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, 2016 to June 30, 2017.

The unique characteristic of each center and facility is reflected in the information, observations and recommendations submitted by each office.
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<tr>
<th></th>
<th>Canyon Springs</th>
<th>Fairview</th>
<th>Porterville</th>
<th>Sonoma</th>
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<td>Number of Residents Provided Services</td>
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<td># of Residents Served by Volunteer Advocates</td>
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<td># of Residents Served by the Coordinator</td>
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### Average # of Contacts Per Month by the Coordinator with Each Resident Served
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<tr>
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### Average # of Individual Related Meetings Attended per month
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### # of Self-Advocacy Groups Facilitated by the Coordinators and Volunteers
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### # of Volunteer Advocates
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### # of Volunteer Advocate Training Sessions
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### # of Volunteer Advocates Trained
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### # of Volunteers Paid Stipends
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### Nature, Status and Outcome of Complaints Filed Under the SCDD Grievance Procedure

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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 6/30/2017</th>
<th>Number Referred for Services</th>
<th>Number of Residents Provided Services</th>
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<tbody>
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<tr>
<td>Fairview</td>
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<tr>
<td>Porterville</td>
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<tr>
<td>Sonoma</td>
<td>259</td>
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<td>77</td>
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Residents Referred for 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>
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<td>Fairview</td>
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<td>23</td>
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<tr>
<td>Porterville</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.

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>
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</thead>
<tbody>
<tr>
<td>Canyon Springs</td>
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<td>23</td>
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<td>4</td>
<td>4</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Fairview</td>
<td>26</td>
<td>23</td>
<td>49</td>
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<tr>
<td>Porterville</td>
<td>87</td>
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<td>Sonoma</td>
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* If a resident is in the forensic program, he/she are identified 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>Average # of Individual Related Meetings attended per month</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canyon Springs</td>
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<tr>
<td>Sonoma</td>
<td>76</td>
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* In some instances, a resident might be served by both a volunteer and staff, depending upon their needs.

**ADVOCACY ASSISTANCE PROVIDED BY VOLUNTEERS**

**Canyon Springs**

Volunteer advocates and Coordinator attend individual meetings, special team meetings, and transition meetings with clients. They attend pre-transition meetings, transition meetings and thirty day meetings once clients are placed in the community. Advocates meet with their consumers on a weekly and bi-weekly basis.

Advocates review the Plus Program with their clients to ensure they have a good understanding of the new program and their point system.

Volunteer advocates participate in Walk to Work activities with the clients on Mondays, Wednesdays, and Friday mornings. This support provides the client with opportunities for exercising (walking) around the facility and added time for positive communication and support.

Volunteer advocates have assisted clients in meeting preparation by providing encouragement, support and planning. They have also practiced with clients on what they will say at their meetings and suggestions on what to expect.

Volunteer advocates meet with several clients in assisting with their selection and transition to group homes. Advocates assist clients in transitioning to their new homes by helping them come up with budgets, telephone numbers and addresses to community based agencies including advocacy resources in the area. Advocates continue contact via phone and/or e-mail usually on a weekly basis.
Volunteer advocates continue to visit with consumers several times per month. Advocates attend any meetings scheduled for the consumer. The various types of meetings they attend include annual individual program plan meetings (IPPs), special conferences and several types of placement planning meetings, from the Meet & Greet (MG), to the Transition Planning Meeting (TPM) and the Transition Review Meeting (TRM). Advocates have continued to visit and follow up with consumers once they move into the community at various intervals as required. These visits include face to face visits at the fifth day living at the home, the thirty day IPP meeting, the ninety day meeting, the six month meeting, and the one year IPP meeting with their consumer. In some cases, the advocates will conduct a sixty day IPP meeting. The advocates follow the consumer for one year after leaving Fairview. They stay in contact with them or the facility staff by phone during the months when no meetings are held. These community meetings are usually held at the home or at the day programs. Volunteers are also required to complete documentation of their visits on several different forms developed for community follow up for all VAS consumers.

**Summary of advocacy provided by volunteers during the first part of fiscal year 2016-17**

- Volunteer advocate assisted the consumer to facilitate continued campus access as consumer’s key card needed to be re-programmed. She ensured the consumer continued to have free access to the FDC campus.

- Consumer was able to attend the Orange County Fair through the advocacy efforts of her advocate.

- Volunteer advocate provided consultation to consultants to assist in the completion of initial whole person assessment.

