I. Introduction

This report is respectfully submitted and presents information about volunteer advocate recruitment, training, demographics, and stipends as well as an overview of the advocacy services provided from July 1, 2015 to June 30, 2016.

The SCDD VAS program at Lanterman Developmental Center ceased operation on June 30, 2015. The LDC VAS program followed individuals from Lanterman Developmental Center into their community setting for six months after placement. The Volunteer Coordinator and volunteer advocates attended IPP and special team meetings in addition to face-to-face visits.

Beginning January 1, 2015, the SCDD VAS program serves individuals transitioning from the developmental centers and community facility for up to one-year post placement.

The unique characteristic of each center, and facility, is reflected in the information, observations and recommendations submitted by each office.
# Volunteer Advocacy Services Executive Summary Graph
## Semi-Annual Report  
July 1, 2015 – June 30, 2016

## Table of Services Provided

<table>
<thead>
<tr>
<th></th>
<th>Canyon Springs</th>
<th>Fairview</th>
<th>Porterville</th>
<th>Sonoma</th>
<th>Total</th>
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<td>134</td>
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<td>Total</td>
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<th>Sonoma</th>
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<th># of Volunteer Advocates</th>
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<th># of Volunteer Advocates Trained</th>
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<th># of Volunteers Paid Stipends</th>
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Nature, Status and Outcome of Complaints Filed Under the SCDD Grievance Procedure

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<tr>
<th>Developmental Center</th>
<th>Nature of Complaint</th>
<th>Status of Complaint</th>
<th>Outcome of Complaint</th>
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<td>Porterville</td>
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<td>Sonoma</td>
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II. Residents

Residents Referred and Provided Services

<table>
<thead>
<tr>
<th>Developmental Center</th>
<th>Total Residents as of 06/30/2016</th>
<th>Number Referred for Services</th>
<th>Number of Residents Provided Services</th>
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</thead>
<tbody>
<tr>
<td>Canyon Springs</td>
<td>47</td>
<td>30</td>
<td>30</td>
</tr>
<tr>
<td>Fairview</td>
<td>214</td>
<td>49</td>
<td>49</td>
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<tr>
<td>Porterville</td>
<td>342</td>
<td>134</td>
<td>114</td>
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<tr>
<td>Sonoma</td>
<td>347</td>
<td>87</td>
<td>87</td>
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Residents Referred for Services

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<thead>
<tr>
<th>Developmental Center</th>
<th>Male(s)</th>
<th>Female(s)</th>
<th>Mental Retardation</th>
<th>Cerebral Palsy</th>
<th>Autism</th>
<th>Epilepsy</th>
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<th>Forensic</th>
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<td>Fairview</td>
<td>27</td>
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<td>Porterville</td>
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*In order to report an unduplicated count, if a resident is in the forensic program, identify him/her under gender and forensic only.
Residents Provided Services

<table>
<thead>
<tr>
<th>Developmental Center</th>
<th>Male(s)</th>
<th>Female(s)</th>
<th>Mental Retardation</th>
<th>Cerebral Palsy</th>
<th>Autism</th>
<th>Epilepsy</th>
<th>Other</th>
<th>Forensic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canyon Springs</td>
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<td>20</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Sonoma</td>
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*In order to report an unduplicated count, if a resident is in the forensic program, identify him/her under gender and forensic only.

III. Services

<table>
<thead>
<tr>
<th>Developmental Center</th>
<th># of Residents Served by Volunteer Advocates</th>
<th>Average # of Contacts Per Month by Volunteers with Each Resident Served</th>
<th># of Individual Related Meetings attended</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canyon Springs</td>
<td>30</td>
<td>4</td>
<td>4</td>
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<tr>
<td>Fairview</td>
<td>34</td>
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<td>40</td>
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<tr>
<td>Porterville</td>
<td>114</td>
<td>3</td>
<td>1-2/resident/reporting period</td>
</tr>
<tr>
<td>Sonoma</td>
<td>78</td>
<td>4</td>
<td>11</td>
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</table>

* In some instances, a resident might be served by both a volunteer and staff, depending upon their needs.  
**Meetings do not include monitoring home, meet and greet vendor or provider visits.

ADVOCACY ASSISTANCE PROVIDED BY VOLUNTEERS

Canyon Springs

Volunteer advocates attend IPP, IEP, annual meetings, special team meetings, planning meetings and transition meetings with clients. They assisted clients with speaking to staff, writing letters, making phone calls and sending e-mails. They attended pre-transition meetings and court preparation meetings. Advocates met with their consumers on a weekly and bi-weekly basis. During this reporting period, advocates continue to work on self-advocacy skills.

Advocates have reviewed the Canyon Springs Pro Social Learning System (PLUS) Program with their clients to ensure they have a good understanding of the program and the client’s individual plus sheets. They have explained the different percentages and assisted in providing rewards for positive behaviors. Advocates have discussed
and explored community living options with clients and assisted clients with sharing this information during their scheduled meetings.

Advocates have assisted clients with anger management and counting by utilizing approved games. This has also given clients the opportunity to learn good sportsmanship and acceptable behaviors in an environment that they can expect in their communities.

All volunteer advocates spend time helping clients prepare for annual review meetings and any other specials at the facility. They review “My Own Choice,” client’s rights and assist the client in writing their choices for presentation at meetings. Volunteer advocates assist the clients with proceedings at Superior Court. The volunteer advocates help to prepare written statements for their public defenders and judge. Advocates assisted clients in preparing for hearings by practicing with clients what they would say in court.

A volunteer advocate participates in community activities with clients in the local community/area. This support provides the client with choices in selecting exercise, being with friends and meeting and taking part in community activities. Another advocate has met with a client and staff at a local restaurant. This support has encouraged positive behaviors when interacting in the community and assisted the client in making friends. An advocate has attended several social events at a client’s residence in the community. This support has assisted the client with engaging in socially acceptable conversations and behaviors. Volunteers have also assisted clients with preparations for Special Olympics.

Volunteer advocates have reviewed and assisted clients with “My Own Choice” and discussed think, plan, do. Advocates have also reviewed the consumer Advisory Committee and Community Conversations with People with Developmental Disabilities with clients. They have assisted clients in meeting preparation by providing encouragement, support and planning. They have also practiced with clients on what they will say at the meetings and what to expect.

Advocacy Assistance is provided to the clients as follows:

- Volunteer attend Individual Program Plan Meetings, meeting with the client ahead of time for advance planning
- Volunteers attend Individual Educational Plan Meetings, meeting with the client and their teacher to discuss participation and future goals
- Advocates attend transitioning meetings with clients to encourage their input into type of placement
- Volunteer advocates participate in Human Rights Committee Meetings to review changes in client’s program plans and medications
Volunteers meet with clients to discuss court proceedings and give encouragement to clients
Advocates attend focus meetings held on the residences to encourage clients to speak up on personal issues
Advocates attend medical appointments with client to provide encouragement for clients well-being
Volunteers participate in community recreational and outreach activities to encourage socialization with clients
Volunteer advocate visited clients in area hospital to encourage and provide emotional support

**Fairview**

For this annual report, four FDC consumers returned to their home communities during the first half of the fiscal year, and three additional VAS consumers returned to the community during the second half of fiscal year 2015-16. This is a total of seven VAS consumers who have moved from FDC. All of the VAS consumers, who have moved back into the community, have adjusted well to their new residential settings. However, in one case the family has requested a change in residential placement due to their concerns with the facility staff.

FDC VAS consumers have moved into a variety of residential programs over the past year, including intermediate care habilitation program (ICFDDH), a residential care facility for the elderly (RCFE), a sub-acute psychiatric program developed for consumers with I/DD and an adult residential facility for persons with special health care needs, (ARFSHN). Six of those consumers participate in community-based day services and travel to the day program five days per week.

