Goal 1: Self-Advocacy

Californians with I/DD and their families reflecting the diversity of the state will have increased information and supports to advocate for civil and service rights to achieve self-determination, integration and inclusion in all areas of community life.

Area(s) of Emphasis	Areas Planned	Areas Addressed
Child Care		
Education & Early Intervention		
Employment		
Formal and Informal Community Supports	X	
Health		
Housing		
Quality Assurance	X	
Recreation		
Transportation		
Strategies	Strategies Planned	Strategies Used
Barrier Elimination	X	
Coalition Development and Citizen Participation	X	
Coordination with Related Councils, Committees and Programs	X	
Demonstration of New Approaches to Services and Supports	X	
Demonstration of Projects or Activities		
Informing Policymakers		
Interagency Collaboration and Coordination	X	
Other Activities		
Outreach	X	
Supporting and Educating Communities	X	
Systems Design and Redesign	X	
Technical Assistance	X	
Training	X	
This Goal Addresses:	Planned	Addressed
Individual/Family Advocacy	X	
System Change	X	
Self-Advocacy Requirement	X	
Targeted Disparity		
DD Network Collaboration		
Capacity-Building	X	

Intermediaries/Collaborators	Planned	Actual
DDS (State DD Agency)	X	
Disability Rights California (State Protection and Advocacy System)	X	
UCEDD (University Centers for Excellence in DD)	X	
Other: Office of Client Rights Advocacy (OCRA)	X	
Other: Statewide Self-Determination Advisory Committee (SDAC)	X	
Other: People First of California	X	

Other Planned Collaborators:

Statewide Self-Advocacy Network (SSAN)

SCDD Self-Advocacy Advisory Committee (SAAC)

Regional Center(s)

Independent Living Centers

Local Behavioral/Mental Health providers/agencies

Other Self-Advocacy groups

Actual Collaborators:

		2017-21 State Plan: Objective 1.1
Goal	Self- Advocacy	Californians with I/DD and their families reflecting the diversity of the state will have increased information and supports to advocate for civil and service rights to achieve self-determination, integration and inclusion in all areas of community life.
1	1.1	The Council will increase knowledge about self-determination and person- centered planning by monitoring, supporting and actively engaging in the implementation of the Self-Determination Program.
Self-Determination (SD) B. Develop and implement training for family/self-advocates & provider including the underserved Spanish-speaking population C. Support & collaborate with local & statewide Self-Determination		 B. Develop and implement training for family/self-advocates & providers, including the underserved Spanish-speaking population C. Support & collaborate with local & statewide Self-Determination Advisory Committees and other collaborators, addressing PCP & SD
	Planned laborators	 A. DDS & OCRA; SSAN, SAAC, ILCs, People First &/or other parent/self-advocacy organizations, behavioral health agencies, & other stakeholders B. DRC & UCEDDs C. DDS, DCs (CRA/VAS), &/or RCs
	xpected Outputs	 A. Develop 1 handout each on PCP & SDP in plain language; distribute to 10,000 people, statewide; translate into/provide in Spanish B. 25 PCP & 25 SDP trainings will be provided, reaching at least 1,500 people; 4 trainings will be in Spanish, reaching 50 people C. Support the statewide SDAC, which will meet 2x/year to monitor implementation of the SDP; support 10 local SDACs
	xpected utcomes	 A. People will have increased information about PCP/SDP B. Family/self-advocates will have increased knowledge of SDP and ability to access/benefit from the SDP, when available, including those underserved who are Spanish-speaking C. The SDP and SDAC work of local regional centers will be monitored; family/self-advocates will be empowered in self-governance/advisory capacity
	Evaluation easurement	 A. The number of eBlasts, flyers, brochures, etc. distributed will be logged to determine the number of people being reached; satisfaction & other surveys will be used (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.2, 2.2.3, 2.2.4, 2.2.5, 2.2.6, 2.2.7, 2.2.8, 2.2.10, & 2.2.11; SC 1.3.2, 1.3.3, 1.3.6, 1.4.1, 2.1.3, 2.3.1, 2.3.2, & 2.3.3) B. Attendance sheets, pre/post-tests, anecdotal reports &/or satisfaction surveys will be used (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.2, 2.2.3, 2.2.4, 2.2.5, 2.2.6, 2.2.7, 2.2.8, 2.2.10, & 2.2.11; SC 1.3.2, 1.3.3, 1.3.6, 1.4.1, 2.1.3,

2.3.1, 2.3.2, & 2.3.3)

C. Attendance sheets, travel logs &/or satisfaction surveys will be used (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.2, 2.2.3, 2.2.4, 2.2.5, 2.2.6, 2.2.7, 2.2.8, 2.2.10, & 2.2.11; SC 1.3.2, 1.3.3, 1.3.6, 1.4.1, 2.1.3, 2.3.1, 2.3.2, & 2.3.3)



		2017-21 State Plan: Objective 1.1
Goal	Self- Advocacy	Californians with I/DD and their families reflecting the diversity of the state will have increased information and supports to advocate for civil and service rights to achieve self-determination, integration and inclusion in all areas of community life.
1	1.1	The Council will increase knowledge about self-determination and person- centered planning by monitoring, supporting and actively engaging in the implementation of the Self-Determination Program.
Major Activities Self-Determination (SD) B. Develop and implement training (including Spanish version) C. Collaborate with local & statewide Self-Determination Advisory		B. Develop and implement training (including Spanish version)
	Planned laborators	 A. DDS & OCRA; SSAN, SAAC, ILCs, People First &/or other parent/self-advocacy organizations, behavioral health agencies, & other stakeholders B. DRC & UCEDDs C. DDS, DCs (CRA/VAS), &/or RCs
A. Develop 1 handout on PCP & SDP in plain language; distribute to people; translate/provide in Spanish B. 25 PCP & 25 SDP trainings; reach 1,500 people; 4 trainings will Spanish, reaching 50 people C. Support the statewide SDAC, which will meet 2x/year; support 1		 A. Develop 1 handout on PCP & SDP in plain language; distribute to 10,000 people; translate/provide in Spanish B. 25 PCP & 25 SDP trainings; reach 1,500 people; 4 trainings will be in
	expected outcomes	 A. People will have increased information about PCP/SDP B. Family/self-advocates will have increased knowledge of SDP and ability to access/benefit from the SDP, when available, including those underserved who are Spanish-speaking C. The SDP and SDAC work of local regional centers will be monitored; family/self-advocates will be empowered in self-governance/advisory capacity
	Evaluation easurement	 A. The number of eBlasts, flyers, brochures, etc. distributed will be logged to determine the number of people being reached; satisfaction & other surveys will be used (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.2, 2.2.3, 2.2.4, 2.2.5, 2.2.6, 2.2.7, 2.2.8, 2.2.10, & 2.2.11; SC 1.3.2, 1.3.3, 1.3.6, 1.4.1, 2.1.3, 2.3.1, 2.3.2, & 2.3.3) B. Attendance sheets, pre/post-tests, anecdotal reports &/or satisfaction surveys will be used (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.2, 2.2.3, 2.2.4, 2.2.5, 2.2.6, 2.2.7, 2.2.8, 2.2.10, & 2.2.11; SC 1.3.2, 1.3.3, 1.3.6, 1.4.1, 2.1.3, 2.3.1, 2.3.2, & 2.3.3)

C. Attendance sheets, travel logs &/or satisfaction surveys will be used (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.2, 2.2.3, 2.2.4, 2.2.5, 2.2.6, 2.2.7, 2.2.8, 2.2.10, & 2.2.11; SC 1.3.2, 1.3.3, 1.3.6, 1.4.1, 2.1.3, 2.3.1, 2.3.2, & 2.3.3)



		2017-21 State Plan: Objective 1.2
Goal 1	Self- Advocacy	Californians with I/DD and their families reflecting the diversity of the state will have increased information and supports to advocate for civil and service rights to achieve self-determination, integration and inclusion in all areas of community life.
	1.2	The Council will promote self-advocates in leadership roles in statewide networks a) through the strengthening of a statewide self-advocacy organization and by supporting self-advocates; b) within cross-disability leadership coalitions; and c) in training other self-advocates to become leaders.
Major Activities A. Professor for yea B. Me Sel C. Co SA D. Co abo		 A. Provide tangible support (e.g. travel/lodging/meeting arrangements, etc.) for 8 SSAN & 7 SAAC members in a total of 9 meetings throughout the year B. Meet/identify (with partners &/or a steering committee) training needs re: Self-Advocacy (SA), boardsmanship, etc. C. Consult/work with SA leaders to support development of T4T &/or other SA/community training presentations; assist in training efforts D. Collaborate with cross-disability agencies & self-advocates to train others about statewide/local SA opportunities; outreach to agencies/community & schedule/hold/facilitate 8 training(s)
Planned Collaborators A. SSAN & SAAC B. SSAN, SAAC, DRC, OCRA, UCEDD(s), RC(s), ILC(s), People C. SSAN, SAAC, ILC(s), other SA groups, etc. D. SSAN, SAAC, other SA groups, ILC(s), UCEDD(s), behavior		A. SSAN & SAAC B. SSAN, SAAC, DRC, OCRA, UCEDD(s), RC(s), ILC(s), People First, etc.
A. Travel/lodging/meeting scheduled meetings; for meeting B. Regularly scheduled/a training needs; list of C. 8 planning/curriculum curricula with pre/post & scheduling of training D. 4 quarterly meetings with presserved.		A. Travel/lodging/meeting arrangements for SSAN/SAAC members for 9 scheduled meetings; facilitation, as needed/requested by members for each
	xpected utcomes	 A. Continued/increased participation by SA leaders in scheduled meetings B. List of current community training needs re: SA; 10 identified SA trainers in local/statewide leadership roles C. Empowerment and training of 150 family/self-advocates

	D. Collaboration with cross-disability network(s) to support/promote self-
	advocates' leadership opportunities/roles & training; 8 trainings; 120
	people reached
	A. Satisfaction surveys; attendance/travel logs; & personnel time, as assigned
	to SAAC/SSAN activities/meetings (IA 1.1, 2.1, 2.2.1, 2.2.2, 2.2.3, 2.2.4,
	2.2.5, 2.2.6, 2.2.10, & 2.2.11; SC 1.4, & 1.4.1)
	B. List(s) of statewide training needs; list(s) of training material/curricula;
	pre/post-tests &/or satisfaction surveys (IA 1.1, 2.1, 2.2.1, 2.2.2, 2.2.3,
	2.2.4, 2.2.5, 2.2.6, 2.2.7, 2.2.8, 2.2.10, & 2.2.11; SC 1.1, 1.3.2, 1.3.3, 1.3.5,
Data Evaluation	1.3.6, 1.4, 1.4.1, 2.1, & 2.2.3)
& Measurement	C. Agendas/rosters of scheduled/held meetings; attendance logs; numbers of
	trained & acting trainers; & anecdotal/qualitative review of curricula (IA
	1.1, 2.1, 2.2.1, 2.2.3, 2.2.4, 2.2.5, 2.2.6, 2.2.7, 2.2.8, 2.2.10, & 2.2.11; SC
	1.1, 1.3, 1.3.3, 1.3.6, 1.4, 1.4.1, 2.1, & 2.3.3)
	D. Pre/post-tests &/or satisfaction surveys; anecdotal reports; attendance logs
	(IA 1.1, 1.2, 2.1, 2.2.1, 2.2.2, 2.2.3, 2.2.4, 2.2.5, 2.2.6, 2.2.7, 2.2.8, 2.2.10,
	& 2.2.11; SC 1.3, 1.3.3, 1.3.6, 1.4, & 1.4.1)

Goal 2: Employment

Californians with I/DD and their families reflecting the diversity of the state will have increased information to obtain competitive, integrated employment.