- Ongoing follow up by volunteer advocate concerning the provision of appropriate services and supports for consumer who transitioned into the community. This consumer enjoyed being outside. The volunteer advocate supported the home staff by making suggestions concerning safe methods for her consumer to enjoy the yard and other outdoor areas of the home while managing behaviors. As a result of her efforts, a glider sofa was placed on the front porch of the home for the consumer to enjoy watching the neighborhood activity. Chimes and other enhancements were added to the front yard of the home for her enjoyment.

- Volunteer advocate supported consumer in his request during his IPP meeting for independent campus access. As a result, the consumer now is shadowed to
and around campus. His advocate will assist him to request this be reviewed within a six-month period.

- One volunteer advocate attended a holiday family dinner and had the opportunity to meet and visit with several consumers’ family members. She offered a suggestion to not overfeed their family member during this special event, as he is known to get sick if he consumes an excessive amount of food.

**Summary of advocacy provided by volunteers during the second half of fiscal year 2016-17**

- Volunteer advocate requested consumer to have an extra pair of special shoes when her only pair was wet after a rainstorm.

- Volunteer advocate makes frequent contacts with consumer who lives in the community and ensures she has a variety of new opportunities.

**Porterville**

A total of 100 residents have been referred for advocacy assistance from the Volunteer Advocacy Services Program this reporting period. Currently, 100 of these residents are assigned a volunteer advocate and receive weekly services. In 2016, there was an increase in residents on the STA side of PDC. This impacts our service numbers as we seek to provide new residents all the supports and services our program has to offer. Our numbers are also impacted by the amount of clients (primarily from the GTA) that are transitioning to the community.

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 and special meetings. They attend as many meetings as possible for their assigned clients but sometimes ask another volunteer, or the Coordinator, 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 residents are appropriately attired, concerns with medication 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 residents 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.

Volunteers are the "eyes and ears" of the project. They 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 general services).

**Sonoma**

Advocates provide support for consumers in exercising their rights and promoting self advocacy. They assist in problem solving with the consumer for increased independence. Advocates visit potential residential homes targeted for their clients. The advocates assist the ID team by confirming that the Residential Service Provider will meet consumer’s needs. Examples include:

- At team meetings, advocates recommend the services needed for community placement for VAS consumers.

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

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

- A VAS consumer told his advocate that he didn’t have any of his beverages in his refrigerator. The advocate spoke with unit staff and the VAS consumer received his beverages.

- An advocate requested that a VAS consumer who had restricted access to the SDC campus be allowed to play basketball and go on hikes with staff.
• At a VAS consumer’s unit transfer meeting, the VAS advocate requested that the VAS consumer continue attending the same offsite program after the transfer. The team accepted the request.

• An advocate informed the Coordinator that some VAS consumers were not wearing weather appropriate clothing. The Coordinator spoke with SDC Clinical Director regarding this problem. The Clinical Director followed up on the issue with Program Directors.

• VAS advocate and Coordinator met with SLS provider regarding VAS consumer living in the community not attending a day program. The SLS agency provided staff so that the VAS consumer could start attending a day program part time.

• Coordinator discussed with SDC program assistant a request by SDC staff of turning off the unit door opener to keep a resident from leaving the unit. It was decided that other methods should be utilized to keep the residents safe.

• For a VAS consumer with a bee allergy to take a walk outside an advocate requested a bee net be installed on the VAS consumer’s wheelchair. The VAS consumer was able to enjoy being outside.

• Coordinator spoke with DDS staff regarding concerns of lack of follow up of residents discharged from the Northern Star Unit. Monitoring to continue.

• Coordinator informed a Sonoma County Public Defender that SDC residents are followed for up to one year in the community by the Sonoma Regional Project and sometimes the VAS Project.

• During a conservatorship hearing, Coordinator advocated for that the right of social contacts for a VAS consumer be removed from the Conservatorship powers. The Conservator decided not to request that power.

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 all 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 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 attended a Bio-ethics Committee meeting on a request for a Do Not Resuscitate order for a VAS consumer.

- On two occasions, advocates noticed VAS consumers were hitting or scratching their ears. The advocates notified doctors and staff. In both cases the VAS consumers had ear infections.

- Advocates participated in two special meetings regarding hospice care for VAS consumers.

- An advocate assisted a SDC speech therapist in developing a communication passport for a VAS consumer.

- Advocate attended two discharge meetings from General Acute Care for VAS consumer.

- An advocate noticed a VAS consumer had an unsteady gait and notified unit staff.