Summary of advocacy provided by volunteers during first part of fiscal year 2015-16:

- Volunteer Advocates continue to assist consumers in completing agendas for IPP meetings. The topics requested were discussed and resolved.
- Volunteer Advocates continue to assist consumers to attend special activities held on FDC campus, such as FDC Self Advocacy March and other special performances held during the holidays and throughout the year.
- Volunteer advocates continue to ensure consumers’ grooming and hygiene needs are met and will ask FDC staff to complete nail and hair care, when needed.
- Volunteer advocate continues to monitor, and discuss with Project Coordinator, frequent injuries her consumer continues to sustain. Several special meetings have been held to discuss various plans to keep the consumer safe and free
from harm. Such plans have included increased supervision along with use of a bed alarm when she gets up out of bed during the night, the movement of her bedroom closer to residence nursing station and having her furniture bolted to the floor to prevent injuries to herself and to others. Recommendation was also made for an updated psychiatric evaluation due to increased aggression towards others and to rule out the diagnosis of dementia. Advocate continues to closely monitor this consumer and report to the coordinator observations made during her visits.

- Volunteer Advocate observed that consumer had not been carrying her purse as usual. She made an inquiry to her group leader on her residence, as to where the location of the consumer’s purses. Group leader did not know. Advocate contacted the floor supervisor for follow up. Consumer was then observed happily carrying her purse and having her personal items with her.

- During Transition Support meeting, volunteer advocate clarified with the ID Team the need for increased supervision when in the community with consumer. This concern is specifically related to when the consumer would be walking in the community and if she sees a grate on the sidewalk or in the street. Consumer will continue to receive safety and ILS training both while at FDC and when she moves into the community.

- Volunteer advocate observed that vehicle training for her consumer was no longer being provided when he was transferred to another residence. Advocate contacted his new recreational therapist and requested that vehicle training be reinstated with this consumer, so he can continue to become more comfortable getting in and out and riding in vehicles.

- Advocate continues to visit with consumer who was recently hospitalized and was not able to return to his previous community home. He now requires increased nursing care and was transferred to a sub-acute program in the community. Advocate assisted with his transfer by bringing his personal property/clothing to his new placement. Advocate also contacted his Regional Center case manager to make arrangements for his wheelchair to be transferred to his new residence.

- Advocates continues to visit with consumers in the SNF program and insure they have opportunities to get out of bed and be placed into their wheelchairs and to participate in any activities offered on the residence or within the program.

Summary of advocacy provided by volunteers during second part of fiscal year 2015-16
Advocate was reviewing consumers file and noted that consumer sustained a foot lesion and that the consumer was having some difficulty ambulating. After further investigation concerning the cause of the foot lesion and change in gait, advocate noted that consumer was wearing shoes that did not fit her properly and requested FDC to assist the consumer to obtain new shoes. Follow up phone call by advocate was made to consumer’s residence to insure consumer received new shoes that fit her properly. With new shoes, the consumer’s gait returned to her usual capabilities.

Advocate recommended consumer have an updated occupational therapy evaluation to re-assess his independent feeding skills. This consumer is visually impaired and is often unable to finish all the food in his meal independently. After the assessment, a new recommendation was made for consumer to use a swivel-type spoon, and he is now able to consume all his food independently during his meals.

Advocates attended IPP meetings for consumers who have moved into the community. Advocates are responsible for visiting with the consumer at least five times during their first year of placement in the community and complete monthly telephone contacts in the alternate months without a visit. Advocates are responsible for completing a written report to document their observations and/or any concerns that need to be addressed. To date, one VAS advocate has attended a 60 & 90 day IPP review and has also been completing monthly contacts with her consumer in the community. Advocate reports the consumer is doing well in her new living setting.

Advocates visit FDC VAS consumers when they are admitted to community hospitals for treatment until returning to FDC. Visits then continue in the acute residence while the consumer receives specific medical treatments, such as IV medications as prescribed for their illness.

Advocate continues to visit a VAS consumer who now resides in a skilled facility in the community. Advocate continues to request that the consumer be dressed in his own clothing, be out of bed and up in his wheelchair on a daily basis. She continues to monitor his programming and discuss her concerns with his Regional Center case manager. She continues to attend his care plan meetings and advocates for appropriate services and supports for him. During her last visit, consumer was up in his wheelchair and dressed in his own clothing.

Advocate assisted a consumer in making and sending a thank you note to his brother. His family member continues to send his brother favorite candy and leisure items during every holiday and on his birthday. Family was very appreciative of our efforts in supporting his brother.
Advocate continues to provide ongoing support and recommendations for comfort measures for a consumer, who has been diagnosed with an inoperable tumor. Due to her continued advocacy, palliative care is now being provided to him to insure all possible comfort measures are put in place during his final days.

Advocates, at times, may contact a consumer via telephone which they enjoy as VAS consumers have limited opportunities for phone use and etiquette.

Porterville

A total of 134 residents have been referred for advocacy assistance from the Volunteer Advocacy Services Program this reporting period. Currently, 112 of these residents are assigned a volunteer advocate and receive weekly services. Twenty residents have not yet been assigned an advocate and are currently on a wait list. In 2015, PDC increased the capacity for residents on the STA side. This impacts the VAS service numbers as we seek to provide new residents all the supports and services our program has to offer. VAS project numbers are also impacted by the number of clients (primarily from the GTA) that are going to community placement.

VAS volunteer advocates provide weekly support to their assigned residents. Visits focus on how the individual resident’s week has been and if there have been any issues of frustration, concern, progress, etc. Some volunteers will role play different scenarios to help the resident practice possible alternative solutions to situations of identified concerns. The volunteers identify staff or other resources that residents can contact to resolve issues or meet wishes. Volunteers assist with preparation for residents’ Individual Program Planning (IPP) meetings, IEPs, transition (TPM and TRM) and special meetings. They attend as many meetings as possible for their assigned clients but sometimes ask another volunteer, or the VASC, to provide coverage if they have a conflicting schedule. Volunteers often address quality of life issues, such as: advocacy for appropriate placement, resolving conflicts with peers, ensure that less capable residents are appropriately attired, concerns with medication and highly restrictive intervention side effects, money management, diet awareness, etc. All volunteers document notes regarding their advocacy assistance efforts.

The volunteers utilize individualized approaches to communicate with each of their clients depending on the current need of the resident. When working with residents who are learning to be self-advocates, the volunteer uses more of a teaching model, encouraging the resident to identify their needs and wants and speak up for themselves. When working with a resident who is unable to advocate for themselves or has not had success advocating for themselves, the volunteer makes requests through various team members and/or will follow up with the VAS Coordinator or CRA for assistance.
The VAS Coordinator and advocates often identify issues of concern that may need to be brought to the CRA’s attention. PDC provides services to a variety of individuals needing general acute medical services, skilled nursing services, or intermediate care services. Many of the individuals have chronic medical or behavioral problems and some additionally need services in a secured treatment environment. Residents are sometimes referred to as forensic and non-forensic residents. Forensic residents are also referred to as "secured treatment area" (STA) and the non-forensic residents are referred to as "general treatment area" (GTA).

In the STA, there are two programs (7 and 8). Each has multiple units at this time. To access these units, the volunteers must check out an alarm, have their photo identification and whistle on their person at all times prior to entering through a sally port.

In the GTA, there are two programs (5 and 1). Program 1 (Acute and Skilled Nursing) covers General Acute Care, or GAC, W-1, E-2, Unit 30 and 32.