Area(s) of Emphasis	Planned	Areas Addressed
Child Care		
Education & Early Intervention		
Employment	X	
Formal and Informal Community Supports	X	
Health		
Housing		
Quality Assurance		
Recreation		
Transportation	X	
Strategies	Planned	Strategies Used
Barrier Elimination	X	
Coalition Development and Citizen Participation	X	
Coordination with Related Councils, Committees and Programs	X	
Demonstration of New Approaches to Services and Supports	X	
Demonstration of Projects or Activities		
Informing Policymakers	X	
Interagency Collaboration and Coordination	X	
Other Activities		
Outreach	X	
Supporting and Educating Communities	X	
Systems Design and Redesign		
Technical Assistance	X	
Training	X	
This Goal Addresses:	Planned	Areas Addressed
Individual/Family Advocacy		
System Change		
Self-Advocacy Requirement		
Targeted Disparity		
DD Network Collaboration		
Capacity-Building	X	

Intermediaries/Collaborators	Planned	Actual
DDS (State DD Agency)	\mathbf{X}	
Disability Rights California (State Protection and Advocacy System)		
UCEDD (University Centers for Excellence in DD)	X	
Other: CA Dept. of Rehabilitation & Employment Development Dept.	X	
Other: Private Employers	X	
Other: Public Advocacy groups &/or private non-profits	X	



	20	017-21 State Plan: Objective 2.1
Employment Goal		Californians with I/DD and their families reflecting the diversity of the state will have increased information to obtain competitive, integrated employment (CIE).
2	2.1	The Council will increase and promote culturally competent strategies and resources that facilitate competitive, integrated employment (CIE) of people with I/DD.
planning & monitoring of statewide needs/trends and employment related Council activities & outcomes B. Identify regional stakeholders and convene 4 quarterly meetings C. Develop 10 sets of local/regional employment barriers (e.g. fear of of entitlements, lack of transportation, minimum wage increases, e D. Develop/implement 10 culturally competent training(s) &/or other community events for self-advocates, family members & providers E. (Co-) Host 10 regional employer events F. Engage with/provide input to at least 10 state/local Workforce Development Boards (L/WDB) G. Promote & inform community about pathways to CIE (e.g. coalities eBlasts, flyers, newsletters, etc.) H. Explore feasibility of using regional offices as CIE sites (e.g.		 B. Identify regional stakeholders and convene 4 quarterly meetings C. Develop 10 sets of local/regional employment barriers (e.g. fear of loss of entitlements, lack of transportation, minimum wage increases, etc.) D. Develop/implement 10 culturally competent training(s) &/or other community events for self-advocates, family members & providers E. (Co-) Host 10 regional employer events F. Engage with/provide input to at least 10 state/local Workforce Development Boards (L/WDB) G. Promote & inform community about pathways to CIE (e.g. coalitions, eBlasts, flyers, newsletters, etc.) H. Explore feasibility of using regional offices as CIE sites (e.g. internships, workforce entry, contracts, employability assessment, etc.); if feasible, implement in 3 locations I. Maintain/expand the Data Dashboard, including website-based information & resources for family/self-advocates and other
	Planned bllaborators	 A. SCDD Employment First Committee (EFC); state/federal collaborative partner agency representatives; family/self-advocates B. Family/self-advocates, local/regional employers, DOR, EDD, local/regional employment agencies, UCEDD(s), RCs, housing &/or transportation authorities, etc. C. Family/self-advocates, EFC, local/regional employers, Regional Advisory Committees, &/or UCEDD(s) D. UCEDD(s), parent/self-advocates, employers, cultural communities, RCs, local college/school districts, etc. E. DOR, EDD, local/regional employers, RCs, WDBs, local college/school districts, etc. F. WDBs, EFC, parent/self-advocates, etc.

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	G.Community stakeholders (including employers)	
	H.Local/regional Workability &/or school/college employment &	
	transition programs, DOR, EDD, DOE, etc.	
	I. EFC, DOR, EDD, DDS, UCEDD(s), housing/transportation entities,	
	etc.	
	J. Local/regional cultural communities, DDS, DOR, EDD, UCEDD(s),	
	DSS, etc.	
	A.4 quarterly EFC meetings; monitoring and strategic planning for CIE-	
	related activities & outcomes; data collection	
	B. 10 cross-disciplinary, collaborative networks throughout the state will	
	be established; 4 meetings will be held	
	C. 10 Regional lists of 5 CIE-related issues &/or barriers will be	
	developed	
	D. 1 culturally competent training curriculum will be developed for	
	family/self-advocates, employers, service providers, & other	
	stakeholders	
	E. 10 regional CIE regional or statewide events will be held for	
Expected Outputs	employers/providers/stakeholders	
	F. 10 local exchange/lists of information, training, &/or resources to assist	
	in developing opportunities to gain CIE for people with I/DD	
	G. 12 Newsletters, 24 eBlasts, 12 flyers, 4 brochures, etc. will be produced	
	& disseminated	
	H. If feasible, regional offices may host 10 CIE opportunities through local	
	employment agencies, educational entities, contractors, etc.	
	I. 1 up-to-date, Council-sponsored Data Dashboard; 1 webpage dedicated	
	to CIE-related issues, resources, training, etc.	
	J. 1 set of plain language materials to become the foundation for	
	translation &/or transliteration into threshold languages	
	A. A Council-based entity of family/self-advocates & federal/state-level	
	collaborative partners to monitor statewide implementation of the	
	Employment First initiative, identify/report on employment trends	
	throughout the state, and make recommendations	
	B. A cross-disciplinary, collaborative network of local/regional partners	
Expected	throughout the state to identify/address issues &/or barriers associated	
Outcomes	with CIE and people with I/DD	
	C. A comprehensive needs assessment regarding CIE will be available for	
	future policy/planning/project development	
	D. Family/self-advocates and employers/community members/providers	
	will have knowledge & resources to develop, provide &/or obtain CIE;	
	500 people with I/DD will have the skills to develop a résumé	

E. Employers will have culturally competent information and contacts to develop/offer options about & opportunities for CIE to people with I/DD **F.** WDBs and stakeholders will have culturally competent knowledge & strategies to facilitate/offer CIE for people with I/DD **G.** Family/self-advocates, employers & other community stakeholders will use information/resources to develop, deliver &/or obtain CIE **H.** The Council will provide one or more working model(s) of CIE **I.** Family/self-advocates, employers, & other stakeholders will have upto-date knowledge, resources & information about CIE, employment strategies that work &/or are replicable, training/employment opportunities, etc. **J.** Plain language materials will be available for further translation into threshold languages to provide accessible information about CIE **A.** Attendance logs and minutes will provide quantitative & qualitative data (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.2, 2.2.5, 2.2.6, 2.2.7, 2.2.9, 2.2.10, & 2.2.11; SC 1.3, 1.3.3, 1.3.6, 1.4, 1.4.1, 2.2, & 2.2.3) **B.** A list of agencies/partners, contact sheets, attendance logs &/or satisfaction surveys will be used to track collaborative partners and meeting attendance (SC 1.4 & 1.4.1) C. Employment barriers will be identified/tracked/reported on in 13 California regions (IA 2.2.1; SC 1.4 & 1.4.1) **D.** Pre/post-tests, satisfaction surveys, anecdotal data &/or rosters will be used to track training, learning & satisfaction (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.9, 2.2.10, & 2.2.11; SC 1.3, 1.3.6, 1.4, & 1.4.1) **E.** Meeting attendance/minutes; logs of generated/forwarded eBlasts, **Data Evaluation &** eMails, newsletters, etc. will be kept for reporting purposes in Measurement identifying the number of people reached, along with satisfaction surveys (IA 2.2.1 & 2.2.10; SC 1.1, 1.1.1, 1.1.2, 1.3, 1.3.6, 1.4, 1.4.1, 2.1, 2.1.3, 2.2, & 2.2.3) **F.** Anecdotal reports of meetings, phone calls, &/or other contact activities will be made (SC 1.1, 1.1.1, 1.1.2, 1.3, 1.3.1, 1.3.2, 1.3.4, 1.3.5, 1.3.6, 1.4, 1.4.1, 2.1, 2.1.1, 2.1.2, 2.1.3, 2.2, 2.2.1, 2.2.2, 2.2.3, 2.3, 2.3.1, 2.3.2, & 2.3.3) **G.**Logs of generated/forwarded eBlasts, eMails, newsletters, etc. will be kept for reporting purposes in identifying the number of people reached, along with satisfaction surveys (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.10, & 2.2.11; SC 1.3, 1.3.6, 1.4, & 1.4.1) **H.**Logs of the number of conversations with collaborative partners &/or

- the number of jobs/internships created/implemented will be kept/reported, in addition to satisfaction surveys (IA 1.1, 2.2.1, 2.2.9, 2.2.10, & 2.2.11; SC 1.3, 1.3.1, 1.3.2, 1.3.3, 1.3.4, 1.3.4, 1.3.5, 1.4, 1.4.1, 2.1, 2.1.1, 2.1.3, 2.2.1, & 2.3.3)
- I. The number of website 'hits' will be logged/reported, as available through the available technology; the feasibility of adding a blog/comment/satisfaction survey section on the website will also be explored/reported (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.9, 2.2.10, & 2.2.11; SC 1.1, 1.1.1, 1.1.2, 1.3, 1.3.1, 1.3.2, 1.3.3, 1.3.4, 1.3.5, 1.3.6, 1.4, 1.4.1, 2.2, 2.2.1, 2.2.3, 2.3, 2.3, 1, & 2.3.3)
- **J.** Anecdotal information about translated material(s), numbers of people reached &/or satisfaction surveys will be used to report on this activity (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.2, 2.2.3, 2.2.4, 2.2.5, 2.2.10, & 2.2.11; SC 1.3, 1.3.2, 1.3.3, 1.3.5, 1.3.6, 1.4, 1.4.1, 2.1, 2.1.1, 2.1.3, 2.2.1, 2.2.3, 2.3, 2.3, 2.3.1, & 2.3.3)