- Often advocates will follow up on medical issues regarding VAS consumers.

- Advocate attended a client protection plan meeting for a VAS consumer that collapsed several times.

- An advocate alerted staff that a VAS consumer had a bruise near the eye.

- Due to a VAS consumer’s health issues the advocate requested that a home visit prior to moving not be done. The team agreed with the advocate.

- An advocate informed staff that a VAS consumer was sneezing and looked ill. The staff notified the unit nurse.

- An SDC Speech Therapist requested an advocate, who knows the VAS consumer well, to help evaluate if a VAS consumer can eat orally.

- At a ninety day review meeting, an advocate requested that a VAS consumer receive repositioning at the consumer’s program.
<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>Average # of Individual Related Meetings Attended</th>
<th># of Self-Advocacy Groups Facilitated by the Coordinators and Volunteers</th>
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<td>Sonoma</td>
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* In some instances, a resident might be served by both the Coordinator and volunteer advocate, depending upon his or her needs.

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

**Canyon Springs**

The Coordinator has an average of six to eight contacts on a monthly basis with clients who are eligible for advocacy services. Clients are visited on and off campus work sites. The VAS Coordinator has assisted clients with obtaining information regarding dates for their court appearances and writing letters to their Regional Center Service Coordinators.

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 their work areas both on campus and off. This affords the opportunity to meet informally with clients and discuss personal advocacy, program goals, diet, exercise, the judicial process, human rights, client rights, work place issues and other concerns. Flyers and brochures, which clients assisted in creating, are posted/placed throughout the facility and in the community with information on obtaining a volunteer advocate.

The VAS 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 provides advocacy training monthly. The VAS Coordinator consults with the assigned volunteers prior to some meetings to assist with any concerns and attends meetings if needed.
The VAS Coordinator is a member of the Human Rights Committee and the Quality Assurance Meetings that are held monthly. As a member of these committees, the Coordinator reviews changes/additions in medications and/or their treatment plans and assists with making recommendations as requested by the client.

The VAS Coordinator provides block and orientation training regarding advocacy, and SCDD philosophy and goals.

The VAS Coordinator distributes a monthly calendar of scheduled annual/semi-annual IPP meetings and monthly training calendars to all volunteer advocates.

The VAS Coordinator has visited four clients that transitioned into the community, and calls them weekly. The VAS Coordinator has four clients that are due to transition into the community in this period.

**Fairview**

Summary of advocacy provided by Coordinator during the first part of fiscal year 2016-17

- Project Coordinator requests and reviews all annual IPP and any special meeting reports for all new consumers to Volunteer Advocacy Services program. An initial face-to-face meeting is conducted to meet the consumer, if there is a successful match.

- Project Coordinator requests and reviews annual whole person assessments (WPA’s) for all VAS consumers.

- Project Coordinator requested a tour for a VAS consumer who wanted to view various community residential models available in the community. As a result, VAS consumers are attending open houses at several new facilities and day programs in the Orange County area when available.

- Project Coordinator and her advocate visited consumer at her new day program and provided information to the program about her skills and service needs. This was completed because cross training was never completed with day program staff at Fairview DC prior to her move to the community.

- Project Coordinator reviewed behavioral training assessment and data at consumer’s new home to discover that baseline data was not being collected on several potentially dangerous behaviors for that consumer. Community facility administrative staff and Regional Center worker were made aware of potential health and safety concerns regarding this consumer’s level of supervision.
Due to ongoing falls and previous sustained injuries, Project Coordinator requested a special meeting concerning ongoing protection measures for a VAS consumer. As a result, this consumer is now provided increased supervision to keep her safe and free from further injuries.

During a visit with a VAS consumer, consumer made a request to purchase a clock for his room. This request was forwarded to residence manager for follow-up. Consumer now has a clock on the wall in his room, so he can independently follow his daily schedule.

Project Coordinator visited a VAS consumer with a history of elopement at five days after moving into the facility. Discovery was made that the home is located on a busy main street and safety concerns for this consumer were raised. Project Coordinator contacted Regional Center case manager concerning adequate supervision to keep her safe. Regional Center has since provided an increase in her supervision to 1:1 during her transition to the community.

During transition planning meeting, Project Coordinator recommended that formal social skills and boundary training be provided as part of consumer’s transition to the community. This VAS consumer has a long history of inappropriate social interactions with both peers and staff. Training is needed on an ongoing basis when he moves back to the community.