**Sonoma**

Volunteer advocates attended eighty-eight IPP’s or semi-annual IPP meetings. Advocates visited community care facilities and day programs to evaluate services for their consumers. Volunteer advocates also attended thirteen Transition Planning Meetings and Transition Review meetings for community placement for their consumers. Also advocates attended six-unit transfer meetings.

The VAS project continues providing advocacy services after a VAS consumer transitions to the community for one year. The advocates or Coordinator made nineteen visits to VAS consumers living in the community.

Volunteer advocates consult frequently and problem solve with social workers, regional center case managers, job coaches, teachers and unit staff. The advocates are involved in meetings that influence resident’s day/work services, and changes in health. Additionally, advocates attend meetings regarding care, treatment, palliative care or hospice needs. With numerous changes of level of care staff and supplemental staff in the consumer’s life, advocates are a constant person in the consumer’s life. Advocates provide information regarding consumers to unfamiliar team members.

Advocates are expected to volunteer at least four hours a month per resident that are assigned to the advocate. The four hours includes meetings for the resident and visits with the resident. Advocates accompany residents in the community and around the SDC campus. Advocates participate in some unit celebrations and events with residents as these represent milestones achieved.
Advocates provide support for consumers in exercising their rights and promoting dignity. They assist in problem solving with the consumer for increased independence. Advocates visit potential residential placements to evaluate appropriateness. The advocates assist the ID team in making sure that consumer’s needs will be met by the Residential Service Provider. Examples include:

- At team meetings advocates recommended community placement for eleven VAS consumers.

- Advocates toured ten potential homes and/or day programs for their consumers; to assess needed supports were available to their consumers.

- The Coordinator or advocates had nineteen meetings with regional center case managers to discuss community placement for consumers in the VAS project.

- An advocate assigned to VAS consumers who have sensory impairments attended a Mobility and Orientation training to assist in easing these VAS consumers transition into the community.

- Advocates make calls or visit their consumers to ensure that they are adjusting well in the community.

- When consumers become anxious about moving into the community their advocates will discuss the move and try to reassure them.

- Concerned about the safety of a VAS consumer living in a proposed community home the consumer’s advocate spoke with the regional center case manager regarding these concerns. The ID team agreed that the home would not be a good match for the consumer.

- An advocate that toured a community for possible placement of a VAS consumer told the regional center case manager their concerns regarding the appropriateness of the home for the VAS consumer. The case manager agreed.

- An advocate was concerned that the staff were not getting a VAS consumer out of bed in the morning. The advocate was told that some people were not getting out of bed due to lack of staffing. The Coordinator and the CRA met with Program management to discuss this issue. The program management agreed to monitor staffing levels to make sure that residents on the NF units were getting up in the mornings.
Two advocates requested that sisters living on different units at SDC be able visit each other. The sisters were given opportunities to visit.

A VAS consumer spoke often of wanting to see her mother. The advocate spoke to the ID team regarding this and the consumer was able to visit her mother several times.

When consumers are hospitalized, advocates visit them for emotional support and ensure their needs are met. In addition to IPP and semi-annual meetings, advocates participate in special ID Team meetings concerning the consumer. For example, advocates attend meetings when there is a significant change in the consumer’s health, a change in the individual’s plan of care, or changes in an individual’s behavioral plan. Advocates consult with the medical and direct care staff to ensure that least restrictive treatment options are considered. Advocates participate in ID Team discussions related to bioethical issues such as the decision to provide outside hospitalization for a consumer receiving end-of-life care.

Often advocates visit their consumers at the General Acute Care at SDC and community hospitals to make sure that they are comfortable and have a familiar person with them. Advocates and the Coordinator keep in contact regarding the health of VAS consumers.

- An advocate discussed with SDC Occupational Therapist the need for a new wheelchair for a VAS consumer.

- An advocate requested (and the team agreed) that whenever a VAS consumer goes to an outside hospital that the consumer have familiar staff with them for the first 48 hours.

- An advocate spoke with SDC staff regarding a VAS consumer having a rash and staff informed the unit doctor.

- Advocate noticed that a consumer was becoming increasingly agitated and spoke to the unit staff regarding the consumer’s PRN medication for pain. The medication was given and the consumer seemed relieved.

- Advocates attended three discharge meetings from GAC for VAS consumers.

- When visiting a VAS consumer in the hospital an advocate was concerned about the consumer having tangled and unwashed hair. The advocate spoke with the residential service provider about this consumer. The provider said that he will contact the hospital.
• An advocate spoke with a SDC physician regarding two medical concerns for a VAS consumer. The team agreed to monitor these conditions and report to the consumer’s physician.

• Concerned about a VAS consumer not eating an advocate spoke with the consumer’s social worker. The social worker agreed to discuss the advocate’s concerns with the team.

• A VAS consumer indicated to her advocate that her foot hurt. The advocate notified the staff and the consumer’s foot was examined.

• An advocate spoke with a VAS consumer’s staff about the VAS consumer not sleeping well. The staff will monitor the VAS consumer’s sleeping patterns.

• An advocate noticed that VAS consumer was hitting the side of their face and seemed more agitated than usual. The advocate suggested that VAS consumer might be experiencing dental pain. Staff followed up and it was found that the consumer had an abscessed tooth.

• Advocates will follow up on medical issues regarding VAS consumers after being reported. Continued monitoring occurs.

<table>
<thead>
<tr>
<th>Developmental Center</th>
<th># of Residents Served by the Coordinator</th>
<th>Average # of Contacts Per Month by the Coordinator with Each Resident Served</th>
<th># of Individual Related Meetings Attended each month</th>
<th># of Self-Advocacy Groups Facilitated by the Coordinators and Volunteers</th>
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</table>

* In some instances, a resident might be served by both a volunteer and staff, depending upon his or her needs.

ADVOCACY ASSISTANCE PROVIDED BY THE PROJECT COORDINATOR INCLUDING SELF-ADVOCACY GROUPS FACILITATED
Canyon Springs

The VAS Coordinator is on the premises forty hours per week and is available for all clients that reside at the Canyon Springs facility. The Coordinator has an average of four to six contacts on a monthly basis with clients who are eligible for advocacy services. Clients are greeted in person or by phone and email.

One on one advocacy has been provided to clients by the VAS Coordinator where clients have requested a volunteer advocate and when there were none available. In addition, the VAS Coordinator is available during client mealtimes, breaks, in the exercise area and in the facility. This affords the opportunity to meet informally with clients and discuss personal advocacy, program goals, diet, exercise, the judicial process, human rights, client rights, workplace issues and other concerns. The VAS Coordinator has met with each client at Canyon Springs and discussed advocacy. Flyers and brochures, which clients have assisted in creating, are posted/placed throughout the facility with information on obtaining a volunteer advocate.

The Coordinator meets frequently with volunteer advocates on a walk in basis or by appointment and telephone contact to provide support, mentoring and coaching to identify strategies for effective advocacy. The VAS Coordinator meets with the volunteer on a monthly basis to discuss any current issues concerning the clients. The VAS Coordinator consults with the assigned volunteers prior to some meetings to assist with any concerns. The VAS Coordinator provides guidelines to volunteers on the mission statement of the volunteer program.

A volunteer is a member of the Human Rights Committee that meets once a month. As a member of the committee, the volunteer reviews changes for clients and assists with making recommendations.

The Coordinator facilitated self-advocacy training for new volunteer advocates through individual training sessions. The VAS Coordinator has provided block training regarding clients’ rights. The VAS Coordinator has provided training to new staff at Canyon Springs.

The VAS Coordinator monitors and follows up incidents documented in incident reports. This is done on a regular basis.

