

#### **NOTICE/AGENDA**

# STATE COUNCIL ON DEVELOPMENTAL DISABILITIES COUNCIL MEETING

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**DATE:** March 23, 2021

**TIME:** 10:30 A.M. – 4:00 P.M. with midday lunch break

COUNCIL CHAIR: Wesley Witherspoon

Item 1. CALL TO ORDER

Item 2. ESTABLISH QUORUM

Item 3. WELCOME AND INTRODUCTIONS

	This item is for members of the public only to provide comments and/or present information to the Committee on matters not on the agenda. Each person will be afforded up to three minutes to speak.	
Item 5.	APPROVAL OF JANUARY 2021 MINUTES  All	Page 4
Item 6.	CHAIR REPORT Wesley Witherspoon, Council Chair	Page 12
Item 7.	EXECUTIVE DIRECTOR REPORT AND STAFF REPORTS  Aaron Carruthers, Executive Director  A. Deputy Director of Administration Report  B. Deputy Director of Policy and Public Affairs Report  C. Deputy Director of Regional Office Operations Report  D. CRA/VAS Report  E. QA Project Update Report	Page 13
Item 8.	STATEWIDE SELF-ADVOCACY NETWORK (SSAN) REPORT SCDD SSAN Representative Matthew Lagrand	Page 33
Item 9.	MEMBER SPOTLIGHT Julie Neward and Larry Yin	Page 36
Item 10.	SCDD 2021-22 DRAFT BUDGET Aaron Carruthers, Executive Director	Page 37
	LUNCH BREAK	
Item 11.	<ul> <li>2021 LEGISLATIVE POSITIONS, RECOMMENDATIONS AND PRIORITIES UPDATE  Julie Austin, LPPC Chair and Bridget Kolakosky, Deputy Director</li> <li>A. COVID-19 Relief Package Update: AB 81, AB 82, AB 85, SB 87, SB 88, SB 92, SB 94</li> <li>B. Update on Council Priorities: SB 639</li> <li>C. LPPC-Recommended Positions <ul> <li>State Plan Goal Community Supports: AB 34, SB 672, AB 1007</li> <li>State Plan Goal Public Safety: AB 971</li> <li>State Plan Goal Education: AB 126, AB 610</li> <li>State Plan Goal Health &amp; Safety, Health: AB 270, AB 323, AB 1400, AE 1417, AB 118, SB 52</li> </ul> </li> </ul>	Page 71

Item 4. PUBLIC COMMENTS

Item 12.	SPOTLIGHT FOCUS: UPDATE ON VACCINES FOR PEOPLE WITH DEVELOPMENTAL AND OTHER DISABILITIES  Aaron Carruthers, Executive Director	Page 79
Item 13.	COMMITTEE REPORTS  A. Administrative Committee  B. Employment First Committee  C. Executive Committee  D. Self-Advocates Advisory Committee (handout)  E. Statewide Self-Determination Advisory Committee (SSDAC)	Page 98
Item 14.	NEXT MEETING DATE AND ADJOURNMENT Next Meeting: May 25, 2021	Page 103

#### Accessibility:

Pursuant to Government Code Sections 11123.1 and 11125(f) and Executive Order N-29-20 (this Executive Order can be found by clicking the link on page one of the agenda or typing <a href="https://www.gov.ca.gov/wp-content/uploads/2020/03/3.17.20-N-29-20-EO.pdf">https://www.gov.ca.gov/wp-content/uploads/2020/03/3.17.20-N-29-20-EO.pdf</a> into your web browser), individuals with disabilities who require accessible alternative formats of the agenda and related meeting materials and/or auxiliary aids/services to participate in this meeting should contact Charlotte Endres at (916) 263-8184 or <a href="mailto:charlotte.endres@scdd.ca.gov">charlotte.endres@scdd.ca.gov</a>. Please provide at least 3 business days prior to the meeting to allow adequate time to respond to all requests.

All times indicated and the order of business are approximate and subject to change.

**MARCH 23, 2021** 

## AGENDA ITEM 5 ACTION ITEM

#### STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

#### Approval of January 2021 Minutes

The draft minutes from the January 2021 Council meeting have been included in the packet for review. Councilmembers will vote on whether to approve the minutes.

#### Attachment

January 26, 2021 Council meeting minutes

#### **Action Recommended**

Approve the January 2021 Minutes.



#### Draft Council Meeting Minutes January 26, 2021

#### **Members Present**

Andy Imparato Aubyn Stahmer **Brian Winfield** Cindy Chiu David Pegos (F.A.) Francis Lau (F.A.) Jeana Eriksen (S.A.) Jonathan Nelson (F.A.) Joseph Rodrigues Joyce McNair (F.A.) Julie Austin (F.A.) Julie Neward (F.A.) Julio Garnica (S.A.) Kara Ponton (S.A.) Karen Millender (F.A.) Kilolo Brodie (F.A.) Kim Rothschild (F.A.) Lee Bycel (F.A.) Maria Marquez (S.A.) Matthew Lagrand (S.A.) Nicole Adler (S.A.) Olivia Raynor Richard Nelson Rosie Ryan (S.A.) Sandra Aldana (S.A.) Wesley Witherspoon (S.A.)