Project Coordinator continues to assist VAS consumer with her requests to purchase specific hygiene items from her personal trust fund through her Trustee.

Summary of advocacy provided by Coordinator during the second part of fiscal year 2016-17

Project Coordinator requested, on behalf of a VAS consumer, to conduct group sessions with all FDC consumers about FDC closure and the process in selecting a community setting. Consumers are increasingly anxious about the closure as both staff and peers continue to leave.

During transition review meeting, Project Coordinator requested additional supports for consumer when he is riding in a vehicle as he continues to attempt to unfasten his seat belt. Facility staff provides close 1:1 supervision while he is in a vehicle.

Project Coordinator requested if a Volunteer Advocate is not feeling well and has a community meeting to attend, (especially in a medical type home/ARFPSHN)
to notify the VAS Coordinator so another advocate can attend rather than bring any contaminants into the facility.

**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 the advocacy office. Mainly of the calls are from clients in the STA seeking court information or transition information. PDC staff often call on behalf of clients seeking information or assistance.

**Sonoma**

Coordinator participated in 165 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 three meetings regarding health issues of VAS participants. Also, Coordinator attends meetings when a volunteer advocate can’t attend.

Coordinator presented seventeen rights training sessions to SDC residents. The training includes: information on voting, community living options, and personal rights. Some of these trainings were assisted by SDC active treatment team or by SCDD North Bay Regional Office manager. In addition the Coordinator assisted the OCRA in nine Community Living Options trainings for SDC residents.

Coordinator made fifteen presentations at SDC employee orientations. At the orientations there were a total of 104 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 are contacted when there is a bioethical issues 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 their meetings.

• Coordinator attended one Client Protection Plan meeting regarding a consumer 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.

• 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 participated in an interpretive conference with a Northern Star resident that asked to move. The Coordinator filed a Writ of Habeas Corpus for the resident to leave SDC. The court granted the Writ.

• 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 scheduled trainings with SDC Program Director for Community Living Options for residents of the nursing program.

• When covering for the CRA, Coordinator attends the Whole Person Review meetings, Policy Review Committee, and SDC Psychological/Sexual Committee meetings.

• Coordinator is a member of SDC Resident Transition Advisor Group. 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.

- Coordinator was informed by an advocate of a medical restraint being used without proper consents. Coordinator notified SDC Quality Assurance of possible rights violation.

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

**Canyon Springs**

The number of clients being served has increased with increasing the number of clients per Advocate.

There are more services provided to clients with the full –time VAS Coordinator on-site. The VAS Coordinator spends more time with each client getting to know their requests for a Volunteer Advocate and how better to match the client with a Volunteer Advocate.

The new VAS Coordinator meets with Program Director, Unit Supervisors and Executive Director to pass-on information from the community that would benefit the clients. The VAS Coordinator is working with the SCDD Regional Office in San Bernardino and has scheduled monthly self-advocacy meetings on-site. The VAS Coordinator is working with the OCRA Clients Rights Advocate on-site with new self-advocacy training and clients meetings.

**Fairview**

During the first reporting period of FY 2016-17, approximately the same number of meetings was attended by both the Project Coordinator and volunteer advocates due to the increase of VAS consumers in active transition to the community.

During the first four months of the second half of FY 2016-17, the Project Coordinator attended more meetings due to the increase of VAS consumers who have moved back to the community during this time. As of May 1, services provided by the Project Coordinator has decreased due to the Project Coordinator retiring and becoming a Volunteer Advocate herself. She continued to follow most of the consumers she was following as Project Coordinator. Volunteer Advocates continue to attend approximately the same number of meetings during this reporting period.
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 2016. Volunteer Advocates were also in attendance and aided in facilitation of training and presentation of support materials. The Coordinator also attends monthly People First Meetings in both the STA and GTA.

The incumbent VAS Coordinator retired in May 2017. The CRA served as Acting Coordinator. Recruitment is underway to replace the VAS Coordinator. The CRA/VAS Program Manager and other SCDD project staff continue to provide coverage as needed.

Sonoma

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, fourteen VAS consumers have moved into the community.

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 September 29th 2016 the Opportunity Fair Committee held the Options and Opportunities Fair. The fair provided information on community living options for SDC residents, their families and SDC staff. There were twenty-five community providers that presented information about their services. In addition, five regional centers provided information 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 eighty people attended the fair.

IV. Service Outcomes

Canyon Springs

Volunteer advocates meet with their assigned Clients on a weekly or bi-weekly basis to discuss the progress made in their individual program plans, work assignments and living arrangements.