The Coordinator distributes a monthly calendar of scheduled annual IPP meetings to all advocacy volunteers. An updated calendar of scheduled outings is also distributed to the volunteers.
The Coordinator communicates with outside agencies such as: Long Term Ombudsman Program, Riverside County Voters Association, Disability Rights of California, to provide advocacy presentations to the clients. The Coordinator worked with the Department of Labor to discuss wages and work schedules.

The Coordinator facilitates a monthly client council meeting requesting input from the clients on their pertinent issues/concerns. The Coordinator collaborates with the SCDD San Bernadino Regional Office staff to provide various self-advocacy topics at the client council meeting.

**Fairview**

*Types of advocacy assistance provided by Program Coordinator during first half of fiscal year 2015-16:*

- Project Coordinator continues to request and review copies of most recent whole person assessments for all FDC VAS consumers. These reports are reviewed to insure all necessary supports and services have been identified and to ensure those services are made available for consumers when moving back into the community.

- Project Coordinator assisted two consumers in completing Writs of Habeas Corpus or requests for release from FDC. Both Writs remain on calendar and continue to be reviewed by Court.

- Project Coordinator continues to assist consumer with her requests to purchase personal items, clothing and hygiene products from her trust through her trustee.

- Project Coordinator continues to provide ongoing emotional support for consumer, whose father had passed away during this past year. This consumer continues to have frequent episodes of agitation, and crying especially during the holiday season. Coordinator continues to closely support him and assess if any further team meetings would be beneficial.

- Project Coordinator requested that consumer’s IPP meeting be re-scheduled because the regional center case manager was unavailable to participate in the IPP meeting. Discussions concerning recommendations from the whole person assessment and future community placement plans had not been discussed during the IPP meeting, so a follow up IPP meeting was held so placement recommendations from his Regional Center would be included in his IPP.
• Project Coordinator observed and verified with nursing staff that consumer had lost a significant amount of weight over the past year. Per weight record, consumer had lost over 15 pounds since the summer and was only receiving a regular diet over this time period. Coordinator contacted residence dietician to reevaluate his diet and weight trend. As a result, consumer was ordered to have increased portion size during meals and has begun to gain a little weight.

• Project Coordinator visited several proposed community homes with consumer’s family as requested. Consumer has a long history of AWOL and safety issues, so a home with a fence and a large back yard would best suited meet his needs. Family did then agree to one setting and will support the placement process at this home.

• Project Coordinator continues to support consumer who was having some reservations but then agreed to send some of his personal property to his mother for safekeeping. Consumer agreed that such property did cause him to become hyperactive and aggressive and agreed that possession of such materials were not therapeutic in his treatment plan. Consumer has now begun to explore other hobbies, such as nature and environmental topics that he can participate in without affecting his behaviors and mood.

• Project Coordinator had observed and confirmed with her day services staff, a dramatic change in consumer’s behaviors recently while attending her day program. After consulting with residence psychologist, she reported that consumer’s medications had been reduced and the team was assessing the risks vs benefits of medication reduction. After further discussion with psychologist concerning observations made, she agreed to consult with other IDT members about the increase in the frequency and severity of her behaviors. After review by IDT, recommendation was made for consumer to be placed back on her previous dosages of medications. Consumer now observed being calm and enjoying her daily activities in her program.

• Project Coordinator distributes to the volunteer advocates a monthly calendar of all IPP, special and/or transition meetings held for VAS Consumers.

• Project Coordinator continued to follow one VAS consumer who since leaving FDC, was moved into another home with the same care provider. Since this move she had done much better in this setting and has shown improvement overall. During this reporting period, she has successfully maintained her community placement for over six months and is now attending a vocation program she enjoys.
Types of advocacy provided by Program Coordinator during second part of fiscal year 2015-16

- Project Coordinator attended several special IDT meetings concerning residence transfers and the planned consolidation of two residences. Several denials of rights (DOR) meetings were also attended by VAS Coordinator for VAS consumers. DOR’s are reviewed on a monthly basis with one consumer regaining her rights/personal possessions.

- Project Coordinator attended several special ID Team meetings concerning increased campus access, an increase in physical injuries and a change in training site. Campus access training has continued for one VAS consumer and no change in day training for the other consumer due to his continued exhibition of unsafe behaviors while on campus. Increased supervision is now being provided for one VAS consumer who has had several, severe and unobserved injuries over the past year. Since the increase in her level supervision, she has not sustained any further injuries.

- Project Coordinator continues to assist consumer with her requests to purchase personal items, clothing and hygiene products from her personal trust fund through her trustee.

- Project Coordinator requests and reviews all annual IPPs and all special IDT meeting reports for new consumers to VAS Program. An initial face-to-face meeting is completed to observe the consumer to better determine which advocate would best fit with new VAS consumers.

- Project Coordinator toured a newly licensed intermediate care nursing program at Harbor Village for FDC consumers.

- Project Coordinator continues to process and monitor monthly VAS stipends and the VAS budget at FDC.

- Project Coordinator with VAS staff assistance, developed two assessments to be used by the VAS program statewide to document community follow up for consumers who have returned to the community.

- Project Coordinator continues to attend monthly Self-Advocacy Advisory board meetings held at Harbor Regional Center.

- Project Coordinator continues to request and review current whole person assessments for VAS consumers who are or will be in transition over the next several months.
Project Coordinator participated in several SCDD sponsored self-determination trainings on the topic of facilitator, as she was involved in statewide pilot project.

**Porterville**

Advocacy assistance, provided to residents by the Coordinator, during this reporting period, includes (but is not limited to) meeting attendance, consultations with the Executive Director, Clinical Directors, Program Directors, coverage for the Clients’ Rights Advocate, review of medications and attendance at HRC – Human Rights Committee and BMC – Behavior Management Committee, assignment of referrals, hiring and training of Volunteer Advocates, Self-Advocacy Training, preparation and processing of invoicing and reports.

There has been a large increase in the number of clients calling our office. Most calls are from clients in the STA requesting court information or from PDC staff seeking VAS services for a particular client.

**Sonoma**

Coordinator participated in 161 Individual Program Plan meetings, Transition Planning/Transition Review meetings, as well as consultations with SDC staff, regional center case managers, Client’s Rights Advocate, Office of Clients Right Advocate assigned to SDC and Sonoma Regional Project staff about specific issues for VAS clients. Coordinator attended monthly meetings with SDC staff and an SLS agency on community placement for three VAS consumers. Coordinator attended eleven meetings regarding health issues of VAS participants and two care plan meetings for VAS participants with declining health. Also, Coordinator attends meetings when a volunteer advocate can’t attend.

Coordinator and SDC active treatment team presented twenty-six rights training sessions to SDC residents. The trainings include: information on voting, community living options, and personal rights.

Coordinator and SDC active treatment team met with SDC Clinical Director and social workers regarding voter education for residents. We presented on voting for residents. Also, we spoke about the low numbers of people with disabilities who vote and the need to encourage people to register to vote. The Clinical Director requested that the social workers ask SDC residents if they want to register to vote on an annual basis. The Coordinator and SDC active treatment team continue informing SDC staff and residents on voting rights.
Coordinator made sixteen presentations at SDC employee orientations. At the orientations there were a total of eighty-eight employees. The presentations included discussions of client rights, the importance of IPPs, the denial of rights process, descriptions of the VAS Project and CRA duties, and laws regarding people with developmental disabilities.

