

**Alta California Regional Center (ACRC)
Self-Determination Advisory Committee Meeting (SDAC)
Wednesday, March 13, 2019
10:00 A.M. to 12:00 P.M.
Minutes**

Members:	Present	Absent
Lisa Cooley SA	x	
Joyce McNair FA	x	
Kimberly Terrell SA	x	
Niccole Pitz	x	
Luis Rivera FA	x	
Benita Ayala	x	
Brittnee Gillespie, DRC	x	
Others Present:		
Lori Banales, ACRC Jason Lindo, ACRC Patti Diamond, ACRC Brittany Mangum (Support Staff), ACRC Phil Bonnet, ACRC	Kathy Brian, DDS Joseph Hernandez, SP Karen Mulvaney Jana Chapman-Plon, DDS Nicole Patterson, DDS Sheila M. Samantha W., FA	Thomas H. Chris U. Kenya, FA Maria Q., FA Mike H., SP Veronica M. Carmen D., FA
Legend:		
SA – Self-Advocate, FA – Family Advocate, SP – Service Provider		

1. Call to Order by Lisa Cooley, Chair

- Welcome & Introductions (10:00 A.M.)

2. Approval of Agenda & Minutes (from January 9, 2019)

- It was moved/seconded and carried to approve the agenda and minutes. No Abstentions.

3. Lori Banales-

Lori, Client Services Director of ACRC, introduced herself and spoke of the reorganization of the agency and how the agency is growing. Lori will continue as Director of Client Services; however, she will hire 2 additional Associate Directors that the client services managers will report to.

4. SDP Meetings and General Information Update- Jason Lindo

DDS has started their training of Regional Centers. Our two co-chairs and other Regional Center co-chairs attended the first meeting held at Alta. The next step is for Patti and Jason to train the ACRC staff. There will be 2 staff from each unit trained, as SDP Service Coordinators; they will also be used as resources as we work through the process of Self-Determination at Alta.

After all Regional Center trainings end (3/15), within 60 days (5/15), all Regional Centers must hold their first orientation training. We aim to have our first meeting at the end of April. SDAC members need to be trained in April. There will be a full 6-hour training which may be broken up into two trainings. There will be translators for those families who will need them.

Trainings will take place in the following offices: Sacramento, Woodland, Grass Valley, Yuba City, Roseville, and Placerville. They will be smaller trainings that will consist of about 12 people. This will be much easier than trying to train 179 people plus all of their supports.

There may be extra workshops before you meet with your planning team. There will probably be some people that will choose to opt out once the trainings begin.

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The difference between SDP and traditional services is that SDP services will take some time to get through each of these processes. Providers will be hired and vetted, FMSs will be hired, etc. We are all learning together as this is a work in progress.

Proposed training dates for the SDAC:

10 AM -4:30 PM

Wednesday 4/3

Tuesday 4/9

Wednesday 4/10

Monday 4/29

Clients will be notified by Alta of the training dates by mail and email.

Participants: please give your service coordinator your current email address and make sure we have your updated mailing address.

Many questions went to DDS at the DDS Train the Trainer session, and they said DDS will get back to us with answers. There will possibly be modifications to the PowerPoint that was shown during that training session.

Please email Jason with any questions you may have at:

[SDP@altaregional.org-](mailto:SDP@altaregional.org)

jlindo@altaregional.org

Our reporting mechanism for reporting back to DDS is an excel spreadsheet with the following: initials of participants and UCI, orientation completion date, certified first budget, date after spending plan of any barriers or concerns that may have come up in process, date you actually begin your plan. This is the first step in the law to start SDP services. We will need releases to share full names of clients.

Our number is down to 166 clients participating in SDP. DDS is still working through a process to choose names to fill the empty spaces. There is a 2,500 cap for the State of California for their SDP roll-out participants. Two clients have moved to other Regional Centers, the other vacancies will be backfilled by DDS.

Once these spots are filled, those newly selected participants will go through the process. These will be concurrent (once one is completed, you can move to the next step).

- ***The difference between billable vs. non-billable services- Jason Lindo/Patti Diamond***

In order for RC to fund these services, they must fall under the Medicaid Waiver. This will be further discussed at the training. If there is a generic resource that can meet a need, that will need to be exhausted first.

- ***Outreach- Joyce McNair***

When the committee was started in 2015, we had an outreach sub-committee. The word is out now, so there is not much of a need for the committee anymore. ACRC Next Steps (A Work in Progress) is a new section that Joyce proposes.

- ***ACRC's Next Steps/Training overview - Joyce McNair***

It's recommended to start putting together your Person Centered Planning Team. ACRC is working in the background on the operational end.

The IPP must have the SC present. The Person Centered Planning Team may or may not involve the SC- that is up to you. The Independent Facilitator cannot be paid if you they are the parent of a minor or a conserved adult.

Patti gave an overview of tradition services vs. SDP services. The traditional service method is what is currently used in the Regional Renters. Patti drew a diagram for the audience to for them to visualize the new dual tracks to services: Traditional and SDP.

Five Principles:

1. Freedom
2. Support
3. Responsibility
4. Authority
5. Confirmation

5. Public Comment Period

It would be a good idea to put your Independent Facilitator in your Person Centered Planning Team.

A packet will be included in the training which will answer a lot of questions you may have regarding budget. This is the most important aspect of the rollout. The current budget would be a starting point that can be discussed.

Your SC may or may not be the SC trained/assigned to you as a SDP participant. Your current SC may be able to shed light or recommend providers to you. These are good conversations to have with your SC.

Each SDP trained SC will have both SDP clients as well as traditional clients on their caseloads.

Access/use of public transit and ride share (i.e. Uber, Lyft) fall under the qualifications for transportation

FMS is required by law. There is a whole module in the orientation that will go over FMS.

Trainings will be available on the website (in the future) so people can refresh their memories.

SC will be working with you on your current services and will work with your trained SDP SC to ensure a smooth transition.

All acronyms are available on the DDS website.

Start creating your One Page Profile now!

There is no wait time for the client to go back to traditional services.

If there is a service that is a generic service, the client will go that route. If there is a service that could be useful to the client that was not available.

DDS just published their rate study and are looking for public comment in the next month. This will have an impact on SDP.

Worldwideweb.burnshealthpolicy.com/ddsvendorrates

- This can also be found on ACRC's site.

Start inviting Independent Facilitator to your Person Centered Planning meetings.

Some clients may want to use non-vendored services, which is a roll that the Independent Facilitator can assist with. There is law about what the role of an Independent Facilitators requires. The Independent Facilitator needs to be trained and it could possibly cost money. This person could potentially be the Independent Facilitator of another client. A parent cannot be paid as an Independent Facilitator if they are the parent of a minor.

There could possibly be a campaign to have a flyer that could go out to different agencies or community/human service agencies. We may need to build a pool of Independent Facilitators.

6. Open discussion on Self-Determination:

- **Transitions- Niccole Pitz**

If a client needs ILS, this will come out of the budget. There is funding that DDS has set aside for Regional Centers to use. If these services are provided by generic resources, then those services will have to be utilized and exhausted first.

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ACRC is reporting to DDS barriers that are in the way.

The motion was passed to adopt “ACRC Next Steps (A Work in Progress).” Adopt draft as roadmap as how to proceed, a work in progress that will be refined as we go along

Benita introduced both motions, Niccole seconded them.

Set up sub-committee to address Independent Facilitator including creating resources.

7. Dates for Future Meetings:

- May 8, 2019

8. Identify agenda items for next meeting:

- How to organize questions

9. Meeting adjourned at 12:01 PM