IPPs. If interested in learning more about SDP, a box is checked on the SANDIS database. There are plans to address gaps in outreach. Service coordinators speak about 20 languages and some will help with outreach efforts and translation as needed.

Claire Lazaro - Valley Mountain Regional Center. 13,000 clients, 90-100 SDP slots. 4 people on our list. Information on regional center website, flyers distributed. Presentation to 500 self-advocates. Vendors, consumer services, meetings, family resource centers. No data. Gaps - asking community stakeholders to help distribute information. Have "Steps to SDP" emailed and mailed to clients.

Peter Mendoza - Golden Gate Regional Center. 9,000 clients, 72 SDP slots. Good relationship with SCDD, SDAC, and regional center staff. Several presentations. GGRC Self-Advocacy Celebration. Could use more committee members. Would like a best practice list. Want a statewide outreach plan. Will move meeting to 3

different offices so all can participate. Need money for cost of attending meetings.
Translating flyer into variety of languages.

9. **INFORMATION MATERIAL**

Minutes from the DDS Workgroup were provided as informational material in the packet.

10. **PUBLIC COMMENT**

No public comment.

11. **ADJOURN**

The meeting was adjourned at 4:05 p.m.

DRAFT

INFORMATIONAL
MATERIAL FROM
WESTSIDE
REGIONAL
CENTER

California's Self-Determination Program for Individuals with Developmental Disabilities



Painting by Sydney Edmond
Poet and artist with autism
San Diego

Your Life Your Way

A plain-language presentation created by the
Self-Determination Local Advisory Committee of



What is Self-determination?



- *IT'S ABOUT CHOICE!
- *You can CHOOSE to be in the Self-Determination Program.
- *You can get LOTS of help!

NOTES:

Bullet 1: You can choose who supports you everyday to reach your dreams.

Bullet 2: No one can force a person into or out of the Self-Determination Program.

Bullet 3: You don't have to do this by yourself! You will have help from people to find your services and workers. You will have help with your budget.

What is Self-determination?



You can CHOOSE:

- * your services and supports.
- * who helps you.
- * where you go in the community.
- * who you spend time with.

NOTES:

Bullet 1: Your services and supports can be from anyone in the community. No one tells you who to choose.

Bullet 2: You can choose the workers who assist you everyday. You can interview them, hire them, supervise them, and fire them, if needed.

Bullet 3: No one can tell you where you go each day. You are the boss of you!

Bullet 4: No one can tell you who your roommate is or who you have to hang out with. You can choose your own friends and your own roommates.

Families and consumers fought for the new law



Governor Brown signs Self-Determination Law
October 9, 2013

NOTES:

- This photo is of Governor Jerry Brown signing the self-determination bill into law in 2013.
- This law was written and supported by individuals with developmental disabilities and their families.
- The people in this picture were key to getting this law passed and includes parents, individuals with developmental disabilities and Senator Bill Emmerson, the author of the bill.

BEFORE YOU MOVE ON TO THE NEXT SLIDE IN WHICH A FILM WILL START IMMEDIATELY, SAY:

For the next slide, you will be seeing a short film on the Self-Determination Program created by the Department of Developmental Services, or DDS. This film features many individuals and families who are participants in the Self-Determination Pilot Project. More than 200 people have participated in the pilot project since 1997 from five regional centers.

They are: San Diego, East LA, Tri-Counties, Kern, and Redwood Coast Regional Centers.

200 consumers in California have been
testing Self-Determination since 1998
and they love it!



See notes from previous slide.



NOTES:

We are now going to talk about how the Self-Determination Program will work for you.

First, we will talk about Person-Centered Planning, which is at the core of self-determination.

Second, we will learn about the Independent Facilitator and how they can help you. Then we will talk about how you can make your person-centered plan work – what kinds of unique services and supports you can buy.

Then we will hear about how you create your Individual Budget and how you can change it, if needed.

We will then talk about presenting your plan and budget at your IPP meeting with your service coordinator at your regional center.

Finally, we will let you know about the Financial Management Services – these are the people who will pay the bills and help you hire workers and keep your budget.

How Does Self-Determination Work?



PERSON-CENTERED PLANNING

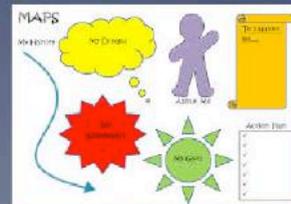
It's about your hopes and dreams!

Hold a planning meeting



Get help from people you trust

Create a written plan



NOTES:

It's about your hopes and dreams:

- Person-centered planning allows you to think big about yourself and your future. It is about the person's hopes and dreams, not what others think you should be doing.
- Person-centered planning is based on your strengths and what you do well and things you enjoy doing.
- For small children, the plan is more of a Family-Centered Plan because the family is so critical at this point. As the child gets older, she or he should start to make more of their own decisions about what they want to be doing.