Coordinator is in contact with SDC staff when a VAS consumer has a change of service or requires hospitalization. Also Coordinator and advocates need to be contacted when there is a bioethical issue related to treatment, or when there is a reportable incident involving a VAS consumer. Examples include:

- When attending IPP meetings the coordinator consistently advocates for the consumer to participate in his/her meeting.
- Coordinator attended three Client Protection Plan meetings regarding consumers in the VAS Project.
- Coordinator informs advocates of incident reports, hospitalizations, and special meetings regarding their consumers.
- On a regular basis Coordinator and CRA meet with administrative staff (Executive Director, Clinical Director, and Sonoma Regional Project Director) in a joint effort to develop and promote opportunities for self-advocacy at SDC.
- VAS Coordinator is a member of the Human Rights Committee that meets once a month.
- Coordinator and CRA are assisting the Human Rights Committee in developing trainings and activities for staff and residents regarding rights, choices and advocacy.
- Coordinator supports VAS consumers request to move from SDC at their writ of habeas corpus hearings.
- Coordinator meets with regional center case managers and representatives of the Sonoma Regional Project regarding community placement for the consumer’s in the VAS Project.
- Coordinator attends special meetings regarding service changes for VAS consumers.
- Coordinator provided training for the advocates on community living options and requested that they discuss community living options to the VAS consumers and
reported on the consumer preferences regarding living options. Coordinator gave this information to SDC Executive Director.

- Coordinator requested that advocates inform VAS consumers of the Supported Life Conference in October.

- Coordinator facilitated an interpretive meeting for a SDC resident.

- When covering for the CRA, Coordinator attends the Whole Person Review meetings.

- Coordinator reviewed and made suggestions to SDC policies regarding clients’ rights and consents.

- Coordinator attended two public hearings on the transformation of SDC plan.

- Coordinator is a member of SDC Resident Transition Advisor Group (RTAG). RTAG evaluates SDC transition planning process and makes recommendations to improve resident’s transitions into the community. RTAG developed two documents on transition planning and an individualized orientation document for residential providers.

- An advocate notified Coordinator that a VAS consumer requested to move out of SDC. Coordinator informed the CRA of the request. CRA discussed with the consumer the right to file a Writ of Habeas Corpus.

- A VAS consumer told the Coordinator about a lack of privacy while making telephone calls and not being able to speak to a peer. Coordinator brought this issue to the attention of the unit Social Worker and the CRA.

- Coordinator made presentations to SCDD Consumer Advisory Group and the Statewide Self-Advocacy Network regarding supports for SDC residents transitioning into the community.

- Coordinator and DRC Office of Clients Rights Advocacy made a living options presentation at SDC work program.

**IMPACT OF CHANGES IN THE AMOUNT OF SERVICES PROVIDED THIS REPORTING PERIOD**

**Canyon Springs**

Advocacy Services have increased during this period due to the following:
• Clients have requested more meetings with their advocates due to transitioning and follow-up in the community
• An increase in outreach presentations in the surrounding communities have been more successful
• Increase in the number of volunteers added to the program
• Collaborations with other service agencies resulting in more client presentations at Canyon Springs has encouraged more clients to request volunteers

**Fairview**

During this reporting period, more meetings were attended by both volunteer advocates and Project Coordinator due to the increase of VAS consumers starting transition to the community and the consolidation of several FDC residences.

**Porterville**

Self-Advocacy/Group Training sessions were held, by the Coordinator, this reporting period at the Fall Festivals in the General Treatment Area (GTA) and Secure Treatment Area (STA) in October of 2015 and at the Spring Festivals, in both areas, in May of 2016. Volunteer Advocates were also in attendance and aided in facilitation of training and presentation of support materials. The VAS Coordinator also attends monthly People First Meetings in both the STA and GTA.

**Sonoma**

The VAS Project has a good working relationship with regional centers. This helps ease the transition for VAS participants with community placement. Communication between the VAS project and some regional centers has fluctuated depending on case manager turnover; sometime causing delays in community placement for VAS consumers. The VAS Coordinator attends the monthly liaison meeting with Sonoma Regional Project and Regional Centers. This assists the coordinator in knowing what kinds of supports the regional centers provide as well what assistance regional centers need at SDC. In the last year, eleven VAS consumers moved into community settings.

SCDD and Sonoma Developmental Center sponsor Opportunities and Options Fair. Coordinator and the SDC Assistant to the Executive Director are co-chairs of the Opportunity Fair Committee. Members of the committee include SDC staff, regional centers staff, SCDD staff and a person from the community. On January 8th, 2016 the Opportunity Fair Committee held the Options and Opportunities Fair. The fair provided information on community living options for families of SDC residents. There were twenty-one community providers that presented information about their agencies. In addition, four regional centers provided information for families regarding community living options. The California State Staff Program, Sonoma Regional Project, Disability
Rights California/OCRA, and SCDD North Bay regional office gave information on state staff programs, rights, and advocacy services. Approximately ninety people attended the fair. The next Opportunity Fair was scheduled for September 29th 2016.

IV. Service Outcomes

Canyon Springs

Nine clients have transitioned into the community and their advocates continue to provide assistance. Clients were able to discuss their transitioning issues, their general outlook on life and feelings/concerns about their new homes and their new work assignments.

Volunteer advocates meet with their assigned clients on a monthly basis to discuss the progress made in their plan, work assignment, living arrangements and transitioning plans.

When issue/problems arise, volunteers notify the VAS Coordinator who follows up with line of care/administrative staff. These issues/resolutions are discussed during the regular scheduled meetings with CS administration.

Advocacy Services and Outcomes:

- Client shared with Volunteer that they wanted to wear a scarf to work and was told that it was not allowed. Volunteer met with line of care staff to discuss clothing issue. Client wears different scarves to work daily.
- Client shared that they wanted a California ID. Volunteer suggested client research process on the computer. Volunteer encouraged client to provide researched materials to social work services at CS. Client is in process of obtaining a California ID
- Volunteer observed client continuously scratching her head. Client shared that she might have scalp condition. Volunteer notified line of care staff and client was immediately examined by the nursing staff. Client was prescribed dandruff shampoo
- Volunteer reported to VAS Coordinator that a client was not attending an off work site program per his request. VAS Coordinator found that client had no California ID. Volunteer and VAS Coordinator met with administration. Appointments were made and client received identification and is now attending off site work program per his request.
- Client shared with Volunteer that they were hungry. Volunteer Coordinator scheduled a meeting with the dietician/client and Volunteer to go over client’s diet and portions. Added snacks were given to the client.
Volunteer observed client sleeping at work. Client shared they were bored. Volunteer encouraged client to request a re-evaluation to a different work site to be considered for another position. Client was re-assessed and is working in a different program.

Client shared that their roommate kept them up all night with loud music. Volunteer encouraged client to inform staff. Client has another roommate who has the same interests in music among other commonalities.

Client shared that they were interested in finding out more information on registering to vote. Volunteer and client reviewed information on the computer and an outing was planned to the library where voting materials were obtained.

**Fairview**

FDC Service Outcomes for first half of fiscal year 2015-16:

- Project Coordinator supported four VAS consumers and their families in the placement of consumers into community settings from Fairview DC.

- Project Coordinator and several advocates attended three Transition Planning meetings (TPM) and three Transition Review Meetings (TRM) prior to VAS consumers leaving FDC.

- Project Coordinator attended several meetings in the community as follows: Three 30-day meetings, two six month meetings and one annual meeting for VAS consumers. In review, all services and supports in their community settings are meeting consumers' needs.

- Two writs for release were completed as requested and processed by FDC client records to the appropriate legal jurisdictions.

- Compile bi-monthly summary of services being provided by FDC VAS Program and send to Lead Clients Rights Advocate.

- Project continues to support transition activities for ten VAS consumers currently in some stage of transition from FDC to various community settings.