	2017-21 State Plan: Objective 2.2		
Goal	Employment	Californians with I/DD and their families reflecting the diversity of the state will have increased information to obtain competitive, integrated employment (CIE).	
2	2.2	The Council, in consultation with its federal partners, will increase identification, advocacy and/or sponsorship of legislative, regulatory, policy, procedure and/or practice changes to increase CIE for people with I/DD.	
collaborative partners &/or other state-level agencies through MOU/data-sharing agreement/other means; obtain recommend from UCEDD(s), DOR, EDD, etc. to inform future/ongoing employment-related strategies B. Meet with EFC quarterly to identify possible employment-related legislation C. Meet with/educate legislators, legislative counsel, policy maked legislative and executive staff and other stakeholders, who are instrumental in writing legislative proposals regarding CIE D. Monitor legislation increasing employment opportunities for perwith I/DD &/or cross-disabilities; maintain updates on Council		MOU/data-sharing agreement/other means; obtain recommendations from UCEDD(s), DOR, EDD, etc. to inform future/ongoing employment-related strategies B. Meet with EFC quarterly to identify possible employment-related legislation C. Meet with/educate legislators, legislative counsel, policy makers, legislative and executive staff and other stakeholders, who are	
A. UCEDD(s), Franchise Tax Board, DDS, EDD, DOR, etc. B. EFC stakeholders, inclusive of private employers C. Community stakeholders, family/self-advocates, etc. D. Private non-profits, NGOs, &/or representative organizations, etc. E. Family/self-advocates, community stakeholders, & representative		 A. UCEDD(s), Franchise Tax Board, DDS, EDD, DOR, etc. B. EFC stakeholders, inclusive of private employers C. Community stakeholders, family/self-advocates, etc. D. Private non-profits, NGOs, &/or representative organizations, etc. 	
Expected Outputs Expected Outputs C. 1		 A. 1 MOU; 4 quarterly updates to the Data Dashboard; 4 quarterly contacts/meetings with collaborative partners; 1 ongoing list of up-to-date recommendations B. 4 quarterly meetings; 1 list of potential legislation to support CIE for people with I/DD &/or cross-disabilities C. 150 phone calls/teleconferences; 1,500 emails; &/or 100 meetings/hearings D. 1 legislative platform (posted to the Council website) committed to increasing opportunities for CIE for people with I/DD &/or cross-disabilities; 4 quarterly website updates; monitor 5 bills related to CIE E. Testimony provided &/or attendance during 40 hearings about 	

	employment-related issues affecting people with I/DD &/or cross-	
	disabilities during legislative session	
Expected	A. Family/self-advocates and stakeholders will have knowledge about up-	
Outcomes	to-date, accessible employment information through the Data	
Outcomes	Dashboard and Council website to advocate for CIE; the Council will	
	have a relevant employment strategy related to employment disparity	
	issues and will be instrumental in effective policy changes regarding	
	CIE	
	B. Family/self-advocates, EFC members, & other stakeholders will have	
	knowledge about issues regarding CIE & a commitment to developing	
	policy solutions about employment gaps	
	C. Policy-makers will have knowledge about CIE & employment	
	opportunity gaps for people with I/DD &/or cross-disabilities	
	D. There will be job opportunities for people with I/DD through tax	
	incentives for employers, sponsored &/or volunteer internships, etc.	
	E. There will be ongoing conversations & awareness among policy-	
	makers about employment issues affecting people with I/DD; policy-	
	makers will develop potential solutions to address employment gaps	
	A. Development of a signed, operative Memorandum of Understanding	
	between collaborative partners to obtain/share data; acquired data from	
	collaborative agencies; contact logs (SC 1.3, 1.3.1, 1.4 & 1.4.1)	
	B. Attendance rosters, meeting minutes, stakeholder satisfaction surveys,	
	anecdotal data, etc. (IA 1.1, 1.2, 2.2, 2.2.1, 2.2.10, & 2.2.11; SC 1.4 &	
	1.4.1)	
Data Evaluation &	C. Activity reports; number of employment-related bills addressing	
Measurement	employment initiatives &/or addressing factors involving disparity in	
	CIE for people with I/DD; anecdotal data (SC 1.2, 1.2.1, 1.4, 1.4.1, 2.1,	
	2.1.2, 2.2, 2.2.2, 2.3, & 2.3.2)	
	D. Data obtained from state-level collaborative partners (IA 2.2, 2.2.10, &	
	2.2.11; SC 1.2, 1.2.1, 1.4, 1.4.1, 2.1, 2.1.2, 2.2, 2.2, 2.3, & 2.3.2)	
	E. Anecdotal data from legislative/policy meetings; activity reports (SC	
	1.2, 1.2.1, 1.4, 1.4.1, 2.1, 2.1.2, 2.2, 2.2.2, 2.3, & 2.3.2)	

Goal 3: Housing

Californians with I/DD and their families reflecting the diversity of the state will have increased access to affordable, accessible, safe, and fully integrated housing that provides choice and flexibility regarding where and with whom they live.

Area(s) of Emphasis	Planned	Areas Addressed
Child Care		
Education & Early Intervention		
Employment		
Formal and Informal Community Supports		
Health		
Housing	X	
Quality Assurance		
Recreation		
Transportation		
Strategies	Planned	Strategies Used
Barrier Elimination	X	
Coalition Development and Citizen Participation	X	
Coordination with Related Councils, Committees and Programs	X	
Demonstration of New Approaches to Services and Supports		
Demonstration of Projects or Activities		
Informing Policymakers	X	
Interagency Collaboration and Coordination	X	
Other Activities		
Outreach	X	
Supporting and Educating Communities	X	
Systems Design and Redesign		
Technical Assistance	X	
Training	X	
This Goal Addresses:	Planned	Areas Addressed
Individual/Family Advocacy	X	
System Change	X	
Self-Advocacy Requirement		
Targeted Disparity		
DD Network Collaboration		
Capacity-Building	X	

Intermediaries/Collaborators	Planned	Actual
DDS (State DD Agency)	X	
Disability Rights California (State Protection and Advocacy System)	X	
UCEDD (University Centers for Excellence in DD)	X	
Other: Housing Developers/Private Sector Builders	X	
Other: Governance/Regulatory agencies	X	
Other: Public Interest Advocacy Groups/Private Non-profits	X	

Other Planned Collaborators:

Department of Aging



	2017-21 State Plan: Objective 3.1		
Goal	Housing	Californians with I/DD and their families reflecting the diversity of the state will have increased access to affordable, accessible, safe, and fully integrated housing that provides choice and flexibility regarding where and with whom they live.	
	3.1	The Council will work with housing entities to increase the development and/or provision of community housing for people with I/DD.	
A. B. Major Activities C.		 A. Identify stakeholders, build coalition(s) & engage with partners to convene quarterly task force meetings B. Assess & document current universally accessible housing levels; include home ownership options & NIMBY issues; participate in regional Dept. of Fair Employment & Housing (DFEH), HUD, &/or local housing authority meetings C. Develop and distribute information to publicize housing needs of people with I/DD & request accessible, affordable housing with local housing authorities within regional catchment areas D. Develop curriculum & train family/self-advocates, stakeholders & community members about affordable, accessible housing 	
	Planned laborators	 A. SELPAs/CACs, RCs, housing developers/private sector builders, governance/regulatory agencies, &/or family/self-advocate and public interest advocacy groups B. Housing developers/private sector builders, governance/regulatory agencies, &/or family/self-advocate and public interest advocacy groups C. RCs/DCs/CRA/VAS, family/self-advocate &/or public interest advocacy groups, etc. D. Housing developers/private sector builders, governance/regulatory agencies, DCs/CRA/VAS, RCs, &/or family/self-advocate and public interest advocacy groups 	
	xpected Outputs	 A. 25 coalition/stakeholder meetings will be held throughout the state B. 12 regional needs assessments/updates of housing options/issues affecting people with I/DD &/or cross-disabilities, including home ownership & NIMBY issues; 12 collaborations developed & 12 meetings held with regional Dept. of Fair Employment & Housing (DFEH), HUD, &/or local housing authorities C. Letters will be sent to at least 12 governance agencies D. 1 housing curriculum; 25 trainings will be provided, reaching at least 250 people 	

	A. A collaborative network will exist to address the housing needs of people
	with I/DD; development of 12 set-asides within affordable, accessible,
	safe & integrated housing developments for people with I/DD
	B. Public/agency awareness will be raised of the need for available,
	affordable & accessible housing, including home ownership, and the
	recognition of accessible housing access as a civil right
	C. Policies/practices within housing authorities will address the
Expected	availability/need for safe, affordable, and accessible housing for people
Outcomes	with I/DD &/or cross-disabilities and housing agencies will begin to
	include plans to provide additional housing in public planning/building
	efforts
	D. Family/self-advocates, stakeholders & community members will have the
	awareness & knowledge about equal housing rights and potential/real
	accessible, affordable housing for people with I/DD, including home
	ownership; family/self-advocates will participate in regional housing
	commission and advisory body meetings
	A. Written/anecdotal responses to correspondence/requests for information
	&/or tangible increase/progress in housing development &/or available
	set-asides (IA 1.1, 1.2, 2.1, & 2.2.1; SC 1.1, 1.1.1, 1.1.2, 1.2, 1.2.1, 1.3,
	1.3.6, 1.4, 1.4.1, 2.1, 2.1.1, 2.1.2, 2.1.3, 2.2, 2.2.1, 2.2.2, 2.2.3, 2.3, 2.3.1,
	2.3.2, & 2.3.3)
	B. Anecdotal (qualitative) data, attendance rosters of meetings and
Data Evaluation	collaborative partner contact lists (IA 2.2, 2.2.10, 2.2.11; SC 1.3, 1.3.1,
& Measurement	1.3.2, 1.3.2, 1.3.3, 1.3.4, 1.3.5, 1.3.6, 1.4, 1.4.1, 2.1, 2.1.1, 2.1.3, 2.2,
	2.2.1, & 2.2.3)
	C. Number of letters disseminated, satisfaction surveys, &/or anecdotal
	reports (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.10, & 2.2.11; SC 1.1, 1.1.2, &
	1.4.1)
	D. Pre/post-tests &/or satisfaction surveys (IA 1.1, 1.2, 2.1, 2.2, 2.2.1,
	2.2.10, & 2.2.11; SC 1.4.1, 2.3, & 2.3.3)