- Client shared with volunteer that he was having problems getting hold of his family. Volunteer assisted client with notifying social worker, who provided
telephone numbers and addresses to client. Volunteer assisted client in writing a letter to his family.

- Client requested assistance in attending a concert in the community. Volunteer assisted client in looking up on the computer prices for tickets and date of concert. Client attended concert and purchased a cd online.

- A client, who had transitioned (into the community) shared with his Volunteer that he was having problems at his work site. Volunteer assisted in writing his expectations down and notifying staff both at his home and at his job site. A meeting was held and issues were addressed and resolved.

- Client shared with volunteer that he wanted to save money for transitioning into the community. Volunteer and client created a schedule for them to meet and helped him devise a workable budget and encouraging him to save.

- Client shared with volunteer that he didn’t want to work at an on-campus site. Volunteer advocate and Volunteer Coordinator scheduled a tour to off-campus work site. Client saw several different work programs, chose one, and is now working off-campus.

- Five female clients asked VAS Coordinator for assistance with getting their hair cut out in the community. VAS Coordinator arranged for free haircuts and blow dry coupons at the local beauty school. Staff at CS arranged for the appointments and took clients to appointments. VAS Coordinator shares with Staff when the clients ask for appointments, after suggesting to client to self advocate.

- VAS Coordinator suggested to Unit Supervisor that the clients might like to create Goals/Vision Boards by cutting out magazines and gluing onto poster board. Staff arranged the activity and VAS Coordinator assisted and provided boxes of magazines.

Six advocates were recruited during this year. Three advocates are still in the hiring process at time of report writing.

**Fairview**

**Service Outcomes during first half of FY 2016-17**

VAS Coordinator completed and distributed monthly calendars of all IPP, special and/or transition meetings scheduled so volunteer advocates are able to attend.
Monthly calendar of all FDC activities/special events are forwarded to VAS advocates so they can assist VAS consumers in attending as many facility and community events as possible.

Joint meeting with VAS advocates and South Coast Regional Project staff was held so coordination can be made between agencies for visits with VAS consumers who have returned to the community.

Project Coordinator and SCDD Regional Office staff provided an overview of the Self-Determination Program to the Fairview Family and Friends meeting held at Fairview DC.

Project Coordinator and volunteer advocates continue to attend all community meeting for VAS consumers who have moved back to their home communities. VAS staff attended nine various meetings in the community during this period.

Project Coordinator participated in a transition review meeting. Information was provided that this VAS consumer requires additional medical services, blood sugar monitoring and insulin administration adjustments that was not available at the proposed community home. Both Project Coordinator and her volunteer advocate continue to provide ongoing support to the consumer, who was initially quite disappointed but then soon became excited about her future of moving into another community residential program. Her regional center is exploring another placement resources that will be better equipped to meet both her medical and behavioral needs.

Advocacy Coordinator and volunteer advocate toured potential community home for a VAS consumer. This consumer enjoys keeping physically active. Advocate ensured that the home and neighborhood were conducive to meet his needs.

Advocacy Coordinator toured another community home targeted for two female VAS clients. After consulting with the facility owner/administrator determination was made that the home will meet their needs.

Community supports training was provided by SCDD Regional Office staff to all Fairview VAS volunteer advocates since they will be closely following consumers when consumers move back to their home communities.

VAS Team will continue to provide support in all phases of transition activities for the twelve VAS consumers currently in varying stages of transition from Fairview DC to community settings.

VAS Coordinator continues to monitor that consumers’ Regional Center staff are able to participate in all of consumers meetings.
Request and review of all Regional Center and day program’s IPPs, reports and incident reports for VAS consumers who are now living in the community.

**Service Outcomes during second half of FY 2016-17**

Project Coordinator participated in monthly IPP meetings for VAS consumer in Southern STAR program.

Nine Meet & Greet meetings held with VAS consumers

Eleven Transition Planning Meetings (TPM) held with VAS consumers

Fourteen Transition Review Meetings (TRM) held with VAS consumers

Twenty-eight face to face meetings were completed for VAS consumers living in the community. These visits include face to face visits at 5 days, 30 day, 60 and or 90 days, and one year time periods from leaving FDC.

All six FDC Volunteer Advocates are currently visiting consumers in the community and assessing that all their needs are being met.

Requested copies and reviewed annual Whole Person Assessments for all VAS consumers.

Requested and reviewed of all Regional Center and day program’s IPPs, reports and incident reports for VAS consumers who are now living in the community.

