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State Council for Developmental Disabilities

Program Performance Report

For Year 2018

State Council for Developmental Disabilities

Section I: Identification

* - Required input

To provide identifying information of the reporting Council

1. State/Territory*

CA

2. Federal Fiscal Year Reporting*

October 1, 2017 through September 20, 2018

3. Contact person regarding PPR information*

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Section II: Comprehensive Review and Analysis

* - Required field

Adequacy of health care and other services, supports and assistance that individuals with developmental disabilities in Intermediate Care Facilities (ICF) receive

In addressing recent Medi-Cal trends, the California Department of Health Care Services (DHCS) Research and Analytics Division reported substantial changes to health care delivery systems in its March 2017 update. Specifically: “Individuals eligible for Medi-Cal residing in rural counties have been shifted from Medi-Cal's traditional Fee-for-Service (FFS) delivery system to Managed Care plans. Children were transitioned from the Healthy Families Program (HFP) into Medi-Cal, and the Patient Protection and Affordable Care Act (ACA) has brought in millions of new Medi-Cal enrollees since December 2013.”

DHCS reported that Medi-Cal enrollees currently represent, at 13,111,407, “approximately one-third of California’s population.” Of these, 2,023,168 (15%) are seniors and people with disabilities, 54% are female, 46% are male, and fewer than 1% of the total are in long-term care (CDHCS RASD, July 2018). Medi-Cal is also responsible for financially covering 95% of the services provided for those with I/DD in California who are residents of intermediate care facilities (CAHF (<https://www.dhcs.ca.gov/services/ltc/Pages/DD.aspx>), 2017).

California maintains four (4) distinct types of Intermediate Care Facilities:

- ICF/DD (Developmentally Disabled) – 16 or more beds
- ICF/DD-H (Habilitative) – 15 or fewer beds
- ICF/DD-N (Nursing) – 15 or fewer beds

* DD-CNC (Continuous Nursing Care) – as determined by RCs

At the federal level, these are identified as Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) (CMS.gov, 2017). According to the California Association of Health Facilities (CAHF), there are currently “15 large ICF/DDs, approximately 723 ICF/DD-Hs, and 420 ICF/DD-Ns in California”. Of those residents (with I/DD) of intermediate care facilities, 6% are below the age of 22; 35% are between the ages of 22 and 45; 48% are aged 46-64; and 10% were 65 years or older. CAHF further reported that, of the 9,000 residents of ICF/DD facilities, 76% also “participate in off-campus day programs” (CAHF (<https://www.dhcs.ca.gov/services/ltc/Pages/DD.aspx>); September 2017).

While an estimated 706,500 people in California may meet the federal criteria for having an intellectual and/or developmental disability (I/DD), fewer than half (305,623) are actually identified and found eligible to receive case management and/or other services through the state’s regional center system, leaving an estimated 400,877 or more people without valuable support services throughout the course of their lives (CA Dept. of Housing and Community Development, 2017; CA Dept. of Developmental Services, 2018). Of those people with developmental and/or cross-disabilities who are unserved by the state’s regional centers, there is little specific information available. As of December 2016, according to the Social Security Administration, more than 916,000 “blind and disabled” Californians received SSI/OASDI benefits, with more than 731,000 people over the age of 18 receiving OASDI payments. The standard monthly federal SSI payment is \$735 (SSA, 2017).

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Adequacy of health care and other services, supports, and assistance that individuals with developmental disabilities served through home and community-based waivers receive

California's state-run institutions (developmental centers) are in the final, scheduled stages of closure. As of September 2018, there were only 450 residents in 4 such institutions: Canyon Springs Community Facility (CF), Fairview, Porterville and Sonoma Developmental Centers (DC).

The HCBS-DD Waiver is administered by the California Department of Developmental Services (DDS), which authorizes home and community-based services (HCBS) for people with I/DD who are RC clients. These waiver-supported services make it possible for someone with I/DD to live in a community of choice, rather than in a licensed health facility (e.g. ICF-DD) or a state-run developmental center (DC). The DD Waiver is currently the largest HCBS waiver in California as well as the nation. In September of 2018, California received approval from the Centers of Medicare and Medicaid Services (CMS) to amend this Waiver. The amendment now allows DDS to increase provider payment rates for Home Health Aide and Skilled-Nursing Services (DDS, May 2018).

Twenty-one (21) regional centers (RC) throughout California purchase and coordinate services and supports for individuals with I/DD. Unlike states that restrict services to persons served under the HCBS Waiver, California's regional center system (and vendored service providers) offer a full scope of state-funded services to all eligible persons. Whether one is eligible for – and chooses – enrollment in the HCBS Waiver or not, individuals with I/DD and/or a family member will receive person-centered planning, opportunities to choose individualized services and providers, and assurance of the same quality of care (DDS, May 2018).

During FY 2017 (per the newest figures available from DDS), California invested more than \$5B in RC services for 305,623 people and families with I/DD, an increase of nearly \$587M from the previous year. Funded RC supports included residential, adult day program, supported living, behavioral, transportation, respite, employment-related, social/recreational, non-medical (therapeutic), medical/adaptive equipment and/or supplies, environmental and vehicle modification-related, mobility and other services.

While there are no 'official' waiting lists associated with RC services, there have been anecdotal accounts that the initial intake, assessment and eligibility process can be frustratingly long. Parents (without adequate information about disabilities or the 'process' of qualifying for services) report that they have been turned away (e.g. told that the child won't qualify for RC services) or otherwise discouraged from pursuing eligibility by clerical staff who are simply answering telephone inquiries (in an RC Intake Unit), without a formal assessment process or even an appointment with the Intake Unit. For parents who may have no – or limited – English proficiency, disability-related information, and/or successful experience with social service systems, it can take very little in the way of roadblocks to simply give up on finding appropriate services and supports through the RC system.

While state health and service entitlements may not involve formal waiting lists, Californians with disabilities (and very-low to low-income) do experience long waits for Section 8 eligibility and extended searches for available, affordable, safe and accessible housing. In low-population and/or rural areas, access to medical/dental care is also challenging, given the high percentage of medical/dental providers who choose to not accept Medicare/Medi-Cal/Denti-Cal reimbursements/payments or who limit the number of such clients that they will accept and serve. Employment has very nearly become a 'benefit' for PwD, as obtaining a job is dependent upon being hired by private employers or finding a public service job, while competing in a significant pool of unemployed workers without disabilities. Transportation is an ongoing, frustrating barrier for PwD, in attempting to access personal independence through employment, recreational and/or social opportunities. Complex, interwoven and often disconnected systems of transportation are not well coordinated, with schedules and routes that seldom fully meet the complex needs of PwD.

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Section III: State Plan Implementation

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A. Introduction

Provide an executive summary with cohesive information that provides an overview of the report including, but not limited to the following: (1) targeted areas of emphasis, (2) strategies used to implement activities; (3) significant accomplishments and/or barriers to state plan implementation; (4) needs requiring state plan amendments

Introduction

Over the course of FFY 2018, the California State Council on Developmental Disabilities (SCDD) engaged in advocacy, systems change, and capacity-building activities through a series of 6 goals, 18 objectives, and a comprehensive work plan that detailed specific activities and targets for each objective. The Council engaged in virtually every type of available activity in implementing its work plan, although combined activities required choosing only 1 approach, for reporting purposes. The Council's work plan simplified the operative list of activities to include, broadly: training and outreach, information dissemination, meetings and collaborations, collaborative partners/networks, leveraged funds, technical assistance, and facilitation.

Throughout the course of FFY 2018, SCDD provided a total of 736 trainings (25 of which were given only in Spanish), reaching 25,999 people. While some trainings were given solely in Spanish, there were many more that also included Spanish (and/or other) simultaneous translation(s). Regional and HQ staff provided facilitation in meetings, presentations, etc., serving 912 people during 94 events. Technical assistance was provided a total of 3,061 (documented) times, serving 16,423 people.

The Council engaged in 1,335 meetings and/or collaborative activities, reaching 29,836 people. Regional and HQ staff also documented a total of 4,762 collaborative partnerships with local, regional, state and federal agencies/personnel through joint meetings, plans, and actual activities, leveraging \$354,691 in funding. In distributing hard copies of resources (471 times), the Council served 274,544 people. Through 2,088 electronic distributions, staff reached an additional 2,318,591 people with valuable resources and information.

The vast bulk of work produced by the California State Council on Developmental Disabilities is done at the staff level, in 12 regional offices, headquarters (HQ), and through satellite programs inside developmental centers (DC) and community facilities (CF). Each year, however, the Council and its State Plan Committee identify specific goal areas in which to focus more intensive work and attention and release grants to community-based organizations to engage in research, demonstration/validation projects, and other types of programs that may not be funded by other means but which will push forward increased access to programs, services and/or civil rights of PwD. For FFY 2018, the Council chose to focus on self-advocacy, employment and housing for its grant-driven work, resulting in outcomes on which further work in these areas can be built.

Self-Advocacy

The core of the Council's mission is the empowerment of family and self-advocates in self-governance and personal and community advocacy efforts. To that end, SCDD maintains an MOU with the Statewide Self-Advocacy Network (SSAN), a cohort of self-advocates receiving tangible support and facilitation through SCDD's State Plan. Regional and HQ staff have worked with SSAN-associated self-advocates and regional community leaders to put together material and curricula for both SSAN meetings and peer and community-based trainings and presentations. During SSAN meetings, members provided and/or participated in a total of 10 presentations, reaching 270 people. In community and peer-based presentations, SSAN members reported a total of 21 presentations/trainings, given to 964 people. Presentations were given on topics associated with self-advocacy (e.g. self-determination, self-advocacy, etc.), employment (e.g. mock interviews, hiring and benefits, etc.), health/public safety (e.g. abuse, hiring/firing attendants, emergency preparedness, IHSS, etc.), education through the lifespan (e.g. employment, independence, self-advocacy, etc.), and formal/informal community supports (e.g. ABLE Act, etc.). As self-advocates become more confident in 1) developing and presenting curriculum to peers and community members, 2) surveying training participants/attendees, and 3) developing and refining curriculum, it is expected that a sharp increase in the number of peer-led trainings will increase over the remaining two years of the State Plan cycle.

The Council also contracted with the Supported Life Institute (SLI: *Peer Advocacy Connection*) to produce a 41-video library collection (*College Students and Professionals with Disabilities – Sacramento Region*) of interviews with 47 self-advocates (and 1 family member) who have all successfully engaged (or provided support for a family member) in post-secondary education (PSE) and/or competitive, integrated employment (CIE). An additional anime video was produced by a sub-contractor. The completed video library was published online, marketed to 370 self-advocates (at the Supported Life Conference), and has reportedly been viewed more than 6,400 times. The associated booklet and training guide addressed common questions facing PwD who are considering post-secondary education as an option, in preparation for or in addition to active employment.

Employment

The Council invested in two separate grant-funded projects targeting employment. Hope Services (Project Search – Monterey County Extension) provided internships for PwD in a range of hospital/clinic/support settings to provide interns with real-life employment-related training and experience. *Project Search* reached 34 people and leveraged \$34,892 in funding. While employment is the sole focus of an entire goal within the State Plan, it is also a strong component of the education goal, as California's State Department(s) of Education and Rehabilitation stress the importance of CIE in transition planning and both secondary and post-secondary education for PwD.

The Council's second grantee (Easterseals Southern California [ESSC]) engaged in field testing of the Discovery Fidelity Scale for customized employment to successfully place PwD into preferred jobs. While this project supported 46 self-advocates and 7 family members, it also provided training, outreach, and capacity-building information/resources to 316 professionals and employers, engaging in a series of 8 systems change activities with 121 community-based organizations (and 193 people). Through the activities of this project, ESSC leveraged \$149,488, trained staff from provider agencies (and funders) on the customized employment process, and conducted the nation's first field test of the Discovery Fidelity Scale, a process designed to validate that PwD achieve better employment outcomes when job discovery is provided with fidelity. This project resulted in the

revision of all original tenets and the establishment of best practices in achieving positive employment outcomes for PwD. The research project findings were presented at the National Association of People Supporting Employment First Conference and are slated to be included in an upcoming article in the *Journal of Vocational Rehabilitation*.

Housing

The Council provided a grant to the Lanterman Housing Alliance (LHA) to 1) review the status of affordable housing for PwI/DD throughout California, 2) identify barriers to housing production, and 3) make recommendations for overcoming those barriers. LHA partnered with the Corporation for Supportive Housing to produce the *Statewide Strategic Framework* (SSF), which included: 1) models for the development of and/or access to affordable housing currently available throughout California; 2) innovative programs or systems created in other states to facilitate the creation and/or provision of affordable housing; 3) current sources of available funding for capital, operating, and/or rental subsidies; and, 4) examples in use with other supportive/special needs populations (e.g. homeless, veterans, etc.), which leverage available funding to create housing. This project considered those PwD who are homeless/transient, those in institutional and/or congregate settings, and those who live in family homes with aging family/caregivers. The SSF contains more than 20 recommendations (relevant at the local, regional, and/or state level) for policymakers, regulators, legislators, developers, RC staff, family and self-advocates, and others that will lead to obtaining housing (of choice) and more individual living alternatives for people with I/DD who want or need it. The SSF was also presented to the full Council and to the conference of the National Association of Councils on Developmental Disabilities. The timing of the Lanterman Housing Alliance grant is going to prove especially critical, in that the California Legislature is seeing a significant number of housing-related initiatives being proposed for the 2019 session and the Council is informed and positioned to weigh in on the needs of people with intellectual and/or developmental disabilities and ideas on meeting those needs.

Ongoing Council Activities

Regional staff has continued working on other successful projects (implemented during the current 5-year State Plan cycle) that are continuing to benefit PwD in communities throughout California. The Council is gradually becoming skilled at infusing mission-specific agencies (e.g. law enforcement, disaster relief, etc.) with subject matter expertise about PwD, as an under-

recognized and underserved population. The training and partnership of residential staff, PwD, and emergency personnel in emergency preparedness trainings has been critical in the face of wildfire and flooding disasters in virtually every area of the state. As part of these trainings, staff provides people with information and resources to prepare evacuation-ready 'go-bags' in case of emergencies. Regional staff is continuing to provide ICE (In Case of Emergency) identification cards to self-advocates and family members to assist in interactions with LE and medical (first response) personnel and has provided direct assistance, information, training and tangible supports during evacuation and emergency relief efforts in the aftermath of disasters. Council (regional and HQ) staff has engaged in ongoing provision of POST-certified disability-related training and support to first responders throughout California, continuing partnerships and sharing subject matter expertise with law enforcement, mental health, and other regulatory/enforcement agencies.

The Council has struggled to make significant inroads in other areas. While California's Self-Determination Program has been approved through the federal waiver process, its actual implementation is proving to be slow and arduous. Transportation continues to be an ongoing challenge for every community in California. Developing and implementing effective survey instruments has proven to be exceptionally difficult, given limited staffing and the sheer number of self-advocates and others who attend Council trainings and often require one-on-one support to complete paperwork. An additional challenge has been the data collection process as it involves those whose primary language is not English and who prove to be extremely reticent to disclose (what is perceived to be) personal identifying information (e.g. ethnicity, area of residence, etc.) to a 'governmental entity,' – especially considering recent political efforts that don't necessarily support those without official residential or immigration status. With these successes and challenges, the Council will continue the work of its 6 goals and 14 objectives (without significant changes) through the duration of the 5-year State Plan period.

Cultural Diversity : Describe the Council's overall efforts to address the needs of individuals with developmental disabilities and their families of a diverse culture through its state plan supported activities

The Council's cultural diversity efforts were implemented throughout the activities of the state plan and included the work of the Council's federal partners, the Department of Developmental Services, and local and other state-level agencies. Training was provided in languages other than English, as were handout materials. Conferences and events also included sign language, non-English translations and interpreted materials. The Council provides resource materials in other languages than English on its website and will translate materials, as requested, for specific purposes, resources and/or events. The Council's objective to collaboratively address Purchase of Service disparities within the 21 regional centers in California, in conjunction with the federal partners, has now been legislatively mirrored and will become an ongoing collaborative effort encompassing additional state and local partners.

Regional Council staff also report regularly on emerging local and state trends and issues, based on observation and regular interactions within local communities. Of some rising concern has been a federal and state policy shift in providing/funding low-cost housing to those with low to very low income who are elders or homeless and, specifically, veterans. This trend has left people with I/DD somehow underrepresented on the housing front, as they are particularly vulnerable to joint factors of low income, inaccessible or unsafe housing, high housing costs, and a subsequent risk for homelessness.

Throughout California's regional centers, there continue to be ongoing disparities in the purchase of services (in both Early Start and adult supports and services) for people with I/DD and their families "from communities of color (e.g. Latinos, African Americans and Asian)" (DDS, September 2017). Additional concerns include the not-yet-fully-implemented Self-Determination Program, as California has received final approval of the 1915 (c) HCBS Waiver application, which allows self-advocates and families to make more independent choices about desired supports and services.

B. Evaluation of State Plan Implementation

B1. Evaluation Activities

Evaluation Activities

The Council engaged in a mixed method (qualitative and quantitative) evaluative model for its work and collected and reported information about its activities in a variety of ways, maintaining transparency in the state plan implementation process. Staff documented and reported all work plan activities, events, trainings, etc. on a monthly basis. The narrative summaries of all activities were provided to all Council members and the public on a bi-monthly basis, so that regional work could be qualitatively assessed by the Council, its committee members, and the communities served throughout the state. Administrative staff produced reports to track the Council's quantitative progress toward meeting the overall targeted work, specific activities, grant-funded projects, and the number of people served, in this process.

While Council staff initially developed pre/post-test and satisfaction instruments that would reflect both the quality of and satisfaction with the completed activities, these did not, in fact, fully or accurately capture the type of data needed to report beneath the new federal performance measures. In order to accomplish the intended purpose, the Council's survey instruments have (again) been redesigned for FFY 2019 (as of August 2018).

Demographic data collection efforts were also met with significant resistance, as family/self-advocates and community members consistently reported that they do not feel comfortable (in the country's ongoing political climate) with disclosing any personal or demographic information. As a result, attendees typically refused to sign attendance sheets and/or fill out pre/post-tests and satisfaction survey (data collection) instruments.

Although the Council's grant-funded entities are all required to provide quarterly reports (identifying progress on the work associated with individual projects), their 2018 year-end reports were based more specifically on federal performance measures (unlike those of the Council's regional staff) and yielded more valuable data (specific to FPMs). Council staff was unable to do the same, given virtually thousands of smaller projects completed throughout the course of the year and prior to fully revising the evaluation and reporting process. Once revised, FPM-relevant survey instruments were used (by Council staff) in the last 2

months of the FFY, although the data yield is insufficiently reflective of the balance of the year's work. These instruments are expected, however, to bring in valuable data for FFY 2019 and the Council will continue to refine the process of long-range data collection for outcomes associated with events outside of discrete trainings (e.g. resource fairs, conferences, etc.).

B2. Evaluation Results

Evaluation Results

While the Council collected and reported quantitative data about all activities, qualitative feedback about Council efforts was limited to verbal feedback from participants and through a limited variety of survey instruments, which failed to track actual FPM data (outside of IA 1.1 and 1.2 and SC 1.4 and 1.5). Family/self-advocates and professionals tend to consistently provide positive feedback, both during and following activities. Narrative pre/post-test and survey information (in varied formats) was uniformly positive, in response to specific training, projects, events and activities. Large event feedback (e.g. conferences, fairs, and other outreach events) tends to be anecdotal (and given by few participants), due to the nature of having so many people engaged in diverse activities. Because so much of the Council's regional and 'large event' work is collaborative, in nature, staff receives feedback from its collaborative partners in real time, adjusting outreach and engagement activities, curriculum and material distribution accordingly. This was especially true of law enforcement-related trainings, the evaluations for which were designed, implemented and collected by individual agencies. Law enforcement agencies and personnel are all highly expressive and immediately abandon instructors and/or programs that are not effective or well-received. The Council's success in that environment has been particularly notable, as a result.

Staff reported that collecting satisfaction information (either in-person or over the phone/email) after events was especially cumbersome and impractical, as staff is heavily engaged in activities throughout the month. Event-based survey instruments also meet with some hesitancy, reluctance, and/or outright opposition on the part of attendees, who are focused on the event (e.g.

training, etc.) and have limited time and attention to spare for activities that do not directly benefit and/or inform them. Ongoing mistrust associated with self-identification information has also prompted family/self-advocates to avoid completing any demographic or satisfaction surveys.

The Council's 'head count' (IFA 1.1 and 1.2 and SC 1.4 and 1.5) numbers are currently reflective of the actual number of events and attendees. Some system change (SC) FPMs were also collected, but – by and large – little to no data was collected for FPMs associated with IFA-related outcomes/sub-outcomes. Surveys taken at the actual time of an activity yielded 'intended' outcomes, as desired and anticipated and expressed by participants, but did not necessarily reflect 'actual' outcomes, based on implementation. The Council is still/again in the process of rolling out new survey instruments that are more closely aligned with the federal performance measures and conforming to activities as they relate to individual/family advocacy and/or systemic change efforts (or both). The Council's new survey instrument and data collection process are now designed to capture system change implementation results, in the aftermath of Council activities. Staff reports that such intensive data collection efforts reduce the time available for engaging in the actual work of the Council (e.g. training, resource fairs, conferences, collaborative meetings, etc.) and that event participants are often unwilling to spend the time necessary to fill out survey instruments, aside from the resistance to providing demographic data. The Council will continue to refine the process to meet both workload expectations and the community's needs.

B3. Lessons Learned and Future work of the Council

Lessons learned and future work of the Council

The Council has changed the way that it designs and/or provides training for family/self-advocates, professionals (others), and peer trainers. In order to deepen subject matter knowledge, regional staff are providing ongoing series of trainings, building on previous training to sharpen skills, broaden knowledge, and allow for additional opportunities for participants to ask questions (based on experience) and solicit TA from Council staff. This is also a tactic the Council is using to educate peer trainers who provide community-based training.

The work of the Council involves forward motion, while the data collection/evaluative process requires 'looking back.' Evaluation efforts have informed administrative and line staff regarding the data collection process, although it has been an extended process. Regarding the state plan itself, there has been no significant need for revision, based on feedback from the first two years' implementation efforts. Based on feedback from participants and/or collaborative partners, however, the Council does revise curriculum and is still revising survey instruments to more accurately align with the federal performance measures. Additionally, based on needs identified by regional staff, changes will be made to projected numbers within the work plan. Finally, it was determined that the work and reporting of policy-related objectives was best captured through only 1 objective, rather than several. Therefore, the Council has decided to combine all of its policy work within Objective 6.4 (Formal/Informal Community Supports), while maintaining all of the areas of emphasis, thereby deleting 4 objectives (Obj. 2.2, 3.3, 4.3 and 5.4).

Council staff worked with self-advocates in preparing for and presenting peer-led trainings, although pre/post-surveys were not an integral part of identifying satisfaction or (if necessary) adjusting curriculum. Peers who led trainings without the benefit of staff assistance reported that it was especially difficult to administer pre/post-tests and surveys without one-on-one facilitation or assistance with paperwork, following presentations. Peer trainers will now attempt to use (revised) evaluation tools and, when available, staff will assist with this process. Likewise, the in-house and Council project evaluation process is (again) being revised, to bring sub-grantees into using evaluative models that are more consistent with the Council and its regional office revised data collection and reporting instruments.

The process of collecting demographic data from activity participants has continued to be the most challenging component of the Council's evaluation/data collection efforts. Family/self-advocates have become strong proponents of and practitioners in carefully protecting hard-won civil rights and sheltering personal identifying and/or health information. In fact, the ongoing political climate has triggered strong concerns about revealing personal information, which often includes ethnic/cultural identities, to any 'governmental entity.' The Council has worked hard, over a period of many years, to overcome distrust by people in underserved populations, many of whom (with their families) have suffered prejudice, injustice, limited opportunities and deprivation because of their countries/cultures of origin, sexual preferences/identities, limited proficiency in the use of English, (dis)abilities, and other characteristics that may identify differences that create a sense of 'being different' and, therefore, subject to deportation, service refusal, or social rejection. Regional staff reported back very quickly that, once they were directed to begin collecting demographic information, activity participants were extremely reluctant – or refused outright – to publicly expose their diversity, regardless of assurances that such information would be used to better provide or enhance services, rather than deny those services. The Council is finding that now, once again, it is in a position of having to prove its trustworthiness as a strong advocate for people with I/DD and/or cross-disabilities, regardless of their diverse backgrounds and needs.

C. Input on National Priorities

Input on National Priorities

Input on National Priorities

There is a tremendous need to update the national prevalence rate for people with I/DD, specifically, as an under-identified and/or served population that relies on both targeted and generic state and federal services/funding. The current prevalence rate largely does not factor in the increase in ASD diagnoses.

There is incredible tension within the system between moving the nation into Olmstead's expectations of community integration and affordable housing. The lack of affordable housing is leading to people falling back into more restrictive settings. States could be allowed to afford rent subsidies through their service systems rather than only being obligated to fund "institutional" level of care, which included more restrictive licensed facilities.

Emerging State Issues

Insufficient (disability-specific) services available

Families have reported that they believe that staff within the special education and regional center systems have an ongoing record of lying, being intentionally misleading, and/or ignoring family/self-advocates.

Parents are reporting that RCs and school districts have become 'siloed' systems. School personnel have reportedly 'soft-pedalled' standardized assessment and classroom reports so that parents are: 1) not made fully aware of a child's full range or combination of deficits; and 2) left simply 'hoping for the best' for a child's developmental progress and outcomes. Staff may 'label' students as having only a learning disability, rather than an intellectual/developmental disability. Schools/districts/SELPA's have also neglected to inform parents about cross-eligibility opportunities with the regional center system, leaving students without valuable RC services post-graduation. This lack of informed understanding leaves parents of young adults in an untenable position: Having been led to believe that their children are within low to normal ranges of performance, they are then hard-pressed to convince themselves, their children, and/or the regional center system that those same children now need RC services once school ends, even if they have received only a 'certificate of attendance' rather than a full diploma (if they have stayed in school and not dropped out in frustration over failing grades, bullying and poor self-esteem). Once these young adults reach the age of majority (at 18), they are highly unlikely to risk further humiliation by having to admit to a cognitive or developmental disability to receive RC services and/or SSI benefits (due to global delays), nor are they likely to grant parents the permission to do so on their behalf.

The above described dynamic is one specific aspect of a general “falling off” individuals and families experience as they transition out of the educational system. Moving among schools, regional centers, and rehab often means being bounced back and forth, often resulting in not receiving services.

Insufficient (generic/public) services available

A series of wildfires and subsequent mudslides have displaced tens of thousands of Californians in both Northern and Southern California. People with disabilities reported that they were unable to comply with mandatory evacuations, as there were no accessible transportation options available and ILS workers were unresponsive/unavailable. Many people with disabilities arrived at evacuation shelters without medications and/or modified equipment. Although shelter/public safety personnel attempt to obtain original or replacement medications, it can take 24-48 hours to do so. Despite these barriers, thankfully only a few individuals who are regional center clients lost their lives as a direct result of the fires.

Self-advocates have reported physical/service accessibility barriers (e.g. hotel accommodations without Hoyer lifts, etc.) when attending out-of-town meetings, and who report that - once they are dropped off at meeting/hotel locations, they are sometimes isolated from local or preferred restaurant locations without having to incur additional 2-way transportation costs. Ironically, people who use Paratransit services, rather than generic transportation systems, report that drivers frequently display a callous disregard for PwD and can be rude, dismissive and/or arrogant, inconsistent in delivering riders to appointments in a timely manner (despite scheduling buffers to accommodate for unexpected transportation issues/delays), and will simply leave if a rider is slow in exiting a building, foregoing any standard 5-minute ‘grace period.’ Conversely, riders are expected to endure substandard service, poorly maintained equipment (e.g. non-existent or substandard heating/air-conditioning during extreme weather, broken tie-downs, etc.), long (sometimes 1.5-hour or longer bus) rides, and drivers who ‘handle’ riders like excess, unwanted baggage. Additionally, Paratransit services do not cross county-lines, leaving riders travelling across multiple counties waiting at the county line for a ride.

California's mental health system, by and large, ignores people (in crisis) with combined mental illness and I/DD (with or without substance abuse issues), relegating them solely to the RC system for any (emergent) services and supports. While patients with I/DD can and do receive ongoing psychiatric care (through Medicare/Medicaid/Medi-Cal coverage), there are few to no emergency resources available for those who become abruptly or critically unstable, fully psychotic, and/or violent. Because the RC system is not considered an 'emergency response' system, parents (many of them aging and/or otherwise incapable of 'handling' someone who is in a full psychiatric emergency), residential/day service providers and law enforcement are expected to somehow 'subdue' and 'manage' people with multiple diagnoses, rather than rely on acute emergency care through traditional mental health resources. Ironically, smaller, 'boutique' mental health providers/agencies – uniquely trained, experienced, and designed to serve people with dual diagnoses – are typically unable to qualify for MHSA RFPs and other grant opportunities, due to operational size and/or smaller working budgets.

Other public and private options are becoming more inaccessible to PwD and/or their families. Dental providers are more often refusing to accept Medi-Cal payments/reimbursements, leaving people with no local options. Affordable housing options, credits, tax breaks and other incentives are now being provided and/or subsidized for people who are homeless, veterans, elderly, and/or mentally ill, with little to no consideration given to people with I/DD, in regard to set-asides, incentives and/or supports. Finally, family members – who are, in increasing numbers, providing direct support and housing for people with I/DD – are finding it more difficult to obtain health care, IHSS, rental assistance and other forms of public assistance. These deteriorating family support systems are further destabilizing the health and safety of people with I/DD, putting them at even greater vulnerability and risk of homelessness. While self-advocates may be involved with peer-related support and advocacy groups, very few report that they are actively aware of or involved with panels, committees, boards or other governance bodies that may provide for – or ignore – those issues affecting people with I/DD and/or their families, leaving advocacy efforts to others who may or may not have the necessary time and investment necessary for systemic change activities on behalf of people with I/DD and their families.

I/DD Systems of Service/Support

As RCs are working to implement the Employment First policy, some program loopholes are surfacing. One RC has instituted a vendor numbering system for those agencies providing CIE opportunities, a system that confuses family/self-advocates, who would like to supplement CIE with supported employment but have been denied. Regional staff reported that a 'former' subminimum wage/sheltered workshop provider has developed a work-around, in regard to minimum wage requirements: It simply converted all workshop clients to become minimum wage employees for 1 hour each week, while continuing to operate as a standard day program for the remainder of that day and the rest of the week. This effectively allowed the program operator to decertify as a subminimum wage employer and completely bypass the Employment First/WIOA requirements (of job placement trial/counseling/etc.) *without* the required approval of a subminimum wage employment program option. Clients are now directly placed into a program for 1 hour/week *without* receiving the benefits of DOR job placement/training/counseling. While vendors complain that they are unable to remain in business, due to low rates, some family advocates are opposing across-the-board increases without programs being held to specific and measurable outcomes.

A broad coalition of Latino family advocates are banding together across the state to demand better services. The disparities in services have become too severe and families are organizing in response to what they describe as intimidation for speaking out "Don't come to this meeting again" and retaliation for speaking up "My services were cut off," "I never got an answer when I needed something."

Section IV: State Plan Implementation Progress Report

Detailed Progress Report on Goals

Description

Self-Advocacy

Area Of Emphasis

Area of Emphasis	Planned for this goal	Areas addressed
Quality Assurance	true	true
Education and Early Intervention		true
Child Care		true
Health		true
Employment		true
Housing		true
Transportation		true

Area of Emphasis	Planned for this goal	Areas addressed
Recreation		true
Formal and Informal Community Supports	true	true

Strategies

Strategies	Planned for this goal	Strategies Used
Outreach	true	true
Training	true	true
Technical Assistance	true	true
Supporting and Educating Communities	true	true
Interagency Collaboration and Coordination	true	true
Coordination with Related Councils, Committees and Programs	true	true
Barrier Elimination	true	true
Systems Design and Redesign	true	true
Coalition Development and Citizen Participation	true	true
Informing Policymakers	true	true

Strategies	Planned for this goal	Strategies Used
Demonstration of New Approaches to Services and Support		
Other Activities		

3. Intermediaries/Collaborators

Collaborators	Planned for this goal	Actual
State Protection and Advocacy System	true	true
University Center(s)	true	true
State DD agency	true	true
Office of Client Rights Advocacy (OCRA)	true	true
Statewide/Regional Self-Determination Advisory Committee(s) [(S)SDAC]	true	true
Statewide Self-Advocacy Network (SSAN)	true	true
SCDD Self-Advocacy Advisory Committee (SAAC)	true	true
People First of California & other self-advocacy groups	true	true
Regional Centers	true	true

Collaborators	Planned for this goal	Actual
CRA/VAS	true	true
Independent Living Centers	true	true
Local Behavioral/Mental Health providers/ agencies	true	true

Provide an overall cohesive description of (a) the extent to which progress is being made in achieving the intended outcomes of the Goal for the reporting year, (b) the extent to which each goal was or was not achieved for the reporting year, (c) where applicable, factors that impeded goal achievement for the reporting year, (c) needs that require substantive state plan amendment (goal only)

The Council is heavily invested in capacity-building efforts on behalf of both family and self-advocates, putting together empowerment activities in every area of emphasis (apart from child care). Not only did Council staff engage in system change efforts, but it also provided facilitation and tangible supports for family/self-advocates who desired training, information, and leadership and self-governance opportunities, with an emphasis on the rights of individuals and their families.

With nearly 156,000 square miles, 58 counties and a population of more than 39 million (which roughly translates into 250 people per square mile), California's State Council on Developmental Disabilities faces significant challenges in face-to-face outreach efforts, a process that requires creativity and a heavy reliance on social media to extend its overall reach. Using a combination of events, trainings, handouts, website postings (and other forms of social media), the Council reached more than 340,000 people with self-advocacy-related information, training and updates on current events affecting families and people with I/DD and/or cross-disabilities. This has been especially effective in soliciting input and personal stories from people in relation to policymaking efforts.

The Council (through Goal 1) targeted statewide self-advocacy networks and organizations, using conferences (e.g. hosting, marketing, etc.) as large-scale outreach vehicles for disseminating information, training and materials. In facilitating, hosting and/or convening 463 family/self-advocate meetings, the Council and its regional staff provided support and information to more than 7,735 people. Partnering with community collaborators in such events/efforts leveraged a total of \$14,501.

Throughout the federal fiscal year, the Council provided information, outreach and technical assistance at the local, regional and state levels, informing policymakers of the needs, efforts and strengths of family and/or self-advocates throughout the state. Providing family/self-advocates with up-to-date information and material has been a central focus of the Council, which developed, updated, posted and/or distributed information and materials about self-advocacy (in 389 electronic distributions) to more than 319,430 people through the work of this goal. The Council developed, translated (plain language and Spanish) and distributed handouts about Person-Centered Planning (PCP) and the Self-Determination Program (SDP).

Peer training, specifically, exposed some challenges, as self-advocate/peer trainers learned how to develop and present curriculum/material, addressed logistics associated with marketing, scheduling and training activities, and (much like staff) experienced the challenges of collecting demographic information and administering pre/post-testing and/or satisfaction surveys to family/self-advocates. To increase accessibility, the Council focused on providing training and resource information in languages other than English. Peer trainers provided 17 trainings, reaching 431 people.

A total of 4,664 people took part in 150 (curriculum-based) trainings, 25 of which were in Spanish, reaching 1,163 people. Regional staff provided 13 Boardmanship trainings, promoting inclusion of family/self-advocates on community-based boards and reaching 3,889 people. Council staff worked with more than 400 collaborative partners (including all of its federal partners) in coalition-building efforts throughout the state.

The Council's work in promoting California's Self-Determination Program (SDP, which is a major barrier elimination and systems design/redesigning effort) included significant participation in regional and state-level advisory committees and the provision of facilitation, training and other tangible supports to self-advocates, to enhance their own participation efforts. The Council also promotes and maintains both the Statewide Self-Advocacy Network (SSAN) and the Self-Advocacy Advisory Committee (SAAC), which entails tangible support for self-advocate members, boardmanship training, and other types of facilitation.

The Council issued a grant to the Supported Life Peer Advocacy Connection (Students & Professionals with Disabilities), a project that was derailed in its target year, due to staff turnover, and was extended by another year. This project produced a set of videotaped interviews with self-advocates, all of whom successfully navigated college and/or obtained CIE. The video library and booklet, which will continue to be available and promoted on the Supported Life Institute's website, provides information about college and employment options, best practices for supporting individuals with I/DD in both college and employment, and resources and strategies to support success. Breaking Out of the Disability Box, a self-advocacy group, created an additional anime video and the Yolo County SELPA CAC field-tested materials. UC Davis MIND Institute (UCEDD) also assisted in publicizing the project by highlighting videos and the booklets at *Think Transition* meetings. Supported Life reported reaching 3,000 people (IA 1.1 & 1.2; SC 1.5) and supporting 2 best practices (SC 1.3.4) with this project.

Although the Council is successfully meeting its objectives with its self-advocacy goal, the empowerment of family/self-advocates is a core value of SCDD, making this goal an ongoing and continuing effort. As with every goal area during this FFY cycle, data collection toward documentation of the federal performance measures was not accomplished (outside of the sub-grantee projects), which has hindered the effective measurement of goal and objective accomplishment (outside of information collected through anecdotes and staff observation).

4 Year Overview : A description of how the Council will use and build from knowledge gained and progress made to move forward in the next state plan cycle.(This section only applies to the PPR submitted for the Federal Fiscal Year 2020, which will be due by January 1, 2021)

5 Year Overview : For the final PPR of this state plan cycle, provide an overall analysis of the outcomes achieved during the five year state plan cycle. The description should include the extent to which diverse stakeholders are satisfied with council activities that promote self-determination and community participation for individuals with disabilities and families, results of other types of information gathering such as focus groups, surveys, or other feedback or input methods with individuals with developmental disabilities and families and major accomplishments and factors impeding goal achievement (if applicable).(This section only applies to the PPR submitted for the Federal Fiscal Year 2021, which will be due by January 1, 2022)

Objectives

1. 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.

1. **Goal:** Self-Advocacy

2. **State Plan Objective** Objective 2

3. **This Objective is**

Capacity Building

4. **This Objective is**

Ongoing

5. This Objective is

	The Objective is
a. Fulfilling a Self-Advocacy DD Requirement *	Yes
b. Targeted disparity *	No
c. DD Network Collaboration *	No
d. A demonstration project of New Approaches to Services and Supports *	No
e. A demonstration of projects or activities *	No

6. Stage of Implementation

Implementation

7. Provide an overall description of this effort

California is deeply committed to empowering people with I/DD and/or cross-disabilities in becoming self-governing and strong self-advocates. Due to the Council's extensive and ongoing work in this area, the community's expressed need for self-advocacy support services ranked sixth (6th) in importance through the State Plan development survey. Self-advocacy remains in the Council's first area of priority, however, as Objective 1.2 focuses on supporting self-advocacy networks and entities. Additionally, the work of this objective supports self-advocates in bringing information administrative and financial backing is critical to establishing a strong foundational base which self-advocates can learn and practice the principles of governance and share their skills with other self-advocates within their regional communities.

8. Outputs Achieved

Expected Outputs	Achieved
Travel/lodging/meeting arrangements for SSAN/SAAC members for 12 scheduled meetings; facilitation, as needed/requested by members for each meeting	true
Schedule/convene 12 meetings; 1 list of ideas re: training needs; 12 regional lists of interested SA trainers	true
1 T4T curriculum	true
12 T4T trainings (reaching 200 SAs); 1 list of trained/qualified SA trainers; 24 meetings (throughout the Council's 12 regions) with SA groups & collaborators; 12 peer-led trainings, reaching 150 SA	true
12 meetings with 250 SA	true

Expected Outputs	Achieved
1 list, combining regional policy boards, councils &/or advisory committees on which FA/SA may seek service opportunities; 1 updated boardsmanship curriculum; 6 boardsmanship trainings to 60 FA/SA	true

10. The report should include the following: (a) A narrative progress report that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenges to achieving the objective and unexpected benefits.(b) For system change activities, include a description of the stage of implementation (planning, initiation, implementation, outcome/fully integrated) of the system change initiative. (c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report).