	2017-21 State Plan: Objective 3.2		
Goal 3	Housing	Californians with I/DD and their families reflecting the diversity of the state will have increased access to affordable, accessible, safe, and fully integrated housing that provides choice and flexibility regarding where and with whom they live.	
	3.2	The Council will identify and decrease barriers to housing for people with I/DD.	
Major Activities		 A. Develop/provide training for people with I/DD &/or cross-disabilities about HCBS Final Settings Rule to promote self-advocacy skills in identifying/accessing integrated, affordable, & safe community housing options B. Develop/provide a residential/housing component in transition & IPP training/planning for (adult & aging) family & (transition-aged, adult, & aging) self-advocates; distribute material(s); promote/advocate for housing options, including early registration for Section 8 lists C. Develop/provide training and system advocacy on long-range financial planning to bridge gaps between median rent costs/home prices and SSI/SSDI (e.g. supports available in-home, SSI & home ownership, etc.) 	
A. DRC, DCs/DDS/RCs, CRA/VAS, UCEDDs, &/or IL Planned B. DOA, RCs/DDS, Districts/SELPAs, HUD, ILCs, staken		 A. DRC, DCs/DDS/RCs, CRA/VAS, UCEDDs, &/or ILCs B. DOA, RCs/DDS, Districts/SELPAs, HUD, ILCs, stakeholders, etc. C. DCs/DDS/RCs, ILCs, CRA/VAS, family/self-advocates, DRC, &/or ILCs, etc. 	
Expected I Outputs		 A. Curriculum; 50 trainings; reach 500 people B. Curriculum; 25 trainings; reach 250 people C. Curriculum; 25 trainings; planning policy/practice change; reach 250 people 	
	xpected utcomes	 A. Family/self-advocates will have knowledge about HCBS and accessible, affordable, safe, integrated housing/placement options, supports, & services for people with I/DD &/or cross-disabilities and overcome barriers to requesting appropriate residential placement B. Young and aging self-advocates & families will have knowledge about transitional issues, housing entitlement programs &/or long-term residential options for aging adults with I/DD &/or cross-disabilities; family/self-advocates will advocate for & access resources; there will be a 5% decrease in the number of emergency placements C. Increased legal & long-range residential & financial planning/preparation for identification of/access to housing choices and preferences 	

Data Evaluation & Measurement

- **A.** Pre/post-tests &/or surveys to determine satisfaction &/or understanding of HCBS criteria, safe/integrated/affordable housing options, &/or rights regarding fair housing and issues surrounding NIMBY concerns (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.10, 2.2.11, SC 1.3, 1.3.2, & 1.3.6)
- **B.** Pre/post-tests &/or satisfaction surveys; number of trainings/people reached; self-reports from RCs in regard to IPP/IFSP procedures; number of meetings held/plans developed; pre/post-project numbers of emergency placements, as available; anecdotal reports of active engagement/advocacy & outcomes (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.10, & 2.2.11; SC 1.1, 1.1.2, 1.3, 1.3.1, 1.3.3, 1.3.4, 1.3.5, 1.3.6, 1.4, 1.4.1, 2.1, 2.1.3, 2.2, 2.2.3, 2.3, & 2.3.3)
- C. Pre/post-tests &/or surveys to determine satisfaction &/or understanding of financial planning options, long-term residential options, &/or other issues surrounding aging and people with I/DD (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.10, & 2.2.11; SC 1.3, 1.3.3, 1.4, & 1.4.1)

	2017-21 State Plan: Objective 3.3		
Goal	Housing	Californians with I/DD and their families reflecting the diversity of the state will have increased access to affordable, accessible, safe, and fully integrated housing that provides choice and flexibility regarding where and with whom they live.	
3	3.3	The Council, in consultation with its federal partners, will increase identification, advocacy and/or sponsorship of legislative, regulatory, policy, procedure and/or practice changes to increase housing for people with I/DD.	
Major Activities		 A. Identify/collaborate with experts to inform Council on housing issues B. Meet/confer with/educate legislators, legislative counsel, policymakers, legislative and executive staff and other stakeholders, who are instrumental in writing proposals regarding housing issues C. Propose &/or monitor legislation, policies, & practices that increase the availability of affordable, accessible, & safe housing D. Testify in informational/committee hearings at the local representative &/or state legislative level(s) 	
Planned Collaborators		 A. Stakeholders, housing experts & providers, & regional housing governance entities B. Legislators, legislative counsel, policymakers, legislative and executive staff and other stakeholders, etc. C. Family/self-advocates, regional housing experts & entities, legislative counsel & staff, etc. D. Stakeholders & other interested parties 	
A. 2 LPPC housing-related presentations; 40 telephone contact B. 20 meetings Outputs C. Monitoring at least 5 pieces of legislation			
A. The Council will have knowledge of & participation in housing-resissues regarding people with I/DD &/or cross-disabilities B. Increase policymakers' familiarity with housing issues specific to with I/DD &/or cross-disabilities; ensure that proposed legislation includes issues related to housing for people with I/DD &/or cross disabilities C. The introduction &/or monitoring of the progress of 5 pieces of housing the progress of 5 pieces of 5		 A. The Council will have knowledge of & participation in housing-related issues regarding people with I/DD &/or cross-disabilities B. Increase policymakers' familiarity with housing issues specific to people with I/DD &/or cross-disabilities; ensure that proposed legislation includes issues related to housing for people with I/DD &/or cross-disabilities C. The introduction &/or monitoring of the progress of 5 pieces of housing-related legislation D. Public & legislative awareness of & active engagement in issues surrounding safe, affordable, accessible housing needs of people with 	

	A. Meeting rosters/agendas/minutes; phone logs & activity reports (IA 1.1,
	1.2, 2.1, 2.2, 2.2.1, 2.2.4, 2.2.5, 2.2.10, & 2.2.11; SC 1.3, 1.3.3, 1.3.6, 1.4,
	& 1.4.1)
	B. Updated housing platform; # of eBlasts, newsletters, etc. (IA 1.1, 1.2, 2.2,
	& 2.2.1; SC 1.2, 1.2.1, 1.3.3, 1.3.6, 1.4, & 1.4.1)
	C. Activity reports (SC 1.2, 1.2.1, 1.3.3, 1.3.6, 1.4, & 1.4.1)
Data Evaluation	D. Number of bills sponsored/supported in each house/session (SC 1.2,
& Measurement	1.2.1, 1.3.3, 1.3.6, 1.4, & 1.4.1)
	E. Activity reports (IA 1.1, 1.2, 2.1, 2.2, & 2.2.1; SC 1.2, 1.2.1, 1.3.3, 1.3.6,
	1.4, & 1.4.1)
	F. Number of letters sent; number of written/anecdotal responses received
	(IA 1.1, 1.2, 2.1, & 2.2.1; SC 1.1, 1.1.1, 1.1.2, 1.2, 1.2.1, 1.3, 1.3.6, 1.4,
	1.4.1, 2.1, 2.1.1, 2.1.2, 2.1.3, 2.2, 2.2.1, 2.2.2, 2.2.3, 2.3, 2.3.1, 2.3.2, &
	2.3.3)

Goal 4: Health & Safety

Californians w/ I/DD and their families reflecting the diversity of the state will have increased information to access health, public safety, and related services that meet their needs and health care choices.

Area(s) of Emphasis	Planned	Areas Addressed
Child Care		
Education & Early Intervention		
Employment		
Formal and Informal Community Supports	X	
Health	X	
Housing		
Quality Assurance	X	
Recreation		
Transportation		
Strategies	Planned	Strategies Used
Barrier Elimination		
Coalition Development and Citizen Participation	X	
Coordination with Related Councils, Committees and Programs		
Demonstration of New Approaches to Services and Supports		
Demonstration of Projects or Activities		
Informing Policymakers	X	
Interagency Collaboration and Coordination	X	
Other Activities		
Outreach	X	
Supporting and Educating Communities	X	
Systems Design and Redesign		
Technical Assistance	X	
Training	X	
This Goal Addresses:	Planned	Areas Addressed
Individual/Family Advocacy	X	
System Change	X	
Self-Advocacy Requirement		
Targeted Disparity		
DD Network Collaboration		
Capacity-Building	X	

Intermediaries/Collaborators	Planned	Actual
DDS (State DD Agency)	X	
Disability Rights California (State Protection and Advocacy System)	X	
UCEDD (University Centers for Excellence in DD)		
Other: Department of Public Health &/or Mental Health Division	X	
Other: Managed Health Care Plans/Agencies	X	
Other: Law Enforcement/OES	X	



		2017-21 State Plan: Objective 4.1
Goal	Health & Safety	Californians w/ I/DD and their families reflecting the diversity of the state will have increased information to access health, public safety, and related services that meet their needs and health care choices.
4	4.1	The Council and its federal partners will increase knowledge and awareness for people with I/DD and their families about the availability of and access to health and public safety-related services and supports.
Major Activities A. Participate &/or comm B. Provide tra advocates		 A. Participate in/outreach to family/self-advocates through health/wellness &/or community fairs B. Provide training about health & access to care issues to family/self-advocates C. Provide emergency preparedness/personal safety/bullying training
Planned A. Managed Health Care Plans/Agencies, DPH, Mental Health, etc. Collaborators B. RCs, managed health care plans/agencies		
A. Participate/collaborate in 12 health/wellness events; provide commoutreach through 24 eBlasts & 12 newsletters B. 1 curriculum; 20 trainings; 500 people reached		
	xpected utcomes	 A. Family/self-advocates will be reached and have information about health-related options &/or services B. More family/self-advocates will be reached and will have information about health options &/or services C. More family/self-advocates will be reached and will have information about emergency preparedness, personal safety, &/or bullying & their options regarding available services, prevention, protection and response
	Evaluation easurement	 A. # of people contacted; # of materials distributed; satisfaction surveys (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.10, & 2.2.11; SC 1.3, 1.3.3, 1.3.6, 1.4, & 1.4.1) B. Pre/post-tests, satisfaction surveys, anecdotal feedback, etc. (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.10, & 2.2.11; SC 1.3, 1.3.3, 1.3.6, 1.4, & 1.4.1) C. Pre/post-tests, satisfaction surveys, anecdotal feedback, etc. (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.10, & 2.2.11; SC 1.3, 1.3.3, 1.3.6, 1.4, & 1.4.1)