VAS Coordinator was in contact with the identified regional center regarding the death of a VAS consumer to ensure proper family notification and dispersal of personal items.

**Porterville**

Volunteer Advocates work specifically with consumers on an individual basis following Individual Program Plans (IPPs) goals. They provide training, support and encouragement while focusing on self-advocacy goals. Many of the 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 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. Both were, immediately assigned back with their previous advocate to help with transitioning, training reinforcement and support.

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

• As more clients transition, remaining clients are moved within the facility while units consolidate. Clients face constant change in their routine and are assisted by unfamiliar faces. The VAS project provided focused support for all impacted.

During this reporting period, we have had special training in Person Centered Planning. This is very beneficial material in working with our clients and helping them during their IPP and/or Special IPP Meetings.

As more consumers are transitioned to community placement all advocates have a client or multiple clients that are increasingly anxious about their future. Many of the GTA consumers have spent their entire lives at PDC and the thought of change is very difficult to process for them. However, the advocates are helping our consumers by focusing on the positive aspects of these changes. They are using our “Choices” materials as reinforcement.

Sonoma

• Coordinator and advocate requested that when a resident from the nursing facility (NF) is a patient of a community hospital that SDC staff be with the resident to provide support to the resident and communicate resident’s medical needs to hospital staff. This is now standard practice for all NF residents.

• Advocate concerned that a VAS consumer with complex seizure disorder asked Unit Supervisor to have the consumer moved closer the nursing station. The ID team agreed that the consumer should be moved to another unit where staff are more familiar with the consumer’s needs.

• When a VAS consumer is agitated the unit staff has her call her advocate. The advocate helps the consumer calm down.

• An advocate assisted an SDC speech therapist in developing communication passports for VAS consumers.
• An advocate along with SDC dental hygienist showed staff the best approaches of cleaning the teeth of two VAS consumers.

• Coordinator regularly meets with regional center case managers regarding specific needs for VAS consumers when move they transfer to the community.

• 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.

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

• An advocate informed unit staff that a VAS consumer’s fingernails were too long and needed to be trimmed.

• 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 encourages SDC to assist residents in appearing at their commitment review hearings. Coordinator reports on residents court attendance to SDC human rights committee.

• An advocate noticed that a VAS consumer was indicating that he wanted to get out of bed. The advocate informed the lead staff and the consumer was assisted out of bed.

• Coordinator and advocate requested to a regional center case manager that a VAS consumer living in the community start to attend a day program. The VAS consumer will start attending the day program in July.

• To assist a VAS consumer in moving to the community an advocate requested that the regional center case manager schedule the move date. The advocate wanted to assure that the VAS consumer feels comfortable with the move.

• An advocate assisted an SDC social worker in taking a VAS consumer on van rides in order to desensitize the consumer before community placement.
• At a five-day community review meeting the advocate made suggestions to day program staff on how to work with a VAS consumer such as the type of sign language the VAS consumer uses. Also, the advocate made suggestions on encouraging the consumer to dress appropriately.

• A new Unit Supervisor consulted with a VAS advocate regarding a VAS consumer’s behaviors.

V. Volunteers

Volunteer Advocates

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<th>Developmental Center</th>
<th>Male(s)</th>
<th>Female(s)</th>
<th>Persons with Disabilities</th>
<th>Relative(s)</th>
<th>Providers</th>
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<th>Professionals</th>
<th>Foster Grandparents</th>
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* Relatives include anyone with a family member with disabilities; providers refers 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 volunteers were successfully recruited and began orientation. They were assigned clients and see them regularly. Presently there are seven active volunteers with one volunteer on leave of absence due to illness.

Volunteer recruitment consisted of the following: flyers posted at Canyon Springs and local community centers, agencies, hospitals, libraries, medical clinics, professional organizations and colleges. Volunteer Advocates have brought in leads for other potential volunteers and continue to inform the local community about opportunities. The VAS coordinator has met with individuals from other agencies, churches, schools, libraries, professional organizations, and colleges to present the program mission and to build community relationships.
The Vas coordinator continues to go in the community where the volunteer advocate program was explained, questions fielded and flyers left. In addition, flyers were left several times during this reporting period at the public libraries, visitor centers and community centers in Cathedral City, La Quinta, Desert Hot Springs, Palm Desert, Palm Springs and Indio.

The VAS Coordinator has contacted California State University Palm Desert and College of the Desert. Informational materials was taken and distributed on campus. Flyers were also left at these locations by the clients themselves.