Hold a Planning Meeting: You will have a planning meeting that should take place where you are comfortable and at a time that works for you. Someone can help you plan the meeting, if you want.

Get help from people you trust:

You get to invite anyone you want to be part of your planning meeting. Friends, family, teachers, therapists, employers, neighbors. Anyone who you think might be able to help you reach your goals. And you don't have to invite people that you don't want to be there!

Create a written plan:

You will have an important meeting where you will discuss your dreams and goals and then set out a plan to meet the goals. After that meeting, the facilitator will write up a plan that lays out all of the important information decided at the planning meeting. You make the decisions that are in your written plan.

How Does Self-Determination Work?



THE INDEPENDENT FACILITATOR

How can the Independent Facilitator help you?

- * Leads your person-centered planning process.
- * Finds people and providers to support you.
- * Creates your individual budget.
- * Helps you at your IPP.
- * Helps you manage your workers.



NOTES:

Bullet 1: The Independent Facilitator can lead your person-centered planning process. They will do a pre-plan with you to decide who to invite to your planning meeting. They can help you invite people to a meeting. They will lead the planning meeting and take notes. They can then write up your plan so that you can show it to people.

Bullet 2: The Independent Facilitator can help you find workers and staff to support you. They can help you find lots of great things to do in the community.

Bullet 3: The Independent Facilitator can help you develop your Individual Budget by figuring out how much the things will cost that you want to do.

Bullet 4: The Independent Facilitator can come to your IPP and help explain your plan and budget. If you need help with changing your budget, they can advocate for you.

Bullet 5: The Independent Facilitator can help you manage the workers who help you everyday. They can teach you how to make sure your workers are meeting your needs.

THE INDEPENDENT FACILITATOR

- * You can choose to hire an Independent Facilitator to help you with self-determination.
- * Paid for by your individual budget.
- * Cannot be providing you other services.
- * You can choose to use your Service Coordinator as your Independent Facilitator.



NOTES:

Bullet 1: You don't have to have an Independent Facilitator. This is your choice.

Bullet 2: The costs of the Independent Facilitator will be paid out of your Individual Budget. But your budget will not be increased to include the costs.

Bullet 3: The facilitator must be independent. This means that they can't be providing you with other services paid for through the regional center, such as your ILS worker or your respite worker.

Bullet 4: If you want, you can have your service coordinator be your Independent Facilitator.

How Does Self-Determination Work?



How do you make your plan work?

- * Find people and groups in the community.
- * They don't need to work with your regional center.
- * Some things may not cost money.
- * Hire people to help you. If you don't like them, hire someone else!
- * Join a class or program. If you don't like it, join something else!



NOTES:

Bullet 1: You can look in your community and find great things to do there. You can also leave your neighborhood and do other great things.

Bullet 2: You can hire almost any worker and provider. They don't have to have a contract (or be a vendor) with your regional center.

Bullet 3: Not everything in your person-centered plan needs to cost money. Maybe you want to spend more time with your grandpa. Or maybe you love to watch the sunset.

Bullet 4: You can hire workers, but if you don't like them, you can fire them. And then you can hire someone else that works with you better.

Bullet 5: You can take a class, but if you don't like it, you can stop going and try something different. It is your choice!

Different things children can do with Self-Determination

SUMMER CAMP



HORSEBACK RIDING



GYMNASTICS



ART CLASS



HELPER IN THE COMMUNITY



NOTES:

For children, you can do some awesome things with self-determination.

All of the restrictions on social and recreational programs are gone with the self-determination program.

Here are some examples of what you can do:

Get support to go to a summer camp.

Take a gymnastics class.

Learn how to ride a horse.

Take an art class.

Find someone to help you in the community



NOTES:

If you are an adult, there are many unique things you can do with self-determination, like:

Hire someone to help you learn how to use a computer.