	2017-21 State Plan: Objective 4.2		
Goal	Health & Safety	Californians w/ I/DD and their families reflecting the diversity of the state will have increased information to access health, public safety, and related services that meet their needs and health care choices.	
4	4.2	The Council, its federal partners, and self-advocates will increase information and training to law enforcement, court personnel, health care providers, and/or other care professionals about disability-related health and safety issues.	
A. Provide training/information/technical support to personnel, first responders, fire/paramedic/ER sta safety & people with I/DD &/or cross-disabilities (including family & self-advocates as speakers/tra B. Distribute information to the community, family/s safety/first responders about health/public safety with I/DD &/or cross-disabilities and their families C. Collaborate with public safety stakeholders on act factors &/or improve health and public safety for cross-disabilities and their families; provide technical support to personnel, first responders, fire/paramedic/ER sta safety & geople with I/DD &/or cross-disabilities as speakers/tra B. Distribute information to the community, family/s safety/first responders about health/public safety in the I/DD &/or cross-disabilities and their families; provide technical support to personnel, first responders, fire/paramedic/ER sta safety & geople with I/DD &/or cross-disabilities		 A. Provide training/information/technical support to law enforcement, court personnel, first responders, fire/paramedic/ER staff, etc. regarding public safety & people with I/DD &/or cross-disabilities & their families (including family & self-advocates as speakers/trainers) B. Distribute information to the community, family/self-advocates, & public safety/first responders about health/public safety issues affecting people with I/DD &/or cross-disabilities and their families C. Collaborate with public safety stakeholders on activities to address risk factors &/or improve health and public safety for people with I/DD &/or cross-disabilities and their families; provide technical assistance (as requested) 	
A. Public safety & court personnel/first responders, medical staff, & family/self-advocates, including SSAN/SAAC members B. DPH, managed health care plans/agencies, local/state mental/behavioral health agencies/facilities C. OES, public safety & court personnel/first responders, medical facilities DRC/OCRA, RCs, etc.			
A. 1 curriculum; 24 trainings; 250 people reached B. 24 eMails/eBlasts, 12 newsletters, & 3 brochures disseminated to 1,0 people & 12 agencies C. 12 regional collaborations; 24 meetings with collaborators		B. 24 eMails/eBlasts, 12 newsletters, & 3 brochures disseminated to 1,000 people & 12 agencies	
	xpected utcomes	 A. First responders, law enforcement, court personnel, fire/paramedic/ER staff will have training/information/technical from family/self-advocates, professionals & subject matter experts that increased their knowledge about, provision of accessible services to, & improved interactions with people with I/DD & cross-disabilities B. Family/self-advocates, professionals & the community will have knowledge to increase awareness of accessible health & public safety-related services, rights, & available/appropriate accommodations for people with I/DD &/or cross-disabilities C. The health, court, and public safety system of service/supports will have 	

	knowledge about issues that affect access to health care, justice, &/or public safety for people with I/DD &/or cross-disabilities and have a community safety plan/net/response for people with I/DD &/or cross-disabilities
Data Evaluation & Measurement	 A. Pre/post-training, satisfaction surveys, &/or attendance logs (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.10, & 2.2.11; SC 1.3, 1.3.2, 1.3.3, 1.3.5, 1.3.6, 1.4, 1.4.1, 2.3, 2.3.3, & 2.3.3) B. Number of people reached; satisfaction surveys (IA 1.1, 1.2, 2.1, 2.2, & 2.2.1; SC 1.3, 1.3.3, 1.4, & 1.4.1) C. Meeting attendance logs, agendas, numbers/types of system change efforts, anecdotal data, development &/or identification & distribution of community safety plan(s), etc. (IA 2.2, 2.2.10 & 2.2.11; SC 1.1, 1.1.1, 1.1.2, 1.3, 1.3.3, 1.3.6, 1.4, & 1.4.1)

2017-21 State Plan: Objective 4.3				
Goal 4	Health & Safety	Californians w/ I/DD and their families reflecting the diversity of the state will have increased information to access health, public safety, and related services that meet their needs and health care choices.		
	4.3	The Council, in consultation with its federal partners, will increase identification, advocacy and/or sponsorship of legislative, regulatory, policy, procedure and/or practice changes to increase accessibility to health care and public safety services for people with I/DD and their families.		
Major Activities		 A. Identify/collaborate with experts to inform Council on health &/or public safety-related issues B. Monitor implementation of recently passed public safety bills relating to law enforcement training C. Monitor process of de-institutionalization of people with I/DD &/or cross-disabilities D. Advocate (at community &/or systemic level) for adequate/affordable/accessible health care & other community-based supports/services 		
Planned Collaborators		 A. Subject matter experts (e.g. health, public safety, court personnel, etc.) B. Law enforcement agencies, family/self-advocates, civil rights entities, etc. C. DCs/DDS/RCs, long-term care facilities, Ombudsman program, etc. D. Managed Health Care plans/agencies, service providers, RCs, etc. 		
Expected Outputs		 A. 24 meetings with health & public safety agencies/personnel B. Anecdotal data from regional offices to determine law enforcement training mandates are being implemented statewide, per recently passed legislation C. 4 updates from collaborative partners to ensure compliance with closure deadlines for state-run institutions and residential/service transfers of people with I/DD &/or cross-disabilities back into community settings; collected anecdotal data regarding development/implementation of personal safety/support/service plans D. 24 meetings with health boards/agencies, IHSS/Public Authority, etc. to advocate for health services/rights for people with I/DD &/or cross-disabilities 		
	xpected utcomes	 A. 12 relevant recommendations for legislative and regulatory solutions & improvements to health care &/or public safety systems B. Positive law enforcement interactions with people with I/DD &/or cross-disabilities C. Compliance with HCBS settings rule & timely, safe deinstitutionalization 		

	of people with I/DD &/or cross-disabilities, with access to appropriate
	community-based supports/services
	D. Health care & other community support/service providers have
	knowledge about the needs of people with I/DD and their service
	accessibility & policies/practices address those unique needs
	A. Meeting rosters/agendas/minutes; phone logs & activity reports (IA 1.1,
	1.2, 2.1, 2.2, 2.2.1, 2.2.4, 2.2.5, 2.2.10, & 2.2.11; SC 1.3, 1.3.3, 1.3.6, 1.4,
	& 1.4.1)
	B. Council reports/agendas/minutes (IA 1.1, 1.2, 2.2.1, 2.2.10, & 2.2.11; SC
D-4- El4	1.1, 1.1.1, 1.3, 1.3.3, 1.3.6, 1.4, & 1.4.1)
Data Evaluation	C. DDS/DC/RC reports; family/self-advocate/anecdotal reports (1.1, 1.2,
& Measurement	2.1, 2.2, 2.2.1, 2.2.2, 2.2.3, 2.2.6, 2.2.10, & 2.2.11; SC 1.1, 1.1.1, 1.1.2,
	1.3, 1.3.1, 1.3.2, 1.3.3, 1.3.4, 1.3.5, 1.3.6, 1.4, 1.4.1, 2.2, 2.2.1, 2.2.3, 2.3,
	2.3.1, & 2.3.3)
	D. Anecdotal reports & satisfaction surveys (IA 2.1, 2.2, 2.2.1, 2.2.10, &
	2.2.11; SC 1.3, 1.3.1, 1.3.2, 1.3.6, 1.4, & 1.4.1)

Goal 5: Early Intervention, Education, Transition & Post-Secondary Education

Californians with I/DD and their families reflecting the diversity of the state will have increased information, in order to obtain inclusive education services throughout the lifespan.

mespan.			
Area(s) of Emphasis	Planned	Areas Addressed	
Child Care	X		
Education & Early Intervention	X		
Employment			
Formal and Informal Community Supports	X		
Health	X		
Housing			
Quality Assurance	X		
Recreation			
Transportation			
Strategies	Planned	Strategies Used	
Barrier Elimination			
Coalition Development and Citizen Participation	X		
Coordination with Related Councils, Committees and Programs	X		
Demonstration of New Approaches to Services and Supports	X		
Demonstration of Projects or Activities	X		
Informing Policymakers	X		
Interagency Collaboration and Coordination	X		
Other Activities			
Outreach	X		
Supporting and Educating Communities	X		
Systems Design and Redesign	X		
Technical Assistance	X		
Training	X		
This Goal Addresses:	Planned	Areas Addressed	
Individual/Family Advocacy	X		
System Change	X		
Self-Advocacy Requirement			
Targeted Disparity			
DD Network Collaboration			
Capacity-Building	X		

Intermediaries/Collaborators	Planned	Actual
DDS (State DD Agency)	X	
Disability Rights California (State Protection and Advocacy System)	X	
UCEDD (University Centers for Excellence in DD)	X	
Other: Family Resource Center(s); self-advocacy entities	X	
Other: Districts/SELPAs, CACs, & Colleges/Universities	X	
Other: DOR, EDD, RCs, etc.	X	

2017-21 State Plan: Objective 5.1				
Goal 5	Early Intervention, Education, Transition & Post- Secondary Education	Californians with I/DD and their families reflecting the diversity of the state will have increased information, in order to obtain inclusive education services throughout the lifespan.		
	5.1	The Council and its federal partners will increase knowledge and awareness of developmental milestones and intervention services for families of young children and professionals.		
Major Activities		 A. Develop collaborative networks & convene quarterly meetings to determine community training/outreach needs &/or collaborative opportunities B. Develop/provide information/outreach materials to community & professionals to encourage early identification & assessment of & intervention for children with I/DD &/or cross-disabilities C. Develop/provide training to parents/community members about early identification/intervention, I/DD &/or cross-disabilities, support/service resources, &/or transition into the school system D. Develop/offer training &/or provide outreach materials/technical assistance to pediatricians, hospitals, neonatal units, Early Start programs, child care centers, etc. 		
	Planned llaborators	 A. UCEDD(s), RCs, DRC, Family Resource Center(s), First 5 agencies, health providers/networks, etc. B. UCEDD(s), RCs, DRC, Family Resource Center(s), First 5 agencies, health providers/networks, etc. C. UCEDD(s), RCs, Family Resource Center(s), First 5 agencies, etc. D. Health professionals, Early Start programs, child care centers, etc. 		
Ехре	ected Outputs	 A. 4 quarterly meetings with collaborative partners; 1 comprehensive list of identified &/or recommended trainings; 1 list of recommended outreach materials B. 24 eBlasts, 12 newsletters, 1 set of handouts, etc.; 1,200 people reached through outreach efforts C. 1 Curriculum; 12 trainings; 250 people reached D. 1 Curriculum; 12 trainings; 150 professionals reached 		
Expe	cted Outcomes	A. A collaborative network will be in place to address early identification challenges & opportunities associated with finding/serving children as yet unidentified as having I/DD &/or cross-disabilities		