Recommendations for future recruitment include community presentations at local colleges, community groups and churches.

The VAS Coordinator continues to be in contact with area colleges and schedule community presentations. Several clients that are presently in the program have expressed an interest in assisting with this outreach. Current volunteer advocates will be recruited to assist with community outreach. This has been done in the past and has been, according to the volunteers, very rewarding.

Volunteer training and orientation is a lengthy process. Although the VAS Coordinator can train anytime, mandatory facility training occurs twice a month at best. Most volunteers want to begin volunteering immediately.

Volunteers must have an extremely flexible schedule in order to attend consumer meetings including special meetings that are scheduled. Often, volunteers are given short notice to attend. Volunteers are asked to give a six-month commitment and many of the volunteers have outside jobs/careers.

Barriers for obtaining and recruiting volunteers are:

- Clients residing at Canyon Springs are involved in daily scheduled outings and are not always on site.
- Some clients at Canyon Springs are involved in off-site work projects meaning clients are not available for visits during their work hours.
- Medical/Dental insurance compensation is not offered/available.
- Volunteers need to have some comprehension concerning the service population and services available to them.
- Training time is long and extensive.
- Flexible schedules: volunteers must be available for scheduled and some unscheduled meetings.
- Reimbursement: volunteers are paid by stipends, which can take 30/60/90 days before receiving payment.
• Not all Volunteer Advocates are able to travel to visit in the community once the client is placed.

**Fairview**

Currently there are six volunteer advocates participating in Fairview VAS Program during this reporting period. One advocate had not been able to visit her consumers due to an injury and her recovery for one month. This advocate has since recovered and has resumed her activities with the program.

Description of barriers to increasing the number of volunteer advocates:

- The volunteer advocate duties require that they have an extremely flexible schedule, as they need to be available for scheduled and, at times, unscheduled special meetings with the consumer.

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

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

- Review of budget allocation for volunteer advocates is reviewed on an annual basis

- The stipend payment is processed on a roving basis without a set pay date.

**Porterville**

Recruitment and training of new volunteer advocates requires in-depth training. Ensuring that the volunteer advocates understand safety measures to adequately protect themselves and the residents, as well as the purpose and mission of the program remains a priority. Recruitment for appropriate advocates for the Secure Treatment Area is a constant activity.

The program is striving to enhance our services by training with “Self-Advocacy”, “Self-Determination” teaching and support materials. The Coordinator met with advocates once per month to provide materials and training, discussion and feedback. We also work closely with PDC staff to ensure clients’ needs are being met on an individual as well as collective, basis. The program is focusing heavily on helping clients understand the community transition process.
**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.

**Recommendations to enhance volunteer advocacy services:**

Continue to provide regular training opportunities for the volunteer advocates including:

- Promoting empowerment and self-advocacy among consumers
- On-going education about rights of the service population
- Client protection and mandated reporting
- Keep advocates informed of SDC transformation plans
- Information on advocacy agencies or groups in the community

### Volunteer Advocates Training

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<th>Developmental Center</th>
<th># Training Sessions</th>
<th># Volunteer Advocates Trained</th>
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</tr>
<tr>
<td><strong>Sonoma</strong></td>
<td>2</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, PLUS PROGRAM, the Lanterman Act, contraband, self-advocacy, judicial process, My Own Choice and Active Treatment Crisis Management (ATCM). Volunteers are also provided with an orientation and tour of Canyon Springs and a VAS training manual.
A volunteer is matched with a client at Canyon Springs by mutual agreement between both parties. An initial meeting is arranged and attended by the VAS program coordinator, volunteer, and, sometimes the Individual Program Coordinator and/or Standards Compliance Coordinator.

**Fairview**

Two trainings were provided to VAS volunteer advocates during the first part of this reporting period. One training was in coordination with South Coast Regional Project staff and focused on community follow up. Advocates were trained in proper documentation for consumers who have returned to their home communities. The second training was provided by the SCDD Orange County regional office staff concerning community supports in the community. This training provided VAS advocates further clarification of the type of services and supports available to consumers who move back into the community.

During the second half of FY 2016017, one training was provided to the VAS Volunteer Advocates. The subject was end of life decisions. Discussion was how both FDC and community hospitals follow and/or develop end of life plans and decisions for consumers.