While promoting self-advocates in leadership and training roles, the Council engaged in providing tangible support (e.g. travel, lodging, meeting arrangements, facilitation, etc.) on 94 occasions for more than 910 self-advocates in SCDD-related groups, as well as meeting with other self-advocates and/or organizations. The Council convened and/or facilitated on 41 occasions, serving 440 SSAN members during (in-person or telephone) meetings. Through its work with SAAC, the Council convened 6 meetings, serving more than 91 self-advocates and providing tangible support on 16 occasions, serving 216 people. During work associated with this objective, the Council educated more than 3,880 people through trainings, engaged in 140 meetings with self-advocate groups (reaching 1,923 people), and other outreach efforts. The Council reached and educated 185,712 people by electronic means and provided family/self-advocates and others with resources, information and material during all outreach events and trainings. Improvements in reporting are expected to provide better data in 2019.

Regional staff submits comprehensive (internal) monthly activity reports, which are compiled, reported, and compared against the projected figures within the Council's yearly work plan. The Council is kept apprised of staff work and the accomplishments of grantees throughout the course of the year and presented with end-of-year findings prior to inclusion into and final submission of the yearly PPR. The collection of demographic data through satisfaction surveys proved problematic, as those attending Council functions have been unwilling to disclose personal information that they feared would impact their standing with 'authorities' or those in charge of withholding public entitlements and/or determining eligibility for supports/services. Internal reporting protocols for FFY 2019 have changed, which are expected to streamline and correct these reporting challenges. As part of this effort, the Council is working with its self-advocates to document and report their work and accomplishments, as a result of Council support and training, which continues to be a work in progress.

The Self-Advocacy Advisory Committee (SAAC), which is populated solely by self-advocates, has the stated mission to "be the Voice for all Californians with disabilities by promoting State Council participation and peer advocacy that advances independence and inclusion." Members of the SAAC are voting Councilmembers and meet prior to Council meetings to review the agenda for the upcoming Council meeting, discuss and clarify topics, ask questions, and give feedback to various agencies that are formulating policies that impact people with I/DD. Over the past year, staff provided facilitation support to SAAC members 16 times, working with 216 people, in the process. Facilitation occurred during meetings, peer-led trainings, phone calls, planning sessions, curriculum/training development, and sessions of the full Council.

As a cross-disability group, SSAN is one of the Council's primary projects to strengthen connections between self-advocates throughout the state. Formed by the Council to foster leadership in self-advocacy, the SSAN membership typically includes twenty-one (21) self-advocates throughout the state, representing all 12 of the Council's regions. Self-advocates who work at member agencies and organizations also hold seats, including one (1) member from each of the following: the Association of Regional Center Agencies (ARCA), California Foundation of Independent Living Centers (CFILC), Department of Developmental Services (DDS), Disability Rights California (DRC), and the University Centers on Excellence in Developmental Disabilities (UCEDDs) through the UC Davis MIND Institute, UCLA Tarjan Center, and USC Children's Hospital Los Angeles. While the SSAN began as a Council project, the goal for the group is ultimately to become independent and self-sufficient. The stated goal of SSAN is to "train SSAN members to become skilled

advocates and empower them to share their knowledge and skills in their communities.” The group has voted to focus its activities on training members about content and speaking skills, to help develop presenters with the skills and preparation to train self-advocates and others in the community.

Regional staff provides support to members of their Regional Advisory Committees (RACs) for such matters as meetings with local representatives of the Legislature, RC directors, and other community leaders. Staff also assists with arrangements for transportation, meeting materials and preparations, presentations, trainings, reports, etc. One of the most important roles for staff has been the assistance provided to RAC members as they apply for other leadership positions, either with SCDD and/or other organizations within the community and state, and prepare outreach materials (e.g. training curricula, newsletters, etc.).

People First is a self-advocacy organization run by and for people with developmental disabilities, maintaining 13 chapters in regions of the state. Each People First region may have several chapters, and any self-advocate can start a chapter by using information from the People First website. Regional Council staff often facilitates People First meetings. Council staff typically supports self-advocates during meetings by providing information, assisting with negotiations for People First events, and/or photocopying materials for meeting and outreach.

Council staff engaged in 140 collaborative meetings with 1,923 people. In 18 meetings with 382 people, SCDD put together a list of training needs and a list of interested and/or qualified (e.g. trained, available, etc.) self-advocate trainers. The Council facilitated 14 peer-to-peer/peer-to-community trainings, reaching more than 330 people.

As part of its training strategy, the Council and its regional staff worked to put together lists of interested and/or qualified self-advocate trainers, for the purpose of encouraging peer-led trainings. Council staff participated in 14 meetings with 88 people to develop curriculum, which enabled RAC, SAAC, and SSAN members to provide trainings and presentations about becoming active in board membership, public entitlement programs, employment, self-determination, peer and self-advocacy, emergency/disaster preparation, hiring attendants/facilitators, sexual violence/victimization, etc.

Council staff was instrumental in training community members and family and self-advocates about family/self-advocacy issues related to self-advocacy, including voting, bullying, HCBS, planning/funding/holding large events, emergency preparedness, post-secondary educational options, end-of-life preparations/planning, 'telling a family story' (for addressing/educating policymakers), alternatives to conservatorship, engaging in conflict resolution, enhancing personal communication skills, etc.

In Los Angeles County, staff identified a strong need in Hispanic/Spanish-speaking families for community and family/self-advocacy skills, collaborating with Fiesta Educativa to put together a culturally appropriate 4-session advocacy training program in Spanish. Staff also addressed self-advocacy with young adults through Fiesta Educativa. In the San Diego, Riverside and Imperial County region, staff integrated a session on end-of-life information and planning into a health and wellness training program. In preparation for a Supported Life Conference session, staff worked with a self-advocate who was presenting to peers and others on employment, independent living and community access.

As part of the effort to keep policymakers and collaborative partners informed about self-advocacy, the Council is building a statewide database to identify and maintain contact with self-advocacy groups. Additionally, Council staff and members issue newsletters and guest articles about events, successes and/or needs within with community of PwD, providing keynote addresses and filling other public information requests whenever possible.

Collaborative partnership activities include meetings with the Silence = Violence Coalition, People First groups throughout the state, family resource centers, consumer and parent advisory committees, Child Abuse Prevention Councils, Independent Living Centers, and both governmental and non-governmental agencies providing supports, services and policy work on behalf of PwD (e.g. conferences, training, direct services/supports, etc.).

In addition to community and peer-led training, the Council planned and participated in, hosted, provided self-advocates with sponsorships for and marketed statewide and regional self-advocacy conferences, including:

1. 9th Annual Self-Advocacy Conference (Fresno County)
2. California's People 1st Gathering (Sacramento County)

3. Carlos Quintong Celebration of Self-Advocacy event and awards ceremony (Alameda County)
4. CHOICES Conference: *It's All About ME!* (San Joaquin County)
5. Summer Games Special Olympics (Humboldt County)

Council staff provided both facilitation and technical assistance specific to self-advocacy issues in nearly 130 separately reported requests, meeting needs of 212 people. In addition to scheduling, advertising, and/or hosting SDAC, SSDAC, SAAC and/or SSAN meetings, regional and HQ staff are called upon to provide logistical and facilitative support prior to and during meetings.

SCDD has continued to make tremendous strides in supporting self-advocates as they engage in increasing levels of self-governance and independence with their self-advocacy groups. In the course of these activities, the Council leveraged \$3,176 in funding. The goal of this work is to create self-sustaining advocates who can use their power in addressing civil rights and service policies that affect their lives and futures and those of others with disabilities.

12. Expected Outcomes Achieved

Expected Outcomes	Achieved
The Council will promote self-advocates in leadership roles in statewide networks through the strengthening of a statewide self-advocacy organization and by supporting self-advocates	true
The Council and its collaborators will identify regional SA training needs to assist SA to plan & hold trainings	true
SA trainers will have T4T curriculum & satisfaction surveys available	true

Expected Outcomes	Achieved
<p>With Council assistance & training, self-advocates will be engaged in training peers to become leaders; SA will have the knowledge to become peer trainers; SA will have the training/knowledge to develop training/leadership/self-advocacy skills; self-advocates will have the knowledge to become leaders</p>	<p>true</p>
<p>SA will be skilled and confident in sharing their stories with policymakers, to engage more fully in policy and legislative change efforts</p>	<p>true</p>
<p>FA/SA will have training & information on boardsmanship and regional/statewide leadership opportunities</p>	<p>true</p>

13. Progress towards achieving outcomes for overall objective : The annual report should include an assessment as to the extent to which progress was made on the intended outcomes for the objective.

Although the Council met or exceeded all projected activities and outreach/training numbers for this objective, it also recognizes that the work of promoting self-advocacy is an ongoing, integral component in the network of supports and services necessary to ensure that people with I/DD and/or cross-disabilities have a voice in the decisions that affect their lives in their self-advocacy efforts and activities throughout the course of its 5-year State Plan.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community). Stories of policy or legislative changes that happened as a result of Council individual advocacy work that are likely to positively impact the lives of people with developmental disabilities or that will prevent a potential negative impact (e.g., created deleted, refined programs and/or legislation, reallocated use of funds, organizational systems change as a result of evidence based practices).

N/A

2. 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.

1. Goal: Self-Advocacy

2. State Plan Objective Objective 1

3. This Objective is

Capacity Building

4. This Objective is

Ongoing

5. This Objective is

	The Objective is
a. Fulfilling a Self-Advocacy DD Requirement *	Yes
b. Targeted disparity *	No
c. DD Network Collaboration *	No
d. A demonstration project of New Approaches to Services and Supports *	No

	<p align="center">The Objective is</p>
<p>e. A demonstration of projects or activities *</p>	<p align="center">Yes</p> <p align="center">Project Name*</p> <p align="center">1) Students & Professionals with Disabilities (Peer Advocacy Connection – Supported Life Institute); 10/16</p> <p align="center">Original Start Date*</p> <p align="center">10-01-16</p>

6. Stage of Implementation

Implementation

7. Provide an overall description of this effort

The focus of Objective 1.1 is to provide collaboration, support, information, outreach, and training to Californians with I/DD and/or cross-disabilities and their families that will promote self-determination, person-centered planning and self-advocacy efforts throughout the state. As an advocacy, systems change and capacity building entity, the California State Council on Developmental Disabilities has been in the forefront of the movement toward making self-determination and person-centered planning the standard for the provision of supports and services for people with I/DD. This objective, in alignment with State Plan (development) survey results, formalizes the independent work of the Council in monitoring the planning and implementation of the statewide Self-Determination Program and preparing and bringing information and support to family/self-advocates. The Council has also been given statutory authority to engage in the work of this objective and provide statewide information-gathering/sharing activities with families and self-advocates with I/DD, in response to federal approval of the CMS HCBS Waiver.

8. Outputs Achieved

Expected Outputs	Achieved
Distribute plain language material to 1,000 people, statewide; translate into other languages, as necessary, & distribute; distribute Spanish material to 500 people	true
10 PCP & 10 SDP trainings will be provided, reaching at least 1,000 people; 8 Spanish trainings will be provided, reaching 100 people	true
2x/year, provide support for the statewide SDAC, which will meet to monitor implementation of the SDP; support 10 local SDACs	true

10. The report should include the following: (a) A narrative progress report that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenges to achieving the objective and unexpected benefits.(b) For system change activities, include a description of the stage of implementation (planning, initiation, implementation, outcome/fully integrated) of the system change initiative. (c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report).

The total work of this objective, which reached nearly 143,220 people, focused on training and providing information about the SDP and PCP, with activities to support each person's desires and strengths when creating annual Individual Program Plans (IPPs) and/or Individual Education Plans (IEPs). Regional staff reported that SCDD leveraged more than \$11,325 from other sources for activities related to this objective.

The PCP process is a critical component of both the educational system and the community-based network of adult supports and services for persons with I/DD. In addition, PCP is the core element of the SDP.

The Council's regional offices engaged in a massive effort to educate people in the community of people with I/DD about self-determination, while assisting regional centers to prepare SD programs and the sign-up process for program initiation. Council staff facilitated the registration process for the DDS's official train-the-trainer SD courses, as the program is beginning implementation, following approval of the HCBS Waiver.

In 2013, state Senate Bill 468 (Welfare and Institutions Code §4685.8) created California's Self-Determination Program, operated through the regional center (RC) system for all RC clients. The program, as designed, will give people with disabilities more control and freedom to choose inclusive, community-based activities, services and providers, rather than those available through RC vendors alone.

The Council now has the statutory authority to appoint members and support local SDAC meetings and to coordinate and convene the Statewide Self-Determination Advisory Committee (SSDAC), comprised of the chairs (or their designees) of all 21 local self-determination advisory committees (SDACs). In the 2017-18 federal fiscal year, the Council worked with 1,604 people through local and statewide SDAC committee meetings. In collaboration with its federal partners (all 3 UCEDDs and Disability Rights California, the state's protection and advocacy agency), the Council synthesized information received from the Statewide Self-Determination Advisory Committee, local advisory committees, and other sources, and shared information with consumers, families, regional centers, and DDS, making recommendations, as appropriate, to increase the program's effectiveness in furthering the principles of self-determination.

During FFY 2018, the Council hosted 3 statewide SDAC meetings, provided staff support for all of the 21 local SDACs in 107 local meetings, and educated more than 3,660 people about self-determination and person-centered planning. At present, DDS is engaging in initial stages of the SDP implementation throughout California. Through the work of its state plan, the Council has kept people informed about SDP and PCP by electronically sending information more than 150 times, reaching more than 137,000 people.

Statewide, the Council provided 65 SDP trainings in English, teaching more than 1,600 people about the principles of self-determination and the SDP. An additional 13 SDP trainings were provided in Spanish to over 430 attendees. The Council updated, produced and/or distributed 3 SD-related handouts, provided to more than 5,800 people in (plain language) English, and - in Spanish - distributing this material to more than 1,926 people. Staff produced 3 PCP handouts in (plain language) English and Spanish. These were distributed to more than 2,260 people in English and 1,113 people in Spanish. These materials were also posted to the Council's website. Council staff conducted 29 PCP trainings in English, reaching 1,100 people, while 12 more trainings were given in Spanish to an additional 730 people. Both SD and PCP resources were posted to the Council's website.

In addition to taking responsibility for the Statewide SDAC, the SCDD assisted with 21 local SDACs, and educated the public on the SDP and PCP with 41 outreach and trainings. In its efforts throughout the last fiscal year, the Council has helped Californians prepare for the launch of the DDS SD program by staffing 21 local SDACs, facilitating 21 statewide SDACs, conducting 78 trainings (in English and Spanish), reaching a total of 2,063 people (433 of whom are primary Spanish-speakers).

Person-centered planning has become a foundational concept in building capacity for advocacy in family and self-advocates, as well as the professionals who serve and support them. Information about PCP has been integrated into most of the trainings provided by Council staff throughout all 6 goal areas, although it features predominantly in the self-advocacy goal of the Council's 5-year state plan. Specific to this particular self-advocacy objective, the Council's regional office personnel engaged in person-centered planning events, providing 41 trainings (12 of which were in Spanish, reaching 730 people) and providing information to more than 1,800 people. Resource materials were distributed in plain language to more than 2,260 people, in Spanish to nearly 1,930 people, and in other threshold languages to 60 people.

While Council staff provide written materials and technical assistance at virtually every event, the Council has been highly effective in its outreach efforts through social media. By eBlasting information about PCP and the Self-Determination Program, upcoming trainings and events, and other community outreach opportunities and public meetings, the Council reached more than 137,000 people.

Of 221 requests for technical assistance (TA) received by staff (reaching 471 people), 104 were from family/self-advocates, professionals, and others asking for information about the SDP, its timeline, and referral information. Nineteen (19) TA requests were associated with local and/or statewide SDACs and membership opportunities, including potential and interested applicants from underserved populations. Twelve (12) contacts involved training inquiries and/or training requests regarding SDACs and/or the SDP. Of the remaining TA requests, most were associated with specific and individual service and/or self-advocacy struggles that people experienced with RC service coordinators, service providers, funding problems, and inquiries about employment, conservatorship, school district advocacy issues, voting, and other types of program questions or issues.

The bulk of the Council's work is handled in-house and/or in collaboration with local, regional or state-level agency partners. As a way of encouraging new and innovative programs and practices and/or subject matter expertise that is beyond the capacity of regional staff, the Council also issues grant-based Requests for Proposals (RFPs) on a yearly basis. Historically, regional mini-grants are issued every other year, alternating with the issuance of statewide grants for larger awards. Because the Council has extensive experience with thousands of (yearly) in-house, regional activities, events and projects, it engages in much the same processes as its sub-grantees,

regarding the actual planning and execution of activities. Sub-grantees, however, are now being held to the standard of reporting back to the Council through AIDD's list of federal performance measures, for the execution and report(s) of activities, a process which has proven to be an ongoing work in progress.

One of the Council's sub-grantees (Supported Life Institute: Peer Advocacy Connection) reached out to both students and professionals (after a 1-year extension, due to unexpected program staff turnover). This project involved a multi-stage effort, beginning with videotaped, edited and (social media-) published interviews with 40 college students and/or professionals with I/DD (<https://www.youtube.com/channel/UCmyYkP-t1xXY3WpQbL5Ju4A> (<https://www.youtube.com/channel/UCmyYkP-t1xXY3WpQbL5Ju4A>)). The sub-grantee worked with sub-contractors to do the actual filming, artwork, and production of the materials that targeted transition-aged youth and adults with I/DD with information about: DOR funding for college, the value of a degree, assistive technology and other accommodations, self-advocacy, transportation, employment options (e.g. skill building, resources, internships, LEAP, and local programs supporting employment opportunities), and small business development and management considerations. By the end of July, the 41-video library had been broadcast 34 times and viewed by 6,400 people, an effort that supported best practices. A 2nd sub-contractor (BODB – Breaking Out of the Disability Box) has produced artwork and voice-over for an anime video for transition students exploring post-secondary opportunities and options. Flyers promoting the video library were distributed to 370 self-advocates and supporters at the Supported Life Institute's statewide conference. A booklet was also created and distributed. While there were initial problems in beginning this project, it has progressed satisfactorily, following its 1-year extension, and has been very effective in its outreach to self-advocates and others and is deemed to be fully replicable by other programs, agencies and/or states.

The Council and its sub-grantees tracked electronic and hard copies of materials distributed, collected anecdotal feedback, and used attendance sheets, pre/post-tests, formal and informal surveys to determine program/activity effectiveness and community/customer satisfaction, and adjusted curricular content, service delivery, and community outreach activities and events in direct response to real-time feedback. An unexpected benefit of implementing the federal evaluation tools in reporting outcomes involved more complete reporting from sub-grantees, allowing the Council more information with which to assess implementation and outcomes of sponsored projects. The Council's regional staff was not able to implement new survey tools (in alignment with ACL's FPMs) until August of 2018, which resulted in skewed results for individual/family advocacy FPMs. This revision is expected to greatly improve data reporting in 2019.

12. Expected Outcomes Achieved

Expected Outcomes	Achieved
People will have information about PCP/SDP in their language(s) of choice	true
Family/self-advocates will have increased knowledge of the SDP and may access/benefit from the SDP, when available, including underserved populations who are Spanish-speaking, etc.	true
The SDP and SDAC work of local regional centers will be monitored; family/self-advocates will be empowered in self-governance/advisory capacity	true

13. Progress towards achieving outcomes for overall objective : The annual report should include an assessment as to the extent to which progress was made on the intended outcomes for the objective.

While SCDD met or exceeded its projected numbers for this objective and its work plan activities, that work will continue for the remainder of the 5-year State Plan period, pending additional information from regional staff and/or Californians about changing needs. Based on expressed needs by family/self-advocates and observed needs by regional staff, and those needs identified through the State Plan (development) survey, the Council will continue to review and update its materials about PCP and SDP programs, and translate that information into other threshold languages (as requested), post it on the SCDD website and distribute it in accessible formats throughout the state. The Council will continue to provide outreach and training about PCP and SDP to regional communities in California. SCDD will also continue to provide support to its statewide and regional DACs in the course of the State Plans's remaining 3 years.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community). Stories of policy or legislative changes that happened as a result of Council individual advocacy work that are likely to positively impact the lives of people with developmental disabilities or that will prevent a potential negative impact (e.g., created deleted, refined programs and/or legislation, reallocated use of funds, organizational systems change as a result of evidence based practices).

California's CMS Waiver application was approved on June 6th, 2018, marking a significant milestone in the self-determination movement and program implementation efforts on behalf of people with I/DD and their families. The California State Department of Developmental Services (DDS) has provided a detailed roll-out schedule for the SDP, with final HCBS ('settings') requirements to be completed by October 31st, 2018 (<https://www.dds.ca.gov/SDP/SDPUpdates.cfm> (<https://www.dds.ca.gov/SDP/SDPUpdates.cfm>)).

The Council has been a powerful advocate for the approval of the Self-Determination Program, providing curriculum, information, technical assistance and training in the years leading up to full approval and implementation, in addition to the work associated with regional center-based SDACs and Council-led meetings of the statewide SDAC. This program represents the most significant development in the past four (4) decades, over which time case management and purchase-of-service(s) responsibilities have been completely in the control of the regional center system. While individuals with I/DD and their families will have opportunities to establish their own unique programs through the SDP, the regional centers will continue to provide oversight, assistance, information, and flow-through funding. For those individuals not yet engaging in the SDP, the RCs will continue to provide clients with the same case management and purchase-of-service supports.

A self-advocate requested the Council's technical assistance, after encountering significant resistance from both his RC service coordinator and residential provider about his desire to move to a less restrictive environment. The self-advocate felt that his past as a teenager was being held against him and that the changes he had made in his life had not been acknowledged. Council staff provided

TA to assist him in begin a person-centered planning process. At what was supposed to be an emergency IPP meeting to discuss his current living situation and possible service changes, the assigned service coordinator refused to acknowledge that the meeting was an IPP meeting, discounted statements made by the SA, and generally treated him and the PCP process with very little respect. Because the client's timely request for an IPP meeting (within 30 days) was disregarded and, based on the service coordinator's lack of availability, he was made to wait nearly 2 months for a 'formal' IPP meeting. SCDD staff made a referral to the local OCRA office and will continue to provide facilitation, using the PCP process to build individual capacity for his next meeting

Individual & Family Advocacy Performance Measure

Description

Self-Advocacy

Race/Ethnicity

Race/Ethnicity	#	%
White, alone	0	

Race/Ethnicity	#	%
Black or African American alone	0	
American Indian and Alaska Native alone	0	
Hispanic/Latino	0	
Asian alone	0	
Native Hawaiian & Other Pacific Islander alone	0	
Two or more races	0	
Race unknown	0	

Gender

Gender	#	%
Female	0	
Male	0	
Other	0	

Category

Category	#	%
Individual with DD	0	

Category	#	%
Family Member	0	

Geographical

Geographical	#	%
Urban	0	
Rural	0	

I. Output Measures

Objective	Performance Measure : IFA 1.1 People with DD who participated in activities	Performance Measure : IFA 1.2 Family members who participated in activities
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.*	18104	50097

Objective	Performance Measure : IFA 1.1 People with DD who participated in activities	Performance Measure : IFA 1.2 Family members who participated in activities
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.*	17644	35625
Total # of Output Respondents	35748	85722

II. Outcome Measures

Performance Measures	Percent (%)
IFA 2.1 Percent of people with DD who increased advocacy	0
IFA 2.2 Percent of family members who increased advocacy	0

Sub-Outcome Measures : The number (#) of people who are better able to say what they want/say what is important to them

Projects	# People with developmental disabilities	# Family Members
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.*	25	39
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.*	26	52
Total # of Sub-Outcome Respondents	51	91
IFA 2.3 Percent of people better able to say what they need	0	0

Sub-Outcome Measures : The number (#) of people who are participating in advocacy activities

Projects	# People with developmental disabilities	# Family Members
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.*	12	18
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.*	19	40
Total # of Sub-Outcome Respondents	31	58
IFA 2.4 Percent of people participating in advocacy activities	0	0

Sub-Outcome Measures : The number (#) of people who are on cross disability coalitions, policy boards, advisory boards, governing bodies and/or serving in leadership positions.

Projects	# People with developmental disabilities	# Family Members
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.*	14	21
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.*	11	23
Total # of Sub-Outcome Respondents	25	44
IFA 2.5 Percent of people on cross disability coalitions	0	0

IFA 3 The percent of people satisfied with a project activity*

0

IFA 3.1 Percent of people with DD satisfied with activity*

0

IFA 3.2 Percent of family members satisfied with activity*

0

System Change Performance Measures

Description

Self-Advocacy

SC 1: Output Measures - The number of Council efforts to transform fragmented approaches into a coordinated and effective system that assures individuals with developmental disabilities 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.

Objective	SC 1.1 Number of policy/ procedures created/ changed	SC 1.2 Number of statutes/ regulations created/ changed	SC 1.3.1 Number of promising practices created	SC 1.3.2 Number of promising practices supported through Council activities	SC 1.3.3 Number of best practices created	SC 1.3.4 Number of best practices supported through Council activities	SC 1.3 The number of promising and/or best practices created and/or supported	SC 1.4 Number of people trained/ educated	SC 1.5 Number of Systems Change activities with other organizations
<p>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.</p>	43	2	2	8	2	15	27	55948	172

Objective	SC 1.1 Number of policy/ procedures created/ changed	SC 1.2 Number of statutes/ regulations created/ changed	SC 1.3.1 Number of promising practices created	SC 1.3.2 Number of promising practices supported through Council activities	SC 1.3.3 Number of best practices created	SC 1.3.4 Number of best practices supported through Council activities	SC 1.3 The number of promising and/or best practices created and/or supported	SC 1.4 Number of people trained/ educated	SC 1.5 Number of Systems Change activities with other organizations
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.	5	2	2	12	6	14	34	32320	108

Systems Change SC 2: Outcome Measures

Outcome Measures	Number(#)
SC 2.1 - Efforts that led to improvements *	33
SC 2.2 - Efforts that were implemented *	51

Sub-Outcome Measures

Objective	SC 2.1.1 Policy, procedure, statute, regulation improvements	SC 2.1.2 Policy, procedure, statute, regulation implemented	SC 2.1.3 Number of improved promising or best practices	SC 2.1.4 Number of implemented promising or best practices
<p>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.</p>	0	0	1	21

Objective	SC 2.1.1 Policy, procedure, statute, regulation improvements	SC 2.1.2 Policy, procedure, statute, regulation implemented	SC 2.1.3 Number of improved promising or best practices	SC 2.1.4 Number of implemented promising or best practices
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.	19	15	13	15

Detailed Progress Report on Goals

Description

Formal & Informal Community Supports

Area Of Emphasis

Area of Emphasis	Planned for this goal	Areas addressed
Quality Assurance	true	true
Education and Early Intervention		
Child Care	true	true
Health		
Employment		
Housing		
Transportation	true	true
Recreation	true	true
Formal and Informal Community Supports	true	true

Strategies

Strategies	Planned for this goal	Strategies Used
Outreach	true	true
Training	true	true
Technical Assistance	true	true
Supporting and Educating Communities	true	true

Strategies	Planned for this goal	Strategies Used
Interagency Collaboration and Coordination	true	true
Coordination with Related Councils, Committees and Programs	true	true
Barrier Elimination	true	true
Systems Design and Redesign	true	true
Coalition Development and Citizen Participation	true	true
Informing Policymakers	true	true
Demonstration of New Approaches to Services and Support		
Other Activities		

3. Intermediaries/Collaborators

Collaborators	Planned for this goal	Actual
State Protection and Advocacy System	true	true
University Center(s)	true	true
State DD agency	true	true
Regional Center(s)	true	true

Provide an overall cohesive description of (a) the extent to which progress is being made in achieving the intended outcomes of the Goal for the reporting year, (b) the extent to which each goal was or was not achieved for the reporting year, (c) where applicable, factors that impeded goal achievement for the reporting year, (c) needs that require substantive state plan amendment (goal only)

In addressing formal and informal community supports, the Council and its regional staff collaborated with more than 1,120 community, regional and state-level agency partners to provide outreach, training, technical assistance and other services to family/self-advocates and others. These activities involved quality assurance, child care, transportation, recreation, RC services, and formal/informal community supports. Although the Council's activities included new or innovative approaches to services and supports, there were no grant projects associated with the goal. All other strategies (e.g. barrier elimination, coalition development and citizen participation, etc.) were used with the Council's activities. The work of this goal also addressed capacity-building, collaboration with the Council's federal network/partners, advocacy efforts, system change, and activities designed to address targeted disparities.

Through all 4 objectives of Goal 6, the Council provided a total of 192 trainings, reaching 4,608 people. While engaging in its activities, SCDD leveraged \$89,000 in funding and provided technical assistance 1,149 times, reaching 3,263 people (addressing more than 70 different kinds of issues). Regional and HQ staff engaged in 308 meetings and/or collaborative efforts, partnering with and/or reaching 5,207 people. The Council provided hard copy resource information 158 times, reaching 196,219 people. In 834 electronic/social media postings, the Council reached 1,416,261 additional people with issues and information about formal/informal community supports.

Regional staff continues to report back to the Council and its Regional Advisory Committees (RACs) on the closure process of California's large institutions (developmental centers) and the relocation of residents with I/DD into communities of their choice, with supports and services from regional centers (RCs) and local vendors. This includes a strong set of recommendations for ongoing monitoring and advocacy efforts on behalf of relocated residents, to ensure that all RC clients are receiving appropriate services, regardless of residential status or origin. In providing training to this population (of 'movers'), regional staff has concentrated on information about personal/civil/Constitutional, residential (under California's Lanterman Developmental Disabilities Services Act) and voter rights (in English and Spanish), self-advocacy skills, and residential options.

Trainings about person-centered planning (PCP), bullying, social media awareness, and emergency preparedness were also given throughout the state. This was especially critical and timely, as DC, hospital and group home residents were forced to evacuate during California's catastrophic fire season. As a result of advance training, preparation and on-scene efforts on the part of residents, professional staff, and first responders, no residents' lives were lost during these emergency evacuations. In the aftermath of evacuations, the Council, its regional personnel, and surrounding community members stepped forward to provide supplies, such as durable medical equipment, food, clothing, etc. for evacuees with disabilities, ensuring that evacuated residents were supported and safe during what became an extensive period of evacuation. The importance of maintaining an emergency 'go-bag' and medical/care instructions, contact information, and supply of medication has become of paramount importance to family and self-advocates throughout the state, as the extended fire and flooding season has destroyed thousands of homes and businesses throughout the state, affecting those with and without disabilities, alike.

The Council serves a diverse community and has integrated facilitation and tangible supports provided to family/self-advocates (through meetings) into its State Plan, recognizing that self-advocacy and governance efforts of PwD are keystones in SCDD's support efforts for PwD, aside from the actual 'working' of the Council. The Council also keeps its members and RACs abreast of legislative updates, emerging issues, and training opportunities, in addition to soliciting information for the full Council and regional staffs. Regional staff are more routinely providing trainings in both English and Spanish, but have also reached out to the Asian, Farsi-speaking, and Russian communities with translated resource materials and opportunities for training and/or collaboration. Regional and HQ staff engaged in more than 70 community-based conferences, fairs and events with collaborative partners, reaching thousands of PwD, professionals, and family and community members.

The Council's policy work for this goal extended to taking positions on 7 bills and monitoring 2 bills, sending letters on 4 bills and testifying on 1 bill. The Council also provided legislative updates to SAAC, SSAN, and RAC members, so that they could provide peer-to-peer updates within their own communities and local/regional self-advocacy groups. The Council provided training and personal empowerment to self-advocates and family members about sharing their own stories with legislators and other policymakers in concise, powerful ways. In regions throughout the state, staff provided local, regional and state policymakers opportunities to learn about PwD and their needs and strengths and opinions by hosting and/or facilitating town hall meetings and other types of presentations, in addition to providing social media releases and hard copies of informational materials. SCDD has been working collaboratively with a broad swath of service providers, first-responders, family and self-advocates, RCs, and governmental entities in addressing coexisting mental health and safety needs of PwD/DD. Regional staff has integrated the service/support needs of those with low-incidence and/or cross-disabilities into its advocacy efforts, recognizing the joint concerns of all persons with disabilities in service, community, residential and personal advocacy environments.

The Council and its federal partners have used this goal to address RC purchase-of-service disparities for underserved populations, developing more standardized, accessible language around RC supports/services so that plain language translations can be provided in the language-of-choice to monolingual ethnic/cultural communities throughout the state. Regional staff is also taking on accessibility and physical barrier issues in building and renovation projects throughout the state (e.g. playgrounds, sidewalks, public streets, etc.), in addition to those support barriers created by insufficient attention or investment from recreation, transportation, child care, and other service-based industries.

Continuing to revise its timeline (to complete collaborative efforts, continue translations, and begin training in 2019, which will move the addition of other language translations forward), the Council will move the unfinished work of Objective 6.1 forward into the 2019 and 2020 FFY, beyond which there will be no significant or substantive changes made to the planned work or objectives within this goal.

4 Year Overview : A description of how the Council will use and build from knowledge gained and progress made to move forward in the next state plan cycle.(This section only applies to the PPR submitted for the Federal Fiscal Year 2020, which will be due by January 1, 2021)

5 Year Overview : For the final PPR of this state plan cycle, provide an overall analysis of the outcomes achieved during the five year state plan cycle. The description should include the extent to which diverse stakeholders are satisfied with council activities that promote self-determination and community participation for individuals with disabilities and families, results of other types of information gathering such as focus groups, surveys, or other feedback or input methods with individuals with developmental disabilities and families and major accomplishments and factors impeding goal achievement (if applicable).(This section only applies to the PPR submitted for the Federal Fiscal Year 2021, which will be due by January 1, 2022)

Objectives

1. 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.

1. **Goal:** Formal & Informal Community Supports

2. **State Plan Objective** Objective 2

3. **This Objective is**

Individual & Family Advocacy

4. **This Objective is**

Ongoing

5. **This Objective is**

	The Objective is
a. Fulfilling a Self-Advocacy DD Requirement *	No
b. Targeted disparity *	No

	The Objective is
c. DD Network Collaboration *	No
d. A demonstration project of New Approaches to Services and Supports *	No
e. A demonstration of projects or activities *	No

6. Stage of Implementation

Implementation

7. Provide an overall description of this effort

California continues to engage in the process of de-institutionalizing residents of its remaining developmental centers, decentralizing the care and housing of residents with I/DD, developing community-integrated residential/care options, and transitioning DC residents into inclusive communities of their (and/or their family members') choice. As California - and its State Council on Developmental Disabilities - is fully committed to the concept of person-centered planning, self-determination, and self-governance, the Council has committed to outreach and training efforts to ensure that 'movers' from DCs and their family advocates receive sufficient information, knowledge and skills to be directing partners in this process.

8. Outputs Achieved

Expected Outputs	Achieved
1 updated survey, reaching 50 FA/SA; 1 report	true
1 list of 30 crisis intervention/healthcare collaborators; 4 community collaboratives, reaching 100 people; 1 updated list of transition findings/recommendations; reach 120 people	true
1 updated curriculum; 13 Council/RAC trainings, reaching 120 people	true
5 updated curricula; 5 different topical trainings, reaching 30 people each, for a total of 150 people reached	true

10. The report should include the following: (a) A narrative progress report that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenges to achieving the objective and unexpected benefits.(b) For system change activities, include a description of the stage of implementation (planning, initiation, implementation, outcome/fully integrated) of the system change initiative. (c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report).

As the California Department of Developmental Services (DDS) progresses toward the final closing of its remaining developmental centers (DCs), the Council has 1) surveyed and assisted people in making that transition and 2) given those residents information, knowledge and skills for community-based life. California's Governor has implemented a plan that is moving the remaining residents of DCs into community-based residential settings by 2021. Canyon Springs Community Facility (CF), however, and the 'behind-the-fence' area of Porterville will continue to provide residential services within acute behavioral care and/or forensic unit needs. The Council's target activities for the DC closure process include surveying self-advocates who plan to move or have already moved out of DCs, training DC residents about the transition process and community living and keeping the 31-member Council and members of all the Regional Advisory Committees (RACs) informed about the ongoing closure process

In Sonoma DC, DDS reported (as of November 28, 2018) that most people had transitioned into the community from Sonoma's DC, leaving 15 still in transition. As of the end of 2017, DDS reported that Sonoma was still slated for closure by the end of 2018. Fairview, which has 93 people still in transition (as of November 28, 2018), and the General Treatment Area (GTA) of Porterville DC are still scheduled to close by 2021.[1]

Council staff provided 21 trainings/presentations about the institutional closure process to the RACs and the full Council, reaching 407 people. Staff developed/updated 6 curricula and provided 17 trainings, reaching 722 people. Additionally, within the remaining open institutions/facilities, the Council provided 45 trainings to residents and 136 trainings to staff. Regional and HQ staff disseminated information in 8 electronic resource submissions, reaching 6,303 people. In 18 face-to-face opportunities, staff served 33 people with technical assistance.

The Council receives and tracks up-to-date information on the demographics and transition of residents in California's developmental centers from institution (e.g. Canyon Springs [CF], Fairview, Porterville, and Sonoma [DCs]) to community residential placements through its CRA/VAS (Clients Rights Advocacy and Volunteer Advocacy Services) contract with the Department of Developmental Services (DDS). Regional CRA/VAS staff provide bi-monthly updates to the Council and produce an annual report detailing the current number of institutionalized residents, as well as incidents logged and the work done on clients' behalf by the Council (e.g. grievances, complaints, incident reports, mandated reports [of suspected abuse], meetings, trainings, denial-of-rights proceedings, etc.). In addition

to surveying/tracking residents' needs, CRA/VAS provide referrals (when appropriate), assist in resolving systemic issues within the institutional environment, and track/confirm appropriate resolutions. Finally, staff provided a set of recommendations to be considered in continuing to serve this population of vulnerable Californians as it transitions into the community:

1. Review the disparity of access to community residential and vocational services for people who reside (or formerly reside[d]) in the DCs and those who do/did not
2. Advocate for equal access for all Californians with I/DD to similarly situated supports and services
3. Review the cross-training protocol for residential service providers through the Regional Resource Development Project
4. Advocate for regional center service workers to provide written, regularly scheduled updates to individuals in the transition process that include realistic time-frames
5. Request easy-to-understand information on homes available from DDS and/or the regional centers to be disseminated to all stakeholders
6. Assure that each transition is person-centered and provides the individual with adequate visits, team planning meetings, cross-training of all community-based service providers, and allows for delay if any services or supports are not in place
7. Assure that the client has adequate monies in an accessible account in the community placement region
8. Develop a protocol for an unconserved client who does not provide informed consent
9. Develop a training module to educate clients on increasing ability to provide informed consent
10. If a client moves prior to the ability to provide informed consent, develop a plan to designate an individual who will provide informed consent, while continuing to educate the client to exercise this right

Staff provided 3 trainings on personal/civil rights, reaching 64 people. At Canyon Springs Community Facility (Riverside County), the self-advocacy group received information about voting rights (*Let's Vote*), in addition to materials about the right to vote, the voter registration process, available accommodations for PwD, mail-in voter options, and important reasons to exercise the right to vote. Attendees requested and were provided with voter registration forms. In Santa Cruz County, staff provided training about RC rights and services, as

well as information (translation was provided in Spanish for both the training and the resource materials provided) about family/self-advocacy, reaching 18 people. In San Diego County, staff collaborated with a self/peer-advocate to provide 4 trainings about self-advocacy, potential barriers, and options for resolution, reaching 225 people.