B. Community members &/or professionals will have knowledge of typical developmental milestones & the importance of identifying young children with I/DD &/or cross-disabilities as early as possible C. Parents will have information/knowledge to identify typical developmental milestones, recognize possible developmental delays, and identify/access available resources in a timely manner **D.** Professionals working with children will have information/knowledge about I/DD &/or cross-disabilities and be able to talk with parents about diagnostic information & accessing resources/supports/services in a timely manner **A.** Meeting rosters/agendas/minutes; list of recommended activities/training; list of recommended outreach material (IA 1.2, 2.2, 2.2.1, 2.2.2, 2.2.3, 2.2.4, 2.2.5, 2.2.6, 2.2.7, 2.2.8, 2.2.10, & 2.2.11; SC 1.1, 1.1.1, 1.1.2, 1.3, 1.3.1, 1.3.2, 1.3.5, 1.3.6, 1.4, 1.4.1, 2.1, 2.1.1, 2.1.3, 2.2, 2.2.1, 2.3, 2.3.1, & 2.3.3) **B.** Logs/#'s of eMails, eBlasts, newsletters, etc. and people reached (IA **Data Evaluation &** 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.10, & 2.2.11; SC 1.1, 1.1.1, 1.1.2, 1.3, 1.3.1, Measurement 1.3.2, 1.3.5, 1.3.6, 1.4, 1.4.1, 2.1, 2.1.1, 2.1.3, 2.2, 2.2.1, 2.3, 2.3.1, & 2.3.3) C. Pre/post-tests, anecdotal data, satisfaction surveys, & training rosters (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.10, & 2.2.11; SC 1.4, & 1.4.1) **D.** Pre/post-tests, satisfaction, & training rosters; follow-up phone calls/anecdotal data (IA 1.2; SC 1.3, 1.3.4, 1.3.5, 1.3.6, 1.4, & 1.4.1)

	2017-21 State Plan: Objective 5.2		
Goal 5	Early Intervention, Education, Transition & Post- Secondary Education	Californians with I/DD and their families reflecting the diversity of the state will have increased information, in order to obtain inclusive education services throughout the lifespan.	
	5.2	The Council, in consultation with its federal partners and other stakeholders, will increase awareness and knowledge for families and self-advocates about the availability of and access to inclusive educational services.	
Major Activities		 A. Develop network & convene quarterly meetings to determine community training/outreach needs &/or collaborative opportunities B. Develop/provide information/outreach materials to families, community & professionals about inclusive FAPE rights for children with I/DD &/or cross-disabilities C. With family/self-advocates, develop/provide training for students/parents/staff/community members about disability awareness & self-advocacy within the school system D. Develop/offer parent peer advocacy training for parent-to-parent support within special education service system 	
Planned Collaborators		A. Local CACs, FRCs, SELPAs, etc. B. OAH, CACs, FRCs, etc. C. SELPAs, CACs, etc. D. OAH, CACs, FRCs, etc.	
Expected Outputs		 A. 12 regional rosters of collaborative partners; 24 meetings; 12 lists of regional community needs B. Material(s) C. 1 curriculum; 24 trainings; reach 240 people D. 1 curriculum; 12 trainings; reach 150 people 	
Expec	eted Outcomes	 A. A series of regional collaborative networks will be in place to identify, monitor & address educational challenges & opportunities for children with I/DD &/or cross-disabilities in local communities B. Parents, community members &/or professionals will have knowledge/awareness about the need for a free, appropriate education for children with I/DD &/or cross-disabilities, and the right to obtain publicly accessible, inclusive education services throughout the lifespan C. Students/parents/staff/community members will have the information to 	

	identify & respond appropriately to I/DD &/or cross-disability issues
	&/or to self-advocate throughout the school system
	D. Parents will have the knowledge and resources to provide parent-to-
	parent peer support within their own communities for issues relating to
	FAPE, disability awareness, etc. and will use their skills/knowledge to
	obtain inclusive educational services for children with I/DD &/or cross-
	disabilities
	A. Meeting rosters/agendas/minutes; list of planned activities (IA 1.2, 2.2,
	2.2.1, 2.2.2, 2.2.3, 2.2.4, 2.2.5, 2.2.6, 2.2.7, 2.2.8, 2.2.10, & 2.2.11)
	B. Logs/#'s of eMails, eBlasts, newsletters, etc. and people reached (IA
D-4- El4 0	1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.10, & 2.2.11)
Data Evaluation &	C. Pre/post-tests, satisfaction, & training rosters (IA 1.1, 1.2, 2.1, 2.2,
Measurement	2.2.1, 2.2.10, & 2.2.11; SC 1.4 & 1.4.1)
	D. Satisfaction surveys, follow-up phone calls, anecdotal data, etc. (IA 1.1,
	1.2, 2.1, 2.2, 2.2.1, 2.2.10, & 2.2.11; SC 1.3, 1.3.3, 1.3.4, 1.3.6, 1.4, &
	1.4.1)

	2017-21 State Plan: Objective 5.3		
Goal 5	Early Intervention, Education, Transition & Post- Secondary Education	Californians with I/DD and their families reflecting the diversity of the state will have increased information, in order to obtain inclusive education services throughout the lifespan.	
	5.3	The Council, in consultation with its federal partners and in collaboration with educators and stakeholders, will increase information and technical assistance to prepare and empower students, families and professionals in developing individualized transition plans.	
Major Activities		 A. Train educators & stakeholders about the process of person-centered planning (PCP) and individualized transition planning (ITP) B. Develop/provide information about the student-led IEP/ITP process; partner in development/revision of resources &/or video training on the student-led IEP/PCP/ITP process C. Train family/self-advocates about the process of IEP/PCP/ITP; develop/provide/promote resources/best practices related to the IEP/PCP/ITP process on the SCDD website 	
Planned Collaborators		 A. DOR, EDD, Family Resource Centers, CACs, etc. B. DRC, Community Alliance for Special Education (CASE), DOE, Districts/SELPAs/CACs, DOR, RCs, etc. C. School Districts/SELPAs/CACs, RCs, DOR, EDD, etc. 	
Ехре	ected Outputs	 A. 1 curriculum; 12 trainings; 150 people trained B. 1 video (web-based); 1 set of replicable print resource materials C. 1 curriculum; 24 trainings; 500 people trained 	
Expected Outcomes		 A. Stakeholders will have knowledge about and value of the PCP/ITP process B. The Council will become an information resource for family/self-advocates and community members, who will have knowledge/resources to engage in the student-led IEP/PCP/ITP process C. Parent/self-advocates and stakeholders will have current knowledge about and use the student-driven PCP/ITP process; the Council will be a clearinghouse for information about the PCP/ITP process 	
Data Evaluation & Measurement		A. Pre/post-tests & satisfaction surveys; number of people trained; anecdotal reports (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.2, 2.2.3, 2.2.4, 2.2.5, 2.2.6, 2.2.10, & 2.2.11; SC 1.1, 1.1.1, 1.1.2, 1.3, 1.3.1, 1.3.2, 1.3.3, 1.4, 1.4.1, 2.1, 2.1.3, 2.2, 2.2.3, 2.3, & 2.3.3)	

- **B.** Pre/post-tests & satisfaction surveys; product development/revision; pre/post-use of student-led IEP/ITP process; website hits/people reached (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.10, & 2.2.11; SC 1.3, 1.3.3, 1.3.6, 1.4, & 1.4.1)
- C. Pre/post-tests & satisfaction surveys; number of people trained (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.2, 2.2.3, 2.2.4, 2.2.5, 2.2.6, 2.2.10, & 2.2.11; SC 1.3, 1.3.3, 1.3.6, 1.4, & 1.4.1)



	2017-21 State Plan: Objective 5.4		
Goal	Early		
5	Intervention,		
	Education,	Californians with I/DD and their families reflecting the diversity of the	
	Transition	state will have increased information, in order to obtain inclusive	
	& Post-	education services throughout the lifespan.	
	Secondary		
	Education		
		The Council, in consultation with its federal partners, will increase	
	5.4	identification, advocacy and/or sponsorship of legislative, regulatory,	
	5.4	policy, procedure and/or practice changes to increase access to quality	
		education services throughout the lifespan for people with I/DD.	
		A. Identify policy-level stakeholders & build coalitions; convene	
		networking & strategy meetings	
		B. Meet/confer with legislators, legislative counsel, policy-makers,	
Mos	lan A ativities	legislative and executive staff and other stakeholders about the value of	
Maj	or Activities	education throughout the lifespan of people with I/DD &/or cross-	
		disabilities	
		C. Educate/testify on legislation, policies, & practices addressing early	
		intervention, education, transition & post-secondary education	
		A. DRC, DOR, DDS/RCs, DOE, family/self-advocates & private non-	
	Planned	profit entities	
		B. DRC, DOR, DDS/RCs, DOE, family/self-advocates & private non-	
Co	llaborators	profit entities	
		C. DRC, UCEDD(s), RCs, DOR, etc.	
		A. Roster of collaborative partners; quarterly meetings; list of current/key	
		issues about accessing quality education services throughout the	
Expe	ected Outputs	lifespan for people with I/DD &/or cross-disabilities	
		B. 20 meetings	
		C. Education/testimony on 1-3 bills	
		A. Key policy stakeholders will be knowledgeable about and active in	
		policy-making efforts about increasing access to quality education	
Expected Outcomes		services throughout the lifespan for people with I/DD &/or cross-	
		disabilities	
		B. Policy-makers &/or legislators/staff will have knowledge when	
		considering/proposing policy changes about education-related issues	
		regarding people with I/DD &/or cross-disabilities	
		C. Policy-makers considering proposed policy changes will have	
		knowledge about the importance of access to education services	
		throughout the lifespan for people with I/DD &/or cross-disabilities	

	A. Roster of collaborators; number of meetings; list of policy issues; satisfaction surveys & anecdotal feedback (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.5, 2.2.10, & 2.2.11; SC 1.1, 1.1.1, 1.1.2, 1.2, 1.2.1, 1.3, 1.3.1, 1.3.2,
Data Evaluation & Measurement	1.3.3, 1.3.4, 1.3.5, 1.3.6, 1.4, 1.4.1, 2.1, 2.1.1, 2.1.2, & 2.1.3) B. Number of legislative contacts/meetings (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.2, 2.3, 2.3.1, & 2.3.2)
	C. Number of public hearings scheduled/attended with testimony offered; number of bills being considered; number of bills signed into law (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.2, 2.3, 2.3.1, & 2.3.2)

Goal 6: Formal & Informal Community Supports Californians with I/DD and their families reflecting the diversity of the state will have increased information and supports to access community-based services available to the general population.