**Porterville**

The VAS Coordinator and the CRA provide new advocates training. Volunteer advocates and are given a copy of the Training Manual with project and PDC policies and 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 (not inclusive):

- Review of the volunteer duty statement
- Confidentiality
- 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
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 activities, 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. The new advocates are mentored by existing advocates.

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.

Volunteer Advocates Stipends

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<td>Sonoma</td>
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**BASIS FOR ESTABLISHING THE LEVEL OF STIPENDS**

All volunteers statewide receive a flat rate amount of $75.00 per individual per month. The volunteers dedicate three 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.
Volunteer advocates visit, attend all meetings, and keep in phone/email contact with individuals who transition to the community for one year after placement. Advocates attend the following meetings: five day, thirty day, ninety day, six month, and one year. During months with no set meeting, advocates visit and/or connect via telephone or email with the client or residential vendor staff.

**THE RELATIONSHIP OF STIPENDS TO RECRUITMENT AND RETENTION OF VOLUNTEERS**

**Canyon Springs**

Individuals recently recruited for the volunteer 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, for personal growth and because they believe it to be worthy of their time.

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 schools.

**Fairview**

Stipends are a motivator to maintain qualified persons to provide advocacy for Fairview VAS consumers both at FDC and in the community.

**Porterville**

The ability to provide a stipend has a direct relationship on recruitment and retention of the volunteer advocates. Volunteers are informed when initially trained, that the stipend may not be paid on a regular basis. Many advocates see multiple clients and do not reside in Porterville. They travel several miles to provide services. If the stipend reimbursement were 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. With the increase in transitional activities the volunteer advocates are participating in more transitional meetings and five face to face meetings after VAS consumers move into the community. 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**

Communication: Volunteer Advocates have shared that they experienced difficulties arranging visits with the clients at Canyon Springs. Several attempts to alert staff must be made in order to schedule a visit with clients at Canyon Springs. The Volunteer Coordinator met with Canyon Springs’ administration. Alternative telephone numbers have been provided to them. These numbers include those of the Office of Protective Service (OPS) and the administrator on duty (AOD).

The VAS Coordinator provided a list of clients and advocates to Program Director. A thorough walk through of the facility with VAS Coordinator introducing Volunteer Advocate to Program Director, Executive Director and all staff. OPS meets each Volunteer Advocate when issuing a facility badge. VAS Coordinator requested OPS to provide a picture collage of Volunteer Advocates so that staff may match faces with names.

**Fairview**

Some current VAS advocates are not able to travel outside of Orange County for follow-up of VAS consumers moving into other counties. Therefore, the Project Coordinator will attend the meetings for the VAS consumers no longer residing in Orange County where the advocate will not be following them. Recruitment is underway to recruit advocates located in the areas where clients are transitioned.

The VAS office may not be notified of scheduled quarterly meetings in the community as cases are often transferred to the Regional Center facility liaison that may be unaware of involvement of VAS program for those consumers.

All VAS advocates are encouraged to accompany the South Coast Regional Project staff during all follow-up meetings for VAS consumers.

The VAS Coordinator will remain in contact with Regional Center DC liaisons and the new Regional Center workers assigned to each VAS consumer.

**Porterville**

As more clients are identified for placement in the community, staff and advocates have worked together to ensure smooth transitions. Advocates do their best to attend every transition meeting. Advocates have expressed enthusiasm at the progress and growth clients experience when offered choices and individualized plans in the community. Advocates continue to push for smooth transitions. For example, one advocate requested that extreme changes to routine be postponed due to impending
placement. The client transitioned smoothly without the need to learn multiple routines prior to transition.

**Sonoma**

- **Facilitating communication**: The Coordinator advocates for better communication between SDC staff and advocates regarding changes in medical, medication, procedures, and general health condition. Coordinator assures that the Social Workers and advocates have current contact information.

- **Advocacy services**: Coordinator served six consumers (including four consumers living in the community) that do not have an advocate. Currently the Coordinator advocates for one individual living at SDC.

- **SDC’s location**: SDC is not close to main urban areas of Sonoma County making recruiting from a large volunteer candidacy pool difficult.

**Trends 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. Staff shortages have increased the closure of day/work programs.
VAS ROSTER
# STATE DEVELOPMENTAL CENTER VOLUNTEER ADVOCACY SERVICE COORDINATORS

<table>
<thead>
<tr>
<th>State Developmental Center</th>
<th>Project Coordinator</th>
<th>Address</th>
<th>Telephone Number</th>
<th>E-mail Address</th>
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<tbody>
<tr>
<td>Headquarters</td>
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<tr>
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