At the Canyon Springs CF (Riverside County), the Council provided information about self-advocacy with a focus on personal and internet safety, cyberbullying, the importance of protecting personal identifying information, social media awareness and online gaming safety. Staff reported that nearly all the residents have a cellphone, use social media, and/or participate in online gaming activities. Residents reported that they had been threatened, taken advantage of, asked for personal/private information, and/or propositioned for explicit images while using online/social media resources. In follow-up training, residents were given information about bullying and protective strategies (*Enough is Enough*). At Sonoma DC, 37 residents and others were given training about disaster planning (e.g. floods, earthquakes, fires, etc.), personal safety concerns, emergency services and options, and personal safety plans. Residents of Canyon Springs CF received Council training about emergency preparedness (*Emergency Disaster Preparedness*) and how to prepare a 'go-bag' for evacuation operations. Survival tips and resource materials for a variety of natural disasters were shared and residents were given information about setting up reverse-911 services on landlines and cell phones, so that their locations could be tracked remotely by emergency dispatchers.

The Council is collaborating with IHSS (Humboldt County), to oversee the implementation of an emergency back-up program for incoming community residents with disabilities. In Mendocino County, staff is working with the Regional Community Placement Plan Committee at the local RC, to address appropriate placements for people with I/DD who are already in or are transitioning into the community from a DC or from outside the region. In identifying, developing and/or updating lists of collaborators for effective crisis intervention and continuity in healthcare services for people transitioning out of DC residency, regional staff (Orange County) are working with members/partners of the South Coast Regional Project. The group is monitoring (along with the Council) the transition process, acute crisis admissions, placement statistics, and the potential loss of historical information (behavioral/medical data) as staff retires and transitions from emptying DCs. A problem has surfaced, as noted by the Council, in that Social Security payments are 1) not passing through to new providers, once the DC has relinquished payeeship, and 2) some funds are being withheld by the SSA. Plans for reimbursing vendors for the full payment amounts are being drafted/implemented.

The Council's regional staff collaborated (in Santa Cruz County) with the Special Parents Information Network (SPIN) to put together materials (in English and Spanish) about RC services and advocacy (*Regional Center Basics*), an important resource for residents transitioning out of the DCs and into RC service catchment areas.

Council staff provided information with the Communication Technology Education Center (CTEC) about grant opportunities designed to reduce service disparities through the RC system and to comply with HCBS settings rules. These require improved opportunities for people with nonverbal disabilities to be able to communicate needs and wants, hopes and dreams, which is essential to the PCP process. To this end, CTEC is interested in reaching out to those residents moving from Sonoma DC into the communities around the Sacramento County area and improving their communication options.

While DC residents (and others) participated in training and completed survey instruments, those instruments did not yield data relevant to ACL's FPMs. Revised survey instruments will be used in 2019 and are expected to capture and speak to federal performance measures for upcoming federal fiscal years.

References

California State Department of Developmental Services (2018). *Population of Developmental Centers and State-Operated Community Facilities: Population as of November 28, 2018*. Retrieved on 11.29.18:1645 from <https://www.dds.ca.gov/DevCtrs/AllFacPop.cfm> (<https://www.dds.ca.gov/DevCtrs/AllFacPop.cfm>).

12. Expected Outcomes Achieved

Expected Outcomes	Achieved
<p>The Council and its collaborative partners will have up-to-date knowledge about resident welfare, the DC transition/closure status, and availability of integrated community supports/services for people with I/DD &/or cross-disabilities transitioning out of institutional care & into community settings</p>	<p>true</p>
<p>Stakeholders that provide integration supports/services will have knowledge about family/self-advocates transitioning into community settings and will provide continuity of medical insurance &/or community-based supports/services with no lapse in/loss of coverage</p>	<p>true</p>
<p>The Council and its advisory committees will be knowledgeable on current issues affecting transition of DC residents with I/DD &/or cross-disabilities into home/community-based settings</p>	<p>true</p>
<p>Family/self-advocates with I/DD &/or cross-disabilities involved in transitioning from DCs to community settings will have the knowledge to advocate for appropriate, safe, integrated, generic services to meet their unique, individual needs</p>	<p>true</p>

13. Progress towards achieving outcomes for overall objective : The annual report should include an assessment as to the extent to which progress was made on the intended outcomes for the objective.

While the Council achieved all other targets within this objective, staff was able to gain information from only 87% of transferring residents' family members and 48% of transitioned residents, stakeholders and/or community members. Ultimately, the information was obtained from other sources, as the state now has legislative mandates to collect the same type of data. Where possible, the Council will simply use available (new) data, rather than burden residents/movers and/or their family members with additional surveys.

The Council is fully committed to monitoring the DC closure process and, simultaneously, welfare and safety of those residents who are transitioning out into communities throughout California. Some of the surveys (received from family advocates) seemed to indicate that the DC closure/resident transfer/moving process is now becoming 'real' for those family members who may not have believed that 'this day would ever come.' As a result, there were a number of comments reflecting anxiety that the availability, readiness and/or adequacy of community-based services and supports. Interestingly, these comments were made in the aftermath of training (provided by the Council), which triggered a sense of this 'new reality' and are confirmation that training has been effective. The Council will continue to provide information and training to family/self-advocates, preparatory to - and as an ongoing part of - the active and post-transition process. Additionally, the Council will continue to provide information and training to those agencies and personnel that provide services to family/self-advocates who may be unfamiliar with community-based support systems.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community). Stories of policy or legislative changes that happened as a result of Council individual advocacy work that are likely to positively impact the lives of people with developmental disabilities or that will prevent a potential negative impact (e.g., created deleted, refined programs and/or legislation, reallocated use of funds, organizational systems change as a result of evidence based practices).

N/A

2. 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.

1. **Goal:** Formal & Informal Community Supports

2. **State Plan Objective** Objective 3

3. **This Objective is**

Individual & Family Advocacy

4. **This Objective is**

Ongoing

5. **This Objective is**

	The Objective is
a. Fulfilling a Self-Advocacy DD Requirement *	No

	The Objective is
b. Targeted disparity *	No
c. DD Network Collaboration *	No
d. A demonstration project of New Approaches to Services and Supports *	No
e. A demonstration of projects or activities *	No

6. Stage of Implementation

Implementation

7. Provide an overall description of this effort

In response to the Council's State Plan survey, 34.9% of respondents (family/self-advocates, professionals, and others) stated that they wanted more information, resources, and/or technical assistance in the area of formal and informal supports, including information in Spanish - and that, specifically, in regard to RC services. This is especially telling, given the purchase-of-service disparities identified by regional centers throughout the state, in regard to the offer and/or provision of services equally to diverse populations. While Objective 6.1 addresses the need for 1) POS guidelines to be translated into threshold languages and 2) training to provide language-accessible

training throughout the state, Objective 6.3 is designed to include RC services and also address those services/supports that fall outside of the direct purchasing authority of regional centers (e.g. transportation, public entitlements, extended child care, etc.). The Council's training, technical assistance efforts and resource provision in Objective 6.3 are designed to address those community-based needs and services, which is inclusive of providing RC's with training and/or technical assistance, as well.

8. Outputs Achieved

Expected Outputs	Achieved
1 curriculum; 4 trainings, reaching 30 people	true
13 meetings, reaching 120 people; 1 monitoring agenda, reaching 120 people; 10 progress updates, reaching 120 people	true
3 updated curricula; 7 RC trainings, reaching 140 people; 11 generic services trainings, reaching 220 people; 1 set of hard copy/electronic outreach materials; 12 electronic distributions, reaching 10,000 people; 12 hard copy distributions, reaching 5,000 people; provision of TA in all 12 regions, reaching 250 people	true

10. The report should include the following: (a) A narrative progress report that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenges to achieving the objective and unexpected benefits.(b) For system change activities, include a description of the stage of implementation (planning, initiation, implementation, outcome/fully integrated) of the system change initiative. (c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report).

For self-advocates and family members attempting to obtain community-based services, the Council provided culturally accessible information, training, technical assistance, referrals, systemic advocacy and overall capacity-building. Regionally, staff maintained collaborative relationships with local/state governmental and private agencies, engaging in system change efforts in communities statewide. As part of this effort, regional Council personnel collected information, reporting services and needs at 30 meetings to 550 people on regional advisory committees and the State Council. Additionally, staff maintained 12 monthly logs of technical assistance requests, which assisted in the tracking and reporting back of emerging issues and to inform the monitoring of trends in available, accessible services.

The Council engaged in extensive, in-person outreach, training, and technical assistance to improve access to regional center services, transportation, public benefits, child care, recreation, etc. Staff conducted 157 training sessions for 3,636 people. In addition, staff provided family and self-advocates, community members, and professionals with technical assistance, referrals, and information 1,046 times, serving 3,121 people. Hard copies of information/resources were shared 158 times, reaching 196,219 people. Additional information was shared electronically 685 times, extending the Council's reach to 1,301,892 people. Through its collaborative activities, the Council leveraged \$88,750 in funding.

Regional staff submits comprehensive monthly activity reports, which are compiled, reported, and compared against the projected figures within the Council's yearly work plan. This information is stored and maintained on the Council's Common Drive. The Council is kept apprised of staff work and the accomplishments of grantees throughout the course of the year and presented with end-of-year findings prior to inclusion into and final submission of the yearly PPR. Internal staff reporting changes have complicated the melding and reporting of work plan results versus the information required for collection and reporting of federal performance measure data. The collection of demographic data through satisfaction surveys also proved problematic, as those attending Council functions have been unwilling to disclose personal information that they feared would impact their standing with 'authorities' or those in charge of withholding public entitlements and/or determining eligibility for supports/services. Internal reporting protocols for FFY 2019 have changed, which are expected to streamline and correct these reporting challenges.

The Council and its regional offices convened 30 meetings, over the course of the FFY, involving 550 people. As part of those activities, staff also engaged Regional Advisory Committees (RACs) and Council members in putting together 13 state and regional Portraits of Service Assessments (POSAs), which then served as the impetus in developing/revising work plans for the following FFY.

Council staff kept members abreast of statewide developments (SSA, tax reforms, Medicare/Medicaid, HUD developments, etc.) affecting PwD during RAC meetings, with some updates provided directly by the Executive Director, Aaron Carruthers. Regarding housing, RAC members and others expressed concerns about reasonable modifications, medical and disability-related income exclusions, and affordable housing opportunities. Along California's northern coast (Del Norte, Humboldt, Mendocino and Lake counties), RAC members received information about the Paid Internship Program, providing PwD with opportunities for work experience, employer references, resume development, etc.

Of the planned training of the annual work plan, regional staff provided 26 HCBS trainings (reaching 449 people), 78 trainings (reaching 2,045 people) about the RC system and its available supports/services, and 53 trainings (reaching 1,142 people) about generic services. In Ventura County, training was provided to 43 self-advocates through a variety of day and employment programs. In Solano County, training was provided at a work training center. In Orange County, a local RC vendor requested HCBS training for staff members and SCDD staff provided a training for 130 Spanish-speaking family members.

In San Joaquin County, SCDD regional staff provided training to nearly 130 direct support professionals. In San Francisco, Council staff gave a keynote address about HCBS to more than 150 RC personnel at the annual All-Staff Event. The Council reached behavioral, crisis intervention and mental health providers, as well as family advocates, allies and self-advocates through Deaf Plus, in Alameda County.

In 78 training sessions on RC supports/services, staff reached groups that ranged in size from 1 attendee to groups with as many as 200 people, serving people in English, Spanish (San Joaquin and other counties), Vietnamese (Los Angeles and Orange counties), Farsi (Orange County), and multi-ethnic collaboratives (Orange County). In Madera County, staff provided training to 20 health professionals. In Santa Clara County, staff reached more than 40 family advocates with RC-related information in Spanish.

In the area of generic community-based services and general civil rights trainings, staff submitted more than 80 activity reports, logging 53 trainings about topics such as: ABA services and supports, early intervention services, employment opportunities, the CalABLE Program, SSI benefits/appeals, voter rights and responsibilities, and the role(s) of the Council.

The Council partnered with other agencies in sponsoring and/or participating in more than 70 community events throughout the state (several are listed below). At every event, the Council provided materials, resources, technical assistance and referrals. In many events, staff provided keynote presentations, outreach information, resource tables and training, as well.

1. 10th Annual San Jose Disability Awareness Day (Santa Clara County)
2. 2018 Inland Empire Disabilities Expo (San Bernardino County)
3. 22nd Annual Recognition Celebration (Butte County)
4. 6th Annual Hero Walk for Autism (Riverside County)
5. Agency 101 Fair (Ventura County)
6. Annual Resource Sharing Fair (Placer County)
7. Brighterside of Down Syndrome Buddy Walk (San Joaquin)
8. Community Outreach Transition Fair (Solano County)
9. Conexiones Educativas Conference: *The ABLE Act* (Orange County)

10. Down Syndrome Awareness Day (Napa County)
11. Exceptional Family Center Information and Resource Fair (Kern County)
12. Fiesta Educativa Back-to-School Fair (Los Angeles County)
13. Parent Education Fair (Monterey County)
14. Transition Fair (Tuolumne County)
15. World Institute on Disability Annual Strategic Planning Event (Alameda County)

Through the work of this objective, regional staff engaged in nearly 500 meetings with family/self-advocates with I/DD and/or cross-disabilities, collaborative agencies and community members throughout California and its 58 counties. These meetings were part of planning efforts for community or agency-wide outreach events, joint activities, training/curriculum development and scheduling, etc. Some meetings were ongoing efforts to monitor and respond to the actions/decisions of those responsible for entitlement and/or community-based services in a timely, effective manner. Information gathered in communities throughout the state is then reported back to RACs and the Council in written and verbal updates and reflected in changes/additions to the Council's annual work plan(s), as necessary.

Regional and headquarter staff provided technical assistance more than 1,000 times over the past FFY, serving over 3,100 people throughout the state. The Council, RAC members and staff maintain constant vigilance over the rights of PwD, which occasionally results in the filing of mandated reports of suspected abuse, etc. Information gleaned through TA opportunities typically leads to not only referral/information/coaching work specific to the topical request, but also to developing training/curriculum that will help others to navigate similar situations.

Technical assistance was provided in response to issues such as:

1. Regional Center (lack of) communication, eligibility, planning and appeals
2. Generic services – denials, charges, or unavailability (e.g. IHSS, HICAP, CalFresh, accessibility of transportation, recreational facilities, etc.)
3. Assistance with, referrals to, &/or eligibility issues related to SSI/SSDI

4. Supported decision-making, conservatorship referrals, revocations, and/or alternatives to conservatorship
5. Difficulties with health insurance and/or inquiries/requests for information/assistance
6. Inquiries about housing authorities and low-cost housing stock
7. Inquiries about the CalABLE Act and its provisions
8. ADA violations &/or complaints
9. Available grant opportunities/applications
10. Availability of disability-related parent/family &/or peer support groups
11. Incidents of violence, hate crimes, bullying &/or retaliation against PwD
12. Specific changes/requests about day programs, services, etc.
13. HCBS & program compliance issues
14. Restraints, constraints and service denials, based on disability-related behaviors
15. Forensic issues facing PwD (e.g. RC eligibility/assessments, incarceration, PC §290 registration, domestic violence, DUI &/or sexual offenses, etc.)
16. Disability-related referral information for criminal justice/forensic multi-agency task force members
17. Disability-related issues on the national, global, &/or multi-corporate stage
18. Needs of/relief & resources for tribal families (with disabilities) in the aftermath of multiple disasters (e.g. fire, flooding, etc.)
19. End-of-life planning for aging parents with adult children with I/DD &/or cross-disabilities
20. Summer camp/recreational options for children & young adults with disabilities

12. Expected Outcomes Achieved

Expected Outcomes	Achieved
Family/self-advocate Council/RAC members will be informed & able to collect/evaluate data & assess progress toward implementation of the HCBS Settings Rule throughout California	true
Council will maintain strong agenda for 1) monitoring the current formal/informal services/supports throughout the state & 2) directing policy, advocacy, & capacity-building activities to address & decrease service/support gaps for family/self-advocates with I/DD &/or cross-disabilities	true
Based on training, outreach/resource materials, and requests for technical assistance, family/self-advocates & other stakeholders will have knowledge & information to access RC services and other quality supports & services that are available to the general population	true

13. Progress towards achieving outcomes for overall objective : The annual report should include an assessment as to the extent to which progress was made on the intended outcomes for the objective.

This objective represents a large part of the Council's mission in outreach and training efforts on behalf of family/self-advocates and others. While the Council fully met and/or exceeded its targeted activities for this objective, there may be increased demand for training as full inclusion requirements draw near(er) through impending HCBS deadlines. Family/self-advocates, professionals, and others frequently question and weigh what services are the (current) responsibilities of the regional center system and what services must be obtained outside of that system. Once the RC POS definitions have been fully translated (into Spanish, initially) and the curriculum has been developed, it is expected that language-accessible POS information will also become a significant training expansion in the work

provided through this objective. Information about community-based formal/informal supports and services is, technically, the basis of what could become yearly family/self-advocates' 'perishable skills' training, as available services and community needs emerge and evolve. The work of this objective will continue throughout the course of the Council's 5-year State Plan cycle.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community). Stories of policy or legislative changes that happened as a result of Council individual advocacy work that are likely to positively impact the lives of people with developmental disabilities or that will prevent a potential negative impact (e.g., created deleted, refined programs and/or legislation, reallocated use of funds, organizational systems change as a result of evidence based practices).

N/A

3. 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.

1. Goal: Formal & Informal Community Supports

2. State Plan Objective Objective 1

3. This Objective is

Capacity Building

4. This Objective is

Ongoing

5. This Objective is

	The Objective is
a. Fulfilling a Self-Advocacy DD Requirement *	No
b. Targeted disparity *	Yes
c. DD Network Collaboration *	Yes
d. A demonstration project of New Approaches to Services and Supports *	No
e. A demonstration of projects or activities *	No

6. Stage of Implementation

Implementation

7. Provide an overall description of this effort

Although the Council has monitored, for some time, the disparity in services purchased for and provided to linguistically/culturally diverse Californians with I/DD and/or cross-disabilities (as compared to those received by primarily English-speaking Californians), it determined to address these disparities more directly. The primary focus of this objective involves reaching out to the underserved, Spanish-speaking family/self-advocate population of California, in collaboration with the Council's four (4) federal partners (California's protection and advocacy agency and three University Centers for Excellence in Developmental Disabilities [UCEDDs]): Disability Rights California (DRC), the Tarjan Center at the University of California Los Angeles (UCLA), the University of Southern California (USC) Children's Hospital Los Angeles (CHLA), and the University of California Davis (UCD) MIND Institute. With complete and culturally/linguistically, competent translations of material (initially in Spanish), the Council intends to provide extensive training to family/self-advocates, regional center staff, service providers and others, thereby decreasing disparities in the information, services and supports requested of and provided through the regional center system.

8. Outputs Achieved

Expected Outputs	Achieved
6 lists of stakeholders, reaching 10 people; 4 meetings, with 100 people; 1 list	true
1 English lexicon; 2 translated lexicons (1 in Spanish); 24 field tests, reaching 120 people	true
1 list of English POS descriptions; 1 translated list in Spanish	true
2 curricula (1 in Spanish); 12 trainings, reaching 200 people	
1 website posting, reaching 250; 12 eBlasts, reaching 1,000 people	true

10. The report should include the following: (a) A narrative progress report that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenges to achieving the objective and unexpected benefits.(b) For system change activities, include a description of the stage of implementation (planning, initiation, implementation, outcome/fully integrated) of the system change initiative. (c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report).

POS Disparity Work

Council staff has engaged in Purchase-of-Service (POS) disparity meetings throughout the state, meeting with RC staff, community-based organizations and vendor agencies, family/self-advocates and others to identify and address RC service/support disparities that appear to be related directly to cultural, income-related, areas of residence, and language-based issues. While direct causal factors have not necessarily been identified, the risk factors are clear and some RCs have moved on to identifying ways to rectify these service/support disparities. A variety of (possible) factors and/or solutions have been identified in different regions.

In Santa Clara and Alameda counties, RCs are working with Family Mentor programs in collaborating with the local RC to address those disparities. In Los Angeles County (with the highest concentration of Latinos in California), there is a distinct discrepancy between the number of out-of-home placements, supports and services provided to Caucasian family/self-advocates and those provided to people of color (Hispanic and Asian clients). Even when adjusting for residential placement, there are still discrepancies based on race and/or language – disparities which the RC is unable to explain, although RC staff has postulated that the discrepant number of Caucasian residents moving out of the developmental centers may have skewed the POS figures/expenditures. RCs in the county are working with a program that follows up with families who have been authorized for services that they are not using and assists with other needs that may inhibit the use of additional RC services. The Council has asked about the language/ethnic balance of RC employees (a question that RCs failed to answer), but was simply ‘assured’ (by RCs) that all families that ‘need’ bilingual service coordinators (SC) are provided with one (with no evidence).

In San Bernardino County, the local RC has identified transportation deficits (throughout the Inland Empire region), lack of awareness of scheduled trainings, parents’ scheduling conflicts, unavailability of childcare, lack of follow-through by parents (after referral requests), and a high ‘no-show’ rate at events as primary reasons for POS disparities in the region. A consistent concern voiced by DC/CF residents in this region has been a lack of attention given to employment opportunities when planning for DC/CF residents as they transition out of institutional placement and out into the community. As a result, newly transitioned RC clients are spending months without appropriate employment-related supports/services and/or placement.

The Council and its federal partners (e.g. DRC and UCEDDs) met on 6 occasions in this reporting period; 2 of those meetings were with family leaders from the Spanish-speaking and Asian population in northern and southern California. Based on input about cultural underpinnings, terminology and understanding of families' needs, formatting changes were made to the service descriptions available for purchase through California's regional center (RC) system. For example, the use of *consumer* - which is California's codified term for a *self-advocate* - has a negative connotation in Asian cultures. Input from family leaders ensured that a final product will increase the knowledge of those reading it. Another area of input involved changing to a *question and answer* format. This process nearly doubled the amount of work required. Describing a service (for purchase) and developing a meaningful question in plain language to correlate to the answer (the description itself) is burdensome, but - based on input - necessary. The focus has been to complete this task and finalize a plain language version, and use the lexicon to begin the translation into Spanish. The lexicon itself went through field testing with Spanish-speaking families, which noted that a handful of translations would be better received in the I/DD community with slight changes. It was then refined/revised.

The final complication (resulting in a delay for the completion of this objective) for the Council has been final approval of the Self-Determination Waiver. It was extremely important to the Council and its federal partners that the description of the purchase-of-services also includes language that will include those who moved over to the Self-Determination delivery model. That waiver was finally approved by CMS on June 7, 2018 – nearly three quarters of the way through the FFY. What the Council initially believed would be a fairly straightforward project became more complicated than merely describing a 'service code' outlining a specific service. It has resulted in the 'clustering' of codes, changing the format to a *question and answer* format, aligning it with services listed in the Self-Determination Waiver, and refining cultural underpinnings to meet the needs of the end-user. All of these changes, while time-consuming, have been vital to producing a meaningful product to our family and self-advocates to increase knowledge of what services may be purchased by the RC system throughout California.

Resources (Development/Translation/Distribution)

Regional staff collaborated with the Special Parents Information Network (SPIN) to translate an SCDD handout (*Regional Center Basics*) into Spanish. The Council provided a resource table for attendees at the annual Conference de Educative (Monterey County), providing both technical assistance and resource materials in Spanish. Regional staff developed, translated (into Spanish) and distributed resources (*Why Work is Better* and *The ABLE Act*) to 40 people through a day activity program in Los Angeles County. While the Council had planned on integrating the translation and posting of NCI data onto its website, the information had already been provided, translated, and posted through DDS, so this effort was not duplicated by SCDD.

Curriculum/Training and Events

Regional staff collaborated with SPIN to provide training in English and Spanish, reaching 18 people. Staff worked with staff of Special Kids Crusade to provide 2 trainings (in Spanish) for 15 Spanish-speaking family members about how to provide testimony at public hearings. SCDD provided a multi-session training (in Spanish) for family advocates (*Rights under the Lanterman Act*), with information and resources (in Spanish) about RC obligations, how to access services, and strategies, practical applications and ways to better navigate the system of supports and services for people with I/DD (reaching more than 200 participants in some sessions). Staff also translated for a (side-by-side, simultaneous Spanish/English) presentation (*Systems Overview*), reaching 48 people. This allowed staff to 'flag' key terms in English, acronyms, and proper names frequently used in the education and service industries. Regional staff (Los Angeles County) also provided training (for parents) about how to write a letter to influence public policy and effectively advocate for desired services (in Spanish).

Regional staff participated in the Soledad Education Conference, providing resources to attendees, as well as technical assistance for 4 families (in Spanish) and a local vendor interested in day activity, employment and health/wellness training opportunities. The Council is working with Fiesta Educativa to develop parent peer leaders to support and advocate on behalf of other Spanish-speaking families with disabilities throughout the San Gabriel and Pomona Valley areas. Counsel training will also equip Spanish-speaking parents to provide testimony in legislative proceedings and assist other families in accessing RC services and supports.

The Council provided training for UCLA students (*Current Perspectives on the Autism Spectrum and Neurodiversity*), which included disparity data, public policy impact strategies, and questions/answers regarding PwD and the systems that support them (reaching 47 people). In collaborating with the local USD and other community-based organizations to plan and conduct the annual FERIA conference, the Council was told that for-profit advocates and attorneys were not welcomed, although collaborators largely agreed that they could attend if not actively or aggressively seeking clients through the venue. The local USD and SELPA disagreed and made it clear that they would not continue to provide financial support for the conference should the special education professionals be given access to this activity. The issue was tabled until the upcoming year's conference, given the proximity of the 2018 planning process and actual event.

Technical Assistance

Regional staff provided resources and technical assistance (in Spanish) for families (at Fiesta Educativa's conference and resource fair [*Construyendo Puentes, No Muros: In Building Bridges, Not Walls*]) with questions about school services and the role of the RC system (reaching 22 family advocates and 12 professionals). Council staff provided TA for directors of employment, day activity and residential service agencies interested in grant opportunities through unused funds slated to address disparities of service(s). Regional staff explained the disparity issues associated between those living in a family home versus those living in the community and strategies that would focus on addressing the need for housing. Staff also provided TA and information about expanding transition services so that adult providers/staff can work with transition-aged students prior to graduation to facilitate transition and provide improved service continuity.

While the Council has worked to collect survey and satisfaction data throughout the activities associated with its 5-year State Plan, the instruments have failed to correlate directly to the FPM reporting system. The Council is continuing to address these concerns, refining the instrument for use in FFY 2019, in order to rectify this issue.

12. Expected Outcomes Achieved

Expected Outcomes	Achieved
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 populations of family/self-advocates with I/DD who primarily speak threshold languages	true
The Council and its collaborators will have an English lexicon of common, industry-specific terms that will be translated into Spanish and field-tested for cultural relevance, accuracy, etc.	true
Family/self-advocates with I/DD &/or cross-disabilities & stakeholders who speak threshold languages will have an accurate, culturally competent list of appropriate, industry-specific terms in 2 of their own, preferred languages	true
Family/self-advocates will have updated training in Spanish about available RC services	
Underserved family/self-advocates who speak threshold languages will have culturally relevant, accurate information in their language of choice about NCI data	true

13. Progress towards achieving outcomes for overall objective : The annual report should include an assessment as to the extent to which progress was made on the intended outcomes for the objective.

Much has been done to adjust and modify the targeted product of this objective. Through multiple meetings with collaborative partners and both Asian language and Spanish-speaking family leaders, descriptions of services available for purchase (POS) through California's regional centers were dramatically altered. With valuable stakeholder input, the draft of a Spanish lexicon was fine-tuned, observing both cultural considerations and generally accepted terms used within the system of supports and services for people with I/ DD. For example, in California, the legal use of the term '*consumer*' is found throughout state law as describing someone who is served through a regional center. In Asian cultures, '*consumer*' is a negative term, due to its root word (*consume*), which presumes that an individual has no intent or expectation of 'giving back.'

Completing adjustments and refinements to the lexicon was a time-consuming process. Spanish-speaking families identified terms that were not necessarily a 'best match' for conversion into the RC system, so those terms were eventually refined. In reviewing the plain language POS descriptions, stakeholders then asked that the process be converted to a *Question-and-Answer* format so that families would have a better understanding of service options, based on their own specific and unique needs.

In describing each service code in plain language, 'service clusters' were revealed. It became clear that service codes are so closely related that the only difference is in the way that regional centers currently process payment. Separating these clusters would create more confusion for families, so the workgroup clustered similar service codes to create clarity. Once completed, with stakeholder input, the group developed corresponding interview questions for each of the descriptive service clusters.

The Council, with its partners, is now preparing to present the completed draft to stakeholders, with a final lexicon review to finalize formatting and move forward with completion of the Spanish translation in 2019. The Council will then finalize the Spanish POS descriptions, develop curriculum and begin training, before moving on to the next (highest disparity) Asian-based language. While this project has taken longer than originally anticipated, it is a valuable project that is likely to produce high levels of satisfaction and, more importantly, help family and self-advocates to know about and access valuable services that RCs may be able to purchase, based on identified and unique client needs. The Council plans to extend the work of this objective through the duration of the 5-year State Plan period.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community). Stories of policy or legislative changes that happened as a result of Council individual advocacy work that are likely to positively impact the lives of people with developmental disabilities or that will prevent a potential negative impact (e.g., created deleted, refined programs and/or legislation, reallocated use of funds, organizational systems change as a result of evidence based practices).

N/A

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.

1. Goal: Formal & Informal Community Supports

2. State Plan Objective Objective 4

3. This Objective is

Capacity Building

4. This Objective is

Ongoing

5. This Objective is

	The Objective is
a. Fulfilling a Self-Advocacy DD Requirement *	No
b. Targeted disparity *	No
c. DD Network Collaboration *	No
d. A demonstration project of New Approaches to Services and Supports *	No
e. A demonstration of projects or activities *	No

6. Stage of Implementation

Implementation

7. Provide an overall description of this effort

In the Council's 2016 State Plan survey, 34.9% of respondents ranked 'Formal and Informal Community Supports' as the top area of need for people with I/DD in the state, approximately twice as many as the second-ranked area of identified need. For this reason, the Council's legislative focus was primarily on those supports and services not addressed specifically in other goal areas. The systemic (federal, state, regional, local and agency-specific) advocacy activities that are a part of every objective are also supported by statutory and regulatory language that identifies and protects the service and civil rights of people with I/DD. Californians with I/DD rely on the Council to come alongside of them and to help represent their interest with legislators and other policymakers. While Council staff engages in data collection with training events, survey instruments aren't used for policy-related work. As a result, the FPM results will not necessarily reflect the generally positive anecdotal feedback received by staff, in the aftermath of events and/or activities. Further, the survey instruments in use did not adequately or accurately represent outcomes and/or sub-outcomes and have been changed, effective August 2018.

8. Outputs Achieved

Expected Outputs	Achieved
13 lists of collaborators/stakeholders; updated LPPC platform/priorities; 3 LPPC meetings; 10 monitored legislative &/or regulatory proposals, reaching 50 people	true
10 events, educating 250 stakeholders	true
20 informational contacts with 400 policymakers/staff	true

Expected Outputs	Achieved
4 submissions of testimony/written comments, reaching 200 people	true

10. The report should include the following: (a) A narrative progress report that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenges to achieving the objective and unexpected benefits.(b) For system change activities, include a description of the stage of implementation (planning, initiation, implementation, outcome/fully integrated) of the system change initiative. (c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report).

The Council’s Legislative and Public Policy Committee (LPPC) met 5 times over the course of the year, limiting its legislative platform, taking positions on 7 bills and monitoring 2 bills. Of these bills, SCDD sent letters to legislators on 4 bills and testified on 1 bill, reaching 30 people. In support of reinstating summer camp and other social recreation programs in the 2019 budget, the Council worked with members of the Lanterman Coalition. Additionally, the Council serves on the HCBS Stakeholder Workgroup, with a focus on submission and approval of the Self-Determination waiver to implement California’s long-awaited Self-Determination Program (SDP). The Council hosted a call with national partners to get input on the Rule and, based on input, drafted a letter to DDS to discuss concerns with the stakeholder process and offer technical assistance as this important process moves forward. At the statewide CHOICE’s Conference, the Council collaborated with a local RC to present a Legislative session, providing packet materials and resources about PwD to policymakers in attendance and mailing packets to those unable to attend.

The Council collaborates with the Disability Action Coalition Policy Committee, sharing legislative priorities and platforms and working with other organizations to move forward civil rights for PwD. As part of this effort, staff participates in supporting PwD during the Annual Disability Capitol Action Day each year. In Solano County, SCDD partnered with Independent Living Resources to host a community forum, with government representatives and staff fielding constituents' questions. Council staff provided legislative, regulatory, policy, procedural, and practice change updates to self-advocates, family advocates, and stakeholders. Council met with Senator Mitchell to educate the Senator and staff members about restoration of social/recreational services that were cut in 2009. Senator Mitchell endorses service restorations for PwD and shared strategies to educate Senate and Assembly colleagues about the issues.

In an effort to expand access and project awareness regarding PwD, regional staff provided disability awareness training to staff with the CA Coastal Conservancy Department, which involved workplace inclusion, engaging and obtaining consultation from the disability community and including accessibility in all projects. In Del Norte, Humboldt, Mendocino and Lake counties, staff addressed issues and gaps in service for the I/DD and homeless populations, and housing policies and gave Supervisors of the Board recommendations about affordable housing development and relayed information affecting PwD in the aftermath of the north state's latest fire-related disasters.

Staff developed accessible curriculum and resources for peer-to-peer community presentations about legislative updates. Throughout the state, regional staff has been providing legislative updates to RC Boards, family and self-advocates and others through meetings. A local RC (in San Joaquin and surrounding counties) put together its first Legislative Committee, however, collaborating with SCDD to provide information about legislation that may impact people with disabilities and/or their families. SCDD staff was also asked to develop/ provide user-friendly, plain language materials and resources. In Alameda and Contra Costa counties, staff is working with the East Bay Legislative Coalition, reviewing federal and state legislation and recent bills. When needed, the Council provides outreach, letters of support for bills and/or Legislative office staff. In Marin, San Francisco, and San Mateo counties, regional staff is working to survey surrounding communities to capture public interests and needs to help shape local, state and federal policy and legislative work.

In Los Angeles County, staff worked with the East Los Angeles FRC to finalize the Project Leadership training to empower parents in providing testimony to local and state leaders on issues of importance to PwD. In Butte County, staff provided training in a day program setting, giving participants contact information for local, county and state policymakers. Staff is also including information about the

Statewide (Provider) Rate Study, RC updates, the Assembly's Select Committee on I/DD and the Lanterman Coalition's legislative priorities. The Council worked through the East Bay Legislative Coalition (Contra Costa, Alameda and San Mateo counties) to put together a disability-focused educational forum for Assembly District 15 candidates.

In Orange County, staff met with Assemblymember Choi's staff about local advocacy activities associated with the SDP, law enforcement events (e.g. *Connect with a Cop*), an LRE townhall event, the PSE Transition Consortium, Orange County's Adult Transition Task Force and an overview of RC eligibility issues and service gaps. Supervisor Bartlett's office was interested in the closure of Fairview DC, including the land use/allocation, post-closure, and DGS process, as well as mental health service provision and supervision plans for those with both mental illness and I/DD. Regional staff provided a legislative/policy update and disability system overview to the ARC SF's Board, to encourage more systemic advocacy. In Mendocino County, staff is working with the County Office of Education (Mendocino Child Care Planning Council) to address a trend in which children with other types of I/DD are being pushed out of needed early intervention slots to accommodate the increase in children with autism.

In San Joaquin County, Council staff met with the field representative for Assemblymember Eggman, looking for a policymaker to write and/or sponsor bills on a variety of topics selected by the Council's LPPC. Senator Galgiani was contacted, as well. Legislators were also asked to make a proclamation regarding the Self-Advocacy Council 6 (Sac6) and its 25th Anniversary as an entity of self-advocates. In Alameda County, staff informed Congressman Swalwell about the I/DD community's priorities, ensuring community accessibility and mitigating risks to the ADA (e.g. HR 620). The Congressman voted against HR 620 (Poe) and firmly aligned himself with constituents with disabilities. In District 12 (San Francisco City/County), the Council provided Minority Leader Pelosi's office with a 1-page summary of community events, concerns and needs regarding PwD.

Regional staff in the state's Bay Area (Marin, San Francisco, Contra Costa, San Mateo and Alameda counties) provided facilitation during a conference call with Disability Rights California (DRC) attorneys, family advocates, and service providers regarding a statewide investigation involving residential vendors failing to provide ASL for deaf/hard-of-hearing residents and/or staff. The Council will be collaborating by referring PwD and/or family members to DRC's investigating attorneys. In Stanislaus County, a self-advocate shared that he is on the brink of losing his job, due to the complete loss of public transportation in his community, a loss which will adversely

affect his entire life. Regional staff stepped forward to address policymakers about discontinued bus service (due to non-compliance issues regarding fare box guidelines) in a community with several large care facilities housing residents with daily transportation needs (e.g. traveling to work, home, day programs, shopping, medical appointments, etc.).

Staff met with a member of the Legislative Analyst's Office for outreach purposes, and provided a 1-page information sheet for Representative DeSaulnier. The Council provided Assemblymember Medina with information about access to quality healthcare, transportation, services for undocumented monolingual immigrants and their families with I/DD and/or cross-disabilities, AB 2171 (Frazier) and SB 1274 (McGuire) – bills addressing CIE and data exchange between state agencies serving PwD. The Council met with Assemblymember Waldron's office regarding the Voter Summit and transportation, especially as it relates to CIE opportunities.

The Council co-facilitates a local ADA Transition Committee, housed within the Disability Action Center, which is identifying barriers within the city of Chico (Butte County) and working with the Public Works and Human Resources directors to build improvement plans (e.g. public streets, sidewalks, playgrounds, etc.). Regional staff is working with the Thompson Policy Institute to identify training needs related to special education peer-based, systemic advocacy. In Los Angeles County, the Council convened a meeting with policymakers and stakeholders to create a Community of Practice (CoP) to address POS disparity within the RC system and increase cultural and linguistic competence. In San Diego and Inyo counties, Council staff and RAC members met with Assemblymember Weber's office to discuss employment issues and suggest that an intern with I/DD be hired within the office.

Council members were provided with *Fundamentals* training, with information about the Council's role and vision, philosophy of community inclusion, ITACC functions, roles and responsibilities, Council and Committee Chair roles, and ethics. In Santa Clara County, the Council supported a Deaf services provider and family advocate in accepting an award and speaking of the disability community's needs with Assemblymember Chu at the Annual Community Heroes event. Regional staff provided DD Council policymakers with POS disparity information, TA, and information at the national (NACDD) conference (reaching 36). Regional staff contacted every Supervisor's office for the Orange County Board of Supervisors, to inform policymakers about the capacity-building and systemic change issues that are the primary focus of the Council and of interest to their constituents.

12. Expected Outcomes Achieved

Expected Outcomes	Achieved
<p>The Council will maintain collaborative regional groups of subject matter experts & stakeholders to address formal/informal community support issues at the legislative & policy levels; with input from the LPPC, the Council will be active in its policy-level engagement on service-related issues affecting people with I/DD &/or cross-disabilities and their families; the Council & its collaborative partners will monitor and address service, general equity and civil rights-related state & federal legislation &/or regulations on behalf of people with I/DD &/or cross-disabilities and their families</p>	<p>true</p>
<p>Stakeholders will have knowledge about proposed legislative/regulatory changes affecting community-based services for people with I/DD &/or cross-disabilities</p>	<p>true</p>
<p>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</p>	<p>true</p>
<p>Family/self-advocates with I/DD &/or cross-disabilities will have the opportunities and knowledge to participate in systemic, policy-level advocacy work to increase access to quality community-based services available to the general population</p>	<p>true</p>

13. Progress towards achieving outcomes for overall objective : The annual report should include an assessment as to the extent to which progress was made on the intended outcomes for the objective.

The Council met and/or exceeded all of its targeted activities in this objective. It is, however, an objective through which the Council will continue to be actively engaged for the duration of its 5-year State Plan. The Council's Legislative and Public Policy Committee updates its list of supported and/or 'watched' bills on a yearly basis, updating as necessary.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community). Stories of policy or legislative changes that happened as a result of Council individual advocacy work that are likely to positively impact the lives of people with developmental disabilities or that will prevent a potential negative impact (e.g., created deleted, refined programs and/or legislation, reallocated use of funds, organizational systems change as a result of evidence based practices).