Area(s) of Emphasis	Planned	Areas
Child Com	W.	Addressed
Child Care	X	
Education & Early Intervention		
Employment		
Formal and Informal Community Supports	X	
Health		
Housing		
Quality Assurance	X	
Recreation	X	
Transportation	X	
Strategies	Planned	Strategies Used
Barrier Elimination	X	
Coalition Development and Citizen Participation	X	
Coordination with Related Councils, Committees and Programs	X	
Demonstration of New Approaches to Services and Supports	X	
Demonstration of Projects or Activities	X	
Informing Policymakers	X	
Interagency Collaboration and Coordination	X	
Other Activities		
Outreach	X	
Supporting and Educating Communities	X	
Systems Design and Redesign	X	
Technical Assistance	X	
Training	X	
This Goal Addresses:	Planned	Areas Addressed
Individual/Family Advocacy		
System Change		
Self-Advocacy Requirement		
Targeted Disparity	X	
DD Network Collaboration	X	
Capacity-Building	X	

Intermediaries/Collaborators	Planned	Actual
DDS (State DD Agency)	\mathbf{X}	
Disability Rights California (State Protection and Advocacy System)	X	
UCEDD (University Centers for Excellence in DD)	X	
Other: Regional Center(s)	X	
Other:		
Other:		



	2017-21 State Plan: Objective 6.1		
	Formal & Informal Community Supports	Californians with I/DD and their families reflecting the diversity of the state will have increased information and supports to access community-based services available to the general population.	
Goal 6	6.1	The Council, in collaboration with our federal DD partners, will reduce service access barriers and decrease the disparity in available information, which describes services and supports that may be purchased throughout California's Regional Center system, by translating and providing that information in Spanish and tracking statewide POS disparity data for Spanish-speaking self-advocates and families.	
Major Activities		 A. Identify stakeholders & convene a consortium of Spanish-proficient collaborators; track POS disparity for Spanish-speaking family/self-advocates with I/DD within the statewide RC system; develop/review recommendations to reduce POS disparity in regard to language inaccessibility B. Develop an English lexicon of common, industry-specific terms; transliterate list into appropriate Spanish terms/phrases; field-test transliterated terms for cultural relevance C. Develop English descriptions of available services (Purchase-of-Service[s] [POS]) that may be funded through the Regional Center system D. Translate descriptions of available services (Purchase-of-Service[s] [POS]) that may be funded through the Regional Center system into Spanish E. Acquire English/Spanish NCI data and, if necessary, translate in(to) Spanish; post to website(s) F. Develop/provide training in Spanish on descriptions of available services (that may be funded/purchased through the RC system) to 	
Planned Collaborators		family/self-advocates; post to website(s) A. DDS, DRC, UCEDD(s), &/or ARCA/RCs B. DDS, DRC, UCEDD(s), &/or ARCA/RCs C. DDS, DRC, UCEDD(s), &/or ARCA/RCs D. DDS, DRC, UCEDD(s), &/or ARCA/RCs	
Expected Outputs		 A. 1 consortium of English &/or Spanish-speaking stakeholders, collaborators, &/or federal DD partners; 1 list of recommendations to reduce language-based POS disparity in Spanish-speaking family/self-advocates with I/DD B. 1 lexicon of appropriate industry-specific terminology in English by use 	

- in multiple agencies/entities; 1 list of appropriate, industry-specific transliterations in Spanish; local field-testing of transliterations in 12 regions; 12 lists of recommendations for editing
- **C.** 1 list of English descriptions of (POS) services available through RC funding
- **D.** 1 list of POS-related descriptions transliterated into Spanish; 1 posted list on Council's &/or other website(s)
- **E.** 1 posting of Spanish NCI material(s) to website(s)
- **F.** 1 curriculum; 1,000 family/self-advocates will be trained
- **A.** The Council will have a collaborative consortium of partners to assist in efforts to monitor/track & make recommendations regarding POS disparity and accessibility for diverse Spanish-speaking family/self-advocates with I/DD
- B. English-speaking family/self-advocates with I/DD &/or cross-disabilities & stakeholders will have a list of/ knowledge about industry-specific terms & will be assured of the accuracy & cultural relevance of those terms; Spanish-speaking family/self-advocates with I/DD &/or cross-disabilities & stakeholders will have a list of/ knowledge about culturally appropriate, industry-specific terms in Spanish & will be assured of the accuracy & cultural relevance of those terms

Expected Outcomes

- **C.** English-speaking family/self-advocates with I/DD &/or cross-disabilities & stakeholders will have a list of/ knowledge about descriptions of (POS) services/supports
- **D.** Spanish-speaking family/self-advocates with I/DD &/or cross-disabilities & stakeholders will have a list of/ knowledge about descriptions of (POS) services/supports in Spanish & will be assured of the accuracy & cultural relevance of those descriptions and will be able to advocate for appropriate services/supports through the RC system, removing barriers and reducing POS disparities
- **E.** Family/self-advocates who are Spanish-speaking will have knowledge of and Council website access to NCI data in Spanish
- **F.** Underserved Spanish-speaking family/self-advocates will have culturally relevant, accurate information in their language of choice about supports/services provided by the RC system and knowledge about how to identify/access necessary supports/services; a service access barrier will be removed and POS disparities for the underserved Spanish-speaking population will be reduced

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	A.	Satisfaction surveys; roster of collaborators; list of recommendations
		(SC 1.1, 1.1.2, 1.3, 1.3.1, 1.3.3, 1.3.4, 1.3.5, 1.3.6, 1.4, & 1.4.1)
	В.	English & Spanish lists of terms; satisfaction surveys; anecdotal data
		from public/industry/peer review (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.10 &
		2.2.11; SC 1.1, 1.1.2, 1.3, 1.3.1, 1.3.3, 1.3.4, 1.3.5, 1.3.6, 1.4, & 1.4.1)
	C.	List of English POS descriptions; satisfaction surveys;
		public/industry/peer review (IA 1.1, 1.2, 2.2.1, 2.2, 2.2.10, & 2.2.11;
Data Evaluation 8-		SC 1.4 & 1.4.1)
Data Evaluation &	D.	List of Spanish POS descriptions; satisfaction surveys;
Measurement		public/industry/peer review; RC POS Disparity Report(s); comparative
		analysis with previous years' reports (IA 1.1, 1.2, 2.2.1, 2.2, 2.2.10, &
		2.2.11; SC 1.4 & 1.4.1)
	E.	Posted NCI material; satisfaction surveys; public/industry/peer review
		(IA 1.1, 1.2, 2.2.1, 2.2, 2.2.10, & 2.2.11; SC 1.4 & 1.4.1)
	F.	Pre/post-tests & satisfaction surveys; number(s) of attendees; POS
		disparity reports/data (IA 1.1, 1.2, 2.2.1, 2.2, 2.2.10, & 2.2.11; SC 1.4
		& 1.4.1)

	2017-21 State Plan: Objective 6.2		
Goal	Formal & Informal Community Supports	Californians with I/DD and their families reflecting the diversity of the state will have increased information and supports to access community-based services available to the general population.	
6	6.2	The Council will increase the knowledge and skills of people with I/DD to move from institutional to community settings and to increase their ability to self-advocate.	
Major Activities		 A. Monitor/gather data on closure process of state-run institutions (DCs) & timely transfer of residents with I/DD &/or cross-disabilities into home & community-based settings with fully integrated, safe & appropriate supports/services B. Identify/meet/collaborate with stakeholders to ensure effective crisis intervention & continuity in healthcare support C. Develop/deliver training on closure process/progress to Council & Regional Advisory Committee (RAC) members D. Develop/deliver outreach & training to family/self-advocates on rights, available supports/services, PCP/SD, conservatorship & alternatives, &/or personal safety 	
Planned Collaborators A. Soon-to-be & transitioned DC family/self-advocates, DDS/RCs, CRA/VAS personnel, local enforcement & non-governmental ager DRC, DHCS, etc. B. DRC, RCs, DHS, CDPH, service providers, local LE agencies, family/self-advocate support groups C. DRC, RCs, DPH, vendors, etc.		CRA/VAS personnel, local enforcement & non-governmental agencies, DRC, DHCS, etc. B. DRC, RCs, DHS, CDPH, service providers, local LE agencies, family/self-advocate support groups	
A. Poll/survey & data/results from 900 family/self-advocates; and data from transitioned residents, stakeholders, & community		 B. 4 quarterly meetings; list of transition findings & recommendations C. 1 curriculum; 13 trainings (Council & RACs) D. 5 curricula; 20 trainings; 900 family/self-advocates reached 	
availability of integrated community supports/services for peop I/DD &/or cross-disabilities transitioning out of institutional cate community settings B. Stakeholders that provide integration supports/services will have		knowledge about resident welfare, DC transition/closure status, and the availability of integrated community supports/services for people with I/DD &/or cross-disabilities transitioning out of institutional care & into community settings B. Stakeholders that provide integration supports/services will have knowledge about family/self-advocates transitioning into community	

2017-21 State Plan: Objective 6.3					
Goal	Formal & Informal Community Supports	Californians with I/DD and their families reflecting the diversity of the state will have increased information and supports to access community-based services available to the general population.			
6	6.3	The Council will increase outreach, training, and technical assistance to improve the quality of and access to services, including (but not limited to) Regional Centers, education, transportation, public benefits, child care, and recreation for people with I/DD and their families.			
Major Activities		 A. Develop/provide training to Council & Regional Advisory Committee (RACs) family/self-advocates &/or other stakeholders on CMS final rule(s) for HCBS B. Gather anecdotal data from Council & RACs to develop policy positions; identify regional & statewide formal/informal service/support trends, address service barriers & quality of service(s), etc. C. Based on findings & Council policy positions regarding service gaps, conduct training & outreach activities to include underserved communities; track requests for & provide technical assistance, and increase training opportunities, as requested 			
	Planned llaborators	 A. Family/self-advocates, DRC, UCEDD(s), DHCS, DDS/RCs, etc. B. Family/self-advocates, DHCS, DDS/RCs, etc. C. Family/self-advocates, DRC, UCEDD(s), private nonprofit entities, etc. 			
Expected Outputs		 A. 1 curriculum; 13 trainings; community training & outreach activities (reaching 5,000 people) B. Current, comprehensive list of service gaps throughout the state; policy/position statements C. 3 curricula; 25 trainings (reaching 500 people) for RC, transportation &/or generic services; 5 trainings for 150 people in underserved communities; eMails, eBlasts, newsletters, etc.; 5,000 people reached; technical assistance, as requested; 12 technical assistance request logs 			
Expected Outcomes		 A. Family/self-advocate Council/RAC members will be informed & able to collect/evaluate data & address service gaps throughout California B. Council will develop/maintain strong agenda for 1) monitoring services/systems throughout the state, 2) developing positions & 3) directing policy, advocacy, & capacity-building activities to address & decrease service/support gaps for family/self-advocates with I/DD &/or cross-disabilities C. Based on requests for technical assistance, family/self-advocates & other stakeholders will have knowledge & increased technical 			

		assistance & training to access quality supports & services that are available to the general population
		Pre/post-tests, anecdotal data &/or satisfaction surveys (IA 1.1, 1.2, 2.1,
		2.2, 2.2.1, 2.2.10, & 2.2.11; SC 1.4.1, 2.3, & 2.3.3)
	ı	Anecdotal data & satisfaction surveys; agency reports/technical
	;	assistance logs (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.5, 2.2.10, & 2.2.11; SC
Data Evaluation &		1.1, 1.1.1, 1.1.2, 1.2, 1.2.1, 1.3, 1.3.1, 1.3.2, 1.3.3, 1.3.4, 1.3.5, 1.3.6,
Measurement		1.4, 1.4.1, 2.1, 2.1.1, 2.1.2, & 2.1.3)
	C. 3	Pre/post-tests, anecdotal data & satisfaction surveys; technical
	;	assistance logs (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.2, 2.2.3, 2.2.4, 2.2.5,
		2.2.6, 2.2.7, 2.2.8, 2.2.10, & 2.2.11; SC 1.3.2, 1.3.3, 1.3.6, 1.4, 1.4.1,
		2.1.3, 2.3.1, 2.3.2, & 2.3.3)