- Coordinated with South Coast Regional Project to obtain clarification regarding provisional discharge status for VAS consumers moving in the community. This issue was clarified by DDS, and was determined that all FDC consumers will leave FDC under provisional placement status.
• Completion of Community Placement follow up form for VAS consumers who have moved into the community. This form is to be completed during all community follow up visits by VAS staff statewide.

• Consulted with Regional Center and facility staff concerning the condition of the brakes on consumer’s wheelchair. The transportation company the day program contracts with, refused to transport this VAS consumer to day program due to problems with the brakes on his wheelchair. VAS Project Coordinator contacted RC case manager, facility staff and Regional Project staff to facilitate repairs to his wheelchair brakes so consumer could continue to attend his day program. His wheelchair was repaired and he now attends his day services program on a daily basis. He also is being evaluated for a new wheelchair at this time.

• Review of Whole Person Assessments completed for all FDC VAS consumers to assure the appropriate level of services is to be provided.

• Continue to provide emotional support for consumer, whose family lives out of state, and has limited opportunities for face to face visitation in California.

• Ongoing request to ensure that both consumers and Regional Center staff are present at all IPP meetings.

• Followed up with all VAS Volunteer Advocates to obtain a flu shot or wear a mask while visiting consumers at FDC due to recommendation by CDC.

FDC Service Outcomes for second half of fiscal year 2015-16:

• Project Coordinator supported three VAS consumers and their families in the placement of consumers into community settings from Fairview DC.

• Project Coordinator and several advocates attended a total of seven Transition Planning meetings (TPM) and Transition Review Meetings (TRM) prior to VAS consumers leaving FDC.

• Project Coordinator attended the following meetings in the community including face-to-face observations of the consumers:
Three five-day visits, three 30-day review meetings, one 60-day review, two 90-day reviews, two six-month reviews, two 9-month reviews and two annual meeting for VAS consumers who now live in the community. Upon review, it was determined that all services and supports provided in their community settings are meeting consumers’ needs.
• Compile bi-monthly summary of services being provided by FDC VAS Program and send to CRA/VAS Project Manager for SCDD Council report.

• VAS Project continues to support transition activities for twelve VAS consumers currently in some stage of transition from FDC to various community settings.

• VAS consumer’s family, who live in Mexico, made a surprise visit to their son’s new home. The family was reported to be extremely happy with their son’s new home, the services being provided and all the progress he has made since moving to a home setting.

• VAS project requests and reviews all new IPPs developed by Regional Centers when a consumer moves back into the community

• VAS project completes monthly visitation updates for all VAS consumers who now reside in the community for up to one-year post placement.

**Porterville**

Volunteer Advocates work specifically with consumers on an individual basis (following Individual Program Plans (IPPs). They provide training, support and encouragement while focusing on self-advocacy goals. Many of our advocates have worked with their clients for many years and have made significant progress in the areas of communications (client to staff, client to client, etc.), issues concerning money handling and budgeting, work commitments, definition of goals, IPP attendance, behavioral issues, pre-placement transition and diet/health, sexuality and exercise.

The following are examples of service outcomes during this reporting period:

• Two clients that were provisionally placed from the STA, returned with failed placements. Both clients were involved in criminal activity while away. They were placed both back with their previous advocate to help with transitioning, training reinforcement and support.

• Several clients have had prolonged hospital stays outside the facility due to respiratory and other serious health issues. Their advocates have visited them regularly at the hospital for comfort, encouragement and support.

• PDC consolidates units as the GTA side decreases in census. Clients are moved around and handling change in their routine, unfamiliar faces and loss. The VAS program provided focused support for all impacted.
During this reporting period, the VAS program had special training in Person Centered Planning. This is very beneficial material in working with clients to better understand and participate in their IPP and/or Special IPP Meetings.

As more consumers start the transition for community placement (least restrictive environment) and news of the 2021 closure of the GTA, clients are increasingly apprehensive and anxious. Many of the GTA consumers have spent their entire lives at PDC and the thought of change is very difficult to process for them. The VAS advocates are helping consumers by focusing on the positive aspects of these changes. Advocates are also attending their client’s IPP and the Transition Placement/Review Meetings (TPM and TRM) for those in the placement process.

Specialized training has been provided for volunteer advocates providing services to clients who reside in the secure treatment area, STA. There is a noted increase in the level of agitation, physical and verbal assault. Many of the consumers are obtaining court competency and are concerned about having to go back to jail/prison. STA advocates are cautioned to stay in line-of-sight of staff, especially with clients who exhibit or have history of behavioral challenges.

Sonoma

- Coordinator and advocate requested that the regional center provide nursing hours that were agreed to in the IPP for a VAS consumer living in the community.

- A VAS consumer was not included in a field trip due concerns about the consumer becoming agitated. The advocate encouraged the RT to include the consumer in the field trip. The VAS consumer enjoyed the trip.

- A VAS consumer told his advocate that a peer kept going into his room. The VAS consumer wanted a new lock on his door. The advocate followed up with the consumer’s social worker and a new lock was installed.

- An advocate assisted an SDC speech therapist in developing communication passports for VAS consumers.

- An advocate described a VAS consumer’s communication methods to a SDC psychologist to be included in the approaches and strategies of the consumers IPP.

- On several occasions Coordinator informed Regional Center case managers that consumers in the VAS project would benefit from community placement.
• When a VAS consumer who resided in intermediate care facility or ICF program at SDC was being referred to a nursing facility or NF unit the consumer’s advocate pointed out how well the consumer was doing on his current unit. Moving to an NF unit would be detrimental to his quality of life. The transfer to the NF did not occur.

• Advocates meet with potential community providers when those providers visit their clients or when the advocates tour the providers home. The advocates give information about their consumers to help the providers understand the consumer’s needs.

• Coordinator, advocates, and Regional Center case managers recommended community placement for three VAS consumers at their IPP meeting; as a result, referral packets were sent out to providers.

• Three advocates accompanied five VAS consumers on the days they moved to homes in the community.

• Advocates and Coordinator assist with the comprehensive assessment for VAS consumers.

• Advocate requested that a VAS consumer receive new clothes.

• A VAS consumer asked his advocate to assist him in having a senior companion. Advocate spoke with the consumer social worker and a senior companion was assigned to the consumer.

• Several VAS consumers exercise their right to make phone calls by calling their advocate.

• Advocates report to the ID teams on how the consumers responded on their visits to community homes. This gives the ID teams information to assess if placements are appropriate.

• Coordinator informed the Sonoma County Court that SDC was not following the court orders to communicate medical issues of a VAS consumer to the Coordinator.

• At an IPP meeting an advocate requested that the VAS consumer attend a socialization class in order to assist the consumer with community placement the team agreed.
An advocate suggested that a VAS consumer be given a choice of resting in bed or in a recliner.

Coordinator filed a General Event Report (GER) of possible neglect of a VAS consumer.

A VAS consumer told the Coordinator that they didn’t have access to her own funds to pay her telephone bill. The Coordinator notified SDC Quality Assurance of a possible denial of rights.

Coordinator assisted a VAS consumer in filing a Fair Hearing appeal. The Coordinator assisted the VAS consumer during the informal hearing with SDC administration.

When a VAS consumer moved into the community and found out that he had to reapply for SSI due to living on a decertified unit for over a year, the Coordinator met with the trust office to discuss the reasons and to find out if other VAS consumers had the same situation. The VAS Coordinator worked with the Regional Center for reapplication of SSI benefits. Continued monitoring.

V. Volunteers

Volunteer Advocates

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* Relatives include anyone with a family member with disabilities; providers refer to anyone employed to provide services in the system; students are anyone enrolled in school; and professionals are those employed within the system.