N/A

Individual & Family Advocacy Performance Measure

Description

Formal & Informal Community Supports

Race/Ethnicity

Race/Ethnicity	#	%
White, alone	0	
Black or African American alone	0	
American Indian and Alaska Native alone	0	
Hispanic/Latino	0	
Asian alone	0	
Native Hawaiian & Other Pacific Islander alone	0	
Two or more races	0	
Race unknown	0	

Gender

Gender	#	%
Female	0	
Male	0	

Gender	#	%
Other	0	

Category

Category	#	%
Individual with DD	0	
Family Member	0	

Geographical

Geographical	#	%
Urban	0	
Rural	0	

I. Output Measures

Objective	Performance Measure : IFA 1.1 People with DD who participated in activities	Performance Measure : IFA 1.2 Family members who participated in activities
<p>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.*</p>	<p>1136</p>	<p>9318</p>
<p>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.*</p>	<p>26819</p>	<p>121998</p>

Objective	Performance Measure : IFA 1.1 People with DD who participated in activities	Performance Measure : IFA 1.2 Family members who participated in activities
<p>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.*</p>	1595	7737
<p>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.*</p>	1089	4156
<p>Total # of Output Respondents</p>	30639	143209

II. Outcome Measures

Performance Measures	Percent (%)
IFA 2.1 Percent of people with DD who increased advocacy	0
IFA 2.2 Percent of family members who increased advocacy	0

Sub-Outcome Measures : The number (#) of people who are better able to say what they want/say what is important to them

Projects	# People with developmental disabilities	# Family Members
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.*	4	42
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.*	41	151

Projects	# People with developmental disabilities	# Family Members
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.*	3	16
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.*	0	0
Total # of Sub-Outcome Respondents	48	209
IFA 2.3 Percent of people better able to say what they need	0	0

Sub-Outcome Measures : The number (#) of people who are participating in advocacy activities

Projects	# People with developmental disabilities	# Family Members
<p>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.*</p>	<p>17</p>	<p>123</p>
<p>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.*</p>	<p>14</p>	<p>50</p>

Projects	# People with developmental disabilities	# Family Members
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.*	3	14
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.*	0	0
Total # of Sub-Outcome Respondents	34	187
IFA 2.4 Percent of people participating in advocacy activities	0	0

Sub-Outcome Measures : The number (#) of people who are on cross disability coalitions, policy boards, advisory boards, governing bodies and/or serving in leadership positions.

Projects	# People with developmental disabilities	# Family Members
<p>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.*</p>	<p>8</p>	<p>26</p>
<p>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.*</p>	<p>9</p>	<p>36</p>

Projects	# People with developmental disabilities	# Family Members
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.*	2	7
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.*	0	0
Total # of Sub-Outcome Respondents	19	69
IFA 2.5 Percent of people on cross disability coalitions	0	0

IFA 3 The percent of people satisfied with a project activity*

0

IFA 3.1 Percent of people with DD satisfied with activity*

1

IFA 3.2 Percent of family members satisfied with activity*

7

System Change Performance Measures

Description

Formal & Informal Community Supports

SC 1: Output Measures - The number of Council efforts to transform fragmented approaches into a coordinated and effective system that assures individuals with developmental disabilities 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.

Objective	SC 1.1 Number of policy/ procedures created/ changed	SC 1.2 Number of statutes/ regulations created/ changed	SC 1.3.1 Number of promising practices created	SC 1.3.2 Number of promising practices supported through Council activities	SC 1.3.3 Number of best practices created	SC 1.3.4 Number of best practices supported through Council activities	SC 1.3 The number of promising and/or best practices created and/or supported	SC 1.4 Number of people trained/ educated	SC 1.5 Number of Systems Change activities with other organizations
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.	0	0	0	1	0	0	1	8604	17

Objective	SC 1.1 Number of policy/ procedures created/ changed	SC 1.2 Number of statutes/ regulations created/ changed	SC 1.3.1 Number of promising practices created	SC 1.3.2 Number of promising practices supported through Council activities	SC 1.3.3 Number of best practices created	SC 1.3.4 Number of best practices supported through Council activities	SC 1.3 The number of promising and/or best practices created and/or supported	SC 1.4 Number of people trained/ educated	SC 1.5 Number of Systems Change activities with other organizations
<p>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.</p>	20	2	12	46	14	33	105	237849	321

Objective	SC 1.1 Number of policy/ procedures created/ changed	SC 1.2 Number of statutes/ regulations created/ changed	SC 1.3.1 Number of promising practices created	SC 1.3.2 Number of promising practices supported through Council activities	SC 1.3.3 Number of best practices created	SC 1.3.4 Number of best practices supported through Council activities	SC 1.3 The number of promising and/or best practices created and/or supported	SC 1.4 Number of people trained/ educated	SC 1.5 Number of Systems Change activities with other organizations
<p>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.</p>	0	0	2	0	0	0	2	8194	5

Objective	SC 1.1 Number of policy/ procedures created/ changed	SC 1.2 Number of statutes/ regulations created/ changed	SC 1.3.1 Number of promising practices created	SC 1.3.2 Number of promising practices supported through Council activities	SC 1.3.3 Number of best practices created	SC 1.3.4 Number of best practices supported through Council activities	SC 1.3 The number of promising and/or best practices created and/or supported	SC 1.4 Number of people trained/ educated	SC 1.5 Number of Systems Change activities with other organizations
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.	0	0	0	0	0	14	14	3491	25

Systems Change SC 2: Outcome Measures

Outcome Measures	Number(#)
SC 2.1 - Efforts that led to improvements *	93

Outcome Measures	Number(#)
SC 2.2 - Efforts that were implemented *	12250

Sub-Outcome Measures

Objective	SC 2.1.1 Policy, procedure, statute, regulation improvements	SC 2.1.2 Policy, procedure, statute, regulation implemented	SC 2.1.3 Number of improved promising or best practices	SC 2.1.4 Number of implemented promising or best practices
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.	0	0	0	391

Objective	SC 2.1.1 Policy, procedure, statute, regulation improvements	SC 2.1.2 Policy, procedure, statute, regulation implemented	SC 2.1.3 Number of improved promising or best practices	SC 2.1.4 Number of implemented promising or best practices
<p>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.</p>	54	40	39	11063

Objective	SC 2.1.1 Policy, procedure, statute, regulation improvements	SC 2.1.2 Policy, procedure, statute, regulation implemented	SC 2.1.3 Number of improved promising or best practices	SC 2.1.4 Number of implemented promising or best practices
<p>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.</p>	0	0	0	0

Objective	SC 2.1.1 Policy, procedure, statute, regulation improvements	SC 2.1.2 Policy, procedure, statute, regulation implemented	SC 2.1.3 Number of improved promising or best practices	SC 2.1.4 Number of implemented promising or best practices
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.	0	0	0	756

Detailed Progress Report on Goals

Description

Housing

Area Of Emphasis

Area of Emphasis	Planned for this goal	Areas addressed
Quality Assurance		true
Education and Early Intervention		true
Child Care		
Health		
Employment		true
Housing	true	true
Transportation		true
Recreation		
Formal and Informal Community Supports		true

Strategies

Strategies	Planned for this goal	Strategies Used
Outreach	true	true
Training	true	true

Strategies	Planned for this goal	Strategies Used
Technical Assistance	true	true
Supporting and Educating Communities	true	true
Interagency Collaboration and Coordination	true	true
Coordination with Related Councils, Committees and Programs	true	true
Barrier Elimination	true	true
Systems Design and Redesign		
Coalition Development and Citizen Participation	true	true
Informing Policymakers	true	true
Demonstration of New Approaches to Services and Support		false
Other Activities		true

3. Intermediaries/Collaborators

Collaborators	Planned for this goal	Actual
State Protection and Advocacy System	true	true
University Center(s)	true	true

Collaborators	Planned for this goal	Actual
State DD agency	true	true
Housing developers/private sector builders	true	true
Governance/regulatory agencies	true	true
Public interest advocacy groups/private non-profits	true	true

Provide an overall cohesive description of (a) the extent to which progress is being made in achieving the intended outcomes of the Goal for the reporting year, (b) the extent to which each goal was or was not achieved for the reporting year, (c) where applicable, factors that impeded goal achievement for the reporting year, (c) needs that require substantive state plan amendment (goal only)

Implementing housing policy and developing adequate (affordable, accessible, safe) housing stock has been an ongoing struggle for Californians (regardless of income), but especially for vulnerable and/or marginalized populations (e.g. PwD, elders, returning/displaced veterans, and those who are chronically homeless). California's high cost of living - coupled with ongoing natural and/or man-made disasters - has seriously reduced available low-cost housing stock, exacerbating the problem of finding sufficient housing for those with low-to-very-low income and in need. Finally, housing shortages are long-term problems not easily addressed through single-session legislative efforts; omnibus housing (policy) bills are seldom introduced/considered and are exceptionally difficult to effectively implement, making this an ongoing issue. Stepping back to consider the larger picture, the Council released a housing grant to redirect the focus on people with I/DD, an underserved (and often invisible) residential constituency.

Grant Projects

Statewide Strategic Framework (SSF): Supportive Housing for People with Developmental Disabilities (Lanternman Housing Alliance)

This (SSF) project was designed to capture the overall status of affordable housing for individuals with I/DD throughout California, to identify barriers to expanded production, and to make recommendations for overcoming those barriers. The resulting list of strategies ranged from creation of dedicated funding streams to identification of other funding vehicles, better alignment between the housing and community development systems, local actions such as Section 8 voucher set-asides, etc. While it takes time to develop and produce results, these options will result in more individual, independent living opportunities for people I/DD.

The applied methodology estimates the number "from 450 individuals (when identifying people with I/DD who are reported to be homeless/transient) to 10,500 individuals (when considering adults from institutional and congregate settings). This number increases to more than 20,000 people with I/DD, when factoring in adults with I/DD living in a family home with aging family/caregivers.

For policymakers developing housing, providing access services or seeking affordable housing for people with I/DD, the SSF provides: 1) models for development of and/or access to affordable housing throughout California; 2) innovative programs and/or systems created in other states to facilitate creation or provision of affordable housing; 3) current sources of available funding for capital and operating and/or rental subsidies; 4) examples in use with other supportive/special needs communities (e.g. homeless, veterans, etc.) that leverage available funding to leverage or create housing stock.

For PwD who want or need (or will need in the foreseeable future) alternative living arrangements, the SSF contains more than 20 recommendations, which are applicable at the community, county and statewide levels and are designed to assist PwD in obtaining housing of their choice.

The SSF has been presented to California's Council members and the National Conference of State Councils. SCDD will be disseminating the SSF to policymakers throughout the state and will also make it available to other states and Councils.

This project leveraged \$6,000 in additional funding, reaching 98 self-advocates (SA) and 411 family advocates (FA). 61% of SA and 91% of FA reported increasing their advocacy because of this project, with satisfaction ratings of 43% (SA) and 63% (FA). 85% of people, overall, reported being better able to say what services and supports, etc. that they want.

Additional Work

The Council's 12 regional offices identified stakeholders and/or established/participated in housing-related coalitions within their own geographic regions (given the unique needs of those areas and residents), reaching 1,013 people in a series of 33 stakeholder meetings. Staff also engaged in 30 regional DFEH/HUD/Housing Authority meetings, collaborating with 885 people. The Council developed 2 housing curricula (about affordable, accessible, safe housing and housing rights), providing 4 trainings to 113 stakeholders. A series of 28 eBlasts reached 20,298 housing stakeholders, and staff provided TA on 32 occasions, serving 102 people. The Council developed and provided 6 trainings about the HCBS Final Settings Rule, reaching 277 people. Staff provided 5 trainings to address housing in ITP/IPP planning, reaching 84 people, and 10 trainings about financial planning, public entitlements, and housing/support services, reaching 118 people. In each of the Council's 12 regions, lists of emergency placement issues were developed, in addition to regional/local collaborators and stakeholders to serve as experts in accessible and affordable housing.

Convening meetings represents more than simply engaging in the ongoing work of the Council, as every Council and/or committee meeting also involves providing tangible support (e.g. travel/lodging arrangements, facilitation, etc.) to family/self-advocates in support of their own housing advocacy and self-governance efforts. In addition to convening LPPC meetings, the Council educated/informed policymakers, other state agencies and stakeholders 18 times, reaching 318 people. Additionally, 14 website postings, phone calls, presentations, social media/email blasts reached 10,993 people with housing-related information. Council staff testified on legislation and/or submitted comments 4 times, reaching 199 people. Regional staff provided technical assistance 270 times, serving a total of 1,895 people, and leveraged \$6,750 in housing-related activities.

While the Council met its work plan targets/activities for this goal, the needs associated with housing for PwD are far from being met in California, needs which require continuing housing-related work on the part of the Council. There is currently no reason to amend this goal, outside of combining the policy work into Objective 6.4 for the remaining State Plan period (through FFY 2021).

4 Year Overview : A description of how the Council will use and build from knowledge gained and progress made to move forward in the next state plan cycle.(This section only applies to the PPR submitted for the Federal Fiscal Year 2020, which will be due by January 1, 2021)

5 Year Overview : For the final PPR of this state plan cycle, provide an overall analysis of the outcomes achieved during the five year state plan cycle. The description should include the extent to which diverse stakeholders are satisfied with council activities that promote self-determination and community participation for individuals with disabilities and families, results of other types of information gathering such as focus groups, surveys, or other feedback or input methods with individuals with developmental disabilities and families and major accomplishments and factors impeding goal achievement (if applicable).(This section only applies to the PPR submitted for the Federal Fiscal Year 2021, which will be due by January 1, 2022)

Objectives

1. The Council will identify and decrease barriers to housing for people with I/DD.

1. **Goal:** Housing

2. **State Plan Objective** Objective 2

3. **This Objective is**

System Change

4. This Objective is

Ongoing

5. This Objective is

	The Objective is
a. Fulfilling a Self-Advocacy DD Requirement *	No
b. Targeted disparity *	No
c. DD Network Collaboration *	No
d. A demonstration project of New Approaches to Services and Supports *	No
e. A demonstration of projects or activities *	No

6. Stage of Implementation

Implementation

7. Provide an overall description of this effort

Changing and evolving state/federal priorities in regard to home and community-based services have created an increased urgency for securing sufficient sources for integrated, community-based housing for people with I/DD. Given the disparity between State Plan survey respondents and the Council's regional staff in regard to identifying housing as a primary need, the work of this objective is designed to educate family/self-advocates and others about (issues around) obtaining available, affordable and accessible housing. While the ultimate objective is to identify and decrease barriers to housing, those barriers are numerous and complex and can also be person-specific, including such diverse issues as self-determination, employment, financial assets and public entitlements, transportation, community-based service availability, and others. A significant change in or loss of these components can have an adverse cascading effect, with the subsequent loss of (access to) housing and/or related services. California and its diverse terrain and population are also subject to a range of man-made and natural disasters, resulting in loss of available housing (and related services) due to fire, earthquake, flooding, mudslides, and more. This objective and its work plan pull together these components with training and information distribution.

8. Outputs Achieved

Expected Outputs	Achieved
1 HCBS curriculum; 10 trainings, reaching 100 people	true
1 transition/IPP curriculum; 10 trainings, reaching 100 people	true
1 set of electronic/hard copy resource/information materials, reaching 5,000 people	true

Expected Outputs	Achieved
1 financial planning/entitlements/residential supports/services curriculum; 12 trainings, reaching 250 people	true
1 updated needs assessment; 1 updated list of residential options, in case of emergency, reaching 5,000 people	true

10. The report should include the following: (a) A narrative progress report that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenges to achieving the objective and unexpected benefits.(b) For system change activities, include a description of the stage of implementation (planning, initiation, implementation, outcome/fully integrated) of the system change initiative. (c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report).

Securing safe, accessible, affordable housing is a primary challenge for most people with I/DD because of high rental costs throughout the state and the challenges of saving for a large deposit. People who rely solely on government support, such as Social Security allotments, rarely have sufficient income to qualify for housing without the assistance of HUD housing choice vouchers (HCV) or supplemental sources of income or assistance. The need to save for a deposit, first month's rent, and, typically, last month's rent has pushed independent housing opportunities out of reach for many people receiving public entitlement benefits. Until recently, people on Social Security/Supplemental Security Income (SSI) benefits were not allowed to keep more than \$2,000 in accrued assets, without

losing benefits. Even with HCV assistance, low-income housing is not always available and may not be fully accessible or safe. Independent living requires a complex set of supports. To address housing needs of family and self-advocates throughout the state, the Council leveraged \$750 in funding and collaborated with over 350 agencies and/or personnel to decrease barriers in obtaining affordable, accessible, safe, and fully integrated housing.

In response to the complex needs associated with obtaining and maintaining appropriate housing, the Council engaged in a multi-pronged plan to address critical issues. Staff held 21 training sessions on housing barriers, housing options, and long-range financial planning options to help family and self-advocates reach housing goals. The Council also employed both systemic advocacy and customized technical assistance to help 1,682 people handle the gamut of barriers to affordable, accessible housing, through in-person contact and materials distributed to 9,215 people in hard copy. Additionally, the Council developed, distributed, and/or posted to its website housing information to reach an additional 79,884 people.

The Council has encouraged RCs to begin conversations about the HCBS rollout with state-level partner agencies, as experience has demonstrated that CCL continues to enforce old regulations until changes have been clearly updated and can be uniformly enforced. At the regional center (RC) level, the Council has been providing information about county tax incentives and other ideas to increase supplies of low-income, accessible housing or otherwise authorize and encourage the use of ADUs (Accessory Dwelling Units).

Around the issues of housing, the Council and its regional staff targets family/self-advocates, stakeholder agencies, policymakers, and the development and building industries for outreach and training purposes. Delays in qualifying people through Medicare and confusion about the responsibility of managed healthcare groups to provide payment for residential placement, nursing care, and/or medications have all combined to create an undue financial strain on facilities and present the very real possibility of residents being rejected for placement or evicted, with neither appropriate medical care or necessary medications.

As part of a 3-day residential service orientation for 23 service providers, a Councilmember and regional staff in the 7-county Central Coast region of California provided information on the Lanterman Act, civil rights, person-centered planning, and new HCBS Final Rule regulations.

In Orange County, the Council provided training to case managers with Family Assistance Ministries (FAM), which serves more than 12,000 who are homeless or at risk of becoming displaced. In El Dorado County, the Council provided training on inclusion and the HCBS Settings Rule to 35 people, in addition to providing resource material. In San Bernardino County and in collaboration with the Superintendent of Schools and East Valley SELPA, the Council provided training (*Living Options for People with I/DD*) and information about ILS/SLS, independent and/or supported living options, RC services, and local and state-level educational, social and rehabilitation services.

In northern California, staff organized and provided a presentation about long-range financial planning by the Rural Communities Housing Development Corporation (RCHDC). In addition to reviewing the material to ensure appropriate use of disability-related language, the Council provided resource information about bridging the gaps between median rental costs/home prices and SSI/SSDI.

In Sacramento County, Council staff reached 400 mono- and bilingual people (at the Russian Community Networking Breakfast) with materials about CalABLE and low-income housing. Staff also worked with the El Dorado Union High School District, providing resource materials about independent living and IHSS to more than 400 people about transition and independent and supported living options. Staff provided a resource table, reaching 170 people at the Sacramento City College Health Fair and Disability Awareness Day. The Council sponsored and provided resources about IHSS and CalABLE at the Work Skills Fair (*The Spectrum of Ability*), reaching 100 people. At the Sacramento Food Bank & Family Services Network Café, the Council shared information with staff from 70 agencies about CalABLE, self-determination, etc.

During the College of the Sequoia's Community Resources and Employment Fair (Tulare County), staff provided information on Fair Housing Rights, reaching 470 people. In Solano County, staff provided resource information at the Community Outreach Transition Fair, reaching 265 people about CalABLE and saving money without losing public entitlements. In Napa County, SCDD provided a resource table for the Down Syndrome Awareness Day luncheon, disseminating information about CalABLE to 225 people. In Calaveras County, 40 people received information from regional staff about supported living options, CalABLE, and affordable housing at the Transition Fair. At the Butte County Community College Wellness Fair, the Council reached 48 people with information about and applications for IHSS services.

CalViva Health, a locally managed public health care plan (through the Medi-Cal Managed Care Program and operated by the Fresno-Kings-Madera Regional Health Authority), has failed to fund the initial 2 months of residents' placement and critical medications (specifically that for pain). As a result, the only pediatric ICF/DD-N provider in the Central Valley region (serving the counties of Mariposa, Merced, Madera, Fresno, Tulare, Kings, and Kern) is no longer accepting new clients with I/DD. Council staff is working to ensure that the RC is fully aware and responsive to this situation.

In Contra Costa and Alameda counties, Council staff has been collaborating with Disability Rights California (DRC – one of the Council's federal partners) to address negligence and social isolation in group residential environments. In meeting with deaf and deaf-blind residents and their family members, it was reported that care homes in these regions are employing no one who is conversant in ASL or tactile signing (or any preferred method of communication), leaving residents without the ability or opportunity to communicate within a residential setting. This raises the concern of safety, in addition to the trauma of living in an environment in which someone with multiple disabilities is unable to socially communicate with anyone in the home. The Council is working to provide DRC with anecdotal, qualitative data about the prevalence of these issues (e.g. Is this a local/regional issue or is there statewide prevalence?), in order to move the investigation forward. Council staff reports that – in formulating a potential solution – residents have highly individualized preferences in regard to communication methodology. Some residents report that they would prefer to live in an environment in which residents and staff all use the same type of communication; still others would prefer to live in a more inclusive, diverse setting with multiple methodologies (e.g. ASL, tactile sign, etc.). This issue will move forward so long as there continues to be a need.

The Council's regional staff has been meeting with students and family members who are part of Meristem's 3-year transition program (for young adults with I/DD in Sacramento County) and in their last year. While transition into community living is their desire, they are admittedly not ready to be fully independent. Additionally, only 25% are RC clients and only 12% receive SSI, leaving family responsible for the costs of housing and additional supports. Staff is providing resource information and will continue to provide technical assistance.

The Council has provided information and technical support to a residential service organization about POS disparities, un-utilized funding, and the disparity of services between people with I/DD living in a family home and those living out in the community. In Humboldt County, the Council is working with the Human Rights Commission about ‘decriminalizing’ homelessness, in part through the influx of \$5M that will be earmarked for PwD (including I/DD and mental illness), homeless, and low-income families.

As with the work of other objectives, survey instruments were administered only with direct training activities and were not effectively designed to capture data relevant to FPMs. The Council has revised those instruments accordingly and is working to identify and report long-term outcomes with individual/family advocates, housing professionals and others within the community. The Council did capture and report the (raw) number of participants in Council-related activities.

12. Expected Outcomes Achieved

Expected Outcomes	Achieved
<p>Family/self-advocates will have knowledge about HCBS and accessible, affordable, safe, integrated housing/residential options, supports & services for people with I/DD &/or cross-disabilities and will have knowledge to overcome barriers (e.g. financial issues, choice, accessibility, etc.) in housing choices</p>	<p>true</p>
<p>Young adult and aging self-advocates & families will have knowledge about transition issues, housing entitlement programs &/or long-term residential options for aging adults with I/DD &/or cross-disabilities; family/self-advocates will have information to advocate for & access resources</p>	<p>true</p>
<p>Californians throughout the state will have information about housing options for people with I/DD &/or cross-disabilities</p>	<p>true</p>

Expected Outcomes	Achieved
<p>People with I/DD &/or cross-disabilities and their families will have information about options for long-range residential & financial planning/preparation about and identification of/access to appropriate, preferred housing choices</p>	<p>true</p>
<p>Family/self-advocates and others will have information, knowledge and choices about alternative residential options in cases involving emergency/relocation</p>	<p>true</p>

13. Progress towards achieving outcomes for overall objective : The annual report should include an assessment as to the extent to which progress was made on the intended outcomes for the objective.

The Council met and/or exceeded its planned (housing Objective) targets for the current federal fiscal year. Recurring manmade and/or natural disasters, however, continue to deplete the available housing supply, which reduces the availability of affordable, accessible, safe and fully integrated residential options for people with I/DD and/or their families. These events have solidified the ongoing needs of family/self-advocates for obtaining current and relevant information, training, and technical assistance about housing through the work of this objective. This objective will continue as part of the Council's strategic 5-year State Plan.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community). Stories of policy or legislative changes that happened as a result of Council individual advocacy work that are likely to positively impact the lives of people with developmental disabilities or that will prevent a potential negative impact (e.g., created deleted, refined programs and/or legislation, reallocated use of funds, organizational systems change as a result of evidence based practices).

N/A

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 housing for people with I/DD.

1. Goal: Housing

2. State Plan Objective Objective 3

3. This Objective is

System Change

4. This Objective is

Ongoing

5. This Objective is

	The Objective is
a. Fulfilling a Self-Advocacy DD Requirement *	No
b. Targeted disparity *	No
c. DD Network Collaboration *	No
d. A demonstration project of New Approaches to Services and Supports *	No
e. A demonstration of projects or activities *	No

6. Stage of Implementation

Implementation

7. Provide an overall description of this effort

Legislative and housing policy changes were included as a separate objective of the State Plan because 12.1% of the 9,370 self-advocates and family advocates surveyed in the statewide 2016 State Plan survey indicated that housing was a top need throughout the state and ranked fifth highest as a priority. Additionally, Council regional offices noted that, according to local community feedback, housing is the highest emerging need because of barriers associated with affordability, accessibility, and safety. People with disabilities and their families continue to express (in phone call and at public meetings) that more low-income housing should be developed. The number of individuals with I/DD and their families struggling to find housing also points to a need for more training on how to access Section 8 and other housing programs, all of which typically maintain long wait lists. While the 1st of the housing objectives focused on increasing actual community stock, the 2nd objective provides training, information and technical assistance to people with I/DD and their families in accessing available housing. The 3rd and final objective beneath the housing goal takes on overall, statewide policy changes in an attempt to increase the availability of safe, accessible, affordable housing for people with I/DD and/or their families.

8. Outputs Achieved

Expected Outputs	Achieved
13 lists; 1 list of updated LPPC platform & priorities; 3 LPPC meetings	true
8 pieces of monitored legislation, reaching 40 people	
15 meetings/phone calls, reaching 300 policymakers/stakeholders; testimony given in 3 legislative events, reaching 250 people	true

10. The report should include the following: (a) A narrative progress report that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenges to achieving the objective and unexpected benefits.(b) For system change activities, include a description of the stage of implementation (planning, initiation, implementation, outcome/fully integrated) of the system change initiative. (c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report).

SCDD staff reviewed all bills introduced for the 2018 session (as discussed in the narrative for Objective 2.2) and made its recommendations to the LPPC (which met 5 times over the year). The Council (through the LPPC) took positions on/monitored no housing-related bills for the 2018 FFY, as the California Legislature passed a large housing package in its 2017 session. Instead, as a member of the Lanterman Coalition, the Council (in a series of 9 meetings with the Coalition, attended regularly by 25 people) focused on advocating for the creation of an integrated housing fund with money from the closure of California's developmental centers. While this proposal did not pass through California's budget process, it will be revisited in the next legislative session. SCDD also participated in the Coalition's strategic planning for the new session, determining that it would once again focus on its housing proposal, while also taking the issue of provider rates under consideration.

In response to SB 35 (Wiener), a 2017 affordable housing bill signed into law, more than 97% of California communities are currently out of compliance (<https://sf.curbed.com/2018/2/2/16965222/california-sb35-housing-bill-list-wiener> (<https://sf.curbed.com/2018/2/2/16965222/california-sb35-housing-bill-list-wiener>)) with standards for streamlining the process of approving affordable housing developments to meet with regional, low- to very-low income housing needs. Accessing all options for accessible and affordable housing is critical in California, given the state's ongoing housing crisis. SCDD has found inconsistent application of requirements about whether

(or not) ADUs are considered eligible housing for the receipt of supported living services. SCDD met with stakeholders and potential authors regarding drafted model language for a bill to ensure that people in accessory dwelling units (ADUs) will be eligible for supported living services through the RC system, as the legislative introductory period expired. The Council will now reintroduce the bill in FFY 2019 and/or get further service provision clarification from DDS. The Council is also continuing to monitor an appellate case (Reilly v. Marin Housing Authority, filed by the Council's federal P&A partner, DRC) that upheld a lower court's decision to affirm IHSS payments as 'income,' in regard to HUD Section 8 eligibility. This ruling will have a significantly negative impact on parents who struggle to keep their severely disabled children in an affordable home setting, such as government/HUD-subsidized community housing.

In Santa Cruz, Santa Clara, San Benito and Monterey counties, the Council collaborated with the Bay Area Housing Coalition, participating and presenting information in focus groups through housing workshops. In Mendocino County, regional staff is working with County Supervisors, the Behavioral Health Board, the Rural Communities Housing Development Corporation (RDHDC) and other developers to address housing for people with severe mental illness (SMI) and/or I/DD. After 3 years of the Council's collaborative efforts, an RDHDC project in the city of Ukiah broke ground, which will provide 38 much-needed housing units in the region – units that will serve as permanent supportive housing for low-income and/or seriously mentally ill homeless people. Money for this project came from leveraging \$1.3M in MHSA funding and a \$9M grant through the California Tax Credit Allocation Committee's Low-Income Housing Tax Credit program. Council staff is working with RDHDC to consider using their housing funds as a match for an 8-acre, 80-unit project in the region. Staff also collaborated with the Behavioral Health Board to draft a mission statement to commit to funding and development of future housing options for PwD.

In Santa Clara and Santa Cruz counties, staff is working with the Housing Choices Coalition and the counties' Supervisors to: 1) revise criteria for Measure A, the low-income housing initiative; 2) build housing preferences for people with I/DD; 3) promote this issue with families within the I/DD community; and 4) collaborate with local advocates to promote the development of affordable housing units for PwD. In San Diego County, the Council participated in the 14th Annual Community Legislative Forum (*A Home of My Own*) with (350 people, including) policymakers from the Legislature, state agencies, both the Housing Commission and Federation, and other housing entities. The Southern California Housing Collaborative shared its work in developing housing stock in San Diego and Imperial counties

by convincing the Imperial Valley Housing Authority to issue an additional 57 Section 8 vouchers. \$900M was raised through a bond measure, with the homeless, low-wage families, seniors, veterans and PwD each receiving a third of the fund for targeted housing. In San Diego County alone, there is a nearly 10-year wait for those (88,000 people currently) applying for Section 8 housing.

In Ukiah, 1 of only 13 California cities currently in compliance with SB 35 (Wiener), the Council is working with the HHSA Behavioral Health Housing Committee to increase identification, advocacy and/or sponsorship of legislative, regulatory, policy, procedural, and/or practice changes to increase affordable, safe, and accessible housing stock for PwD. The Rural Community Housing Development Corporation (RCHDC) is working on a project that will set aside 10% of its planned 80 units for RC clients (in perpetuity). In Alameda County, regional staff serves alongside architects, local housing advocates and the Center for Independent Living on a panel focused on access, housing and urban/city planning. In San Benito County, staff is working with the local RC to expand services to elders who are caring for an adult child with I/DD and attempting to remain in their own homes.

In Alameda County (a county with the 7th highest density population in the state), the Council provided testimony (regarding the need for housing for PwD) in response to an appeal of the 2527 San Pablo project, establishing set-asides for low- and very low-income residents with I/DD. Regional staff met with stakeholders and councilmembers, updating information about housing needs for people with I/DD. In Mendocino County, the Council provided testimony (to 85 people) in response to the studies and reports about homeless populations within the county (*Homeless Needs Assessment and Action Steps*), finding that the data collection process failed to include vulnerable populations. As a result of testimony, Mendocino County will reopen the issue and extend the population reach of the targeted studies to include those with disabilities. Staff also met with the Supervisor of District 1 and members of the Behavioral Health Board to discuss the Mendocino County Child Care Policy Council's 5-year plan and the Council's LPPC platform.

In Riverside County, SCDD is working with the Coachella Valley Resource Collaborative to 1) address housing and homelessness in the region, and 2) consider emergency housing supports for families in crisis in the surrounding community. Systemically, families and PwD are separated or denied shelter opportunities because of the supports necessary to assist with disabilities and/or associated medical needs. Council staff is working to inform stakeholders (reaching 45 people) of the need to keep families (with I/DD) together and provide technical assistance to develop housing options for families in crisis. In the City and County of Fresno, regional staff provided

stakeholders (property owners of apartment complexes and single family rental houses) with information about PwD, low- to very-low income and housing restrictions, and the reality of substandard housing conditions, per recent reporting (*Living in Misery*) and due to poor city oversight.

In the County of Marin, regional Council staff provided extensive information to the Housing and Federal Grants Division Planner, in preparation for a report and recommendations for the development of a former Coast Guard site, which was not (currently) being considered as affordable housing. The Council is meeting with Supervisors of County Boards to inform them of HUD RFPs, which is set to award up to \$100M in public housing vouchers to public housing agencies. This funding will assist non-elderly people with disabilities who are: 1) transitioning from institutional or other-segregated settings to community living; 2) at serious risk of institutionalization; 3) homeless; and/or 4) at risk of becoming homeless. In Santa Clara County (California's 6th most populous), the Council facilitated a town hall meeting, with sessions by Senator Hill, Assemblymember Mullin, and an Affordable Housing Panel, to address recent legislation, county and state policies about prioritized target populations, common strategies and key strategic partnerships, regional pockets of acute need, and best practices for housing advocacy (reaching 83 people). Staff also testified at the Cupertino City Council meeting about the need to: 1) include extremely low-income housing development in the local housing policy, 2) promote housing for people with I/DD; 3) continue collaboration between housing entities; and 4) build disability awareness among local policymakers.

No data collection instruments were used in regard to activities associated with this objective. The Council has sought TA from ITACC and is in the process of changing its data collection methodology regarding Council activities (outside of trainings).

12. Expected Outcomes Achieved

Expected Outcomes	Achieved
The Council will have updated information from state/regional stakeholders/experts about accessible, affordable housing options to inform the LPPC and its work in the development of a platform & priorities	true
The Council & its collaborative partners will maintain a legislative profile to positively impact statewide housing policies for people with I/DD &/or cross-disabilities	true
The Council will positively impact housing policies throughout the state through social media, calls, presentations, and public comments &/or testimony	true

13. Progress towards achieving outcomes for overall objective : The annual report should include an assessment as to the extent to which progress was made on the intended outcomes for the objective.

The Council met or exceeded its targets for this policy-level housing objective. Housing policy, however, remains a critical issue for people with I/DD and their families. Over the 2017 FFY, the state of California passed a housing package that, while not specifically addressing breakout populations, was designed to increase affordable housing stock throughout the state. The Council then monitored the implementation of the overall package (through FFY 2018) to promote impact on people with disabilities. The exception to this progress was that the Council's LPPC identified no bills to monitor and/or support, although there were local initiatives and regulations that were affected by the Council throughout the state. This objective is critical to monitoring and addressing state and local housing policies and the legislation that addresses statewide shortages. The Council will continue to work with policymakers and communities throughout California to increase housing for people with I/DD.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community). Stories of policy or legislative changes that happened as a result of Council individual advocacy work that are likely to positively impact the lives of people with developmental disabilities or that will prevent a potential negative impact (e.g., created deleted, refined programs and/or legislation, reallocated use of funds, organizational systems change as a result of evidence based practices).

N/A

3. The Council will work with housing entities to increase the development and/or provision of community housing for people with I/DD.

1. Goal: Housing

2. State Plan Objective Objective 1

3. This Objective is

System Change

4. This Objective is

Ongoing

5. This Objective is

	The Objective is
a. Fulfilling a Self-Advocacy DD Requirement *	No
b. Targeted disparity *	No
c. DD Network Collaboration *	No
d. A demonstration project of New Approaches to Services and Supports *	No

e. A demonstration of projects or activities *

The Objective is

Yes

Project Name*

1. Statewide Strategic Framework: Supportive Housing for People with Developmental Disabilities (Lanterman Housing Alliance); 10/17

Original Start Date*

10-01-17

6. Stage of Implementation

Implementation

7. Provide an overall description of this effort

In its survey of the community about needs (to develop the Council's 5-yr goals), community feedback ranked housing as the 5th in importance, as reported by family/self-advocates. Regional staff, however - all of which are deeply embedded at regional levels and knowledgeable about regional issues affecting people with I/DD and/or cross-disabilities - ranked housing as the #1 emerging concern in communities throughout California. Two (2) prevailing concerns included affordability and accessibility (regarding both physical and service-related barriers associated with community-based housing). While community-based housing may not appear to be an issue for every family or individual with I/DD, it is an issue that cuts across all disabilities and communities and can suddenly become an unexpected, critical need at some point in anyone's life. California's most vulnerable populations are also most at risk in the state's current housing crisis. The Council, through its constituency and this objective, must work to tackle an important social services and community need for accessible, affordable housing within profit-based, private construction, rental and sales industry associated governmental entities throughout California. This objective is designed to develop cross-disciplinary relationships between the private and public sectors, building collaborations that will work toward increasing the supply of integrated, affordable and accessible housing for people with I/DD and/or cross-disabilities.

8. Outputs Achieved

Expected Outputs	Achieved
25 regional coalition/stakeholder meetings, reaching 250 people; 12 meetings with regional Dept. of Fair Employment & Housing (DFEH), HUD, &/or local housing authorities, involving 120 people	true
24 electronic submissions, reaching 5,000 people; 12 distributions of written materials, reaching 1,500 people	

Expected Outputs	Achieved
1 updated curriculum; 12 trainings, reaching 250 people	true

10. The report should include the following: (a) A narrative progress report that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenges to achieving the objective and unexpected benefits.(b) For system change activities, include a description of the stage of implementation (planning, initiation, implementation, outcome/fully integrated) of the system change initiative. (c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report).

Obtaining affordable, available, and accessible housing is an ongoing challenge for people with I/DD and those who care for them, as the cost of housing continues to rise in the most populous areas of California. Only 80,000 new homes are built a year in California, while the state's Housing and Community Development Department estimates that the state actually *needs* 180,000 more units a year.

Over 78% of people with I/DD now live with a parent, other family member(s), or within their own home (DDS, 2018, p. 10). Despite a major push for inclusion and community living, fewer Californians with I/DD live independently than did so in 2007. Staff built coalitions, engaging nearly 2,000 people in a total of 63 housing-related meetings with local, regional, state and federal collaborators. Council staff identified community housing assets and challenges, prioritized strategies, and developed action plans with measurable objectives.

Staff issued and distributed 28 electronic articles with housing-related information to more than 20,290 people throughout the state, highlighting the housing needs of people with I/DD and/or cross-disabilities. The Council also developed 2 regionally relevant curricula about affordable, accessible, safe housing and housing rights, reaching over 110 people in 4 training presentations. Staff was contacted for technical assistance more than 30 times, reaching 102 people.

The Council is continuing to make progress in northern California, where the Housing Authority of the County of Butte (which also serves Glenn County) is reportedly providing 1,955 Section 8 Housing Choice vouchers (HCV) to Butte County residents and 87 vouchers to residents of Glenn County. The program also has 134 Veterans Affairs Supportive Housing Program (VASH) vouchers, which require a VA referral from the Department of Veterans Affairs.

In the counties of Santa Cruz, Santa Clara, San Benito, and Monterey, the local RC is working with the Council to educate residential care providers and employment services about HCBS settings and the importance of person-centered planning, as part of the HCBS Roundtable discussions. In San Jose County, a \$450M bond was placed on the November ballot for affordable housing development, based on the area median income (AMI) of the region's population. County officials assured the Council that the bond measure will include considerations for PwD.

A new and particularly innovative collaborative partnership was produced in Riverside County, when the Council joined forces with the Palm Desert Police Crime Prevention Unit to provide training to housing and apartment managers about effective communication with people with I/DD who are transitioning into the community and the housing rights of PwD. In order to mitigate negative interactions, protect the social/civil rights of PwD, and keep housing entities and others informed about fair housing rights and the needs of people with I/DD who may be transitioning into the community, the Council will be proactively meeting with/presenting to this group on a quarterly basis.