	2	017-21 State Plan: Objective 6.4
Goal	Formal & Informal Community Supports	Californians with I/DD and their families reflecting the diversity of the state will have increased information and supports to access community-based services available to the general population.
6	6.4	The Council, in consultation with its federal partners, will increase identification, advocacy and/or sponsorship of legislative, regulatory, policy, procedure and/or practice changes to increase access to quality community-based services for people with I/DD and their families.
Maj	or Activities	 A. Collaborate with family/self-advocates to collect information & anecdotal data regarding formal/informal service/support gaps, barriers &/or disparities, including those of Council's member & other state agencies B. Identify regional & state-level policy boards, councils, &/or advisory committees addressing delivery of services/supports for people with I/DD &/or cross-disabilities; promote inclusion of family/self-advocates as board/committee members C. Develop policy &/or directive positions on unmet timelines/needs associated with DC closures &/or resident transfers/placement D. Meet/confer with/educate legislators, legislative counsel, policy-makers, legislative and executive staff, Council member & other state agencies, and community stakeholders about service/support diversity/disparity issues & other gaps in services/supports for people with I/DD &/or cross-disabilities E. Monitor/educate/testify about legislation, policies, and practices addressing diversity/disparity gaps in systems serving people with I/DD &/or cross-disabilities; testify in hearings about key issues concerning access to formal/informal community-based services for family/self-advocates with I/DD &/or cross-disabilities
Planned Collaborators		 A. UCEDD(s), RCs, family/self-advocates, non-governmental organizations, DRC, Council member & other state agencies, etc. B. Regional & state-level agency policy boards, councils, &/or advisory committees, family/self-advocates, etc. C. DRC, RCs, DHCS, family/self-advocates, DSS, etc. D. UCEDD(s), RCs, family/self-advocates, non-governmental organizations, Council member & other state agencies, &/or DRC E. UCEDD(s), RCs, family/self-advocates, non-governmental organizations, &/or DRC

	A. 1 list of prioritized & key issues, including those specific to Council's
	member agencies; 10% increase in the volume of collaborative
	activities with stakeholders
	B. 12 lists of state/regional policy boards, councils, &/or advisory
Expected Outputs	committees; 1 report of number of family/self-advocates
	applying/accepted for member positions
	C. 1 clear policy agenda regarding DC closure/transfers
	D. 20 meetings
	E. Attendance/testimony in 12 hearings for 3-5 bills
	A. The Council and its stakeholders and collaborative partners will have
	knowledge about community-based support/service needs to inform
	decisions related to the Council's policy platform and its collaborative
	efforts on behalf of family/self-advocates with I/DD &/or cross-
Expected	disabilities
Outcomes	B. Family/self-advocates with I/DD & cross-disabilities will have the
	opportunities and knowledge to participate in systemic, policy-level
	advocacy work to increase access to quality community-based services
	C. The Council will have up-to-date information to drive policy
	development/directives & advocacy and facilitate access to quality
	community-based services for people with I/DD and their families
	¥ 2
	D. Stakeholders, key legislators, policymakers, & legislative & executive
	staff will have knowledge about issues regarding diversity/disparity
	gaps in services for people with I/DD &/or cross-disabilities to inform
	policy decisions E. Policy melana will have information to establish nalicies designed to
	E. Policymakers will have information to establish policies designed to
	decrease gaps in community-based service delivery systems for people
	with I/DD &/or cross-disabilities
	A. Subjective/anecdotal evaluation of issues addressed by Council & its
	state agency members; legislative research/reports (IA 1.1, 1.2, 2.1, 2.2,
	2.2.1, 2.2.10, & 2.2.11; SC 1.4, 1.4.1, 2.1, 2.1.1, 2.1.3, 2.2.1, 2.3, &
	2.3.1)
	B. Number of policy boards, councils, &/or advisory committees with
Data Evaluation &	family/self-advocates currently serving; increase in the number of
Measurement	family/self-advocates participating as members; anecdotal data &/or
Tricusur Circus	satisfaction surveys (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.2, 2.2.3, 2.2.4,
	2.2.5, 2.2.6, 2.2.7, 2.2.8, 2.2.10, & 2.2.11; SC 1.3, 1.3.3, 1.3.6, 1.4,
	1.4.1, 2.2, & 2.2.1)
	C. Anecdotal data (IA 1.1, 1.2, 2.1, 2.2, 2.2.1, 2.2.10, & 2.2.11; SC 1.1,
	1.1.1, 1.1.2, 1.4, 1.4.1,)
	D. Number of contacts/meetings with legislators, legislative counsel,

- policymakers, legislative and executive staff and other stakeholders (SC 1.2, 1.2.1, 1.3.3, 1.3.6, 1.4, & 1.4.1)
- E. Number of public hearings scheduled/attended with testimony offered; number of bills supported; number of bills signed into law (SC 1.2, 1.2.1, 1.3.3, 1.3.6, 1.4, & 1.4.1)



Performance Measures and Outcome/Sub-Outcome Reporting/Results

	Individual/Family Advocacy (IA)							
		Output Measure(s)	Expected	Actual	Total			
1	IA 1.1	The number of <u>people with I/DD</u> who participated in Council-supported activities designed to increase knowledge of how to take part in decisions that affect their lives, the lives of others, and/or systems)				
IA	IA 1.2	The number of <u>family members</u> who participated in Council-supported activities designed to increase their knowledge of how to take part in decisions that affect the family, the lives of others, and/or systems						
		Outcome Measure(s)	Expected	Actual	Total			
IA 2	IA 2.1	After participation in Council-supported activities, the percentage of people with I/DD who report increasing their self-advocacy						
VI IV	IA 2.2	After participation in Council-supported activities, the percentage of <u>family members</u> who report increasing their advocacy						
		Sub-Outcome Measure(s)	Expected	Actual	Total			
	IA 2.2.							
	IA 2.2.	The percentage of people who had been						
	IA 2.2.	advocacy group as a result of participation in Council-supported activities						
IA 2	IA 2.2.							
	IA 2.2.	participation in the group advocacy effort or the advocacy group						
	IA 2.2.	bodies as a result of experience with the Council						
	IA	The percentage of people who are serving in a						

2.2.7	leadership position within or for agencies and		
	organizations		
	For people serving on a policy board prior to		
IA	participating in the Council-funded activity, the		
2.2.8	percentage who are still serving and more		
	effective as a result		
IA	The percentage of people who are paid for their		
2.2.9	role		
IA	The percentage of people satisfied with a		
2.2.10	project activity		
IA	The percentage of people who indicate their		
2.2.11	lives are better because of a project activity		

	Systems Change (SC)						
		Output Measure(s)	Expected	Actual	Total		
SC 1	Policy and/or Procedure changes: The number of Council efforts to transform fragmented approaches into a coordinated and effective system that assures that individuals with I/DD and their families participate in the design of and have access to needed community services, individualized supports, and other forms of assistance that promote self-determination, independence, productivity, and integration and inclusion in all facets of community life						
		Sub-Output Measure(s)	Expected	Actual	Total		
Ε.	SO 1.1.						
SC	SC 1.1.	changes to improve existing policies and/or					
		Output Measure(s)	Expected	Actual	Total		
SC 1	SC 1.2	Statute and/or regulation changes					

		Sub-Output Measure(s)	Expected	Actual	Total
SC 1	SC 1.2.1	The number of statute and/or regulation changes to improve statutes and/or regulations			
		Output Measure(s)	Expected	Actual	Total
SC 1	SC 1.3 Promising and/or Best Practices				
		Sub-Output Measure(s)	Expected	Actual	Total
	SC 1.3.1	The number of <u>new</u> promising practices created			
	SC 1.3.2	The number of promising practices improved			
1	SC 1.3.3	The number of promising practices supported			
SC 1	SC 1.3.4	The number of <u>new</u> best practices created			
	SC 1.3.5	The number of best practices improved			
	SC 1.3.6	The number of best practices supported			
		Output Measure(s)	Expected	Actual	Total
SC 1	SC 1.4	follaboration			
		Sub-Output Measure(s)	Expected	Actual	Total
SC 1					

	Outcome Measure(s)				Actual	Total
SC 2	SC 2.1					
			Sub-Outcome Measure(s)	Expected	Actual	Total
	SC 2.1.1		The number of policy and/or procedure changes adopted			
SC 2	SC 2.1.2		The number of statute and/or regulation changes adopted			
	SC 2.1.3		The number of promising and/or best practices adopted			
			Outcome Measure(s)	Expected	Actual	Total
SC 2	The number of Council efforts to transform fragmented approaches into a coordinated and effective system that assures that individuals with I/DD and their families participate in the design of and have access to needed community services, individualized supports, and other forms of assistance that promote self-determination, independence, productivity, and integration and inclusion in all facets of community life that led to statute and/or regulation being created (submeasures 2.1.1; 2.1.4; 2.1.7)					

			Sub-Outcome Measure(s)	Expected	Actual	Total
SC 2	SC 2.2.1		The number of policy and/or procedure changes created as a result of systems change			
	SC 2.2.2		The number of statutes and/or regulations created as a result of system change activities			
	SC 2.2.3		The number of promising and/or best practices created as a result of systems change activities			
			Outcome Measure(s)	Expected	Actual	Total
SC 2	SC 2.3	fra eff I/E and inc ass inc inc	generated approaches into a coordinated and fective system that assures that individuals with DD and their families participate in the design of d have access to needed community services, dividualized supports, and other forms of sistance that promote self-determination, dependence, productivity, and integration and clusion in all facets of community life that were aplemented (sub-measures 2.1.3; 2.1.6; 2.1.9)			
			Sub-Outcome Measure(s)	Expected	Actual	Total
	SC 2.3.1		The number of policy and/or procedure changes adopted that were implemented			
SC 2	SO 2.3		The number of statute and/or regulation changes adopted that were implemented			
	SC 2.3.3		The number of promising and/or best practices adopted that were implemented			