VOLUNTEER RECRUITMENT ACTIVITIES/
BARRIERS TO INCREASING THE NUMBER OF VOLUNTEER ADVOCATES/
RECOMMENDATIONS FOR ENHANCING RECRUITMENT EFFORTS
Canyon Springs

Five advocates were successfully recruited during this period. Four advocates have begun the orientation process with one Volunteer is awaiting fingerprint clearance. Presently they are five active Volunteers who are matched with a total of sixteen clients.

Volunteer recruitment flyers and/or presentations at the following:

- Cathedral City Library
- Workplace Development Center – Indio
- San Bernardino Business College –Cathedral City
- Cal State University –Palm Desert
- San Bernardino Valley College- San Bernardino
- University of Riverside –Palm Desert
- College of the Desert- Palm Springs
- Mayfield College-Cathedral City
- Palm Desert Library
- California State University –San Bernardino
- University of California –Palm Desert
- Desert ARC- Palm Desert
- Beaumont Public Library
- Banning Public Library
- Aqua Caliente Tribal Administration-Rancho Mirage
- Morongo Tribal Administration-Cabazon
- Desert Regional Medical Center-Palm Desert
- Eisenhower Medical Center- Rancho Mirage
- San Gorgonio Memorial Hospital –Banning
- Beaumont Community Center
- Cathedral City Community Center
- Palm Springs Community Center
- Indio Community Center

Fairview

One volunteer advocate was added to the FDC VAS Program during this first reporting period for a total of six volunteer advocates providing services during this fiscal year. Recruitment continues through word of mouth and email postings.

During the second half of FY 2015-16, no changes were made in the number of volunteer advocates providing services at FDC.
Barriers to increasing the number of advocates include:

- Position requires an extremely flexible schedule as advocates need to be available for scheduled and at times, unscheduled special meetings for their consumers.

- Potential advocates need to have a broad understanding of the range of needs of persons with developmental disabilities and what services are available to consumers within the State of California.

- Medical insurance coverage and workers’ compensation coverage is not available for volunteer advocates.

**Porterville**

The VAS Coordinator continued to recruit for an advocate (or two) for the Secure Treatment Area.

Recruitment and training of new volunteer advocates requires in-depth training to ensure safety.

The VAS project is working to enhance our services by training with “Self-Advocacy”, “Self-Determination” teaching and support materials. The VAS Coordinator meets with advocates once per month to provide materials, training, discussion and feedback. The VAS Project works closely with PDC staff to ensure client’s needs are being met on an individual, as well as collective, basis. Finding volunteer advocates that meet criteria for working in the STA continues to be a challenge.

**Sonoma**

Volunteers are recruited with referrals from previous and current volunteers. The volunteer advocacy position has been posted at Sonoma State University. Coordinator interviewed two potential volunteer advocates for this time period.

*Techniques used to enhance volunteer advocacy services:

Provide regular training opportunities for the volunteer advocates including:

- Promoting empowerment and self-advocacy among consumers.

- On-going education about rights of the developmentally disabled.

- Strategies for effective advocacy.*
- Information on Welfare and Institutions codes.

- Keep advocates informed of SDC transformation plans.

- Information on advocacy agencies or groups in the community.

### Volunteer Advocates Training

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<tr>
<th>Developmental Center</th>
<th># Training Sessions</th>
<th># Volunteer Advocates Trained</th>
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<td>6</td>
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<tr>
<td>Porterville</td>
<td>10</td>
<td>7</td>
</tr>
<tr>
<td>Sonoma</td>
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**SUMMARY OF TRAINING PROVIDED TO VOLUNTEERS PRIOR TO BEING ASSIGNED TO PROVIDE SERVICES**

**Canyon Springs**

New volunteers received training in the following areas: the VAS program, SCDD, DDS, IRC, Canyon Springs Administrative Policies, IPP, clients’ rights, boundaries, mandated reporting, confidentiality, advocacy, PALS, the Lanterman Act, contraband, self-advocacy, judicial process, and My Own Choice booklet training. New volunteers were also provided with a Canyon Springs new employee orientation, a tour of Canyon Springs and a VAS training manual.

Five volunteer advocates received training in boundaries conducted by the on-staff psychologists at Canyon Springs. Three volunteers have successfully toured Desert ARC, an off campus work program that some clients at Canyon Springs attend. Three volunteer advocates have also received training in Canyon Springs Behavior Support Procedures Manual, the PLUS Program (Pro-Social Learning System).

A volunteer is matched with a client of Canyon Springs and an initial meeting is arranged and attended by the client’s rights advocate/volunteer advocacy coordinator, volunteer, client and, any other individual(s) invited by the client.

**Fairview**

New volunteer advocates attend an eight-hour initial orientation prior to being assigned to provide direct services. Training topics include clients’ rights: confidentiality issues, various behavioral interventions; active treatment training; role of an advocate; the IPP
process, and the IDT format. Training in mandated abuse reporting is provided, along with forms and telephone numbers to access FDC staff, when abuse is observed outside of regular business hours.

Training also includes the DC charting system and where to locate pertinent information concerning the consumer. A tour of various residences and vocational sites is also provided to familiarize volunteers with the layout and visitation protocol on campus.

To further ensure success for both advocates and consumers, clients are matched with advocates with whom they feel comfortable working. When they are ready to begin their visitation, the Advocacy Coordinator personally introduces the volunteer advocate to their newly-assigned consumers, residence manager and shift charge person on that particular residence.

**Porterville**

New advocates are provided training by the VAS Coordinator and the CRA. They are given a copy of the SCDD VAS Project Training Manual and PDC Policies & Procedures. Training is on monthly basis for all advocates. Existing advocates receive updated material for their training manuals at monthly trainings. The following is a list of provided training:

- Review of the volunteer duty statement
- Confidentiality (including HIPPA)
- Client abuse and neglect
- Incident reporting of suspected abuse and neglect
- Keys, keycards, and personal alarms
- Property items allowed in Secure Treatment area
- Advocacy and client representation
- Advocacy and the IPP
- Boundary issues
- Clients' rights
- IPP meetings – Person Centered Planning
- Interdisciplinary team
- Documentation
- Grooming and Dress Code
- Personal Safety
- Advocacy Tools (Making Choices, All About Me, etc.)
- Prader-Willi Syndrome
- Transition Support
As the VAS program has been expanded to 12-month provisional placement follow-up, the VAS Coordinator provided training to staff regarding the requirements of this new aspect of our service provisions.

**Sonoma**

The training for new volunteers consists of an orientation to the Volunteer Advocacy project and an introduction to the developmental disabilities system of service. Topics include: advocacy, rights, the State Council on Developmental Disabilities, Regional Centers, the Lanterman Act, SDC policies regarding mandated reporting, the protocols to follow when taking clients off their residential unit. Advocates are reminded the importance of using the IPP for services and supports. Self-determination and empowerment are discussed in the training as well as People First and community advocacy organizations. New advocates are informed of and required to sign SCDD policies on confidentiality, the prohibition on advocates using their vehicles to transport clients as well as the prohibition on giving food or gifts to clients. Also advocates must have fingerprints on file with SDC and clear a background check. Existing advocates mentor the new advocates.

The coordinator meets frequently with advocates on a ‘walk-in’ basis or by appointment to provide support and coaching to identify strategies for effective advocacy. The coordinator assists advocates as needed by joining them at ID team meetings or during community placement visits.

**Training Provided to Advocates:**
In August 2015, the Coordinator and the CRA/VAS Project Manager discussed with advocates how to encourage VAS consumers to advocate for themselves and to make choices. The Choices book was given to the advocates to use with the VAS consumers. In December 2015, the Coordinator provided training on resident rights. In April 2015, the advocates met to discuss advocacy issues and receive a revised confidentiality statement to review and sign.