The Council's training and outreach efforts target diverse populations throughout the state and, whenever possible, include large conferences or events. During the statewide 23rd Annual Self-Advocacy Conference, the Council collaborated with a self-advocate for a training session on housing (*What I Know about Housing Options*), which was attended by 60 people. In Orange County, the Council collaborated with the Kennedy Commission to bring a presentation by Goldfarb & Lipman LLP, an effort that reached 100 people.

Regional staff collaborated with the Housing Authority of the County of Santa Bernardino (HACSB) to provide training about its housing programs; many people with I/DD in this county use HACSB programs to obtain affordable housing, in their desire to live independently. Training included information about eligibility and enrollment requirements

In Mendocino County, local needs prompted a forum on Accessory Dwelling Units, including information about new state regulations. Fifty-five (55) attendees were interested in knowing if ADUs were allowable on their own properties, if the addition of an ADU would help pay for housing expenses, the potential impact of an ADU on property values and/or taxes, etc.

In San Joaquin County, staff provided information for nearly 400 people about affordable housing options and emergency preparedness. In the counties of Santa Cruz, Santa Clara, San Benito, Monterey, Sacramento, Yolo, Sutter, Colusa, Yuba, Nevada, Sierra, Alpine, Placer and El Dorado, regional staff gave forum presentations to residential service providers and others (reaching 65 people) on HCBS regulations, the Lanterman Act, person-centered thinking/planning, transitional funding grants, medical services, transportation, in-home day programs, and individual choice and services.

Regional and/or Headquarter staff engaged in 63 meetings, reaching and/or collaborating with 1,898 people in California about housing. Working with local housing boards and agencies to address the housing needs of people with I/DD has become a major focus for Council staff.

The Council met with 100 community agencies at the Placer County Open Forum on Housing Resources, providing information and sharing available low-income housing resources, which are notably sparse in Placer County, as in many other California cities and counties. In Mendocino County, regional staff met with Parents & Friends to tour a newly completed specialized residential facility for adults with I/DD. The fully accessible residence is available for up to 4 people with I/DD and mobility impairments. The residence includes motorized ceiling lifts and tracks and is the first of up to 4 homes to be built in the Fort Bragg area. These homes are especially suited for 'movers,' people with I/DD who will soon be transitioning from DCs to communities and homes of their choice.

In San Diego County, staff met with 90 community partners (representing 30 agencies) in the *Live Well San Diego* plan development meeting, working on plans to meet the housing needs for people with I/DD. These plans will include mixed use villages near services, implement policies and progressive programs to prevent and overcome homelessness, develop a coordinated approach to creating and financing affordable housing stock, and develop comprehensive supports associated with housing for successfully aging within the community.

In the Sacramento Valley area, staff worked with the local RC's Residential Vendor Forum (reaching 60 vendors and RC staff in housing-meetings) to provide information about HCBS Transition Funding, CalABLE, reimbursement rates, HIPAA agreements and special incident reporting.

In the exorbitantly priced Bay Area (San Francisco, Alameda, Contra Costa, Marin, and San Mateo counties), the Council is working with Senior and Disability Advocates, the Kelsey, Facebook's Menlo Park Campus, (LSA) (a nonprofit housing agency that specializes in inclusive, well support group home living), and BART (Bay Area Rapid Transit) to leverage corporate needs for affordable housing, support a healthy employee base and provide for a functional mixed-use community design.

The Lanterman Housing Alliance (LHA) received a Council grant to A) address systemic housing issues (affecting family/self-advocates with I/DD), B) develop a framework for the development of critically needed affordable housing, and C) identify and/or provide: 1) data on existing and projected needs within diverse populations and current rates of housing development within the state; 2) best practices and lessons learned from successful DD initiatives across the country; 3) funding sources for available capital, financing, rent subsidies and supportive services; 4) new funding models and innovative rental property development and/or ownership strategies (recognizing that some options may not be eligible for federal support); 5) innovative intervention strategies in use with other vulnerable communities; 6) strategic alignment of California's I/DD services/support and affordable housing systems; and, 7) opportunities for continued engagement at local, state, and/or federal levels.

LHA put together a strategic framework work group (SFWG), including representatives from the Council (SCDD), LHA, the Corporation for Supportive Housing (CSH), DDS, the Association of Regional Center Agencies (ARCA), and HOPE. LHA also sent letters and emails to key state legislators announcing the Statewide Strategic Framework and inviting participation.

In its final version, the Statewide Strategic Framework (SSF) can serve as a planning tool for resourcing housing, providing:

1. Models for the development of/access to affordable housing currently in use throughout California
2. Innovative programs or systems in other states for the creation or provision of affordable housing stock
3. Current sources of available funding for start-up capital and/or operational and rental subsidies
4. Current examples of leveraged funding used to provide housing for other vulnerable populations (e.g. homeless, veterans, etc.)

Requests for technical assistance in the area of housing have been primarily from agency personnel, committee members and government entities. Staff has provided technical assistance 32 times, reaching 102 people.

References

California Department of Developmental Services (2018). Fact Book, 15th Ed. Retrieved on 9.13.18:1545 from https://www.dds.ca.gov/FactsStats/docs/factBook_15th.pdf (https://www.dds.ca.gov/FactsStats/docs/factBook_15th.pdf).

California Department of Housing and Community Development (2018). California's Award: *Defining Resilience*. National Disaster Resilience Competition (NDRC): CDBG - National Disaster Resilience Grant (CDBG-NDR). Retrieved on 9.13.18:1515 from <http://www.hcd.ca.gov/community-development/disaster-recovery-programs/ndrc.shtml> (<http://www.hcd.ca.gov/community-development/disaster-recovery-programs/ndrc.shtml>).

12. Expected Outcomes Achieved

Expected Outcomes	Achieved
<p>A collaborative network will exist to address the housing needs of people with I/DD; Public/agency awareness will be raised regarding the need for available, safe, affordable & accessible housing, including home ownership, and the recognition of access to accessible housing as a civil right</p>	<p>true</p>
<p>The Council will distribute information to address the availability/need for safe, affordable, and accessible housing for people with I/DD &/or cross-disabilities and housing and people and agencies will begin to develop/fulfill plans to provide additional housing in public planning/building efforts</p>	<p>true</p>
<p>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</p>	<p>true</p>

13. Progress towards achieving outcomes for overall objective : The annual report should include an assessment as to the extent to which progress was made on the intended outcomes for the objective.

While the Council continues to make demonstrable progress in advocating for the planning, funding and development of accessible, affordable housing for people with I/DD in two major regions of the state, there is still much work to do - especially in light of 2018's devastating, recurrent natural disasters (e.g. fires and extensive flooding) that have continued to destroy precious housing and utility infrastructure networks in entire neighborhoods, towns and regions throughout the state. Furthermore, California is now facing competition from other disaster areas for skilled workers and the tangible building supplies and resources necessary for rebuilding efforts. Local, state and federal economies are feeling the effects of so many lost homes and businesses, as well as the taxes that they

generate, even while displaced residents struggle to afford the expenses associated with rebuilding and/or relocating. In the midst of such devastation, the ubiquitous housing needs of vulnerable populations already marginalized by age, disability, and poverty are likely to be marginalized or completely overlooked in favor of the urgent housing needs of those who are seen as revenue-generators and taxpayers. The Council will continue to be a voice on behalf of those with disabilities in responding to the need for safe, affordable, accessible housing in California.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community). Stories of policy or legislative changes that happened as a result of Council individual advocacy work that are likely to positively impact the lives of people with developmental disabilities or that will prevent a potential negative impact (e.g., created deleted, refined programs and/or legislation, reallocated use of funds, organizational systems change as a result of evidence based practices).

N/A

Individual & Family Advocacy Performance Measure

Description

Housing

Race/Ethnicity

Race/Ethnicity	#	%
White, alone	0	
Black or African American alone	0	
American Indian and Alaska Native alone	0	
Hispanic/Latino	0	
Asian alone	0	
Native Hawaiian & Other Pacific Islander alone	0	
Two or more races	0	
Race unknown	0	

Gender

Gender	#	%
Female	0	
Male	0	
Other	0	

Category

Category	#	%
Individual with DD	0	
Family Member	0	

Geographical

Geographical	#	%
Urban	0	
Rural	0	

I. Output Measures

Objective	Performance Measure : IFA 1.1 People with DD who participated in activities	Performance Measure : IFA 1.2 Family members who participated in activities
The Council will identify and decrease barriers to housing for people with I/DD.*	5097	18881
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.*	934	4232
The Council will work with housing entities to increase the development and/or provision of community housing for people with I/DD.*	1108	4798
Total # of Output Respondents	7139	27911

II. Outcome Measures

Performance Measures	Percent (%)
IFA 2.1 Percent of people with DD who increased advocacy	0
IFA 2.2 Percent of family members who increased advocacy	0

Sub-Outcome Measures : The number (#) of people who are better able to say what they want/say what is important to them

Projects	# People with developmental disabilities	# Family Members
The Council will identify and decrease barriers to housing for people with I/DD.*	0	12
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.*	0	0
The Council will work with housing entities to increase the development and/or provision of community housing for people with I/DD.*	0	0

Projects	# People with developmental disabilities	# Family Members
Total # of Sub-Outcome Respondents	0	12
IFA 2.3 Percent of people better able to say what they need	0	0

Sub-Outcome Measures : The number (#) of people who are participating in advocacy activities

Projects	# People with developmental disabilities	# Family Members
The Council will identify and decrease barriers to housing for people with I/DD.*	0	0
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.*	0	0
The Council will work with housing entities to increase the development and/or provision of community housing for people with I/DD.*	0	0

Projects	# People with developmental disabilities	# Family Members
Total # of Sub-Outcome Respondents	0	0
IFA 2.4 Percent of people participating in advocacy activities	0	0

Sub-Outcome Measures : The number (#) of people who are on cross disability coalitions, policy boards, advisory boards, governing bodies and/or serving in leadership positions.

Projects	# People with developmental disabilities	# Family Members
The Council will identify and decrease barriers to housing for people with I/DD.*	0	0
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.*	0	0

Projects	# People with developmental disabilities	# Family Members
The Council will work with housing entities to increase the development and/or provision of community housing for people with I/DD.*	0	0
Total # of Sub-Outcome Respondents	0	0
IFA 2.5 Percent of people on cross disability coalitions	0	0

IFA 3 The percent of people satisfied with a project activity*

0

IFA 3.1 Percent of people with DD satisfied with activity*

0

IFA 3.2 Percent of family members satisfied with activity*

0

System Change Performance Measures

Description

Housing

SC 1: Output Measures - The number of Council efforts to transform fragmented approaches into a coordinated and effective system that assures individuals with developmental disabilities 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.

Objective	SC 1.1 Number of policy/ procedures created/ changed	SC 1.2 Number of statutes/ regulations created/ changed	SC 1.3.1 Number of promising practices created	SC 1.3.2 Number of promising practices supported through Council activities	SC 1.3.3 Number of best practices created	SC 1.3.4 Number of best practices supported through Council activities	SC 1.3 The number of promising and/or best practices created and/or supported	SC 1.4 Number of people trained/ educated	SC 1.5 Number of Systems Change activities with other organizations
The Council will identify and decrease barriers to housing for people with I/DD.	0	0	0	2	0	4	6	18291	39

Objective	SC 1.1 Number of policy/ procedures created/ changed	SC 1.2 Number of statutes/ regulations created/ changed	SC 1.3.1 Number of promising practices created	SC 1.3.2 Number of promising practices supported through Council activities	SC 1.3.3 Number of best practices created	SC 1.3.4 Number of best practices supported through Council activities	SC 1.3 The number of promising and/or best practices created and/or supported	SC 1.4 Number of people trained/ educated	SC 1.5 Number of Systems Change activities with other organizations
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.	0	0	0	0	0	1	1	3538	4
The Council will work with housing entities to increase the development and/or provision of community housing for people with I/DD.	0	0	1	0	0	9	10	4800	28

Systems Change SC 2: Outcome Measures

Outcome Measures	Number(#)
SC 2.1 - Efforts that led to improvements *	0
SC 2.2 - Efforts that were implemented *	2853

Sub-Outcome Measures

Objective	SC 2.1.1 Policy, procedure, statute, regulation improvements	SC 2.1.2 Policy, procedure, statute, regulation implemented	SC 2.1.3 Number of improved promising or best practices	SC 2.1.4 Number of implemented promising or best practices
The Council will identify and decrease barriers to housing for people with I/DD.	0	0	0	2853
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.	0	0	0	0

Objective	SC 2.1.1 Policy, procedure, statute, regulation improvements	SC 2.1.2 Policy, procedure, statute, regulation implemented	SC 2.1.3 Number of improved promising or best practices	SC 2.1.4 Number of implemented promising or best practices
The Council will work with housing entities to increase the development and/or provision of community housing for people with I/DD.	0	0	0	0

Detailed Progress Report on Goals

Description

Health & Safety

Area Of Emphasis

Area of Emphasis	Planned for this goal	Areas addressed
Quality Assurance	true	true
Education and Early Intervention		true
Child Care		
Health	true	true
Employment		
Housing		
Transportation		
Recreation		
Formal and Informal Community Supports	true	true

Strategies

Strategies	Planned for this goal	Strategies Used
Outreach	true	true
Training	true	true
Technical Assistance	true	true
Supporting and Educating Communities	true	true

Strategies	Planned for this goal	Strategies Used
Interagency Collaboration and Coordination	true	true
Coordination with Related Councils, Committees and Programs		true
Barrier Elimination		true
Systems Design and Redesign		
Coalition Development and Citizen Participation	true	true
Informing Policymakers	true	true
Demonstration of New Approaches to Services and Support		
Other Activities		true

3. Intermediaries/Collaborators

Collaborators	Planned for this goal	Actual
State Protection and Advocacy System	true	true
University Center(s)		true
State DD agency	true	true

Collaborators	Planned for this goal	Actual
Dept. of Public Health &/or Mental/ Behavioral Health	true	true
Managed health care plans/agencies	true	true
Law enforcement agencies	true	true
Office of Emergency Services (OES)	true	true

Provide an overall cohesive description of (a) the extent to which progress is being made in achieving the intended outcomes of the Goal for the reporting year, (b) the extent to which each goal was or was not achieved for the reporting year, (c) where applicable, factors that impeded goal achievement for the reporting year, (c) needs that require substantive state plan amendment (goal only)

The work of this goal was split into 3 distinct topic areas/populations, reaching: 1) family and self-advocates with information about health and public safety (issues and interactions); 2) medical and public safety personnel with information about PwD and the medical/public safety issues they face; and, 3) policymakers with health and public safety concerns and needs of PwD. In addressing health and safety concerns, on behalf of PwD, the Council worked with more than 800 collaborative health and public safety partners throughout the state, many serving specific cultural populations (e.g. Yuki Trails Tribal Center, Vietnamese Cancer Center, Sierra Native Alliance, Sacramento Native American Health Center, Korean Community Services, Intertribal Council, Cambodian Family Community Center, African-American Parent Support Group, etc.).

Regional staff collaborated on, participated in, and provided resources for 29 health and wellness events throughout the state, reaching more than 2,900 family/self-advocates. In direct training efforts, regional staff provided 35 trainings about health/access to care (reaching 1,204 people), 24 public safety-related trainings (*Emergency Preparedness, Response & Recovery*), reaching 806 people, and 23 personal safety-related trainings (including *Bullying*), reaching 2,636 people.

Health-related trainings included such diverse topics as: *Pediatric Dental Visits*, *Sexuality across the Lifespan*, *CPR*, and *End-of-Life Planning for PwD*. A strong focus of training family/self-advocates has addressed personal safety/recognition/response issues in law enforcement interactions with PwD. Self-advocates (and family members and others) were given training about safety tips and personal safety/identification cards with disability-specific and emergency contact information to provide to officers during unexpected or unscheduled field interviews/stops. In response to personal safety concerns, self-advocates were also provided with training about boundaries and personal safety, which included information about bullying (e.g. cyber-bullying, prevention, risk recognition and response, etc.).

The Council has continued to provide training to law enforcement personnel and other public safety and medical responders, reaching 2,243 professionals through 64 trainings about public safety-related issues and PwD. These trainings reached academy recruits (LD-37 Persons with Disabilities), advanced officers and other emergency response personnel (Crisis Intervention Team training), and civilian investigative personnel (Licensing Program Analysts) through the DSS Community Care Licensing Division (disability-related perishable skills training). Regional staff also provided medical personnel with information about early identification/intervention of children with suspected disabilities, advocacy skills for health-related systems of care, and line medical staff with information about communication, behavioral biases, and best practices in working with PwD. Another critical component of these trainings has been to raise awareness of mental health and/or substance abuse issues affecting Pw/DD and/or cross-disabilities.

Regional staff reached out and engaged in stakeholder collaborations 46 times, reaching 494 medical and public safety personnel. In public safety and/or health-related policy work, the Council educated stakeholders on proposed legislative and/or regulatory changes through its website, calls, presentations, social media releases, and/or email blasts 26 times, reaching 23,077 people. When educating/informing policymakers, other state agencies and stakeholders (in 26 separate events), regional and HQ staff reached 8,571 people. The Council monitored 3 pieces of proposed legislation, reaching 54 people, and updated the LPPC platform/priorities once.

The Council provided health/public safety-related resources in electronic format 86 times, reaching 72,069 people, and in hard copy 52 times, reaching 12,593 people. Technical assistance was provided 400 times, reaching 4,353 people. Regional staff also leveraged \$10,300 dollars while engaging in health/public safety-related activities, although this figure seriously under-represents the amount of leveraged funding represented by the salaries of public safety personnel from law enforcement and medical response agencies that pay for them to attend Council trainings.

The work of this goal has greatly expanded the reach, recognized expertise, and credibility of the Council with those agencies and personnel working in a protective medical and/or public safety role with PwD. While the Council has always provided extensive training and outreach to family/self-advocates, RCs, service providers and others within the community, it has required strong cross-disciplinary knowledge, skills and access to gain acceptance in professional medical and public safety environments (to provide ongoing training and/or technical assistance). This (mutual) acceptance and professional openness is reflective of the non-judgmental, collaborative approach taken by the Council in offering quality training about disability-related issues at no charge to agencies that have sometimes struggled with public perceptions (e.g. outrage and bad press) regarding their treatment of PwD under emergent and/or adverse circumstances. While the Council has been successful in reaching first responders, it is still working to gain access to court and judicial personnel for the purpose(s) of providing training and/or technical assistance about PwI/DD and/or cross-disabilities.

4 Year Overview : A description of how the Council will use and build from knowledge gained and progress made to move forward in the next state plan cycle.(This section only applies to the PPR submitted for the Federal Fiscal Year 2020, which will be due by January 1, 2021)

5 Year Overview : For the final PPR of this state plan cycle, provide an overall analysis of the outcomes achieved during the five year state plan cycle. The description should include the extent to which diverse stakeholders are satisfied with council activities that promote self-determination and community participation for individuals with disabilities and families, results of other types of information gathering such as focus groups, surveys, or other feedback or input methods with individuals with developmental disabilities and families and major accomplishments and factors impeding goal achievement (if applicable).(This section only applies to the PPR submitted for the Federal Fiscal Year 2021, which will be due by January 1, 2022)

Objectives

1. 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.

1. **Goal:** Health & Safety

2. **State Plan Objective** Objective 2

3. **This Objective is**

Capacity Building

4. **This Objective is**

Ongoing

5. **This Objective is**

	The Objective is
a. Fulfilling a Self-Advocacy DD Requirement *	No
b. Targeted disparity *	No

	The Objective is
c. DD Network Collaboration *	No
d. A demonstration project of New Approaches to Services and Supports *	No
e. A demonstration of projects or activities *	No

6. Stage of Implementation

Implementation

7. Provide an overall description of this effort

Public concerns about public safety training standards and interactions between law enforcement and people with disabilities propelled the development and activities of this objective. Statutory mandates, implemented in 2017, mandated enhanced training for law enforcement officers, without clearly identifying or specifying a source of trainers with subject matter expertise. Family/self-advocates and professionals alike have noted the lack of disability-specific training for those working with public safety, court, and medical systems, although these are clearly service provision networks on with which people with disabilities interact, access services, and rely upon

regularly. As a natural corollary of providing family/self-advocates with information about health and safety and emergency response systems, the Council tasked itself with providing disability and accessibility-specific training (by subject matter experts, including family/self-advocates) to public safety and medical professionals.

8. Outputs Achieved

Expected Outputs	Achieved
1 curriculum; 12 trainings; 150 people reached	true
1 set of (hard copy &/or electronic) materials about people with I/DD &/or cross-disabilities and public-safety information, disseminated to 1,500 people	true
12 regional collaborations; technical assistance, reaching 60 people	true
1 public safety plan/policy, implemented in 12 regions, reaching/impacting 150 people	true

10. The report should include the following: (a) A narrative progress report that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenges to achieving the objective and unexpected benefits.(b) For system change activities, include a description of the stage of implementation (planning, initiation, implementation, outcome/fully integrated) of the system change initiative. (c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report).

The work of this objective has greatly increased the Council's visibility, outreach potential and credibility as a source for disability-related expertise in the field of public safety, medical and other emergency response personnel. With a cadre of POST-certified trainers, the Council has partnered with a variety of law enforcement (LE), licensed care, and other agencies throughout the state to provide classes on awareness, communication and interactive/tactical techniques for law enforcement, EMS/fire personnel, mental health workers, state investigators for licensed care facilities, and others in the health and public safety fields in serving the community of people with I/DD and/or cross-disabilities. Council staff has met its overall projected activities and target numbers for the year through the work of this objective. Staff held 46 meetings with 494 collaborators. Council training programs directly impacted the safety concerns of 2,243 people, while supporting the efforts of public safety and medical personnel throughout California.

The Council has become active throughout the state in training law enforcement (LE) and other first and second responders about PwD – in several different venues, developing and/or updating each of its (LD-37 and CIT) LE training curricula to be regionally relevant to responding enforcement and emergency personnel. Because of CHP collaborative efforts, the Council's regional staff is obtaining POST (Advanced Instructor Core Competency) certification and is now able to provide training to academy recruits and advanced officers. Council staff has also, as part of statewide AICC training with CHP, provided peer-level, T4T, disability-related training segments to command and line staff from LE agencies throughout California through AICC classes. The 8-hour training segment (LD-37: PwD) in

academy is intensive, hands-on and scenario-based training. Staff is also providing a 2 to 3-hour Crisis Intervention Team training model to advanced and field training officers throughout the state and beginning to put together and provide short-segment, 5 to 10-minute snapshot trainings for daily briefings, as a way of updating field officers on I/DD-related information quickly before shift.

Council staff provided four (4) 8-hour basic LE recruit academy courses on PwD for both the county and city of Sacramento, as well as Kings and Tulare counties (reaching more than 170 recruits), in addition to updating its curriculum, guest speakers, and classroom activities.

Regional staff provided more than twenty (20) 3-hour certified Crisis Intervention Team (CIT) training classes for LE and other emergency response personnel throughout the state, reaching more than 320 public safety professionals, representing city, county, state and federal personnel (e.g. law enforcement, correctional officers, Fish and Wildlife, State Parks, CHP, Mental Health crisis responders, etc.). While surveys are typically collected by a CIT coordinator, anecdotal feedback from attendees has been overwhelmingly positive – about not only the instructional material, but also the expertise, resourcefulness and professionalism of the Council’s regional instructional staff.

The Council has developed a collaboration with UC Davis and the California Department of Social Services (DSS) to provide yearly perishable skills training to all the Community Care Licensing Program’s Licensing Analysts, all of whom are responsible for inspecting licensed care facilities throughout California, providing feedback to staff, and identifying staff/facility deficits for correction. LPAs provide critical protective oversight for vulnerable residents of licensed facilities and have been highly appreciative of training received from the Council’s subject matter experts, who provided 10 days of training, reaching more than 375 people. As a result of the Council’s advocacy efforts, self-advocates are also well-paid (up to \$200 a class - by DSS, through a contract with UC Davis) to speak to classes.

In the Bay Area (Marin, San Francisco, San Mateo, Contra Costa, and Alameda), the Council is working on the I/DD update for the 2019 Health Professionals Conference. Regional staff collaborated with a self-advocate to provide disability-related training to 28 nurses giving information about communication, behavior biases, and best practices in working with men and women with I/DD. At Stanford University, staff presented to policy-making leaders in both the public and private sectors about advocating for PwD and other underserved populations within healthcare systems, reaching 28 people.

Regional staff developed curriculum (*Navigating the I/DD Service System and Accessing Services*) in response to a request from the managed healthcare plan in Orange County. This curriculum will provide information to healthcare professionals about defining and understanding I/DD in children, navigating available systems, and identifying local resources for those children. In Mendocino County, the Council's staff in 4 regions collaborated with the RC and the Association of Service Providers to address disability-related health and safety issues, with a concentration on the effect of regional fires on PwD.

Regional staff provided disability awareness training to crisis intervention counselors in Orange County, who provide telephone support and intervention to the public. A family advocate conducted training for more than 50 Kaiser physicians and nurse practitioners about I/DD systems navigation, local resources and services, and his own experiences as a parent and professional in the healthcare field, working for Kaiser as the Quality Coordinator for Behavioral Health Care. The Council was also asked to provide information and training about PwI/DD for medical personnel through the Healthnet Community Advisory Committee. As with all outreach and training presentations, Council handouts and resources are provided to attendees at each event.

The Council's collaborative work throughout California included 46 meetings with governmental, community-based, and private agencies for planning, shared projects, and problem-solving purposes. In Mendocino County, the Council is working with the Behavioral Health Board to use \$20K of the allocated \$100K fund (designated for use over a 3-year period) to provide LE/emergency responder training. The Behavioral Health Board is also a collaborator in working to find a psychiatric crisis treatment facility to reduce the load on local hospitals and jails.

Lake, California's poorest county, is working with the Council to address child abuse prevention strategies and considering a project (*Family Strengthening Partnership*) with San Diego State University and Child Abuse Prevention Center. In Imperial County, regional staff is working with the Community Health Improvement Partnership.

The California Highway Patrol is still partnering with the Council in training personnel to be qualified for field training opportunities with POST advanced instructor certifications. In San Joaquin County, LE agencies are asking for Council assistance in planning/providing LE training in the area of PwD. In Orange County, regional staff are collaborating with LE, culminating in an event (*Coffee with a Cop*) to reach the I/DD community for questions and provide 'snapshot' training information for LE briefings about PwD.

In Sutter and Yuba counties, regional staff is working with the Agency on Aging Area 4 and FREED (ILC) to develop an aging and disability connection and plan a conference for 2019. In Alameda County, staff is reviewing a report on the 2018 listening sessions (*Crisis Prevention and Intervention Services for People with I/DD in Alameda County*), a report that is expected to lead to a cross-disciplinary, multi-agency action plan. Regional staff are also working with community agencies to address LE training and emergency response/ planning efforts. In Santa Clara County (Silicon Valley), SCDD is working with Silicon Valley Behavioral Health to put together Mental Health First Aid training opportunities for service providers and PwD at no cost to attendees.

In Nevada County, the Council is working with health care and service agencies to consider medical services for Medi-Cal recipients. In Santa Clara County, the Council is working with Stanford Hospital to provide disability-related training to medical personnel. In Mendocino, regional staff are working systemically to change the current nursing staff practice of referring patients with I/DD directly to comfort/palliative care, rather than offering or pursuing other more aggressive treatment options; as a result, the local hospital is now starting a day program to keep those with I/DD and/or elders out of skilled nursing environments with early intervention/treatment models.

Other Events and Community Assistance

1. Ask a Cop: *What if?* (Orange County)
2. Coffee with a Cop (Orange County)
3. Crisis Intervention Team (CIT) Training (multiple counties throughout California)
4. DSS/CCL LPA Training (all counties within California)
5. Earthquake and Tsunami Training and Drill: Integrated Disability Access and Functional Needs (San Bernardino County)
6. LD-37 *Persons with Disabilities* LE Recruit Academy Training (multiple counties throughout California)
7. *Take Me Home* Program (San Diego County)

The Council and its regional staff provided training and TA about public safety-related issues, mental health and people with I/DD and/or cross-disabilities in Orange County through the CalOptima Community Alliances Forum with 24 other community healthcare stakeholders. Of the 179 attendees of this event, 148 returned surveys with a 99% satisfaction return. 97% of the attendees reported that they enjoyed the networking experience and 99% reported having a better understanding of common mental health conditions in children, adolescents, and adults, as well as understanding the early warning signs of common mental health conditions.

12. Expected Outcomes Achieved

Expected Outcomes	Achieved
First responders, law enforcement, court personnel, fire/paramedic/ER staff will have training/information/technical support from family/self-advocates, professionals & subject matter experts that increases their knowledge about, provision of accessible services to, & improved interactions with people with I/DD &/or cross-disabilities	true
Family/self-advocates, professionals & the community will have knowledge to increase awareness of accessible health & public safety-related services, rights, &/or available/appropriate accommodations (e.g. modified interviewing techniques, emergency placement options, etc.) for people with I/DD &/or cross-disabilities	true
The Council will maintain collaborative relationships with health/public safety stakeholders and subject matter experts, in order to solicit up-to-date information &/or to provide technical assistance	true

Expected Outcomes	Achieved
<p>The health, court, and public safety system of services/supports will have knowledge about issues that affect health care, justice, &/or public safety and have a community safety plan/net/response for people with I/DD &/or cross-disabilities</p>	<p>true</p>

13. Progress towards achieving outcomes for overall objective : The annual report should include an assessment as to the extent to which progress was made on the intended outcomes for the objective.

In its second year of implementing the activities of this objective, the Council has continued to make tremendous strides in partnering with local, regional and statewide enforcement agencies and allied public safety and health personnel, for the purpose of training and awareness about the specific needs of people with I/DD and/or cross-disabilities. This unprecedented partnership is producing tangible, beneficial changes in the way that law enforcement and other public safety personnel and health and safety providers understand and interact with people with disabilities. The Council will continue to solidify these relationships and collaborative efforts through the course of the 5-year State Plan implementation period. Through its outreach and training efforts, the State Council is changing and enhancing the careers of an entire generation of law enforcement officers and will affect future interactions with people with disabilities. The experience of working with law enforcement will inform the Council's efforts in reaching out to and training court, correctional, and other public safety and healthcare over the next three (3) years.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community). Stories of policy or legislative changes that happened as a result of Council individual advocacy work that are likely to positively impact the lives of people with developmental disabilities or that will prevent a potential negative impact (e.g., created deleted, refined programs and/or legislation, reallocated use of funds, organizational systems change as a result of evidence based practices).

N/A

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 accessibility to health care and public safety services for people with I/DD and their families.

1. Goal: Health & Safety

2. State Plan Objective Objective 3

3. This Objective is

System Change

4. This Objective is

Ongoing

5. This Objective is

	The Objective is
a. Fulfilling a Self-Advocacy DD Requirement *	No
b. Targeted disparity *	No
c. DD Network Collaboration *	No
d. A demonstration project of New Approaches to Services and Supports *	No
e. A demonstration of projects or activities *	No

6. Stage of Implementation

Implementation

7. Provide an overall description of this effort

This objective spans policy work and information dissemination about both health and public safety, areas that profoundly affect the quality of life for people with I/DD, their families, and the professionals, service providers and community members upon whom they rely. While Objective #1 addresses training and material dissemination to family/self-advocates about health and public safety-related issues and information, Objective #2 provides training and information to health and public safety personnel, to better prepare them for working with people with I/DD. Objective #3 then addresses actual policy, legislative and systemic civil rights issue (e.g. recent threats to Medicaid) that support the infrastructure of health and public safety policies, practices, programs and agencies, ensuring accessibility, continuity and consistency in health/public safety service standards for family/self-advocates with I/DD throughout California and, ultimately, the rest of the nation.

8. Outputs Achieved

Expected Outputs	Achieved
13 updated lists of collaborators	true
1 updated LPPC platform	true
3 LPPC meetings	true
10 bills; 50 people reached	true

Expected Outputs	Achieved
10 bills monitored; 250 people reached	true
20 sessions; 400 people educated	true
5 sessions; 300 people reached	

10. The report should include the following: (a) A narrative progress report that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenges to achieving the objective and unexpected benefits.(b) For system change activities, include a description of the stage of implementation (planning, initiation, implementation, outcome/fully integrated) of the system change initiative. (c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report).

The Council's Legislative and Public Policy Committee narrowed its focus during the past FFY, to be more effective in targeting legislative efforts. Staff reviewed all introduced health-related bills and made recommendations to the LPPC, which took positions on 4 bills and decided to monitor 2 bills. Of these, SCDD sent letters on 2 bills and testified on none of them. SCDD staff reviewed all the introduced bills in February and made recommendations to LPPC. While Congress was debating potential changes to the Medicaid

program, the Council participated in three town hall meetings across California, coordinated by Disability Voices United, a new organization dedicated to educate people with I/DD and their families about the potential impact of these changes. The Council shared information on the debate in Congress and educated attendees about how to (self-) advocate with elected officials (reaching 135 people).

In its work on public safety, the LPPC decided to take positions on 3 bills, monitoring 4 bills altogether. Of those, the Council submitted letters and testified on 1 bill, reaching 40 people. Council staff met with California Highway Patrol officials and potential authors' offices to find agreement on (potential) model legislation regarding DMV notifications that would identify vehicles owned/driven by PwD at the point of a vehicle stop. While such conversations proved valuable, time ran out on introducing a bill prior to the start of session. The Council was also asked to weigh in on extension requests for the implementation of the school bus safety bill that it sponsored after a student was left to die unattended on a bus in the summer heat. SCDD met with 15 members of the (extension bill) author's office, School Bus Association, and Transportation Committee to negotiate that bill's proposed extension period.

The Council collaborates regionally with the WE CAN Individual Prevention Task Force, led by Children's Cause (Orange County) and supported by the local social services agency. This task force recently launched a web-based community resource 'tool kit,' designed to prevent child abuse by providing families with information about undiagnosed I/DD, which may result in unceasing or severe behaviors that lead directly to daycare suspensions. The task force's work is designed to provide parents with support and reduce the risk of child abuse, secondary to a child's (unmanaged) behavioral and/or emotional outbursts. On behalf of elders in the county, the Council drafted a letter of support for CalOptima' application to expand its service area for the Program of All-Inclusive Care for the elderly (PACE), which provides comprehensive, compassionate medical and social services. Also in Orange County, SCDD staff is collaborating through the MHSA Steering Committee and Public Forum to bridge service gaps between the RC and mental health systems of care, which often overlook clients with dual/multiple diagnoses due to requirements that exclude eligibility when one is served by the other agency. It is, oddly, the position of mental health providers that maladaptive or adverse behaviors displayed by people with I/DD are more likely attributable or secondary to the developmental disability, rather than to a mental illness. These eligibility exclusions typically preclude people with I/DD from receiving appropriate mental health care during and/or in the aftermath of acute psychiatric episodes, services which are unique to that system of care and not available through RC supports.

The Council is working through the East Bay (Alameda and Contra Costa counties) Forensics Task Force to engage in systemic change and policy efforts around medical, mental health, criminal justice and public safety practices. Several counties in California have successfully engaged in prison/jail diversion efforts through specialized 'Mental Health Courts,' designed to provide sentencing alternatives for people with mental health and/or substance abuse diagnoses. Court dispositions under these programs (e.g. the Sequential Intercept Model) closely parallel the 'alternative sentencing model' available (since 1999 in California) for those with I/DD who have found themselves the subject of the criminal justice system as accused and/or convicted of criminal conduct. The Council is collaborating with the DA's Office and the Court-Appointed Advocate's Program to work on providing Peace Officer Standards and Training (POST-) certified Crisis Intervention Team (CIT) training for criminal justice and enforcement, fire and medical first responders in the region.

There is also an active proposal under consideration for a recovery/cool-down/crisis intervention clinic as a social/medical precursor/alternative to arrest. As a follow-up to this work, the Council is partnering with the Alameda County Public and Behavioral Health departments and the Schreiber Center to revise policies around intake, RC vendorization, and client service needs and to correct the community's perception and narrative that referring clients to these needed services is just too difficult. In Orange County, staff is working with Kaiser Permanente (Southern California) to educate KP families/patients (with I/DD and/or cross-disabilities) to access to community, special education, and public benefits, in addition to the comprehensive and preventative medical services Kaiser Permanente provides.

In the coastal and inland region, south of San Francisco (Santa Cruz, Santa Clara, San Benito, Monterey, San Luis Obispo, Santa Barbara and Ventura counties), staff is working on developing behavioral health services (for people with I/DD) with family advocates and the Autism Society Board, along with providing Mental Health First Aid/Stress Management training for family caregivers and direct service providers. In Sacramento County, the Council is working with the Medi-Cal Dental Advisory Committee, organized by the Sacramento County Department of Health Care Services and First 5. The collaborative goal is to increase access for Medi-Cal recipients to dental services. The focus is on children and adults with developmental disabilities who access dental services through Medi-Cal. The

current (annual) dental service(s) utilization rate for children is 34% and 18% for adults. In San Diego County, SCDD is considering shielded RC practices around family determinations for respite hours, in the aftermath of recent legislation that has now gone into effect, removing subjective respite hour 'caps' from those practices.

The Council partnered with the local RC Clinical Director, a self-advocate, and a family advocate in presenting (to the Marin Health Council at Marin General Hospital) an overview on national and state trends and data about care gaps experienced by people with ASD, health-related RC services, and personal stories of those who struggle to obtain health services in the region. The information was collected to present a series of 'asks' to the Marin County Board of Supervisors. Regional staff is part of the Electro-Convulsive Therapy Review Committee (pursuant to California Code of Regulations, Title 17, Division 2, Chapter 1, Subchapter 8, §5080(j) and Article 4, §50830-50835), which must approve/reject ECT treatment proposals for PwD. In Orange County, through its work on the CalOptima Whole-Child Model Focus Group, the Council has made a formal recommendation that physicians/specialists and staff receive disability-related training, as they are receiving more transfers from CCS into adult care that involve significant co-occurring disorders, disabilities and other health and/or developmental impairments.

In Orange County, the Council initiated a collaborative effort with IHSS's Program Integrity Unit, the District Attorney's Fraud Division, and DRC's Office of Clients' Rights Advocates (OCRA) to address complaints from family advocates that they are being unfairly referred (by IHSS) to the DA's Office for possible charges involving fraud, although it appears that these suspicions are, ultimately, without merit. The problem allegedly begins with fair hearings, which are filed by family advocates who were denied additional IHSS hours (with a monthly maximum of 283 hrs.) for providing 'protective supervision.' While parents can provide IHSS case managers with supporting information (regarding need) during the initial evaluative (or reconsideration) process, this information is often lacking until (more complete) evidence packets are produced at fair hearing – at which time, parents often prevail. The IHSS Program Integrity Unit – believing that parents are falsifying information to prevail in a fair hearing – then refer these (civil) cases to the DA's Fraud Division for further (criminal) investigation. The ensuing investigations are conducted by criminal investigators, who (without a valid search warrant) show up in workplaces, demanding confidential records from medical and/or school personnel – without parents having prior knowledge or signing a release of information form. Through the Council's regional Healthcare Task Force, the issue has been clearly identified, supported through family reports, and is being addressed through training for staff of the IHSS Program Integrity Unit. Families will be

trained about the importance of providing complete supporting evidence during the initial eligibility determination and regional staff is considering training for DA's fraud investigators, to reduce the incidence rate of criminal investigations against all parents who prevail in fair hearings against IHSS.

12. Expected Outcomes Achieved

Expected Outcomes	Achieved
The Council will maintain a collaborative group of subject matter experts & stakeholders to address health & public safety issues at the legislative & policy level	true
The Council will be active in its policy-level engagement on health & public safety issues affecting people with I/DD &/or cross-disabilities and their families	true
The Council will maintain a deliberative body to develop/consider its health/public safety platform	true
The Council & its collaborative partners will monitor and address health/public safety-related state &/or federal legislation &/or regulations on behalf of people with I/DD &/or cross-disabilities and their families	true
Stakeholders will have current information about proposed legislative & regulatory changes being considered at state &/or federal levels affecting people with I/DD &/or cross-disabilities & their families	true
Policymakers will be educated and informed about health/public safety-related issues affecting people with I/DD &/or cross-disabilities & their families	true

Expected Outcomes	Achieved
<p>The Council will maintain a presence at the state level, monitoring and testifying about legislative and policy changes in health & public safety affecting people with I/DD &/or cross-disabilities and keeping the public informed and part of the process</p>	<p>true</p>

13. Progress towards achieving outcomes for overall objective : The annual report should include an assessment as to the extent to which progress was made on the intended outcomes for the objective.