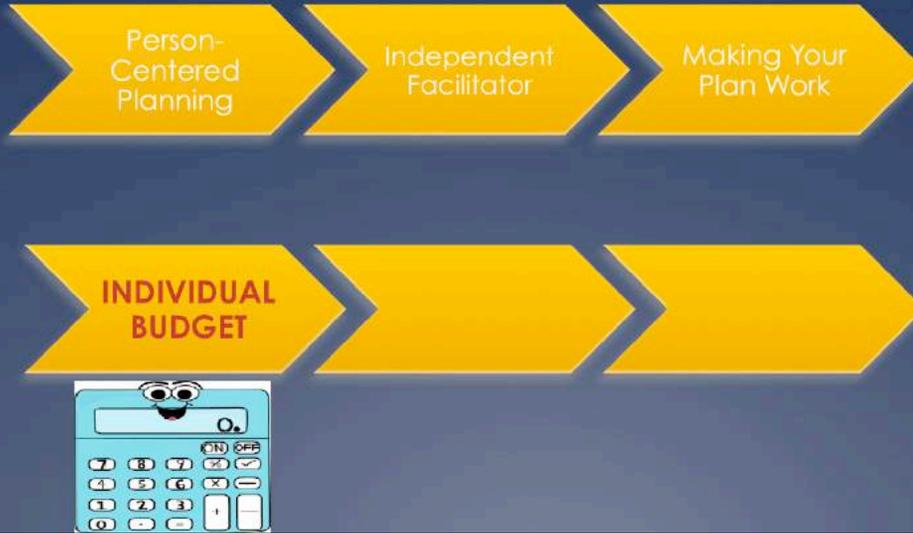
Hire someone to help you start your own business – maybe to write a business plan or help you do marketing.

Ask someone to help you makes friends or to even start a relationship!

You can hire a nutritionist to teach you how to eat healthy or take an exercise class.

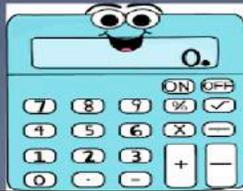
You can hire support staff so that you can live on your own.

How Does Self-Determination Work?



INDIVIDUAL BUDGET

- * The amount of money the regional center gives you for your plan.
- * The amount is the same as what the regional center actually spent on you over the last 12 months.



NOTES:

Bullet 2: Your Individual budget is the amount that the regional center paid for your services in the last 12 months. If the regional center authorized or approved services and you didn't use them, then they aren't in your budget.

HOW MUCH IS IN YOUR INDIVIDUAL BUDGET?

For example...

Last 12 months ... \$50,000

The regional center spent \$50,000 on you for respite, day program, and transportation

Self-Determination ... \$50,000

You have \$50,000 to spend on your choice of workers and services and your Independent Facilitator and Financial Manager



NOTES:

Last 12 months... \$50,000

That \$50,000 is actually what you used and spent on these services through vendored agencies.

Self-Determination... \$50,000

You have that amount of money spend on all kinds of things but it also must include your Independent Facilitator and Financial Manager. Your budget does not increase with those expenses.

You may be concerned about how your budget will be able to afford to do everything if you also have to pay for your facilitator and financial manager. You will be OK because:

1. You can work out your costs with your workers. These costs may be lower than what the regional center might be paying.
2. Your workers may not work for an agency. Agencies usually have lots of administrative costs to cover managing their staff, paying their rent and other bills. This means that you will save because you are hiring workers directly.

How can I change my budget?

CHANGE IN CIRCUMSTANCES

- * Show that your life has changed so you need more money to meet your goals. Changes like:
 - * Leaving school
 - * Losing a job
 - * Getting very sick
 - * Moving into your own place



UNMET NEEDS

- * Show that your needs were not being met in the regular regional center system.

NOTES:

There are two ways that you can change your Individual Budget:

Change in circumstances:

- If your life has changed in some way, like leaving school or getting sick. It's the same in the traditional regional center system, you would need to ask for more services because of this change. So you should be able to ask for more money in your individual budget.
- If your life has gotten better, your budget may actually decrease.

Unmet Needs:

- You need to show that the regional center was unable to meet your needs. For example, the providers that you were offered in the regular system were too far from your home. Or they didn't have the right skills to help you meet your goals. Or if you had services that were stopped by the change in the law in 2009.

How Does Self-Determination Work?



What happens at your IPP meeting with Self-Determination?

- * Bring your Person-Centered Plan and your Individual Budget.
- * If you need more money in your budget, you need to show why. Your Independent Facilitator can help.
- * Regional center will support you to be as healthy and safe as possible, but YOU get to choose who helps you and how you live your life!



NOTES:

Your IPPs will be different if you are in the Self-Determination Program.

Bullet 2: You will present your budget. If you need more money, you have to make a case for why. The decision about your budget is made at your IPP by your team but you can choose to have your Independent Facilitator help you with this.

Bullet 3: Unlike in the traditional program where your service coordinator gives you names of providers, you will be bringing your person-centered plan and going over what activities you have chosen. The regional center needs to make sure you are safe, but they can't tell you what activities to do and whom to hire. You get those choices.

How Does Self-Determination Work?



Financial Management Service (FMS)

- * Gets money from the regional center to pay for your workers and services.
- * Tells you how much you have spent every month.
- * Makes sure you don't spend more than you have in your budget.
- * Checks backgrounds of your workers.
- * Pays taxes for your workers.



NOTES:

Bullet 1: The FMS holds all the money for you.

Bullet 2: They send you information every month about how much money you have spent from your budget.