**Volunteer Advocates Stipends**

<table>
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<tr>
<th>Developmental Center</th>
<th>Number of Volunteers Paid Stipends</th>
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<tbody>
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<tr>
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<td>Porterville</td>
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</tr>
<tr>
<td>Sonoma</td>
<td>9</td>
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**Basis for Establishing the Level of Stipends**

All volunteers statewide receive a flat rate amount of $50.00 per individual per month. The volunteers dedicate four hours per month per individual served. The volunteer advocate visits or attends meetings on the individual’s behalf at least twice per month per individual assigned. The VAS Coordinator may determine compensation for extended training and/or project meetings.

**The Relationship of Stipends to Recruitment and Retention of Volunteers**

**Canyon Springs**

Individuals recently recruited for the volunteer advocate position at Canyon Springs have expressed that they are volunteering their time to give back to their community, to help persons residing at Canyon Springs Community Facility, and for personal growth.

There appears to be a direct correlation between the amount of stipend offered by VAS and the amount of success achieved in recruitment and retention of Volunteer Advocates from local areas.

**Fairview**

Stipends are an incentive to attract qualified persons to serve as advocates; e.g., those who are both experienced and knowledgeable of the California I/DD service delivery system and the people it serves.

**Porterville**

The ability to provide a stipend has a direct relationship on recruitment and retention of the volunteer advocates. Volunteers are told when initially trained, that the stipend is not to be considered a paycheck, and may not be paid on a regular basis. Many advocates see multiple clients and do not reside in Porterville thus traveling several miles to provide services. If the stipend reimbursement was no longer provided, it would negatively impact the amount and quality of services to residents at PDC.

**Sonoma**

The stipend is very important in the recruitment and retention of advocates. Many of the potential advocates that are referred to the coordinator are retired, interested in meaningful volunteer work, and also in need of supplementing their income. It would be difficult to recruit and retain volunteer advocates without a stipend.
VI. Barriers, Observations and Recommendations

**Canyon Springs**

- The Volunteer Advocacy application is a long process. It would be beneficial for the Volunteer application to be available online. Volunteer Advocacy Coordinator is coordinating with IT at Canyon Springs to assist in this matter.

- Potential Volunteers must have a flexible schedule. Several clients work off-site and after their return from work are involved in community outings. VAS Coordinator has requested and received monthly outing schedules (in advance) to give to Volunteers so they can participate with the clients on their outings.

- Being reimbursed for services provided (stipend). Volunteers are reminded during initial training that the stipend should not be considered a regular paycheck and upon occasion may not be paid on a regular basis. Volunteers continue to count on the stipend as a paycheck. If the stipend reimbursement were no longer available, the Advocacy Program would be impacted.

- Commitment by volunteers for six months’ requirement for participation in VAS project: Several applicants to the Volunteer Program have shared that they cannot commit to this period of time. It is recommended that this time be shortened so more individuals/volunteers are able to participate in the program.

- Canyon Springs’ population is changing: It has been challenging to find volunteers willing to work with the forensic population. Training is being provided to the volunteers by psychologists and social workers to incorporate this new population.

- Lack of communication with the VAS Program: Volunteers are not notified when clients are recommended for off-site work programs, transitioning into the community, have special meetings or placed in the hospital. VAS Coordinator met with administration to give contact information and requested that this information be distributed to appropriate staff.

- Currently there are only three clients that attend an off-site work program that has a contract with Canyon Springs. Several clients have requested to work offsite to their volunteer. It would be beneficial for Canyon Springs to locate other work options/opportunities for the clients. Volunteer Advocacy Coordinator has reached out to the Department of Rehabilitation for some assistance in this issue.

- Timely transitioning into the community: Several clients involved in the VAS Program have been identified and are involved in the transitioning process. One
client has been in transition for over eleven months. Several reasons are given for these delays, however this client is waiting for a conclusion. Transition planning is needed with proposed dates for a less stressful community placement.

**Fairview**

- With the return of more VAS consumers to their home communities, volunteer advocates will be limited to visit consumers who move outside the greater Orange County area.

- In some instances, the FDC VAS office has not been informed of quarterly IPP meetings held by RC staff. Usually the regional center facility liaison schedules those meetings, and may not know of all the previous ID team members included in a community placement from the developmental centers. We will continue to contact service providers and regional center case managers to schedule follow up visits for all VAS consumers who now reside in the community.

- At various times during the year, stipend reimbursements are not received during the usual timeframes. This creates additional follow up for the VAS coordinator and the regional office staff to track payments. No knowledge of any other alternate remedies when payments are delayed.

- Recommendation: a mileage reimbursement should be considered for all volunteer advocates.

- Recommendation: VAS Coordinator to obtain the contact information for regional center facility liaison of the facilities which VAS consumers reside.

- Recommendation: Due to inability to accurately track stipend reimbursements through Department of Social Services (the designated state agency whom SCDD contracts for human resource services), an electronic system would expedite the stipend transaction.

**Porterville**

Although we currently have a waiting list, for clients needing services (referrals continue to arrive weekly from IPP Teams and Social Workers) overall quality of services has increased. As more clients are identified for placement in the community, PDC staff and advocates have worked together to ensure smooth transitions.

Several of the recent admissions to the STA have history in jails and prisons. The VAS Coordinator provided training to advocates regarding manipulation tactics utilizing
“Anatomy of a Set-up” training tool. Cell phones and drugs which are considered contraband have been found in the STA. One PDC staff and one Senior Companion have been identified as accomplices in providing this contraband to residents.

**Sonoma**

Recommendations:

- **Provide each consumer with a volunteer advocate:** A majority of the consumers in the VAS project have advocates. Coordinator is reaching out to the community to find advocates to serve those in the VAS project that do not currently have advocates.

- **Facilitating communication:** Coordinator continues to advocate for better communication between SDC staff and advocates regarding changes in medical, medication, procedures, and general health condition. Coordinator makes sure that the Social Workers and advocates have each other’s current contact information.

- **Advocacy services:** Coordinator currently serves nine consumers that do not have an advocate.

Barriers:

- **SDC is not close to main urban areas of Sonoma County and this makes it difficult to recruit advocates.**

Trends within SDC observed during reporting period:

- **With decreases in SDC’s population there are fewer units for specialized needs of residents.**

- **Staff shortages continue to affect the quality of services for VAS consumers. VAS consumers are often assisted by unfamiliar staff that are not aware of their specific needs and preferences.**

- **The transition plans for two VAS consumers from Northern Star to the community were not adequate to meet their needs. One VAS consumer lost their community placement and is currently being served by the community crises team. The other VAS consumer did not have adequately trained staff.**
VAS

ROSTER
<table>
<thead>
<tr>
<th>State Developmental Center</th>
<th>Project Coordinator</th>
<th>Address</th>
<th>Telephone Number</th>
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<tbody>
<tr>
<td>Canyon Springs</td>
<td>Robbin Puccio</td>
<td>69-696 Ramon Road Cathedral City, CA 92234</td>
<td>(760) 770-6238</td>
<td>(760) 770-0581</td>
<td><a href="mailto:Robbin.puccio@cs.dds.ca.gov">Robbin.puccio@cs.dds.ca.gov</a></td>
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<tr>
<td>Fairview</td>
<td>Gail Skvirsky-Bohn</td>
<td>2501 Harbor Blvd Building 19 Costa Mesa, CA 92626</td>
<td>(714) 957-5082</td>
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<tr>
<td>Porterville</td>
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<tr>
<td>Headquarters</td>
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<td>(408) 834-2458</td>
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