The Council met (and exceeded) most of its planned/projected activities and outreach/performance targets over the course of the last FFY for this objective. Health and public safety are, however, policy areas in need of consistent review and monitoring, especially given the Council's capacity for effective and prompt outreach and responsiveness to regional, state and national changes for and/or threats to people with disabilities in vital life areas. While, for example, threat(s) to Medicaid funding and related programs were not necessarily foreseen, the Council was swift in reaching out to Californians with I/DD and their families, in order to engage with prominent legislatures and other policymakers (with personal stories) that informed those in positions of power and trust about the potentially devastating effect that cuts to public health entitlements would have on real people throughout California. While that threat was narrowly averted, Californians are now aware of the federal potential for devastating cuts in critical health benefits and are relying on SCDD to represent their needs and interests in the halls of the California State Legislature and in Washington D.C.

In the field of public safety, the Council is doing more than simply pointing out deficiencies in departmental interactions with people with I/ DD and/or cross-disabilities; it is also stepping up to provide training and/or other types of intervention, as it is investing in and collaborating with agencies throughout the state. The Council's policy level work has been successfully designed to support 'best practice' policies, training and tactics in the interactions of law enforcement agencies throughout the state with people of diverse cultures, abilities and needs. The work of this objective is slated to continue through the course of the current 5-year State Plan cycle.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community). Stories of policy or legislative changes that happened as a result of Council individual advocacy work that are likely to positively impact the lives of people with developmental disabilities or that will prevent a potential negative impact (e.g., created deleted, refined programs and/or legislation, reallocated use of funds, organizational systems change as a result of evidence based practices).

As part of the budget trailer bill process (effective January of 2018), the California Legislature acted to lift the cap on respite services by repealing Welfare and Institutions Code §4686.5 Prior to this action, RCs were limited to purchasing no more than 90 hours per quarter of in-home respite and 21 days of out-of-home respite for a family, unless an exemption was granted.

In a case of day program/caregiver error, a self-advocate with cerebral palsy was left restrained and unattended in a wheelchair (the wheels of which had not been locked) on a hill. The chair rolled down the steep incline, tipping over at the bottom and throwing the individual violently to the ground, where she suffered significant injuries – broken/knocked-out teeth, traumatic brain injury, and (as a

direct consequence of the TBI) ongoing seizures. The victim now requires 24/7 monitoring and must use a g-tube for food intake. The family (which had been receiving 30 hours of respite per month) requested a full 60 hours per month for respite services, realizing that the victim could not return to her former day program and there were no other suitable programs currently available to meet her needs.

The RC 'assessed' this client's needs as requiring only 41 respite hours per month, although it provided neither a completed copy of the assessment instrument, nor the reasons for the assigned service restrictions. In its investigation, the Council discovered that the RC has developed and used this 'assessment instrument' in determining respite hours, but does not keep a copy of that tool/results in clients' files.

Council staff met with the RC Case Management staff to review policies (specifically as they relate to assessment instruments designed to limit families' access to care) to resolve 'arbitrary' denials of service and restore services, per the intent of recently passed legislation. As a result of several meetings and intervention through upper management, the client and her family now receive 100 hours of respite per month and the respite assessment policy is being reviewed to prevent future, unilateral respite restrictions for other families. Additionally, the Council is continuing to educate PwD and their families about their rights, in regard to respite hours and other RC services.

3. 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.

1. Goal: Health & Safety

2. State Plan Objective Objective 1

3. This Objective is

Individual & Family Advocacy

4. This Objective is

Ongoing

5. This Objective is

	The Objective is
a. Fulfilling a Self-Advocacy DD Requirement *	No
b. Targeted disparity *	No
c. DD Network Collaboration *	No
d. A demonstration project of New Approaches to Services and Supports *	No
e. A demonstration of projects or activities *	No

6. Stage of Implementation

Implementation

7. Provide an overall description of this effort

The Council's statewide survey, conducted in-person and through the use of online survey tools, pointed to health and safety as the 4th highest area of concern among people with I/DD and their families. Healthcare arose as an issue because of secondary medical and physical supports needed by people with I/DD and/or cross- disabilities. Safety, a critical component of health, is a paramount concern for all Californians, due to ongoing, seasonal floods, year-round wildfires, earthquakes, and crime rates. Much of the qualitative data from both the statewide surveys and regional office field assessments specifically identified a need for disaster preparedness, safety for self-advocates, and abuse prevention. Given the concerns affecting people with I/DD in the state, the Council was compelled to include health and safety as a goal within the 2017-21 State Plan. The work of this objective is to provide health and safety-related information to family/self-advocates throughout the state, in response to those stated needs.

8. Outputs Achieved

Expected Outputs	Achieved
12 health/wellness events, reaching 500 people; 1 set of health-related materials, reaching 5,000 people	true

Expected Outputs	Achieved
1 curriculum; 12 health-related trainings; 200 people reached; 1 set of updated resource materials, distributed to 2,500 people	
2 safety-related curricula; 24 trainings; 400 people reached	true
1 updated set of public safety-related materials, distributed to 5,000 people	true

10. The report should include the following: (a) A narrative progress report that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenges to achieving the objective and unexpected benefits.(b) For system change activities, include a description of the stage of implementation (planning, initiation, implementation, outcome/fully integrated) of the system change initiative. (c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report).

Through the Council's efforts to connect with the public on health and safety issues with direct, in-person contact, SCDD staff informed and supported 4,128 people with technical assistance. Through direct education at 29 health and wellness events and resource fairs, the Council reached 2,908 people. Council staff disseminated 12 sets of health and/or safety information, reaching 102,095 people, and 105 distributions of emergency preparedness and/or bullying-related information, reaching another 61,311 people with electronic and/or hard copies of materials. Additionally, staff conducted 35 training sessions on health and access to health (reaching 1,204 people) and

another 54 trainings on safety-related issues, reaching 3,587 people. The Council, through its collaborative activities, was able to leverage \$6,350. The Council worked to plan, attend, and participate in almost 30 health-related community events and fairs throughout California, ultimately providing materials, information, technical assistance and resources to 2,908 people.

In northern California, the Council engaged in major activities in the counties of Humboldt, Mendocino, and Butte, while also covering the counties of Del Norte, Lake, Glenn, Lassen, Modoc, Plumas, Shasta, Siskiyou, Tehama and Trinity. Staff collaborated with 10 agencies on the Elder & Vulnerable Adult Service Team to provide resources and materials (e.g. ICE cards, personal medication cards, etc.) to nearly 40 attendees of a local event. With 70 agencies in Mendocino, the Council provided health-related information to more than 150 people. A Council collaboration with the Healthy Mendocino Project and Butte Community College's 2018 Wellness Fair reached an additional 110 people who were given information and resources about IHSS, childhood trauma, poverty, obesity and housing. The Council collaborated with 18 organizations when organizing and hosting a free health fair drawing 398 people, 95% of whom were primarily Spanish-speaking. The event assisted children who need assessments, medical, dental and/or eye care before entering pre- or elementary school and provided 55 children with flu shots.

In southern California, the Council participated in the Children's Hospital Orange County's Resource Fair, reaching 135 people and 20 organizations with information about IHSS, CalABLE, and RC eligibility and other public benefits and community resources. In San Bernardino and Riverside counties, the Council participated in the 6th Annual Disability Sports Festival, providing information to increase knowledge and awareness of healthcare supports for PwD and their families, reaching 165 people. Staff reached 250 families with outreach material at the 6th Annual Hero Walk for Autism, stressing public benefits, child care, and recreational opportunities for PwD. In San Diego County, staff facilitated the implementation of the Annual Health and Wellness event reaching nearly 150 people and 20 organizations. Additionally, staff provided 160 attendees of the North Orange County Community College District Transition Night with Emergency Preparedness Basics information

Council staff provided training in the Napa, Solano, and Sonoma County area about current guidelines for pediatric dental visits, reaching 45 people. Council staff also provided information about sexuality across the lifespan, reaching 60 people. Council also provided a 7-part training series for family advocates and professionals about the skills and tools to ensure quality health care and service improvements for children and youth with special health care needs. Surveys consistently reported the value of the information provided, the communication strengths of the presenters, and an increase in participants' knowledge and understanding.

The Council engaged in more than 20 safety-related events. Through presentations, a collaborative exercise and technical assistance, 75 participants from 27 agencies increased knowledge and awareness about people with I/DD and the availability of and access to health and public safety-related services and supports related to disasters.

During the disastrous fires in October of 2017, Council staff facilitated the use of a local recreation center for families who were evacuated, housed, and fed in FEMA evacuation sites and were unable to use outdoor facilities, due to hazardous air quality conditions. More than 300 children and family members were able to use the site. Needs met for more than 50 people included adaptive equipment for PwD, such as wheelchair-related equipment, raised toilet seats, walkers, shower chairs and canes.

In central California, at the College of the Sequoia's Community Resources and Employment Fair, staff provided 400 students and almost 70 vendors with emergency preparedness information. The Council supplied 200 family/self-advocates with emergency prep handouts at the Fresno USD ATP Transition Resource Fair. The same information packet was provided to 350 family/self-advocates at the Mental Health Resource Fair.

The Council has focused heavily on personal and public safety training, in regard to PwD and their interactions with others and, more specifically, with law enforcement, engaging in 54 safety-related training events for 3,587 people. Self-advocate peers have been instrumental in these efforts, working alongside Council staff to provide resources, information, and anecdotal experiences with others about safety issues.

In the statewide 23rd Annual Self-Advocacy Conference, the Council partnered with a self-advocate to provide emergency preparedness training and extensive resource packets (in English and Spanish), reaching 70 self-advocates and 10 staff. Regional staff reached 50 more people with the same presentation at the 31st Annual Supported Life Conference, also a statewide event.

In Orange and San Bernardino counties, staff provided information about bullying and safe social media interactions, which included bullying and protective strategies. Staff also facilitated a Get SAFE training for more than 30 people, which covered 911 calls, buddy systems, safety checks, cyber-bullying, and asking for help. In Los Angeles, staff trained family/self-advocates on anti-bullying strategies for children in special education. In San Diego, staff coordinated, hosted, and facilitated a personal safety class for 64 people, in collaboration with Get SAFE and members of the San Diego Police Department.

The Council and its regional staff engaged in planning, technical assistance, translations and subject matter expertise in more than 120 meetings and collaborative efforts with local, regional, civic, private and governmental organizations and agencies throughout California. Planning, hosting and facilitation efforts included regional and statewide conferences (e.g. the annual Health & Wellness Event, Self-Advocacy and Supported Life conferences, Multicultural Health Fair, Brain Health to Beat Stroke 5K, etc.), and self-advocacy groups/meetings, as well as organized events initiated by other organizations. The Council greatly expanded its reach and influence with law enforcement agencies throughout the state, as well as domestic violence shelters and programs associated with abuse against vulnerable aging, adult and child populations. Other underserved populations were the focus of the Council's collaborative outreach and planning efforts, as regional staff worked on behalf of the African-American Parent Support Group, Native American Tribal Nations, mental health support organizations, minority Asian groups, a mental health program aimed at the Persian community needing Council information about children eligible for special education services, and organizations providing services, supports, and protections to the aging and I/DD population(s).

The Council is participating in access/functional needs and safety assessments, in regard to transportation, physical access in buildings, and service/safety features of facilities and programs. Regional staff are participating in collaborative assessment and planning meetings to address the issue of human trafficking (for both labor and sex), in order to identify and mitigate risks and provide a safe escape option for victims. Staff is also meeting with representatives of law enforcement agencies to plan for collaborative projects (e.g. PERT projects, Active Shooter training for the community, addressing African-American Parent Support Group concerns, etc.).

The Council completed a 'plain language' draft booklet (*Active Shooter Awareness Guide for People with Disabilities*) that is equally accessible and functional for people without disabilities or access and functional needs. Focusing on the best practice training (*Run, Hide, Fight*), it uses fewer words and has pictures to support the commentary. The first-of-its-kind guide by California's Office of Emergency Services (in collaboration with SCDD and other organizations) focused on planning and accommodations, with the target audience being law enforcement, human resource and other management personnel. The booklet, when finalized, will be used for training self-advocates and is best presented in conjunction with hands-on practice scenarios/drills.

Technical assistance was provided to 4,128 people regarding health and/or safety-related issues throughout the year. During one townhall meeting with an underserved population, attendees requested training about LE interactions, which was then provided over the next few months.

Other technical assistance was provided to agencies, such as the requested review and recommendations provided in response to the UVAH 3-year strategic plan, specifically regarding staff and LE training about client abuse and health care discrimination. The Council has also been asked to lend its expertise to Humboldt County's APS Elder/Vulnerable Adult Service Team as a member and in support of its application for a VAWA grant.

12. Expected Outcomes Achieved

Expected Outcomes	Achieved
Family/self-advocates will be reached and have information about health-related options &/or services	true
Family/self-advocates will be reached and have knowledge about health options &/or services	true
Family/self-advocates will be reached and have knowledge about emergency preparedness, personal safety, &/or bullying & their options regarding available services, prevention, protection and response	true
Family/self-advocates will be reached and have information about public safety-related options &/or services	true

13. Progress towards achieving outcomes for overall objective : The annual report should include an assessment as to the extent to which progress was made on the intended outcomes for the objective.

The Council met nearly all of its work plan activities and target numbers for both the health and safety areas of this objective. Because of emergent, disaster-related events throughout California, however, the Council expanded on its original set of planned activities in order to respond to exigent circumstances and the emergent needs of family/self-advocates with I/DD during floods and fires. In recognition of the many potential environmental and manmade disasters that are a recurrent feature of the California landscape and the fact that emergency response is a perishable skill, the Council will continue its public campaign to educate, prepare and remind family/self-advocates about responding effectively and quickly to local, regional and/or statewide disasters. Additionally, the Council will continue to

monitor and respond quickly to threats against the Medicaid and those health systems that serve people with I/DD and/or cross-disabilities throughout the state.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community). Stories of policy or legislative changes that happened as a result of Council individual advocacy work that are likely to positively impact the lives of people with developmental disabilities or that will prevent a potential negative impact (e.g., created deleted, refined programs and/or legislation, reallocated use of funds, organizational systems change as a result of evidence based practices).

N/A

Individual & Family Advocacy Performance Measure

Description

Health & Safety

Race/Ethnicity

Race/Ethnicity	#	%
White, alone	0	
Black or African American alone	0	
American Indian and Alaska Native alone	0	
Hispanic/Latino	0	
Asian alone	0	
Native Hawaiian & Other Pacific Islander alone	0	
Two or more races	0	
Race unknown	0	

Gender

Gender	#	%
Female	0	
Male	0	

Gender	#	%
Other	0	

Category

Category	#	%
Individual with DD	0	
Family Member	0	

Geographical

Geographical	#	%
Urban	0	
Rural	0	

I. Output Measures

Objective	Performance Measure : IFA 1.1 People with DD who participated in activities	Performance Measure : IFA 1.2 Family members who participated in activities
<p>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.*</p>	<p>279</p>	<p>1648</p>
<p>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.*</p>	<p>4469</p>	<p>7075</p>
<p>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.*</p>	<p>10229</p>	<p>37544</p>

Objective	Performance Measure : IFA 1.1 People with DD who participated in activities	Performance Measure : IFA 1.2 Family members who participated in activities
Total # of Output Respondents	14977	46267

II. Outcome Measures

Performance Measures	Percent (%)
IFA 2.1 Percent of people with DD who increased advocacy	1
IFA 2.2 Percent of family members who increased advocacy	0

Sub-Outcome Measures : The number (#) of people who are better able to say what they want/say what is important to them

Projects	# People with developmental disabilities	# Family Members
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.*	0	0

Projects	# People with developmental disabilities	# Family Members
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.*	0	0
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.*	57	157
Total # of Sub-Outcome Respondents	57	157
IFA 2.3 Percent of people better able to say what they need	0	0

Sub-Outcome Measures : The number (#) of people who are participating in advocacy activities

Projects	# People with developmental disabilities	# Family Members
<p>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.*</p>	<p>0</p>	<p>0</p>
<p>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.*</p>	<p>0</p>	<p>0</p>
<p>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.*</p>	<p>8</p>	<p>26</p>

Projects	# People with developmental disabilities	# Family Members
Total # of Sub-Outcome Respondents	8	26
IFA 2.4 Percent of people participating in advocacy activities	0	0

Sub-Outcome Measures : The number (#) of people who are on cross disability coalitions, policy boards, advisory boards, governing bodies and/or serving in leadership positions.

Projects	# People with developmental disabilities	# Family Members
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.*	0	0

Projects	# People with developmental disabilities	# Family Members
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.*	0	0
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.*	14	41
Total # of Sub-Outcome Respondents	14	41
IFA 2.5 Percent of people on cross disability coalitions	0	0

IFA 3 The percent of people satisfied with a project activity*

0

IFA 3.1 Percent of people with DD satisfied with activity*

0

IFA 3.2 Percent of family members satisfied with activity*

0

System Change Performance Measures

Description

Health & Safety

SC 1: Output Measures - The number of Council efforts to transform fragmented approaches into a coordinated and effective system that assures individuals with developmental disabilities 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.

Objective	SC 1.1 Number of policy/ procedures created/ changed	SC 1.2 Number of statutes/ regulations created/ changed	SC 1.3.1 Number of promising practices created	SC 1.3.2 Number of promising practices supported through Council activities	SC 1.3.3 Number of best practices created	SC 1.3.4 Number of best practices supported through Council activities	SC 1.3 The number of promising and/or best practices created and/or supported	SC 1.4 Number of people trained/ educated	SC 1.5 Number of Systems Change activities with other organizations
<p>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.</p>	3	2	4	9	3	59	75	5725	75

Objective	SC 1.1 Number of policy/ procedures created/ changed	SC 1.2 Number of statutes/ regulations created/ changed	SC 1.3.1 Number of promising practices created	SC 1.3.2 Number of promising practices supported through Council activities	SC 1.3.3 Number of best practices created	SC 1.3.4 Number of best practices supported through Council activities	SC 1.3 The number of promising and/or best practices created and/or supported	SC 1.4 Number of people trained/ educated	SC 1.5 Number of Systems Change activities with other organizations
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.	0	0	0	3	0	2	5	2994	11

Objective	SC 1.1 Number of policy/ procedures created/ changed	SC 1.2 Number of statutes/ regulations created/ changed	SC 1.3.1 Number of promising practices created	SC 1.3.2 Number of promising practices supported through Council activities	SC 1.3.3 Number of best practices created	SC 1.3.4 Number of best practices supported through Council activities	SC 1.3 The number of promising and/or best practices created and/or supported	SC 1.4 Number of people trained/ educated	SC 1.5 Number of Systems Change activities with other organizations
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.	0	0	2	17	0	15	34	37220	95

Systems Change SC 2: Outcome Measures

Outcome Measures	Number(#)
SC 2.1 - Efforts that led to improvements *	39
SC 2.2 - Efforts that were implemented *	713

Sub-Outcome Measures

Objective	SC 2.1.1 Policy, procedure, statute, regulation improvements	SC 2.1.2 Policy, procedure, statute, regulation implemented	SC 2.1.3 Number of improved promising or best practices	SC 2.1.4 Number of implemented promising or best practices
<p>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.</p>	30	31	9	78

Objective	SC 2.1.1 Policy, procedure, statute, regulation improvements	SC 2.1.2 Policy, procedure, statute, regulation implemented	SC 2.1.3 Number of improved promising or best practices	SC 2.1.4 Number of implemented promising or best practices
<p>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.</p>	0	0	0	602
<p>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.</p>	0	0	0	2

Detailed Progress Report on Goals

Description

Employment

Area Of Emphasis

Area of Emphasis	Planned for this goal	Areas addressed
Quality Assurance		true
Education and Early Intervention		true
Child Care		
Health		
Employment	true	true
Housing		
Transportation	true	true
Recreation		
Formal and Informal Community Supports	true	true

Strategies

Strategies	Planned for this goal	Strategies Used
Outreach	true	true
Training	true	true
Technical Assistance	true	true
Supporting and Educating Communities	true	true
Interagency Collaboration and Coordination	true	true
Coordination with Related Councils, Committees and Programs	true	true
Barrier Elimination	true	true
Systems Design and Redesign	false	
Coalition Development and Citizen Participation	true	true
Informing Policymakers	true	true
Demonstration of New Approaches to Services and Support		
Other Activities		

3. Intermediaries/Collaborators

Collaborators	Planned for this goal	Actual
State Protection and Advocacy System	false	
University Center(s)	true	true
State DD agency	true	true
CA Dept. of Rehabilitation	true	true
CA Employment Development Dept.	true	true
Private Employers	true	true
Public advocacy groups &/or private non-profits	true	true

Provide an overall cohesive description of (a) the extent to which progress is being made in achieving the intended outcomes of the Goal for the reporting year, (b) the extent to which each goal was or was not achieved for the reporting year, (c) where applicable, factors that impeded goal achievement for the reporting year, (c) needs that require substantive state plan amendment (goal only)

The Council's work in employment is a strongly collaborative effort, as all 3 UCEDDs and California's P&A organization, Disability Rights California (DRC) sit on SCDD's Employment First Committee (EFC), which met a total of 7 times, in addition to agency members also serving PwD in employment-related capacities (e.g. DDS, DOR and CDE). The Council has partnered with approximately 680 collaborative

governmental and community-based agencies in regional work throughout the state. With two grant-funded projects and its own regional work, the Council leveraged a total of \$195,385 through employment-related activities. In working with 26 local Workforce Development Boards (L/WDB), the Council reached more than 700 people.

In regard to activities, SCDD held 35 regional and/or statewide events, reaching 5,210 people. Regional staff provided 35 CIE-related trainings (reaching 1,133), posted 155 articles (reaching 37,652), and distributed 31 resource packets (reaching 10,124). SCDD also participated in 18 regional cross-disciplinary collaborative meetings with 1,041 people and provided technical assistance to a total of 2,703 family/self-advocates and others.

The Council was also active in employment-related policy work, engaging in 35 outreach efforts that educated 19,026 stakeholders. Staff held 12 meetings with 132 policymakers and updated the Data Dashboard, hosted on SCDD's website. Policy staff monitored 4 bills and took a position and/or sponsored 2 bills. On a more personal level, the Council reached 73 people with employment opportunities, providing internships through its regional and HQ offices.

While the EFC completed and posted its 2016 EFC report in July of 2017, the report was disseminated to 100 people during FFY 2018 (the report is published a year behind the actual work described and distributed during the following year). The Council posts and maintains all EFC reports on its website.

Grant Projects:

The Council engaged 2 community-based organizations in grant-funded projects (Hope Services: *Project Search*; Easterseals Southern California: *Customized Employment*). Federal clarification and guidance allowed the Council to require a different reporting format from sub-grantees, producing FPM-based end-of-project reports (a process that was impossible for the Council's regional staff, given its thousands of completed activities over FFY 2018).

Hope Services: *Project Search*

Project Search is an expansion program, moving into Monterey County and working to train and place interns (with I/DD) in a healthcare employment setting, with referrals through the local RC. This project reached 14 self-advocate interns and 20 family members (all reporting an increase in their capacity to increase knowledge to take part in decisions that affect them, their families, lives, and/or systems and capacity for

advocacy as a result of this grant-supported work). The sub-grantee reported creating/changing, supporting, implementing and improving 1 promising and/or best practice through the course of the project period. One intern reportedly dropped out of the project, believing that the paid internship program (PIP) funding would have jeopardized housing and Social Security entitlement benefits. This project leveraged \$34,892 in funding.

Easterseals Southern California (ESSC): *Customized Employment – Application and Validation*

The *Customized Employment: Application and Validation Project* trained staff from funders and provider agencies on customized employment and conducted the nation's first field test of the Discovery Fidelity Scale, which is designed to validate better employment outcomes with its use. Customized employment avoids a traditional, job-based screening process by getting to know a job seeker's skills, abilities, talents and interests and matching those with an employer who values and needs those specific attributes for job staffing purposes.

Customized employment (as a model) is being used in several states and becoming more prevalent in California. In this grant project, the Council and the Department of Rehabilitation (DOR) launched the first customized employment pilot in the state, paving the way to sustainable reimbursement models based on evidence-based practices (EBP). This project promoted best practices in employing PwD, building capacity and collaboration among service agencies, and furthering research on discovery and customized employment. It also brought subject matter experts to California, expanding working relationships between providers, RCs, DOR and educators, as it supported California's CIE Blueprint.

This project served and/or trained 46 self-advocates, 7 family advocates, and 316 others, involving 8 activities with a total of 121 community-based organizations (reaching another 193 people). ESSC reported improving and/or implementing 1 procedure, improving 2 promising/best practices, and implementing 1 promising/best practice.

As a result of this field study, 100% of the original tenets were revised. Continued field testing of the Discovery tenets will be required, but - once reliability and validity have been verified - an implementation manual will be created. Customized employment is now considered a best practice and will be funded through both the RC system and DOR. Unpublished findings based on these Delphi process research results were presented at the national Association of People Supporting Employment First Conference in Orlando, Florida, August 16, 2018. An article

detailing the 3-phase Delphi process and research methodology used to increase the validity of the DFS has been accepted for publication in the *Journal of Vocational Rehabilitation* (most likely in either the Winter 2018 or Spring 2019 monograph). This project leveraged \$149,488 in funding.

4 Year Overview : A description of how the Council will use and build from knowledge gained and progress made to move forward in the next state plan cycle.(This section only applies to the PPR submitted for the Federal Fiscal Year 2020, which will be due by January 1, 2021)

5 Year Overview : For the final PPR of this state plan cycle, provide an overall analysis of the outcomes achieved during the five year state plan cycle. The description should include the extent to which diverse stakeholders are satisfied with council activities that promote self-determination and community participation for individuals with disabilities and families, results of other types of information gathering such as focus groups, surveys, or other feedback or input methods with individuals with developmental disabilities and families and major accomplishments and factors impeding goal achievement (if applicable).(This section only applies to the PPR submitted for the Federal Fiscal Year 2021, which will be due by January 1, 2022)

Objectives

1. 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.

1. Goal: Employment

2. State Plan Objective Objective 2

3. This Objective is

System Change

4. This Objective is

Ongoing

5. This Objective is

	The Objective is
a. Fulfilling a Self-Advocacy DD Requirement *	No
b. Targeted disparity *	No
c. DD Network Collaboration *	No
d. A demonstration project of New Approaches to Services and Supports *	No

	The Objective is
e. A demonstration of projects or activities *	No

6. Stage of Implementation

Implementation

7. Provide an overall description of this effort

Employment rated as a significant need in the State Plan development survey, ranking second only to formal/informal supports. This policy-level objective is intended to bring together private entities in collaborative efforts to increase CIE for people with I/DD. It is also designed to inform policy-makers, employers and family/self-advocates about the benefits of CIE and address policy and practice changes, incentives, and opportunities around the competitive, integrated employment of people with I/DD and/or cross disabilities.

8. Outputs Achieved

Expected Outputs	Achieved
3 updates to the Data Dashboard, reaching 100 people; 1 updated list of employment-related &/or employment disparity data, reaching 25 people	true
1 updated list of with LPPC platform/priorities	true
1 updated list of LPPC's recommended legislation	true
3 EFC meetings (see 2.1)	true
25 meetings/phone calls/teleconferences, reaching 100 people	true
Monitor 10 bills; educate stakeholders 15x, reaching 300 people	true
Testify/draft/submit comments for 6 hearings, reaching 400	true

10. The report should include the following: (a) A narrative progress report that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenges to achieving the objective and unexpected benefits.(b) For system change activities, include a description of the stage of implementation (planning, initiation, implementation, outcome/fully integrated) of the system change initiative. (c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report).

Through direction of the Legislative and Public Policy Committee (LPPC), the Council developed a new policy-related strategy in FFY 2018, reducing its range of topics and the amount of proposed legislation to consider and on which to take active positions. Council staff reviewed all (introduced) bills and made recommendations to the LPPC (in a series of 5 meetings throughout the year), which moved to 1) take positions on 2 bills, 2) monitor 2 bills, and 3) sponsor 2 bills. Of these, SCDD sent letters on 4 bills and testified on its 2 sponsored bills. In educating and informing policymakers, legislative staff and others, policy staff reached 293 stakeholders and, through testimony and drafted comments, another 29 people. Through information received from its partner agencies, the Council hosted and updated the Data Dashboard twice, reaching 146 people with information. Policy staff Regional staff also reported reaching 19,026 stakeholders about legislative and regulatory changes through the Council's website, calls, presentations, social media, and email blasts and leveraging \$500 through local partnership efforts. Regional staff reported on policy work, people reached, and resource outreach through anecdotal data, numbers of social media contacts and activity reports (with surveys collected after training), submitted monthly, while policy staff maintained notes and logs, putting together an end-of-year summary of work accomplished. LPPC meetings were recorded and reported through anecdotal data and minutes. All staff reports back on the number of people reached and/or served through TA efforts through anecdotal and activity reports.

The Council's Employment First Committee (EFC), meets on a quarterly basis and is attended by partners from DDS, DOE and CDE, identified best practices and recommended legislative, regulatory, and policy changes for increasing the number of individuals with I/DD in CIE, self-employment, and micro-enterprises. EFC members report that the biggest change has been a discernible shift in attitudes about CIE and PwD, which is now the stated expectation for most people with I/DD and their family members, service providers and other stakeholders (most of whom are actively looking for CIE opportunities for PwD and want to ensure the services and supports are in place to ensure a successful transition from segregated and/or subminimum wage employment). Essential changes are still needed in the service delivery system, which has yet to yield significant results, as labor force participation remains extremely low. SCDD hosts the state's data dashboard, which is updated yearly with the status of employment of people with I/DD. SCDD has been meeting with DDS to discuss how the dashboard can be improved.

Building on last year's success, the Council sponsored SB 1274 (McGuire), requiring DSS to provide Cal-Fresh and Cal-Works eligibility and enrollment data to DDS to evaluate the effectiveness of the Employment First Policy. Legislation became necessary, as DSS was prohibited from sharing data (due to privacy concerns), so a legislatively mandated exception was created. SCDD worked with Legislative staff, DDS and DSS to move the bill through the process and ensure that it was signed by the Governor. This non-controversial bill moved through the process efficiently (reaching 100 and providing effective outreach and information dissemination throughout the state).

SCDD sponsored AB 2171 (Frazier) to improve coordination and collaboration among DDS, DOR and CDE (As this bill impacted transition-aged youth, as well as adults, the work impacting adults is reported under the employment objective [2.2], while the work impacting transition-aged youth is reported through the education/transition objective [5.3] and education policy objective [5.4]). The bill (*One Person, One Goal*) was successfully passed out of the Assembly, but was pulled from the Senate floor because agreements (between the author, state agencies and the Governor's office) could not be successfully negotiated prior to the close of session. SCDD staff met with Legislative staff (via call, text or email) numerous times over the session to negotiate this bill and move it through the process (reaching 100). SCDD collaborated closely with DRC and the UCEDD at the Tarjan Center (reaching 60) on this bill. SCDD also held several meetings with DOR to discuss the bill and its implications on the vocational rehabilitation system. SCDD met with other providers that would be impacted by the bill, including the CA Disability Service Providers Network and the Association of Regional Center Agencies (ARCA). SCDD met with the staff of agencies, sent letters in support, and testified in support of the bill in both Assembly and Senate Human Services. Lastly, in response to a citizen's compelling story, Legislative staff (of a potential author) reached out to the Council to discuss potential employment options in California. SCDD met with staff and DOR to negotiate a possible response in the form of model legislation, although there was insufficient time to introduce a bill prior to the beginning of the current session.

The Council partnered with the Department of General Services (DGS) to host the National Disability Employment Awareness Month event at the Elihu Harris State Building, which targeted hiring managers and personnel in civil service departments and to increase hiring of employees with disabilities in state civil service positions. Assemblymember Rob Bonta provided opening statements and Chief Vance Taylor (the Office of Access and Functional Needs for CalOES) was the keynote speaker. Council staff provided the keynote address for

the Alameda County Tech Ability Conference, which targeted private and public sector HR professionals, corporate and department legal counsel, and diversity/equity professionals, as well as hiring managers and directors (reaching 155). Following the presentation, staff also provided TA to 7 attendees.

In Tehama County, staff provided assistance and information on signed legislation improving Employment First through the County Coordinating Council. In San Bernardino County, staff provided information and TA to (quarterly meetings of) the Secondary Transition Interagency Collaborative for the local SELPA about the CIE Blueprint and strategic plan (with DOR, CDE and DDS), establishing local partnership agreements between core partners (DOR, local educational agencies [LEA] and local RCs) and extending to regional partners, stakeholders and vendors (reaching 34 people and 10 agencies). In the counties of Lake, Mendocino, Humboldt and Del Norte, staff collaborated with the regional Association of Service Providers (ASP) to promote employment opportunities for PwD and provide updates on new employment rules and emerging issues, HCBS, behavior management and staffing, etc. In Los Angeles County, staff updated local RC staff with information, feedback and strategies about engaging employers in the hiring of PwD.

In the counties of Amador, Calaveras, San Joaquin, Tuolumne and Stanislaus, regional staff produced a radio promotion about the Council and the services it provides, reaching a potential audience of 100,000 listeners. In Sacramento County, staff participated in the Statewide Self-Advocacy Conference, providing a resource table and reaching 500 people with information about paid internships, CIE, and DOR student services. Regional staff attended meetings of the Business Advisory Council (BAC), collaborating with supported employment agencies and the regional One Stop Job Center to promote and develop pathways for CIE and creating the structure and execution plan for a planned job fair.

In Sonoma County, staff provided training about employment issues and information on the end of the Deferred Action for Childhood Arrivals (DACA) program and its impact on Employment Authorization Documents (EADs). Training and DACA work permit information was provided to attendees in Spanish, with Spanish translation for 37 attendees. Regional staff (Sacramento County) worked with Easterseals Superior CA program directors to develop CIE-related training opportunities for clients who are concerned about the threat of losing SSI/SSA and/or Medi-Cal benefits when income fluctuations put them at risk of insufficient financial support for living expenses. Staff is working to partner with CalABLE, SSA and DOR to augment this curriculum with timely CIE opportunities and updates.

12. Expected Outcomes Achieved

Expected Outcomes	Achieved
<p>Family/self-advocates and stakeholders will have knowledge about up-to-date, accessible employment information through the Data 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</p>	<p>true</p>
<p>Family/self-advocates, EFC members, & other stakeholders will have knowledge about issues regarding CIE & 1 list of targeted policy solutions about employment gaps</p>	<p>true</p>
<p>The Council, family/self-advocates, EFC members, & other stakeholders will have access to targeted policy solutions about employment gaps</p>	<p>true</p>
<p>The Council will incorporate a deliberative body with collaborative stakeholders to develop policy and legislative options</p>	<p>true</p>
<p>Policy-makers will have knowledge about CIE & employment opportunity gaps &/or solutions for people with I/DD &/or cross-disabilities</p>	<p>true</p>
<p>The Council and its EFC will have up-to-date information about statewide policy initiatives affecting CIE for people with I/DD &/or cross-disabilities and share information with policymakers</p>	<p>true</p>
<p>The Council and its collaborative partners and family/self-advocate constituents will maintain an active role in making positive legislative changes in CIE for people with I/DD &/or cross-disabilities</p>	<p>true</p>

13. Progress towards achieving outcomes for overall objective : The annual report should include an assessment as to the extent to which progress was made on the intended outcomes for the objective.

While the Council met or exceeded all of its targeted numbers and activities for this objective, the work of promoting CIE through policy change, training, and outreach to family/self-advocates, employers, policy-makers, and other stakeholders in CIE-related issues will continue until such time as competitive, integrate employment for people with I/DD and/or cross-disabilities in California's industry standard at the business and community level.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community). Stories of policy or legislative changes that happened as a result of Council individual advocacy work that are likely to positively impact the lives of people with developmental disabilities or that will prevent a potential negative impact (e.g., created deleted, refined programs and/or legislation, reallocated use of funds, organizational systems change as a result of evidence based practices).

N/A

2. The Council will increase and promote culturally competent strategies and resources that facilitate competitive, integrated employment (CIE) of people with I/DD.

1. Goal: Employment

2. State Plan Objective Objective 1

3. This Objective is

System Change

4. This Objective is

Ongoing

5. This Objective is

	The Objective is
a. Fulfilling a Self-Advocacy DD Requirement *	No
b. Targeted disparity *	No
c. DD Network Collaboration *	No
d. A demonstration project of New Approaches to Services and Supports *	No

e. A demonstration of projects or activities *

The Objective is

Yes

Project Name*

- 1. Hope Services: Project Search (Extended through 09/18); 10/16
- 2. Easterseals Southern California: Customized Employment - Application and Validation; 10/17

Original Start Date*

10-01-17

6. Stage of Implementation

Implementation

7. Provide an overall description of this effort

In consideration of developing goals for the 5-year State Plan, respondents to the Council's statewide survey reported that employment was a significant need for people with I/DD and/or cross-disabilities in California, rating it as 2nd in importance to formal/informal supports. Self-advocates, family members and service providers continue to report back through Council's regional offices, acknowledging the ongoing need for culturally competent strategies and resources to promote CIE in communities throughout California. This objective allows the Council and its staff to collaborate with education, employers, service providers, state agencies and people with I/DD and/or cross-disabilities to identify and disseminate evidence-based practices to stakeholders in an effort to engage employers in recognition of the tremendous workforce potential of people with disabilities.

8. Outputs Achieved

Expected Outputs	Achieved
3 EFC meetings; monitoring and strategic planning for CIE-related activities & outcomes; data collection; 1 yearly report, reaching 1,500	true
4 meetings	true
10 regional lists of CIE-related issues/barriers	true
1 culturally competent curriculum with satisfaction survey; 10 trainings, reaching 150 people	true
5 CIE regional or statewide events will be held for 250 employers/providers/stakeholders	true

Expected Outputs	Achieved
Engage with 10 L/WDB, distributing information, training & resources to 100 people; post website material, reaching 150 people	true
Develop/update/distribute/post 1 set of materials for FA/SA, stakeholders, etc.	true
1 set of plain language CIE materials, reaching 1,500; 1 set translated into Spanish, reaching 1,500; 1 set of translated material in another threshold language, as necessary	true
If feasible, regional offices may host 10 CIE opportunities, in partnership with local employment agencies, educational entities, contractors, etc.	true
1 up-to-date, Council-sponsored Data Dashboard, reaching 150; 1 webpage dedicated to CIE-related issues, resources, training, etc., will be maintained, reaching 100	true

10. The report should include the following: (a) A narrative progress report that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenges to achieving the objective and unexpected benefits.(b) For system change activities, include a description of the stage of implementation (planning, initiation, implementation, outcome/fully integrated) of the system change initiative. (c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report).

Council personnel in 12 regional offices collected information on systems issues throughout the state, while serving as subject matter experts, assisting people in navigating disability-related and employment systems. Staff provided leadership on statewide, regional and local employment-related committees and task forces, providing information and resources.

The Council, in meeting its planned activities for the year, convened 4 Employment First Committee (EFC) meetings (involving 112 participants), developed a list of issues and a legislative platform, and produced a yearly report that was distributed electronically. Staff put together a comprehensive list of employment-related issues and engaged in employment-related cross-disciplinary networks, meeting 18 times throughout the year, and working with 249 people. Through regional cross-disciplinary, collaborative networks, the Council engaged with 1,041 people (in 105 meetings) about issues surrounding competitive, integrated employment (CIE). Staff reached 37,652 people through electronic information-distribution channels and distributed hard-copy materials to 10,124 people.

As the Employment First movement takes hold and spreads throughout California, regional staff took part in committee meetings dedicated to Employment First policies within RCs and other community-based organizations. These committees are designed to foster preparation for competitive integrated employment, during and following public school enrollment. These policies will also promote Employment First options to working-age adults with I/DD by ensuring seamless transitions between funding sources, as participants access the discovery process, paid internships, and a full range of competitive integrated employment options.