Bullet 3: They will let you know if you have spent too much and will help you make sure you don't overspend.

Bullet 4 & 5: You don't have to check the backgrounds of your workers or pay their taxes. The FMS will do that for you.

Important Things to Know About Self-Determination

Like always, you still have to try to get other agencies to pay first.

Generic Resources:

- * School district
- * Insurance or Medi-Cal
- * Department of Rehabilitation



NOTES:

Click 1: For all consumers, regional centers are supposed to be the last ones to pay for your services. That means that other government agencies need to pay for your services and supports first. This happens now will all of you.

Click 2: This will be no different in the Self-Determination Program. This is called using GENERIC RESOURCES.

For example,

- School districts will still need to pay for educational services.
- Insurance or Medi-Cal will still need to pay for most behavior and other therapies and medical treatments.
- Department of Rehab will need to provide job coaches, unless they can't help you.

Important Things to Know About Self- Determination

New Rules: **Services Must Be in the Community**

The new rules say people with disabilities should be part of their communities and not be separated.

Community means spending most of the time you are getting services around non-disabled people who are not paid to be with you.

*By March 2019 for everyone.
Right away for self-determination.*



NOTES:

In March 2019, all regional center consumers will need to get their services in places that are part of the community. You can't be in day programs just for people with disabilities all day. You can't live in places where everyone has developmental disabilities and you have no choices.

For participants in the Self-Determination Program, you must follow these rules right when the program starts.

Important Things to Know About Self- Determination

New Rules: Services Must Be in the Community

<u>Now</u>	<u>In the Community</u>
<i>Home with many others</i>	<i>Apartment with choice of roommate</i>
<i>Set meals and meal times</i>	<i>Eat what you want, when you want</i>
<i>Sheltered workshop</i>	<i>Job with same pay</i>
<i>Group day program</i>	<i>You choose where you go</i>
<i>Separate camp</i>	<i>Typical camp with help</i>

NOW: Instead of a home with many people with disabilities,

IN THE COMMUNITY: You could live in an apartment with a roommate you choose. – Like people without disabilities.

NOW: Instead of having to eat at specific times and food chosen by others,

IN THE COMMUNITY: You get to eat what you want at the time that you want - Like people without disabilities.

NOW: Instead of going to a sheltered workshop and making very little money,

IN THE COMMUNITY: You could work at a regular job and make the same as other

Big Difference

Regular Regional Center Services



Self-Determination



NOTES:

I hope this presentation showed you that there are big differences between regular regional center services and the Self-Determination program.

In the regular system, you are walking the same path as many other people and using the same services.

In Self-Determination, you decide how you want to live your life everyday.

When will Self-Determination Begin?

Hopefully soon, but first...

1. Law says we need to get money from the federal government.
2. A LOT of planning and training!

First 3 years:
Only 2,500 consumers

After 3 years:
Anyone who wants it!



NOTES:

1. The program hasn't started because we have to get money from the federal government. We are waiting for our state DDS to get the money.
2. There is so much we still need to plan for.

In the first 3 years, there will be a phase in period. There will be 2,500 people chosen randomly by DDS throughout the state. Each regional center will get a number of participants based on how many consumers are part of that regional center.

After 3 years, the program will be open to all eligible consumers of regional centers.

How will the first 2,500 participants be picked?

- * You must attend a **Pre-Enrollment Information Meeting**.
- * Regional center sends names to DDS (Department of Developmental Services)
- * People picked by lottery
- * Must be diverse



NOTES:

Bullet 1: To be part of the phase-in program, you must attend a Pre-Enrollment Information meeting. These meetings will be held:

- At regional centers
- In community organizations
- At providers
- Maybe even in schools.

You do NOT need to go to the meeting at your regional center.

I want to clarify that this meeting today is just an outreach meeting. This is not a Pre-enrollment information meeting.

Bullet 2: At the official pre-enrollment meetings, you will fill out a form with your name, address, and regional center if you are interested in the Self-Determination Program.

Bullet 3 & 4: DDS will pick people by lottery BUT the first participants must be diverse by:

- Disability
- Age
- Gender
- Race/ethnicity

Want to be in Self-Determination?

- * Tell your service coordinator you are interested and put it in your IPP.
- * Go to your regional center's Self-Determination Local Advisory Committee meetings.
- * Ask for all of the services you need now, and if you don't get what you need, you have the right to appeal at a fair hearing.

*** THINK OUTSIDE OF THE BOX!!!**



Bullet 2: Call your regional center or go to your regional center's website to find out when your next advisory committee meeting is.

Bullet 3: If you are not using all of your services, you should be.

Bullet 4: Think creatively now about all the opportunities you have in the world to meet your dreams and goals.

Questions?