With training topics, such as CIE, Employment First and Social Security vs. the value of employment, 35 trainings were held throughout the state, reaching over 1,130 people. Some trainings educated self-advocates on transition and employment options; other trainings provided family/self-advocates information about the ABLE Act and preserving personal assets valuable public entitlements.

The Council included family and self-advocates in peer training support roles, by providing trainings about the changing landscape of employment services. One training (for 20 self-advocates) included the Arc of Ventura County, with an Employment First and PCP presentation in a day/employment context, with information about creating job opportunities outside traditional supported-employment

models. A 2nd presentation (at Greater Opportunities) brought in 45 participants. In the Los Angeles area, Employment First presentations attracted groups of 55 and 70 people at a time, with segments of *Bottom Dollars*, personal success stories, and information about CIE.

The Council provided small-group and individualized employment-related trainings to self-advocates about interviewing, job performance, and employer expectations. With this curriculum, adults and teenagers in transition with I/DD also learned the importance of appropriate hygiene and dress for job interviews. In the Sequoia region, the Council maintains a clothing closet for self-advocates in need of both business attire and information/training on employment-related skills.

Staff collaborated with Rolling Start ILC to provide a community outreach training/demonstration on assistive technology (AT) for employment, designed to give family/self-advocates, community members and professionals information and hands-on demonstrations of AT devices to assist PwD in bridging barriers and obtaining/maintaining employment. Staff also gave training at Colton Redlands Yucaipa ROP, for the Being the Change, an event for self-advocates in local transition partnership programs and their families.

The Council sponsored a work skills fair (Meristem: Redefining the Spectrum of Ability), attended by 200 people - those with I/DD, family members, agency staff, and employers. Information tables were provided, in addition to 14 sessions on employment and stations to develop resumes and practice interviewing techniques. CIE-related events typically draw large crowds, given the desire of PwD to obtain a job.

While regional staff participated in an employment conference, attended by 700 and sponsored by the San Diego Workforce Partnership (Opportunity Summit 2018: Initiate), the actual planners failed to consider the employment skills, strengths, and needs of PwD. The Council is now working with conference planners to correct this situation for next year. The Council engaged in many events, several are listed below:

- 17th Annual Jobtoberfest (San Diego County)
- 2018 Forum for Disability Allyship: *Advocating for Abilities* (San Francisco County)
- 23rd Annual Valleywide Employment Development Expo (Riverside County)

- 35th Annual Cal-TASH Conference (Sacramento County)
- Building Trades Career Expo, Hiring Event and Job Fair (Yolo County)
- Employer Event: *Disability Training* (San Diego County)
- Employment Workshop: *SSI Benefits & Employment in 2018* (Orange County)
- Verdugo Job Center: Disability Resource Fair (Los Angeles County)

The Council engaged 26 state and regional Workforce Development Boards (WDB), working with over 710 people. Staff created 12 lists of information, training, and resources to develop partnership opportunities in CIE. This information was used by the Employment First Committee (EFC) to create its strategic plan for the year. The Council informed individuals electronically, posted articles, and passed out flyers and brochures, reaching more than 47,700 people. The Council engaged in 28 CIE-related events that were collaborative partnership opportunities with 73 different employment stakeholders.

The Council hosts California's Data Dashboard on its website as a resource tool that the public and other agencies can use to obtain statistics on California's progress in CIE. Materials (in hard copy) were distributed to 10,124 people, while electronically distributed materials reached 37,652 people.

The Council successfully initiated 28 model vocational internships, providing a training platform for 73 people with I/DD and their job coaches within regional office jobsites. Regional offices also serve as information and collaborative hubs in the work of building momentum toward increased employment for people with I/DD. Through collaboration, training, and community outreach efforts, the Council's regional staff educated a total of 1,133 people about CIE.

In addition to its direct efforts to reach Californians with CIE-related information, the Council issued grants to 2 entities: Easter Seals Southern California and Hope Services.

The Easterseals project was an exceptionally successful grant-supported project of the Council, which has refined its grants process over the course of the past two (2) years. This project validated the Discovery model, for assessing employment preferences and skills, training professionals to administer it effectively in field-based settings for the purpose of matching candidates with customized employment opportunities.

Five (5) ACRE (Association of Community Rehabilitation Educators) courses on customized employment were provided. Attendees included self-advocates, family members, DOR staff, RC staff, community rehabilitation providers, and educators, with 131 people (representing 83 agencies in 6 counties) obtaining ACRE certificates. The DFS Administrator training was attended by various agency, RC and DOR staff, and family advocates. An all-partner training session (with 17 DFS administrators) provided an additional session of hands-on technical assistance, as well as peer-to-peer coaching, DFS reviews and evaluation, and tailored 1:1 training to address any barriers.

Participant responses to the project demonstrated high satisfaction with the system, training, and 'cultural' shifts around employment assessments. An unexpected project bonus included a full project demonstration which will provide step-by-step guidelines and instructions for replicating the project in other local or state venues.

Hope Services received a grant award to expand Project SEARCH into the Monterey County catchment area. An MOU was signed by all participating collaborative partners (Hope Services, Salinas Valley Memorial Healthcare System (SVMHS), and Salinas Union High School District [SUHSD]), and the hiring (project coordinator) and interviewing process (for intern candidates) began. SUHSD will provide successful interns with an educational certification, as required by Project SEARCH's national office. Some potential program participants declined, as they could not wait for 9 months before earning an income. Additionally, significant issues arose, due to the semi-rural setting and limited transportation options. None of the interns drive and a trip to the program site takes at least an hour, using public transportation. While the initial project phase was met with a 100% satisfaction rate, the 2nd phase garnered a 75% overall satisfaction rate (50% satisfaction from self-advocates and 100% satisfaction from family advocates).

The Council provided family/self-advocates, professionals, and community with employment-related resources in English and Spanish, attending some events that specifically targeted monolingual Spanish-speaking populations (e.g. Festiva Educativa, etc.).

Over this FFY, the Council provided technical assistance 214 times, reaching 2,679 people in face-to-face meetings, conferences, project/conference/workshop-specific interactions, email/phone inquiries, and collaborative partnerships with other agencies. With the collaborative activities and efforts of this objective, the Council leveraged a total of \$195,385.

References

Hall, S. R., Ph.D., Keeton, B., Cassidy, P., Iovannone, R., Ph.D., & Griffin, C. (2016). Discovery Fidelity Scale. The Center for Social Capital, Inc.: Griffin Hammis Associates. Revised Nov. 2017. www.cbtac.org (<http://www.cbtac.org/>).

12. Expected Outcomes Achieved

Expected Outcomes	Achieved
A Council-based entity of family/self-advocates & federal/state-level collaborative partners will exist to monitor statewide implementation of the Employment First initiative, identify/report on employment trends throughout the state, and make recommendations to promote CIE throughout the state	true
A cross-disciplinary, collaborative network of local/regional partners throughout the state will be maintained to identify/address issues &/or barriers associated with CIE and people with I/DD &/or cross-disabilities	true
The Council will have and share regional issues/barriers, identifying trends and training needs	true
Family/self-advocates and employers/community members/providers will have training, knowledge & resources to develop, provide &/or obtain CIE	true

Expected Outcomes	Achieved
Employers will have culturally competent information and contacts to develop/offer options about & opportunities for CIE to people with I/DD &/or cross-disabilities	true
L/WDBs and stakeholders will have culturally competent knowledge & strategies to facilitate/offer CIE for people with I/DD &/or cross-disabilities	true
Family/self-advocates, employers & other community stakeholders will have information/resources to develop, deliver &/or obtain CIE	true
Plain language CIE materials will be available for translation into threshold languages to provide family/self-advocates, community members, employers/providers, etc. with accessible information about CIE	true
The Council will provide one or more working model(s) of CIE, with field-based, paid internship/employment opportunities for PwD	true
Family/self-advocates, employers, & other stakeholders will have up-to-date knowledge and web-based resources & information about CIE, employment strategies that work &/or are replicable, training/employment opportunities, etc.	true

13. Progress towards achieving outcomes for overall objective : The annual report should include an assessment as to the extent to which progress was made on the intended outcomes for the objective.

The collaborative work of the UCLA Tarjan Center UCEDD and the California Departments of Rehabilitation, Education, and Developmental Services resulted in the development of the CIE Blueprint, which is being used by the Council's Employment First Committee to serve as a platform for policy recommendations, training and outreach to employers and other community stakeholders. This critical foundation was a necessary first step to inform the ongoing employment-related work of the Council over the next three (3) years, in an effort to increase and promote culturally competent strategies and resources that facilitate, integrated employment (CIE) of people with I/DD.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community). Stories of policy or legislative changes that happened as a result of Council individual advocacy work that are likely to positively impact the lives of people with developmental disabilities or that will prevent a potential negative impact (e.g., created deleted, refined programs and/or legislation, reallocated use of funds, organizational systems change as a result of evidence based practices).

Hi, I was interested in helping you again with mailing and copying? I've very good experience in stuffing, labeling, and taping down envelopes. I would also like to help you set up the copy machine again. I really enjoyed myself the day that I was there. Please let me know by email when you need my help? Thanks.

Individual & Family Advocacy Performance Measure

Description

Employment

Race/Ethnicity

Race/Ethnicity	#	%
White, alone	0	
Black or African American alone	0	
American Indian and Alaska Native alone	0	
Hispanic/Latino	0	
Asian alone	0	
Native Hawaiian & Other Pacific Islander alone	0	
Two or more races	0	
Race unknown	0	

Gender

Gender	#	%
Female	0	
Male	0	
Other	0	

Category

Category	#	%
Individual with DD	0	
Family Member	0	

Geographical

Geographical	#	%
Urban	0	
Rural	0	

I. Output Measures

Objective	Performance Measure : IFA 1.1 People with DD who participated in activities	Performance Measure : IFA 1.2 Family members who participated in activities
<p>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.*</p>	772	2565
<p>The Council will increase and promote culturally competent strategies and resources that facilitate competitive, integrated employment (CIE) of people with I/DD.*</p>	13381	27534
<p>Total # of Output Respondents</p>	14153	30099

II. Outcome Measures

Performance Measures	Percent (%)
<p>IFA 2.1 Percent of people with DD who increased advocacy</p>	0
<p>IFA 2.2 Percent of family members who increased advocacy</p>	0

Sub-Outcome Measures : The number (#) of people who are better able to say what they want/say what is important to them

Projects	# People with developmental disabilities	# Family Members
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.*	0	0
The Council will increase and promote culturally competent strategies and resources that facilitate competitive, integrated employment (CIE) of people with I/DD.*	0	0
Total # of Sub-Outcome Respondents	0	0
IFA 2.3 Percent of people better able to say what they need	0	0

Sub-Outcome Measures : The number (#) of people who are participating in advocacy activities

Projects	# People with developmental disabilities	# Family Members
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.*	0	0
The Council will increase and promote culturally competent strategies and resources that facilitate competitive, integrated employment (CIE) of people with I/DD.*	0	0
Total # of Sub-Outcome Respondents	0	0
IFA 2.4 Percent of people participating in advocacy activities	0	0

Sub-Outcome Measures : The number (#) of people who are on cross disability coalitions, policy boards, advisory boards, governing bodies and/or serving in leadership positions.

Projects	# People with developmental disabilities	# Family Members
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.*	0	0
The Council will increase and promote culturally competent strategies and resources that facilitate competitive, integrated employment (CIE) of people with I/DD.*	0	0
Total # of Sub-Outcome Respondents	0	0
IFA 2.5 Percent of people on cross disability coalitions	0	0

IFA 3 The percent of people satisfied with a project activity*

10

IFA 3.1 Percent of people with DD satisfied with activity*

0

IFA 3.2 Percent of family members satisfied with activity*

15

System Change Performance Measures

Description

Employment

SC 1: Output Measures - The number of Council efforts to transform fragmented approaches into a coordinated and effective system that assures individuals with developmental disabilities 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.

Objective	SC 1.1 Number of policy/ procedures created/ changed	SC 1.2 Number of statutes/ regulations created/ changed	SC 1.3.1 Number of promising practices created	SC 1.3.2 Number of promising practices supported through Council activities	SC 1.3.3 Number of best practices created	SC 1.3.4 Number of best practices supported through Council activities	SC 1.3 The number of promising and/or best practices created and/or supported	SC 1.4 Number of people trained/ educated	SC 1.5 Number of Systems Change activities with other organizations
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.	0	0	0	0	0	0	0	2795	10

Objective	SC 1.1 Number of policy/ procedures created/ changed	SC 1.2 Number of statutes/ regulations created/ changed	SC 1.3.1 Number of promising practices created	SC 1.3.2 Number of promising practices supported through Council activities	SC 1.3.3 Number of best practices created	SC 1.3.4 Number of best practices supported through Council activities	SC 1.3 The number of promising and/or best practices created and/or supported	SC 1.4 Number of people trained/ educated	SC 1.5 Number of Systems Change activities with other organizations
The Council will increase and promote culturally competent strategies and resources that facilitate competitive, integrated employment (CIE) of people with I/DD.	1	1	0	0	2	14	16	5180	121

Systems Change SC 2: Outcome Measures

Outcome Measures	Number(#)
SC 2.1 - Efforts that led to improvements *	15
SC 2.2 - Efforts that were implemented *	3

Sub-Outcome Measures

Objective	SC 2.1.1 Policy, procedure, statute, regulation improvements	SC 2.1.2 Policy, procedure, statute, regulation implemented	SC 2.1.3 Number of improved promising or best practices	SC 2.1.4 Number of implemented promising or best practices
<p>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.</p>	0	0	0	0
<p>The Council will increase and promote culturally competent strategies and resources that facilitate competitive, integrated employment (CIE) of people with I/DD.</p>	9	1	6	2

Detailed Progress Report on Goals

Description

Early Intervention, Education, Transition & Post-Secondary Education

Area Of Emphasis

Area of Emphasis	Planned for this goal	Areas addressed
Quality Assurance	true	true
Education and Early Intervention	true	true
Child Care	true	true
Health	true	true
Employment	true	true
Housing		
Transportation		
Recreation		
Formal and Informal Community Supports	true	true

Strategies

Strategies	Planned for this goal	Strategies Used
Outreach	true	true
Training	true	true
Technical Assistance	true	true
Supporting and Educating Communities	true	true
Interagency Collaboration and Coordination	true	true
Coordination with Related Councils, Committees and Programs	true	true
Barrier Elimination		true
Systems Design and Redesign	true	
Coalition Development and Citizen Participation	true	true
Informing Policymakers	true	true
Demonstration of New Approaches to Services and Support		
Other Activities		

3. Intermediaries/Collaborators

Collaborators	Planned for this goal	Actual
State Protection and Advocacy System	true	true
University Center(s)	true	true
State DD agency	true	true
Family Resource Center(s)	true	true
Self-advocacy entities	true	true
Districts/SELPA's, CACs, & Colleges/ Universities	true	true
Dept. of Rehabilitation	true	true
Employment Development Dept.	true	true
Regional Centers	true	true

Provide an overall cohesive description of (a) the extent to which progress is being made in achieving the intended outcomes of the Goal for the reporting year, (b) the extent to which each goal was or was not achieved for the reporting year, (c) where applicable, factors that impeded goal achievement for the reporting year, (c) needs that require substantive state plan amendment (goal only)

Goal 5 captured the Council's work in education throughout the lifespan, ranging from early diagnosis and intervention (Objective 1), the educational system (Objective 2) and transition years, through post-secondary education, competitive, integrated employment (CIE) and independent living options (Objective 3). The Council captured its education/transition policy work in Objective 4.

The Council collaborated with more than 820 local, regional, state and federal partners while engaging in the work of this goal, leveraging \$38,255 through the goal's overall activities. Regional staff provided technical assistance a total of 720 times, reaching 3,574 people. In disbursing resources and information, SCDD disseminated information electronically 257 times, reaching 207,109 people. Hard copies of materials and resources were distributed 133 times, reaching 39,148 people. Regional and HQ staff engaged in 196 collaborative community-based meetings 196 times, working with 2,972 people during FFY 2018.

Building (advocacy-related) capacity in family/self-advocates is an important part of the Council's advocacy efforts. To this end, SCDD provides significant training opportunities to the community. The Council provided 28 trainings to 361 parents/community members and 3 trainings to 152 medical, child care &/or Early Start professionals about early identification/intervention, I/DD &/or cross-disabilities, support/service resources, &/or transition into the school system, etc. Curriculum about disability awareness & self-advocacy within the school system was delivered in 82 trainings, reaching 1,802 students, parents, and/or community members. Regional staff provided about advocacy and FAPE rights in 21 parent peer advocacy trainings, reaching 684 people. In providing information about the process of person-centered planning (PCP) and individualized transition planning (ITP), leading to employment, post-secondary education and/or independent living options and opportunities, the Council gave 15 trainings to 366 people. Staff provided 8 trainings about student-led IEPs, PCPs, and ITPs, reaching 282 people.

In regional early identification/intervention efforts, staff worked collaboratively with community-based organizations to address issues such as Fetal Alcohol Syndrome (FAS), dual/multiple diagnoses, positive parenting and managing behaviors, and the differences between Early Start services (Part C of IDEA), other special education (Part B of IDEA) services, and the Lanterman Act, which includes information about RCs and California's eligibility criteria for developmental disabilities. Staff gave trainings for parents and professionals alike, targeting such issues as childcare, ASD, early identification/intervention, RC POS guidelines, and behavioral supports. Regional staff also engaged in outreach within the migrant and seasonal Head Start programs, providing trainings in Spanish for monolingual parents. Other types of training in Spanish were provided throughout the state for underserved populations, including TIGER (parent peer advocacy) training.

While each of the first three education-related objectives under this goal relate to transitions from one support/service system to the next, the most complex and significant transition (addressed in Obj. 5.3) involves the preparation for and transition into adulthood, with its complex systems of (not always well-integrated) disability-related and generic, community-based services. Council staff was involved in transition fairs, SELPA, CAC and RC Board meetings, trainings (on a myriad of educational, transitional and adult topics), and employment-related projects (e.g. Council and community-based internship opportunities, etc.) to assist family/self-advocates in addressing issues affecting emerging adults with I/DD and/or cross-disabilities and navigating concerns about independent living opportunities. Regional staff provided information (in hard copy and electronic format and through trainings) about such diverse topics as bullying, the financial benefits of employment (vs. strictly SSI/SSDI), engaging with law enforcement, low-incidence services (for those with hearing/vision impairments), RC, DOR and Disabled Student Services programs, the differences between ISFPs, IEPs, ITPs, and 504 plans, job interviewing skills, mental and other health-related issues, etc.

In the Council's policy work, staff reviewed all introduced bills, making recommendations to the council's LPPC. The Council took positions on 4 bills and monitored 5 bills, with testimony given on 1 piece of legislation and letters sent in response to 2 bills. Legislative approval was granted for state-level agencies to share previously confidential data to put together a picture of employment supports, services and/or opportunities available to and/or obtained by PwD. This information will facilitate collaborative efforts at the state level to identify and affect employment-related trends for PwD, beginning in the educational stages in the lives of people with I/DD and/or cross-disabilities. At the regional level, staff is working with the mental health system to understand FAPE rights and the supports and services available through the educational system for PwD. At the state level, the Council is working with California's Office of Administrative Hearings to reduce disparities in accessible information and equitable timelines for people from non-English-speaking cultures/communities.

While it met all of its (FFY 2018) targeted activities (and people reached) through the four (4) objectives within the education goal, the Council also recognizes that, at a community level, training family/self-advocates and others about education throughout the lifespan is really a 'perishable skills' issue, as new parents (and their children with I/DD and/or cross-disabilities) continually enter the system of early intervention and/or transition into educational supports and services, post-secondary education, employment and independent living options. Regional staff are routinely responsive to emerging needs at the community level and adjust work, training/outreach, and planning efforts accordingly. None of the findings that emerged from these efforts, however, reflected a need for changes at the State Plan level.

4 Year Overview : A description of how the Council will use and build from knowledge gained and progress made to move forward in the next state plan cycle.(This section only applies to the PPR submitted for the Federal Fiscal Year 2020, which will be due by January 1, 2021)

5 Year Overview : For the final PPR of this state plan cycle, provide an overall analysis of the outcomes achieved during the five year state plan cycle. The description should include the extent to which diverse stakeholders are satisfied with council activities that promote self-determination and community participation for individuals with disabilities and families, results of other types of information gathering such as focus groups, surveys, or other feedback or input methods with individuals with developmental disabilities and families and major accomplishments and factors impeding goal achievement (if applicable).(This section only applies to the PPR submitted for the Federal Fiscal Year 2021, which will be due by January 1, 2022)

Objectives

1. 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 services which support inclusive education.

1. Goal: Early Intervention, Education, Transition & Post-Secondary Education

2. State Plan Objective Objective 2

3. This Objective is

Individual & Family Advocacy

4. This Objective is

Ongoing

5. This Objective is

	The Objective is
a. Fulfilling a Self-Advocacy DD Requirement *	No
b. Targeted disparity *	No
c. DD Network Collaboration *	No
d. A demonstration project of New Approaches to Services and Supports *	No
e. A demonstration of projects or activities *	No

6. Stage of Implementation

Implementation

7. Provide an overall description of this effort

The SCDD's regional offices regularly field frequent requests from family advocates on how to obtain services from their assigned school districts. Individual Education Plan (IEP) meetings are essential for students to receive needed services because a potentially wide array of supports will be identified upon these meetings. Once the IEP is drafted and signed, it becomes a legally binding document that local education agencies (and families) must honor. The most recent numbers from the California Legislative Analyst's Office show that about 10% of students in the state school system received special education services. In the Council's statewide survey, special education was ranked as the third-highest area in which families and people with I/DD have the greatest need for service. In addition, over the course of the year, the Council's regional offices received 900 telephone requests for assistance with IEPs and obtaining delivery of special education services. Since 44% (representing 149,609 people) of Californians receiving regional center services are between the ages of 3 and 21, this remains a pivotal area for many people with I/DD and their families. What's more, a full 560,197 students between the ages of 3 and 21 have a (n intellectual and/or developmental or cross-) disability significant enough that they are deemed eligible to receive special education. This means that 310,588 students may receive school-based services through IEPs, but do not, for a variety of reasons, qualify for regional center case management, to assist in navigating the school system and self-advocate for their civil and educational rights within that system. The Council's activities within this objective area are part of a continuum of work that spans a lifetime of learning, designed to prepare people with disabilities to be independent, productive, members of the society in which they choose to live, learn play and work.

8. Outputs Achieved

Expected Outputs	Achieved
1 updated list of collaborators; 24 meetings, reaching 150 people; 1 updated list of regional/community needs for training/information	true
1 set of material(s) in English; 1 set of materials in plain language; 2 sets of materials translated into threshold languages, as necessary, reaching 1,000 people	
3 sets of updated outreach materials about FAPE rights; 24 electronic submissions, reaching 10,000 people; 12 hard copy submissions/distributions, reaching 1,500 people	true
1 updated disability awareness/self-advocacy curriculum; 24 trainings, reaching 500 people	true
1 updated self-advocacy/FAPE curriculum; 12 trainings, reaching 250 people	true

10. The report should include the following: (a) A narrative progress report that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenges to achieving the objective and unexpected benefits.(b) For system change activities, include a description of the stage of implementation (planning, initiation, implementation, outcome/fully integrated) of the system change initiative. (c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report).

To help family advocates understand child and family rights within the education and regional center systems, Council staff conducted 103 training sessions, reaching 2,486 people. Through face-to-face training efforts, large-scale events and collaborations in this objective, the Council reached 148,207 people.

A core component of the Council's work has been its provision of technical assistance and training in parent/child rights and inclusive education, leading to outcomes that promote equal opportunities for employment, the pursuit of continuing and/or higher education, fully integrated access to community services, and independent living for people with I/DD and their families. As with all supports and services, funding is a critical component in actual provision. Californians passed Proposition 30 (Temporary Taxes to Fund Education) in 2012 to prevent significant budget cuts to education. Proposition 55 increased and extended that tax increase through the end of 2030.

Sweeping funding changes (the Local Control Funding Formula [LCFF]), enacted in 2013, promised to provide supplemental funding for underserved, high-needs students through base, supplemental and concentration grants (thereby replacing a 40-year old web of diversely complex funding streams, block grants, and state categorical programs). While this model was intentionally designed to simplify educational funding and return more control to local districts and SELPAs, it was based on an assumption that supplemental funding would, in fact, be used for the intended, targeted, and vulnerable student populations.

Although the current Governor's Budget will require all statewide provisions of the LCFF to be fully enacted, school districts and SELPAs have proven inconsistent in applying the additional funding to the intended high-need student populations in appropriate, inclusive ways. In northern California, the 2017-18 Humboldt County grand jury issued findings, reporting that "disproportionate numbers of Native American and Hispanic children – some of whom may not even have disabilities" have been "enrolled in special education programs" (Times-Standard, June 29, 2018). The grand jury found, in its investigation, that the county's foster youth were also significantly overrepresented in special education placements and that SPED programming did not adequately take cultural, linguistic and environmental factors into account, when making placements. In Humboldt County (with a 17-22% SPED rate – the highest in the state), children were more often removed from inclusive, general education environments, with neither need nor adequate provisions for reintegrating them as quickly as possible.

This non-inclusive educational trend is a direct outcome of California's 'Local Control Funding Formula' (LCFF), which provides and 'equalizes' funding to public and charter schools, giving them uniform base grants (based on ADA/Average Daily Attendance) and incentives (through supplemental grants) for targeting disadvantaged pupils (e.g.). By 'segregating' specialized students into special education programs (and non-inclusive classrooms), districts may then be able to creatively 'supplement' their budgets in ways that do not necessarily benefit students.

As a recognized subject matter expert in education issues affecting people with disabilities, Council staff met with the CDE Director of Special Education to address outreach and strategic planning for full inclusion of all students. This collaborative effort led to outreach/presentation opportunities with the Advisory Commission on Special Education (ACSE), which provides recommendations and advice to the State Board of Education, the State Superintendent of Public Instruction, the Legislature, and the Governor in new or continuing areas of research, program development and evaluation in California special education.

In promoting educational opportunities and providing information throughout California, the Council engaged in collaborative relationships with federal, state, regional and local, governmental, quasi-governmental and private (non-profit) agencies (in addition to its federal partners), to expand and diversify both the services provided and the populations reached.

In Mendocino County, the Council is working with a grant-funded program, Screenagers (Parent Training on Harmful Effects of Screen Time), which assists parents in coping with and mitigating the effects of the digital age on children's development and education. Additional grant monies were awarded to a recreational training program (Cycle without Limits) for children.

Throughout California the Council is collaborating with Family Resource Networks and Centers (FRN/FRC) to provide IEP and Early Start workshops for parents, professionals and community members. In a 5-county catchment area alone, 12 of these trainings were scheduled/held for the year.

Los Angeles County has been the location of one of the Council's major collaborative efforts, the TIGER Program (Training Individuals for Grassroots Education Reform), in conjunction with the Learning Rights Law Center. The TIGER curriculum progresses (for 11 months) through 35 hours of beginner, intermediate, and advanced courses designed to prepare participants to become actively involved

as advocates in the special education and related services systems. Also in Los Angeles County, SCDD was asked by the local RC to provide its service coordinators (specializing in at-risk infants and those already diagnosed with I/DD and/or cross-disabilities) with information about IEP meetings so that they could advocate more effectively for services on behalf of children qualifying for special education. Information included multiple strategies on resolving disagreements with school districts, school evaluations, strategies to get services and avoiding/preparing for due process, 'stay put' orders, informed consent, compensatory education, and other issues related to due process. Evaluations showed a 2.5-point increase (on a 5-point scale) in knowledge and comfort, following training

In Sacramento County, the Council worked with its federal partner, Disability Rights California (DRC) to provide parents with training on IEPs and developing effective goals. Regional staff also worked with DRC and another of its federal partners, the UCD MIND Institute, and SANKOFA Parent Support Group (formerly the African-American Developmental Disabilities Alliance) to provide information about disparities in RC services, as well as audit concerns regarding a USD's special education services. Six (6) families reported their children had not received adequate behavioral supports, leading to suspensions, expulsions (particularly in the African-American community), removal from public schools and placement in charter or non-public settings.

IEP trainings were given for parents and professionals throughout the state, including the OMID Multicultural Institute, Boat People SOS (a CBO serving the Vietnamese community), child guidance, career development, and regional centers, hospitals, and school districts. Regional staff also provided trainings at the Bishop Paiute Indian Reservation, Coachella Valley Autism Society program, Escuela de la Raza, Exceptional Parents Unlimited, and Parents CAN.

The Council engaged in more than 70 collaborative meetings with policymakers, family advocates, professionals, community members, and other stakeholders throughout the state, reaching hundreds of people. Many of these meetings were part of planning for major regional and/or local events. The Special Education Task Force in Los Angeles County met throughout the year to address legislation, legal cases, the segregation of SPED students in schools throughout the county, the deportation of families with children in SPED and other SPED trends (e.g. reauthorization of the IDEA).

Council staff is working with the California Charter School Association's special education programs manager, to develop plans to address mutual areas of concern, such as the disproportionality of educational outcomes for students with disabilities, employment/transition concerns, training needs of family and self-advocates, and other collaborative opportunities.

The Council is proactive in its outreach to parents in need of assistance with educational plans and services by holding IEP Clinics. These clinics are opportunities to provide small group trainings, review IEPs, share resources, and identify and address emerging issues in specific school districts. Because of the value of these clinics, regional centers are now requesting that the Council provide clinics for RC service coordinators and managers, to address homeschooling, IEPs, transition plans, post-secondary options, IEEs and behavior plans. Regional staff have found providing professional clinics to be equally helpful in learning about emerging community needs. Those needs sometimes include educating parents about their responsibilities, as well as their rights, in addition to a district's responsibility to assess a child.

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12. Expected Outcomes Achieved

Expected Outcomes	Achieved
A series of regional collaborative networks will be in place to identify, monitor & address educational challenges &/or opportunities for students with I/DD &/or cross-disabilities in local communities	true
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, in their language of choice	true
Students/parents/professionals will receive information in hard copy or electronic formats to understand FAPE rights for children with I/DD &/or cross-disabilities	true
Students/parents/others will have information/knowledge to advocate throughout the school system; staff/community members will have the information/knowledge to identify & respond appropriately to students with I/DD &/or cross-disability-related issues	true
Parents will have the knowledge and resources to provide parent-to-parent peer support within their own school districts/communities for issues relating to FAPE, disability awareness, etc. and will use their skills/knowledge to obtain inclusive educational services for students with I/DD &/or cross-disabilities	true

13. Progress towards achieving outcomes for overall objective : The annual report should include an assessment as to the extent to which progress was made on the intended outcomes for the objective.

The Council's goal to reach current and succeeding 'generations' of families with children who are at-risk of developing or who, in fact, have I/DD and/or cross-disabilities, is to educate them about their rights and opportunities to self-advocate in educational and social service environments. The ongoing needs of these children and their families requires a regular influx of training and systemic support in order to acquire and apply information about their rights, the systems and supports available to children with unique needs, and surfacing issues that may affect those rights and services. While the Council fully met and/or exceeded its targeted activities, the needs of its constituency require ongoing work in this (and other) objective(s).

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community). Stories of policy or legislative changes that happened as a result of Council individual advocacy work that are likely to positively impact the lives of people with developmental disabilities or that will prevent a potential negative impact (e.g., created deleted, refined programs and/or legislation, reallocated use of funds, organizational systems change as a result of evidence based practices).

A local principal (Fresno County) has been unresponsive to the Council about school staff's refusal to document meeting discussions and proceedings in the 'notes' section of IEPs, a procedural requirement. The Council is now encouraging parents in this case to invoke their student/parent rights, providing information about due process and the filing of complaints.

2. 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 that lead to employment, post-secondary education &/or independent living options & opportunities.

1. Goal: Early Intervention, Education, Transition & Post-Secondary Education

2. State Plan Objective Objective 3

3. This Objective is

Individual & Family Advocacy

4. This Objective is

Ongoing

5. This Objective is

	The Objective is
a. Fulfilling a Self-Advocacy DD Requirement *	No
b. Targeted disparity *	No
c. DD Network Collaboration *	No
d. A demonstration project of New Approaches to Services and Supports *	No

	The Objective is
e. A demonstration of projects or activities *	No

6. Stage of Implementation

Implementation

7. Provide an overall description of this effort

The transition from high school to post-secondary education, employment and/or independent living options is another significant developmental milestone in the lives of family and self-advocates. Within the full continuum of those individual and family needs that are part of the larger education-related goal, the work of this 3rd objective addresses the range of transition-related issues, needs, options and services facing adults with I/DD and/or cross-disabilities. In addressing those young adult transitional needs (of family/self-advocates), the Council focused on 3 primary areas: Providing training, working on events through its collaborative partnerships, and providing information and outreach.

8. Outputs Achieved

Expected Outputs	Achieved
1 updated curriculum; 12 trainings; 150 people reached	true
12 updated lists of collaborators, reaching 100 people; 12 meetings, reaching 60 people; 1 updated set of resources; 1 updated curriculum; 12 trainings, reaching 150 people	
24 electronic submissions/postings of outreach materials, reaching 400 people; 12 submissions of hard copy outreach materials, reaching 400 people	true

10. The report should include the following: (a) A narrative progress report that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenges to achieving the objective and unexpected benefits.(b) For system change activities, include a description of the stage of implementation (planning, initiation, implementation, outcome/fully integrated) of the system change initiative. (c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report).

To meet target activities in this objective, Council staff put together a list of collaborators for each of its 12 regions, identifying both real and potential community partners. In practice, the Council took part in 67 meetings, working with nearly 850 people and agencies, developing curriculum, planning outreach and training events, and supporting family and self-advocates with I/DD on the transition process. The Council reached almost 650 people through 23 trainings about person-centered planning (PCP), individual education/

transition plans (IEP/ITP), and other student-led meetings designed to lead to employment, post-secondary education, and/or independent living options and opportunities. The Council and its collaborative partners produced and hosted more than 30 transition-related events, such as transition fairs, conferences, trainings, and presentations, providing resources and materials (plain language, Spanish, and other languages, as requested) in hard copy to more than 13,000 people and sending electronic copies to more than 26,000 people.

In addition to the training provided to SA/FA about student-led IEPs, PCPs and ITPs, regional staff provided training to 34 behavioral/mental health professionals and a number of RC service coordinators. In Los Angeles County, staff provided training to personnel with public and charter schools providing transition services to students with IEPs. Staff collaborated with the Urban Skills Center to provide information on developing meaningful goals through the PCP process and putting together transition plans, leading to more robust IEPs. Regional staff trained students taking a class in Disabilities Studies at Stanford University about equity issues, SCDD's goals and legislative platform, and the critical nature of collaborative partnerships in extending and upholding equal rights to PwD. Questions were answered, and TA provided after class discussion was completed. In Santa Cruz County, staff provided a special education clinic to RC service coordinators about the transition process.

The Council is now providing a bonus year of training to 45 TIGER graduates as a way of giving parent advocates intensive information about the transition into adulthood services and supports. Staff also provided family advocates with training about transition, the DD service system in California, generic community-based services, housing, employment, etc. In San Bernardino County, training was provided about conservatorships, IEPs, RC services/rights, and the transition process. Although this training was provided in Spanish, translation was provided for monolingual English speakers.

The Council and its regional staff developed transition-related relationships at more than 60 meetings throughout the state, encompassing nearly 850 people in joint collaborative efforts. The Council's regional staff worked with partners throughout the state in planning for and executing large events and trainings of all sizes, many of which are recurring/annual events for which community entities rely on the expertise, resources and institutional memory of Council staff. Local partnership agreements (LPA) have married the efforts of the Department of Rehabilitation (DOR), regional centers (RCs), and local school districts – most of which also include the work

of the Council in transition-related issues. The ongoing success of the Council's collaborative efforts is also evident in work around specific issues such as individual/systemic advocacy, as in the case of an attorney in south San Francisco who was inspired to open a private, nonprofit practice for families and children in need of assistance with FAPE rights and inclusive education.

Regional staff is engaged with the LPA stakeholders to obtain accurate, up-to-date Department of Education numbers, based on student age and IEP or 504 status, in addition to developing core and secondary partners, evaluating current PETS, and discussing the 'warm hand-off' of SPED students and young adults from DOR to America's Job Centers. Regional staff is working with a professor through CSU Northridge in the launching of a program for young adults with I/DD. Children's Hospital (Los Angeles County) and CSU Los Angeles have brought the Council into the launching of a pre-employment pilot program for young adults (aged 16-21) with I/DD.

In California's 7-county central coast area, staff is collaborating with public and nonpublic educators to problem-solve issues associated with transition planning for students with severe behavioral support needs. Some of the options under consideration include customized employment, specialized employment consultative services, and the participation of community providers in final year transition planning. The Council collaborated with 15 agencies, 21 adult day programs, 23 school personnel, DOR personnel, and 14 RC Transition Unit staff through the Supported Employment/Living Interagency Team (SELIT - San Joaquin County), which monitors and makes recommendations for transitioning students into employment, residential support and post-secondary education placements.

Staff is collaborating with the Post-Secondary Education Transition Consortium and the Multi-Agency LRE Collaboration amid growing concerns regarding restrictive, county-wide SDC placements and/or inadequate support for students with I/DD within regular education class environments. Council staff is engaged in planning with Chapman University's Thompson Policy Institute on Disability for T4T classes with curriculum like that of Partners in Policymaking. This leadership training will include 'call-to-action' plans and empower participants to garner support and directly address policy and systemic issues within their own communities and school/college districts.

As a result of a townhall meeting with Escuela de la Raza Unida (Riverside County), regional staff partnered with (42) residents to present ongoing and significant operational concerns to the Board, through public testimony at a local school district's meeting. These concerns included bullying and harassment of SPED students, inaccessible parking/transportation, and the long-term lack of air conditioning in SPED classrooms.

Council staff provides resource information and materials at every event and training – typically in both English and Spanish, although material translated into other languages is made available upon request. In Orange County, 150 Spanish-speaking family advocates attended training and received resource materials about the IPP/IEP/ITP process. Other well-attended events include the 21st Century Education Symposium (reaching 100 people), the AT Resource Fair (attended by 250 people and 25 agencies), and the Going to College with a Disability/PSE Conference (reaching 175 people and 8 agencies). The Sonoma County Transition Consortium Transition Fair reached 250 people and more than 30 agencies, while the CSU Fullerton Transition Resource Fair (Orange County) reached 175 people and 25 agencies.

In San Diego County, 9 self-advocates participated in the week-long Project College, in collaboration with UCP San Diego and the University of San Diego. DOR sponsored 2 participants from out of the region. The week is a full-immersion college experience for self-advocates who are or will be engaging in post-secondary education and has proven to be a life-changing experience for self-advocates and their families. The following represent events in which the Council participated with planning, execution, training and resources/ information:

1. 21st Century Education Symposium (Research, Policy and Practice) *Education & Promising Practices: A Bright Future for all Students* (San Diego County)
2. 31st Annual CHOICES Conference (San Joaquin County)
3. Annual Transition Fair (Ventura County)
4. College with a Disability Conference (Alameda County)
5. CSU Fullerton/La Sierra High School Transition Fair (Orange County)
6. Fiesta de Educative Conference (Riverside County)
7. Leading the Charge: *Collaborating for Effective Services* (San Diego County)
8. Post-Secondary Educational Opportunities for Students with a Disability Conference (Contra Costa County)
9. Project College (San Diego County)
10. Thompson Policy Institute's 3rd Annual DisAbility Summit (Orange County)

- 11. UC Davis MIND Institute Post-Secondary Conference: *Going to College with a Disability* (Sacramento County)
- 12. Visionaries: *Breaking New Ground for Adults with Autism/DD* (Santa Clara County)

The Council received more than 70 requests for technical assistance, and reached more than 135 people, including SA, FA and professionals in communities throughout California. In Fresno County, a school principal toured the Council's regional facility to learn about available training (*Dress for Success, Law Enforcement and Me, Self-Determination, IPP/PCP*, etc.) and its clothes closet program (*Choose your own Interview Clothes*). In response to self-advocates who appear to be languishing in transition programs, regional staff gave information about paid internships and other available programming designed to lead to positive transition, employment, and independent living outcomes

Council staff receives numerous requests for assistance with individual cases, most of which result in referrals to SELPA staff, special education attorneys, outside agencies, and/or college administrative personnel. In one such case, a college student (who had been earning A's in classes) was stripped of accommodations, which caused her to begin failing her classes. Yet another college student, wanting to successfully complete coursework for a teaching credential, was confused about not having an IEP in college and was given information about 504 accommodation plans and the differences between IEPs and 504's.

Each of the Council's 12 regional offices maintains TA request logs and reports back to the Council (monthly) with the number of calls/requests for TA, subject matter, type of assistance provided and resolution (where possible).

12. Expected Outcomes Achieved

Expected Outcomes	Achieved
Stakeholders will have knowledge about the PCP/ITP process and disabilities	true

Expected Outcomes	Achieved
The Council will be 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	true
Parent/self-advocates, collaborative partners & other 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	true

13. Progress towards achieving outcomes for overall objective : The annual report should include an assessment as to the extent to which progress was made on the intended outcomes for the objective.

The Council successfully met its targeted, yearly goals for this objective, having granted an extension for a sub-grantee to achieve full project completion. As with the previous two (2) objectives in this goal area, transition activities are part of a lifetime continuum of needs for families and people living with I/DD and/or cross- disabilities. In recognition of these ongoing needs, this objective, too, will be continued throughout the duration of the current 5-year State Plan period.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community). Stories of policy or legislative changes that happened as a result of Council individual advocacy work that are likely to positively impact the lives of people with developmental disabilities or that will prevent a potential negative impact (e.g., created deleted, refined programs and/or legislation, reallocated use of funds, organizational systems change as a result of evidence based practices).

N/A

3. The Council and its federal partners will increase knowledge and awareness of developmental milestones and intervention services for families of young children and professionals.

1. Goal: Early Intervention, Education, Transition & Post-Secondary Education

2. State Plan Objective Objective 1

3. This Objective is

Individual & Family Advocacy

4. This Objective is

Ongoing

5. This Objective is

	The Objective is
a. Fulfilling a Self-Advocacy DD Requirement *	No
b. Targeted disparity *	No
c. DD Network Collaboration *	No
d. A demonstration project of New Approaches to Services and Supports *	No
e. A demonstration of projects or activities *	No

6. Stage of Implementation

Implementation

7. Provide an overall description of this effort

The early identification of delays in or missed developmental milestones typically begins with a parent's, friend's or doctor's question(s) and quickly progresses to a search for more extensive information. The Council has a reputation for being a reliable clearinghouse for up-to-date information, technical assistance, and training opportunities for all family/self-advocates. The Council's community outreach efforts throughout the state, provision of training, information, and technical assistance (individual advocacy and capacity-building), and overall system advocacy work locks together to prepare parents, family members, guardians and their children with I/DD to begin what will become a lifetime of family/self-advocacy efforts. The work of this objective is simply the opening salvo in the Council's (Goal 5) continuum (through 4 objectives) of advocacy and training efforts on behalf of children and families learning to thrive with intellectual, developmental, and/or cross-disabilities. Not only are the Council's efforts and activities aimed at families of at-risk and/or newly diagnosed children, but they also target those medical and educational professionals whose work in early identification and intervention are crucial to a child's development and eventual transition into the education system.

8. Outputs Achieved

Expected Outputs	Achieved
1 updated list of collaborative partners; 12 regional meetings, with 120 people; 12 regional lists of training/outreach needs &/or collaborative opportunities; 12 updated lists of materials	true
1 set of updated outreach materials/resources; 24 electronic submissions, reaching 5,000 people; 12 hard copy submissions, reaching 600 people	true

Expected Outputs	Achieved
1 updated curriculum for family/community members; 24 trainings; 350 people reached	true
1 updated curriculum for professionals; 6 trainings; 60 people reached	true

10. The report should include the following: (a) A narrative progress report that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenges to achieving the objective and unexpected benefits.(b) For system change activities, include a description of the stage of implementation (planning, initiation, implementation, outcome/fully integrated) of the system change initiative. (c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report).

In meeting the activities planned for this objective and with a targeted goal of making nearly 6,000 contacts the Council used newsletters, electronic distribution, flyers and brochures to reach a total of 31,890 people with information about I/DD and/or cross-disabilities, associated risk factors, early intervention services, the transition process into school systems, and the importance of early identification. SCDD developed and/or updated and distributed 24 sets of information about a free, appropriate public education (FAPE) and associated educational rights to an additional 3,080 people.

The Council used a combination of outreach techniques that included local/regional events, providing 3 trainings to 152 medical and other professionals and 28 trainings to family members and others, reaching 361 people. Regional staff provided technical assistance to a variety of clients to support the early detection and early intervention needs of parents of and professionals serving children (aged 0-3) throughout the state of California, reaching 1,588 people in 87 TA contacts. Of special significance is the Council's continued outreach to underserved populations. The Council's collaborative activities generated \$10,900 in leveraged funding.

While the Council has long invested time, money and manpower in training family advocates and others about early identification and intervention, it has also committed to working with regional communities to identify needs unique to those areas. In the Bay Area (Alameda, Contra Costa, Marin, San Francisco, and San Mateo counties), staff worked with a local school board trustee and family advocate on a 4-part presentation/curriculum which includes quantitative and qualitative data, measured impact on families, themes on family feedback and recommended steps

In collaboration with the Behavioral Health Board in Mendocino County, regional staff assisted with an early intervention project for a series of 6 1-hour seminars based on the Positive Parenting Program (Triple P) model, which will provide follow-up data for assessment purposes. The Council's work in this area is just beginning with these initial partnering measures, in order to gain a presence for its constituency.

Regional staff is working with the Child Behavior Pathways Program/Bilingual Parent Educator regarding the need of parents for parenting sessions to learn how to manage child behaviors.

In Los Angeles County, staff provided Early Start parents with training about 'I' meetings (e.g. IFSPs, IEPs, and IPPs) and effective meeting strategies. Also included was information on differences between Early Start services (Part C of IDEA), other special education (Part B of IDEA) services, and the Lanterman Act, including RC eligibility criteria and available services. The Council's regional boardmanship/facilitation training resulted in an appointment to the local RC CAC, which, in turn, led to a 100% growth in the parent support group over a 4-month period.

Regional staff in San Bernardino County provided a 7-part series (Project Leadership) with the Early Start FRN, with Spanish translations and materials. This workshop series was designed to train both parents and professionals about the importance of engaging in advocacy within service systems and affecting policies that impact PwD and those with special health care needs.

The Council collaborated with the city of Irvine to produce a series of trainings, with the first addressing I/DD (*Behaviors: For kids that just need a little extra support*) for its Super Saturday Staff Development, reaching more than 20 professionals with information about ABA, positive reinforcement, resources, functional behavioral assessments, etc. The training was repeated for 14 professionals in a separate session, along with a session focusing on ASD (*Resources & Accommodations for Children with ASD*), reaching 18 professionals. The Council's regional staff also provided a basic Super Saturday mini-conference session (*Understanding I/DD*) for 25 professionals.

In a 7-county area in central California, regional staff provided training (*Resources and Accommodations for Toddlers with ASD in Day Care*) for 43 child care providers. The training, translated into Spanish for 8 providers, also included sensory activities for children on the Spectrum. This regional staff also collaborated with the Children's Services Network on Assistive Technology to develop training for staff to direct families to appropriate resources and services.

Staff worked with the San Mateo County Child Care Council to put together a regional conference to address best practices and statewide trending for early intervention and child care needs. In Santa Clara County, regional staff is working with the local adult education program to provide a class on ASD through their child development courses. In Madera County, staff collaborated with Behavioral Health Services and a local attorney to provide an IEP clinic for mental health clinicians and 15 families, all in need of technical assistance and educational/early intervention support.

In Sacramento County, the Council hosted 12 agencies and professionals that serve NICU families to 1) review the previous NICU Symposium and 2) develop a Roadmap for supports and services as a resource for families. The Council also brought together family advocates from Placer and Yolo counties to assist in planning efforts. Although the Council collaborates with unified school districts throughout the state, it specifically engaged in reviewing the Mendocino County Office of Education's 5-year strategic plan and applying

a SWOT analysis. SCDD also maintains a collaborative relationship with the Inter-Tribal Council of California (providing resource information and offering TA), a statewide association of 47 American Indian tribes, which also affiliates with the Tribal Child Care Association of California and the Centers for American Indian Health.

Regional staff provided the keynote address and a separate breakout session (*Partnerships for Inclusion*) for the 10th Annual Early Intervention and Inclusion Conference in San Mateo County, stressing the importance of inclusionary opportunities for children. In Ventura County, staff presented at the Early Intervention Resource Fair (*Walking the Path Together*) and provided technical assistance and other resources, reaching more than 60 people. In Solano County, the Council moderated a website launch and resource fair for PwD, reaching 150 family/self-advocates and other stakeholders on a variety of topics including developmental milestones and intervention services for families of young children. Direct technical assistance included information to relieve or confirm family child development concerns.

In Los Angeles, staff participated in Fiesta Educativa's community fair (*Back to School*), reaching more than 120 attendees and 25 collaborative agencies. In Lake and Mendocino counties, the Council assisted with the Provider Appreciation Dinner to recognize the child care community for the integral role it plays in the assessment/early identification, intervention, and education of children with or at risk of developing I/DD and/or cross-disabilities.

In Orange County, the Council partnered with the County Child Care and Development Planning Council to provide the 1st Annual Inclusion Collaborative HELP (*Helping Educators Learn Practical Strategies*) Conference, reaching 120 professionals. Staff also participated in a developmental screening event (Westminster FRC), providing TA and resources to 23 families and 35 children, all of whom were screened for developmental, behavioral, health-related and/or cognitive concerns. In Sacramento, the Council co-sponsored the 2017 NICU Family Symposium, providing a keynote address (*Parents as Advocates*) and providing resources and materials to 120 attendees.

Many of the events supported by the Council offer rich opportunities to provide outreach, resources and TA to large numbers of people. In Contra Costa County, staff supplied resources in Spanish for the 2nd Annual United for Our Children event, reaching 57 people. In San Mateo County, materials were supplied for the 10th Annual Early Intervention and Inclusion Conference at Skyline College (in English and Spanish). In the Monterey, San Benito, Santa Clara and Santa Cruz County area, staff wrote an article (*Early Start Services*) for the Special Kids Crusade monthly newsletter, reaching an electronic distribution list of 850 family advocates

The Council reached 200 people with resources, material, and TA at the Down Syndrome Awareness Day luncheon in Napa County and nearly 80 people in developmental screenings in Orange County. In Sacramento County, regional staff provided resources and materials and TA to the SANKOPA African-American Parent Support Group and the Step Up for Down Syndrome Walk and Networking Event, reaching more than 60 people.

Much like the provision of resources and materials, the Council takes every opportunity in working through public outreach efforts to also offer/provide technical assistance, Through Help Me Grow Orange County, regional staff provided technical assistance by holding an advocacy clinic (*Special Education and Regional Center Advocacy Clinic – Ask an Advocate*), which has been an effective outreach for family advocates. In Los Angeles County, staff provided outreach and TA with more than 20 monolingual Spanish-speaking families.

12. Expected Outcomes Achieved

Expected Outcomes	Achieved
A collaborative network, identified training needs and needed resource materials 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	true

Expected Outcomes	Achieved
The Council and its collaborative partners will have the necessary resources to conduct effective outreach efforts	true
Family &/or community members will have knowledge of typical developmental milestones & the importance of identifying young children with I/DD &/or cross-disabilities as early as possible	true
Professionals working with children will have information/knowledge about I/DD &/or cross-disabilities and be able to talk with parents about diagnostic information, typical developmental milestones & accessing resources/supports/services in a timely manner	true

13. Progress towards achieving outcomes for overall objective : The annual report should include an assessment as to the extent to which progress was made on the intended outcomes for the objective.

It is the Council's intent to continue to reach family advocates, professionals, and community members and to increase knowledge and awareness of developmental milestones and intervention services for professionals and families of young children. With that charge, Council staff used all available federal strategies, engaging in highly collaborative work through meetings, outreach efforts and events, training and presentations, and other types of activities, working with its federal partners and addressing every federal area of emphasis. While the Council met all of its work plan activities and targeted goals for this objective, there is an ongoing need to provide family advocates and professionals with information about developmental milestones and early identification of and intervention for children with

I/DD. With every suspicion or confirming diagnosis, another family is plunged into unfamiliar territory and needs current information and technical assistance to navigate the complex system(s) of care, service and support needed by children with I/DD. The Council will continue the work of this objective through the remaining course of the 5-year State Plan cycle.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community). Stories of policy or legislative changes that happened as a result of Council individual advocacy work that are likely to positively impact the lives of people with developmental disabilities or that will prevent a potential negative impact (e.g., created deleted, refined programs and/or legislation, reallocated use of funds, organizational systems change as a result of evidence based practices).

N/A

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 education services throughout the lifespan for people with I/DD.

1. Goal: Early Intervention, Education, Transition & Post-Secondary Education

2. State Plan Objective Objective 4

3. This Objective is

System Change

4. This Objective is

Ongoing

5. This Objective is

	The Objective is
a. Fulfilling a Self-Advocacy DD Requirement *	No
b. Targeted disparity *	No
c. DD Network Collaboration *	No
d. A demonstration project of New Approaches to Services and Supports *	No

	The Objective is
e. A demonstration of projects or activities *	No

6. Stage of Implementation

Implementation

7. Provide an overall description of this effort

In the Council's statewide survey in 2016, 15.3% of the 9,370 respondents ranked 'Early Intervention, Education, Transition and Post-Secondary Education' as a top need, making it the 3rd highest-ranking area of concern for family/self-advocates and professionals alike. Objective #1 addresses early identification and intervention; Objective #2 provides information, support and services associated with education and advocating for a free, appropriate public education; and, Objective #3 meets needs associated with transition from primary education into secondary systems of education, CIE, and independent/supported living options – those supports and services necessary for young, full, and aging adults with I/DD to engage in self-governance activities for the duration of their lives. This objective addresses the policies that support and facilitate the continuum of services and supports that begins with early diagnosis and progresses throughout an individual's lifetime of learning and transitioning from one phase of life or activity into another. This is a cross-disciplinary policy objective, in that it addresses diverse systems (e.g. RCs, the medical system, educational entities, DOR and employment-related agencies, legal advocacy linkages, etc.) and topics (e.g. medical/social/educational needs, employment concerns, independent living options, self-advocacy, personal/civil rights, etc.). The years (and supports and services provided) between birth and age 22 are critical

to laying a healthy foundation for the duration of an individual's life. The Council's work in addressing policies to support PwD during and beyond these years is foundational to its responsibility to provide a lifetime of advocacy, systems change and capacity-building activities for those same individuals.

8. Outputs Achieved

Expected Outputs	Achieved
13 updated lists of collaborators; 12 regional meetings, reaching 48 people	
1 LPPC platform with priorities; 3 meetings	true
5 monitored state or federal legislative/regulatory changes/bills, reaching 25 people; 10 legislative contacts with stakeholders for educating/outreach, reaching 250 people	true
200 stakeholders reached during 5 events	true
Testimony or comments submitted 3 times, reaching 150 people	true

10. The report should include the following: (a) A narrative progress report that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenges to achieving the objective and unexpected benefits.(b) For system change activities, include a description of the stage of implementation (planning, initiation, implementation, outcome/fully integrated) of the system change initiative. (c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report).

The broad-ranging objectives (and focus) associated with education include early diagnosis and intervention, a free and appropriate public education (FAPE), and the transition from public school environments into secondary education, employment, and independent living options – a trajectory that begins at birth and continues through the end of life. Engaging in education throughout one’s lifespan prepares and empowers families and individuals with I/DD and/or cross-disabilities for a life full of options, choices and expressed independence.

As described in other objectives, the Council narrowed its policy work in education, to focus attention on those priority areas identified by the Legislative and Public Policy Committee (LPPC). This increasingly narrowed focus has highlighted the importance of broadening and strengthening the collaborative partnerships between the Council, its representative member agencies, and other federal, state, regional and/or local entities that may be education stakeholders. To that end, staff reviewed all introduced bills and made recommendations to the LPPC, which took positions on 4 bills and chose to monitor 5 bills. The Council sent letters on 2 bills and testified on 1 bill, reaching 45 people. While Council HQ staff focused its attention on state-level policy work, regional staff also worked at the community level to produce policy-level changes in those systems that are associated with education throughout the lifespan, leading to CIE and opportunities for independent living.

Legislation

In sponsoring AB 2171 (Frazier), the Council brought together the Departments of Education, Rehabilitation, and Developmental Services (with its 21 contracted RCs) to engage in person-centered transition planning that leads from education into competitive, integrated employment outcomes for PwD. This also requires interagency agreements that include the Departments of Developmental Services, Social Services, Corrections and Rehabilitation (and Division of Juvenile Facilities), Health Care Services, and Employment Development for the provision of special education and related services to individuals with exceptional needs in the State of California. The bill's provisions allow for the sharing of information between agencies to further these goals and responsibilities – information which will then be used in updating the Data Dashboard (included in the narrative of Obj. 2.1) with employment information about PwI/DD. AB 2171 has now been codified as §56345 of the Education Code.

Regional Policy Work

In Madera County, the Council is working with County Behavioral Health Services to train clinicians about IEPs, IEP meetings and FAPE rights to broaden their capacity within the education system. In Fresno County, the Council collaborated with the local RC in providing information about the DD service system during the Legislative Breakfast with local and state representatives. In Contra Costa County, regional staff (in collaboration with the County Board of Education Trustees) provided information to educators and administrators about early intervention services and the process of transition into the school district – a program that was also livestreamed in Spanish. In Mendocino County, the Council convened the Mendocino Child Care Planning Council to review Legislative updates, local funding priorities for preschools, and voluntary funding transfer proposals for state-funded preschool programs. This group is also putting together a proclamation to designate May as Child Care Provider Appreciation month and to increase awareness of and access to quality child care and community-based services for people with I/DD and their families.

In San Diego County, the Council provided testimony to the Board of Mira Costa Community College regarding the (apparent mis-) use of funds received through California's (AB 86) Adult Education Block Grant. The original proposal contained faculty positions to coordinate and build programs for students with I/DD by implementing a Workability program and a College 2 Career program, with additional staff for the DSPS department to assist with program counseling. Despite having received additional funding, however, this campus is now serving the population of students with I/DD (who have now been relegated to a 'sub-group' within the college's student

population) even less than in previous years, the Board has allegedly engaged in Brown Act violations, and there has been no opportunity for public input as meetings have not been noticed. The Council is continuing to work with the college, providing information about Employment First and stressing that students receiving post-secondary education are twice as likely to obtain CIE.

In Alameda County, regional staff is working with the CRISS Projector, the Medical Home Project, and the Lucile Packard Children's Hospital Senior Policy Analyst through a Special Needs Committee, a cross-disciplinary entity which provides recommendations for policy and regulatory changes on a city, county and state level in ways that impact infants and young children with disabilities and/or medical needs. The Council's State Plan and Legislative Platform will be considered in evaluating potential future projects for recommendations and/or involvement.

The Council is collaborating with the Office of Administrative Hearings (OAH), as it is in the initial stages of drafting regulations for the Special Education Division's mediation and due process hearings. In OAH's (Alameda and Los Angeles County) stakeholders' meetings, the presenting issues included: electronic vs. U.S.P.S. mail service; appropriate timelines; pre-hearing conference statements, and administrative judicial consistency. SCDD has stressed that equal access to due process has not been consistent, especially in non-English-speaking communities, due to inequities in timely receipt of information (electronic vs. mail service), issuance of peremptory challenges, and the scheduling irregularities that follow last-minute challenges. The OAH handbook is translated into 6 languages and written at a 6th grade level, but admittedly reads more like 'a book' than an accessible guide to the fair hearing/due process system. Special education advocates, attorneys (for families and for districts), and families in the special education system are participating in this collaborative effort, although the Council provides a statewide perspective to these deliberations.

In response to deficits identified in the 2016 audit of the Great City Schools on Special Education (by the Council), regional staff supported a group of 30 parents and 10 students with disabilities in a rally to hold the Sacramento City Unified School District Board of Education accountable for identified changes that have yet to be made. The Board has publicly acknowledged the administration's insufficient response to both the needs of its constituents and to the findings of the audit and has committed to 1) reviewing the findings

and 2) working with staff and stakeholders to address the insufficiencies. Former CAC parents have now formed a coalition of concerned students, families and community partners to continue to advocate for appropriate services, supports, and facilities for children in special education through this district.

12. Expected Outcomes Achieved

Expected Outcomes	Achieved
The Council will maintain collaborative regional groups of subject matter experts & stakeholders to address education issues at the legislative & policy levels	true
Through input from the LPPC, the Council will be active in its policy-level engagement on educational issues affecting people with I/DD &/or cross-disabilities and their families	true
The Council & its collaborative partners will monitor and address education-related state & federal legislation &/or regulations on behalf of people with I/DD &/or cross-disabilities and their families	true
Stakeholders will have current information about proposed legislative & regulatory changes being considered at state/federal levels affecting people with I/DD &/or cross-disabilities & their families	true
Policymakers will be educated and informed about education-related issues affecting people with I/DD &/or cross-disabilities & their families	true

13. Progress towards achieving outcomes for overall objective : The annual report should include an assessment as to the extent to which progress was made on the intended outcomes for the objective.

In California, education, with its broad array of related supports and services, is a critical component of life for children, young adults and family members living with I/DD and/or cross-disabilities. Although the education system provides initial assessments and ongoing academic and related services, it also serves in providing valuable linkages to community-based supports and services and referrals for children and families alike. Legislation, law, regulations and policies provide the underpinning for good practices, in regard to accessing education and successful transition(s) into adult systems of service (throughout the lifespan), leading to secondary education, independent living and employment supports and other expanded opportunities. While the Council successfully met its targeted activities for this objective, it also recognizes that ongoing monitoring and legislative/policy work is necessary for the protection of current educational access and rights and for moving forward the work of the Council on behalf of people with I/DD and/or cross-disabilities. The Council is well-positioned, both in its relationships with constituents and policymakers (at legislative, regional, and local levels), to continue to participate in the process of advocating systemically and influencing policy on behalf of people with disabilities throughout the state.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community). Stories of policy or legislative changes that happened as a result of Council individual advocacy work that are likely to positively impact the lives of people with developmental disabilities or that will prevent a potential negative impact (e.g., created deleted, refined programs and/or legislation, reallocated use of funds, organizational systems change as a result of evidence based practices).

N/A

Individual & Family Advocacy Performance Measure

Description

Early Intervention, Education, Transition & Post-Secondary Education

Race/Ethnicity

Race/Ethnicity	#	%
White, alone	0	
Black or African American alone	0	
American Indian and Alaska Native alone	0	
Hispanic/Latino	0	
Asian alone	0	

Race/Ethnicity	#	%
Native Hawaiian & Other Pacific Islander alone	0	
Two or more races	0	
Race unknown	0	

Gender

Gender	#	%
Female	0	
Male	0	
Other	0	

Category

Category	#	%
Individual with DD	0	
Family Member	0	

Geographical

Geographical	#	%
Urban	0	
Rural	0	

I. Output Measures

Objective	Performance Measure : IFA 1.1 People with DD who participated in activities	Performance Measure : IFA 1.2 Family members who participated in activities
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 services which support inclusive education.*	5509	32049

Objective	Performance Measure : IFA 1.1 People with DD who participated in activities	Performance Measure : IFA 1.2 Family members who participated in activities
<p>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 that lead to employment, post-secondary education &/or independent living options & opportunities.*</p>	<p>3563</p>	<p>13429</p>
<p>The Council and its federal partners will increase knowledge and awareness of developmental milestones and intervention services for families of young children and professionals.*</p>	<p>1487</p>	<p>7717</p>

Objective	Performance Measure : IFA 1.1 People with DD who participated in activities	Performance Measure : IFA 1.2 Family members who participated in activities
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 education services throughout the lifespan for people with I/DD.*	1364	3114
Total # of Output Respondents	11923	56309

II. Outcome Measures

Performance Measures	Percent (%)
IFA 2.1 Percent of people with DD who increased advocacy	0
IFA 2.2 Percent of family members who increased advocacy	0

Sub-Outcome Measures : The number (#) of people who are better able to say what they want/say what is important to them

Projects	# People with developmental disabilities	# Family Members
<p>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 services which support inclusive education.*</p>	<p>9</p>	<p>48</p>
<p>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 that lead to employment, post-secondary education &/or independent living options & opportunities.*</p>	<p>0</p>	<p>0</p>

Projects	# People with developmental disabilities	# Family Members
The Council and its federal partners will increase knowledge and awareness of developmental milestones and intervention services for families of young children and professionals.*	0	0
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 education services throughout the lifespan for people with I/DD.*	0	0
Total # of Sub-Outcome Respondents	9	48
IFA 2.3 Percent of people better able to say what they need	0	0

Sub-Outcome Measures : The number (#) of people who are participating in advocacy activities

Projects	# People with developmental disabilities	# Family Members
<p>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 services which support inclusive education.*</p>	<p>4</p>	<p>25</p>
<p>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 that lead to employment, post-secondary education &/or independent living options & opportunities.*</p>	<p>0</p>	<p>0</p>

Projects	# People with developmental disabilities	# Family Members
The Council and its federal partners will increase knowledge and awareness of developmental milestones and intervention services for families of young children and professionals.*	0	0
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 education services throughout the lifespan for people with I/DD.*	0	0
Total # of Sub-Outcome Respondents	4	25
IFA 2.4 Percent of people participating in advocacy activities	0	0

Sub-Outcome Measures : The number (#) of people who are on cross disability coalitions, policy boards, advisory boards, governing bodies and/or serving in leadership positions.

Projects	# People with developmental disabilities	# Family Members
<p>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 services which support inclusive education.*</p>	<p>4</p>	<p>22</p>
<p>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 that lead to employment, post-secondary education &/or independent living options & opportunities.*</p>	<p>0</p>	<p>0</p>

Projects	# People with developmental disabilities	# Family Members
The Council and its federal partners will increase knowledge and awareness of developmental milestones and intervention services for families of young children and professionals.*	0	0
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 education services throughout the lifespan for people with I/DD.*	0	0
Total # of Sub-Outcome Respondents	4	22
IFA 2.5 Percent of people on cross disability coalitions	0	0

IFA 3 The percent of people satisfied with a project activity*

0

IFA 3.1 Percent of people with DD satisfied with activity*

0

IFA 3.2 Percent of family members satisfied with activity*

0

System Change Performance Measures

Description

Early Intervention, Education, Transition & Post-Secondary Education

SC 1: Output Measures - The number of Council efforts to transform fragmented approaches into a coordinated and effective system that assures individuals with developmental disabilities 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.

Objective	SC 1.1 Number of policy/ procedures created/ changed	SC 1.2 Number of statutes/ regulations created/ changed	SC 1.3.1 Number of promising practices created	SC 1.3.2 Number of promising practices supported through Council activities	SC 1.3.3 Number of best practices created	SC 1.3.4 Number of best practices supported through Council activities	SC 1.3 The number of promising and/or best practices created and/or supported	SC 1.4 Number of people trained/ educated	SC 1.5 Number of Systems Change activities with other organizations
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 services which support inclusive education.	0	0	0	10	0	25	35	28066	120

Objective	SC 1.1 Number of policy/ procedures created/ changed	SC 1.2 Number of statutes/ regulations created/ changed	SC 1.3.1 Number of promising practices created	SC 1.3.2 Number of promising practices supported through Council activities	SC 1.3.3 Number of best practices created	SC 1.3.4 Number of best practices supported through Council activities	SC 1.3 The number of promising and/or best practices created and/or supported	SC 1.4 Number of people trained/ educated	SC 1.5 Number of Systems Change activities with other organizations
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 that lead to employment, post-secondary education &/or independent living options & opportunities.	0	0	0	10	0	3	13	13563	74

Objective	SC 1.1 Number of policy/ procedures created/ changed	SC 1.2 Number of statutes/ regulations created/ changed	SC 1.3.1 Number of promising practices created	SC 1.3.2 Number of promising practices supported through Council activities	SC 1.3.3 Number of best practices created	SC 1.3.4 Number of best practices supported through Council activities	SC 1.3 The number of promising and/or best practices created and/or supported	SC 1.4 Number of people trained/ educated	SC 1.5 Number of Systems Change activities with other organizations
The Council and its federal partners will increase knowledge and awareness of developmental milestones and intervention services for families of young children and professionals.	0	0	0	1	0	4	5	7015	45

Objective	SC 1.1 Number of policy/ procedures created/ changed	SC 1.2 Number of statutes/ regulations created/ changed	SC 1.3.1 Number of promising practices created	SC 1.3.2 Number of promising practices supported through Council activities	SC 1.3.3 Number of best practices created	SC 1.3.4 Number of best practices supported through Council activities	SC 1.3 The number of promising and/or best practices created and/or supported	SC 1.4 Number of people trained/ educated	SC 1.5 Number of Systems Change activities with other organizations
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 education services throughout the lifespan for people with I/DD.	0	0	0	0	0	0	0	3395	7

Systems Change SC 2: Outcome Measures

Outcome Measures	Number(#)
SC 2.1 - Efforts that led to improvements *	4

Outcome Measures	Number(#)
SC 2.2 - Efforts that were implemented *	0

Sub-Outcome Measures

Objective	SC 2.1.1 Policy, procedure, statute, regulation improvements	SC 2.1.2 Policy, procedure, statute, regulation implemented	SC 2.1.3 Number of improved promising or best practices	SC 2.1.4 Number of implemented promising or best practices
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 services which support inclusive education.	1	0	2	0

Objective	SC 2.1.1 Policy, procedure, statute, regulation improvements	SC 2.1.2 Policy, procedure, statute, regulation implemented	SC 2.1.3 Number of improved promising or best practices	SC 2.1.4 Number of implemented promising or best practices
<p>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 that lead to employment, post-secondary education &/or independent living options & opportunities.</p>	0	0	0	0

Objective	SC 2.1.1 Policy, procedure, statute, regulation improvements	SC 2.1.2 Policy, procedure, statute, regulation implemented	SC 2.1.3 Number of improved promising or best practices	SC 2.1.4 Number of implemented promising or best practices
<p>The Council and its federal partners will increase knowledge and awareness of developmental milestones and intervention services for families of young children and professionals.</p>	0	0	1	0
<p>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 education services throughout the lifespan for people with I/DD.</p>	0	0	0	0

Section V: Council Financial Information

* - Required input

Council is its own DSA

No
Fiscal Information for Programmatic Purposes ONLY

1. Fiscal Year: *
2018

2. Reporting Period - Start*
10-01-17

2. Reporting Period - End*
09-30-18

3. Total Federal Fiscal Award for Reporting Year*
7499029

4. State Funds Contributing to Council State Plan Activities*
0

5. Additional Council Funds Used for Other Activities*
4867000

6. Federal Share of Expenditures*
4727707

7. Federal Share of Unliquidated Obligations*
258372

8. Unobligated Balance of Federal Funds (=Total Federal Fiscal Year Award - Federal Share of expenditures - Federal Share of unliquidated obligations)*

2512950

9. Match Required*

96342

10. Match Met*

96342

11. Match Unmet*

0

Fiscal Information for Programmatic Purposes ONLY

1. Fiscal Year: *

2017

2. Reporting Period - Start*

10-01-16

2. Reporting Period - End*

09-30-17

3. Total Federal Fiscal Award for Reporting Year*

6703630

4. State Funds Contributing to Council State Plan Activities*

0

5. Additional Council Funds Used for Other Activities*

4396000

6. Federal Share of Expenditures*

6470732

7. Federal Share of Unliquidated Obligations*

232898

8. Unobligated Balance of Federal Funds (=Total Federal Fiscal Year Award - Federal Share of expenditures - Federal Share of unliquidated obligations)*

0

9. Match Required*

85754

10. Match Met*

85754

11. Match Unmet*

0

Fiscal Information for Programmatic Purposes ONLY

1. Fiscal Year: *

2016

2. Reporting Period - Start*

10-01-15

2. Reporting Period - End*

09-30-16

3. Total Federal Fiscal Award for Reporting Year*

6682670

4. State Funds Contributing to Council State Plan Activities*

0

5. Additional Council Funds Used for Other Activities*

4280000

6. Federal Share of Expenditures*

6682670

7. Federal Share of Unliquidated Obligations*

0

8. Unobligated Balance of Federal Funds (=Total Federal Fiscal Year Award - Federal Share of expenditures - Federal Share of unliquidated obligations)*

0

9. Match Required*

0

10. Match Met*

0

11. Match Unmet*

0

Dollars leveraged for the reporting year being reported* 330492

Section VI: Measures of Collaboration

* - Required input

Identify the critical issues/barriers affecting individuals with developmental disabilities and their families in your State that the Council and the P&A, the Council and the UCEDD, the Council and other collaborators may have worked on during the reporting period

Presenting Issue

Disparities in services throughout the service delivery system remains. The disparities include a difference in the demographic make up of who lives in a regional center catchment area versus who is served by the regional center. There are also racial disparities across the amount of dollars spent by regional centers on their clients.

California was chosen to participate in a major statewide policy-level endeavor with the SCDD and its federal partners in the *Community of Practice on Cultural and Linguistic Competence in Developmental Disabilities* system transformation 5-year initiative through Georgetown University, described in the narrative for 6.1. This technical assistance grant is designed to increase cultural competency within the DD system throughout California, with the additional bonus of fostering effective collaboration between the Council, California's three UCEDDs, and its P&A agency (Disability Rights California [DRC]), as well as participation by the Department of Developmental Services.

In the past year, the Community of Practice identified several goals:

- Increase coaching of Regional Center directors on cultural and linguistic competence
- Seek to have the membership of the local self-determination advisory committees reflect the community and increase these local advisory committees as the driver of the newly approved self-directed services waiver
- Provide Regional Centers cultural and linguistic competence training
- Offer community-based grant writing training

The first two goals are underway and the other two will be pursued in the following year.

Employment continues to be a presenting issue. After nine years of economic recovery in California, employment for people with disabilities continues to remain stagnant at recession-era levels. Each federal partner is an active member in SCDD's Employment First Committee, which is to identify best practices on employment of people with disabilities and make recommendations to the Governor and Legislature.

Identify the Area of Emphasis collaboratively addressed by DD Network

1. **Quality Assurance** true
2. **Education and Early Intervention** true
3. **Child Care**
4. **Health** true
5. **Employment** true
6. **Housing** true
7. **Transportation**
8. **Recreation**
9. **Quality of Life** true
10. **Other - Assistive Technology**
11. **Other - Cultural Diversity** true
12. **Other - Leadership** true
13. **Other - Please specify**
14. **Other - Please specify**
15. **Other - Please specify**

Strategies Collaboratively implemented by DD Network

The report should include a narrative progress report that cohesively describes the activities that were implemented by the Council and the P&A, the Council and the UCEDD, the Council and other collaborators. DD Network. For at least one of the issues/barriers identified above describe: (a) the issue/barrier; (b) collaborative strategies to address issue/barrier and expected outcome(s); (c) the DDC's specific role and responsibilities in this collaborative effort. Include any technical assistance expertise DD Council staff can provide to other States in this area; (d) briefly identify problems encountered as a result of this collaboration, and technical assistance, if any, desired; and (e) any unexpected benefits of this collaborative effort.

Introduction

The Council continues to have a productive working relationship with the DD Act federal partners, both as individual partner agencies and as a full collaborative unit. Many of the individual collaborative activities were replicated with two or more partners (e.g. collaboration on development of 5-year strategic plans for USC and UCLA's UCEDDs, etc.). There was also some overlap with the Council's targeted goal areas and the UCEDDs' goal areas, regarding employment, health and public safety and access to generic services. A tremendous amount of collaboration occurred on a direct project level, with joint training/presentations, special events, and/or community projects.

The Council's Director sits on and participates in the Community Advisory Committees of its federal partners. The federal partners' Directors meet with the State Council's Director quarterly, either in person or by teleconference, in addition to attendance at bi-monthly Council meetings. Teleconferencing is used to establish and track state-level projects and activities. Local projects are coordinated and executed through the effort of and communication with the Council's regional management staff.

Tarjan Center at UCLA (UCEDD)

As a driving force behind California's groundswell support of competitive, integrated employment (CIE) for people with I/DD and/or cross-disabilities, the Tarjan Center at UCLA has lent its expertise to the Council's Employment First Committee, following the development of the CIE Blueprint. Tarjan was a key technical partner in legislation sponsored by SCDD. SB 1274 (Maguire) gave SCDD access to data held by the Department of Social Services regarding benefits, like CalFresh (California's SNAP program). This information will be added to information received for the Employment Dashboard maintained by SCDD. Additionally, Tarjan was also a technical partner on another piece of legislation sponsored by SCDD, AB 2171 (Frazier), which would require the departments delivering education, rehabilitation, and disability services to coordinate planning.

USC Children's Hospital Los Angeles (UCEDD)

The Council has partnered with USC, CSULA, and DOR to propose a model CalPROMISE program to launch a pilot pre-vocational training at CHLA. This program will target 12-20 people with I/DD, aged 16 to 18. Once in place, the proposed model may serve as a feeding program to prepare CHLA patients for Project SEARCH. CSULA and CHLA are seeking funding to support the pilot project and access transition support and services from a consortium of special education and vocational rehabilitation programs and regional centers.

UCD MIND Institute (UCEDD)

The Council sponsored the UCD Mind Summer Institute (*Neurodevelopmental Disorders: Research to Practice*), reaching and providing resources to approximately 250 attendees. Also, the MIND Institute named SCDD as a partner in their grant to develop supported decision making curriculum and training. This curriculum will be developed by the MIND Institute with SCDD as a technical expert. Once developed, SCDD will provide the training throughout California through its 12 regional offices. Also, the UCD MIND Institute collaborated with SCDD in reviewing and scoring community development grants in the areas of self-advocacy, transition services, and public safety.

Disability Rights California (DRC)

As California's protection and advocacy agency, DRC has been a powerful force in developing and defending civil protections on behalf of people with I/DD and/or cross-disabilities. SCDD has continued to collaborate with DRC in the ongoing closing of California's DCs, partnering to provide family/self-advocates with training and information about self-governance and the process of safely relocating residents to communities and homes of their choice throughout the state. SCDD and DRC have also increased their advocacy collaborations. SCDD and DRC worked jointly on the following legislation:

- AB 2171 (Frazier) (SCDD-sponsored, DRC supported): Require the departments delivering education, rehabilitation, and disability services to coordinate their planning. Outcome: not passed by Senate
- AB 2430 (Arambula) (DRC-sponsored, SCDD supported): Increases the income threshold for aging and disabled programs from 100% of the federal poverty level to 138%. Outcome: not passed by Senate
- AB 2657 (Weber) (DRC-sponsored, SCDD supported): Limits the use of seclusions and restraints in public schools. Outcome: signed by the Governor
- SB 354 (Portantino) (DRC-sponsored, SCDD supported): requires public school to translate an IEP into their native language within 30 days of requesting it by the parent. Outcome: vetoed by the Governor

SCDD continues to be a driver in the state on the Self-Determination Program (SDP) (described more fully in Objective 1.1) on the Self-Determination Program (SDP), both statewide and regionally, with the Department of Developmental Services (DDS) and California's 21 regional centers. DRC is an active partner in the SDP implementation efforts.

SCDD and DRC continued a collaboration with Stanford Law School to identify California's civil rights obligations under the state Lanterman Act to support individuals with I/DD under California law, should the federal government greatly reduce federal Medicaid funding.

SCDD and DRC are partners in monitoring conditions within DCs and the process of transitioning those residents to the community as the state moves forward to close its 3 remaining developmental centers.

Other Collaborative Efforts

SCDD is leading a collaborative effort to evaluate the Self-Determination Program. SCDD, in collaboration with DRC, USC, Tarjan, and the MIND Institute, are creating an evaluation process to measure the satisfaction of participants and barriers to participation for those who decided not to be a part of the program.