#### **Members Absent**

Marko Mijic Nick Wavrin Larry Yin

Others Attending **Aaron Carruthers** Alicia & Kim – captioners Amy Kalivas Anthony DeSalis **Arturo Cazares** Barry Jardini Beth Hurn **Brian Weisel** Bridget Kolakosky Carolyn Obringer Charlotte Endres Chaz Nickolaus Chris Arroyo Cindy Smith Connie Chu **Curt Child Daintry Bartoldus** Debra Wallace Darlene Dupree Darryl Powell David Gradv Dena Hernandez Dennis Dizon

#### **Others Attending**

(Continued) Holly Bins Janet Fernandez Judi Muirhead Julie Hillstead Katherine Sanders Lea Park-Kim Lisa Hooks Mark Klaus Mary Agnes Nolan Mary Ellen Stives Mary Lee Matt Mouer Riana Hardin Rihana Ahmad Robin Maitino-Erben Ross Long Sarah May Sarah Wasiak Scarlett von Thenen Sheraden Nicholau Steve Geiber Sonya Bingaman Tamica Foots-Rachal Tania Morawiec Tricia Kokes Vic Wursten Vivian Haun Wilbert Francis William Hatton

Yolanda Cruz

**Dominique Mills** 

**Douglas Sale** 

Erica Pan

#### 1. CALL TO ORDER

Council Chair Wesley Witherspoon called the meeting to order at 10:35 A.M.

#### 2. ESTABLISH QUORUM

A quorum was established.

#### 3. SWEARING IN OF NEW COUNCILMEMBER

The Council welcomed new member Jonathan Nelson, an at-large Family Advocate representative from the Bay Area. Executive Director Aaron Carruthers performed a ceremonial swearing-in for Councilmember Nelson.

#### 4. WELCOME AND INTRODUCTIONS

Councilmembers and others in attendance introduced themselves.

#### 5. PUBLIC COMMENTS

There was no public comment.

## 6. APPROVAL OF DECEMBER 2020 MINUTES Action 1

It was moved/seconded (Pegos [F.A.]/ [Ponton [S.A.]) and carried to approve the December 2020 Council meeting minutes with corrections to the voting log to ensure Councilmember Rothschild's December election vote was counted. (See minutes page 7 for the voting record of members present.)

#### 7. CHAIR REPORT

Chair Wesley Witherspoon welcomed the Council to its first meeting of the year and expressed his gratitude for beginning 2021 as the new Council Chair alongside Lee Bycel as the new Vice Chair. Witherspoon thanked the outgoing Council Chair and Vice Chair, Maria Marquez and Julie Austin, for their service and leadership.

Chair Witherspoon brought attention to the following awareness campaigns: January was Human Trafficking awareness month, February is Black History month, and March celebrates Women's History month along with Developmental Disabilities Awareness month. Additionally, Witherspoon reported that SCDD recently signed on to a national advocacy letter, which provides a summary of recommendations for ethical vaccine distribution for people with disabilities. SCDD will continue advocating that people with I/DD

should be given priority for the option to receive the COVID-19 vaccine.

Witherspoon also reported that he and Vice Chair Bycel approved seven conflict of interest waiver requests over the holidays, since the Executive Committee would not meet again until February. The following individuals had approved waivers: Elizabeth Espinosa and Betty Pearson-Grimble of Westside Regional Center, Elizabeth Soloway of Regional Center of the East Bay, Michelle Ramirez of Alta Regional Center, Shawna Hall of Tri-Counties Regional Center, David De Lira of Golden Gate Regional Center, and Jose Ayala of North Bay Regional Center.

Lastly Chair Witherspoon announced the new Council Committee assignments for 2021. He also informed the Council that he would be stepping down as the SCDD SSAN representative, and that Councilmember Matthew Lagrand would be appointed as the new SSAN representative. A complete list of Committee assignments is available on the Council's website.

#### 8. EXECUTIVE DIRECTOR REPORT AND STAFF REPORTS

Executive Director Aaron Carruthers provided Councilmembers with an oral report on recent Council activities and goals.

In administrative updates, Mr. Carruthers announced that the Council was recognized and named Employer of the Year for People with Disabilities by the Association of California State Employees with Disabilities (ACSED). SCDD also welcomed two new employees to the Council staff: Brian Weisel is the new staff attorney, and Bridget Kolakosky is the new Deputy Director of Policy and Public Affairs. Council staff was also hard at work over the holiday break, providing trainings, e-blasts and technical assistance as part of the work of the State Plan. Over the course of November and December 2020, almost 300,000 people were reached with SCDD State Plan work.

The Council made the news recently, with manager David Grady and the SCDD Central Coast Regional Office being recognized for working with community-based organizations Pragnya and Young Inquisitive Minds. These groups highlight and model inclusivity programs and the benefits of hands-on learning and allyship in the disability community. For their ongoing efforts, the leaders of each of these organizations received Jefferson Awards for Public Service.

Mr. Carruthers also noted that work continues around progress with COVID-19 vaccines. Carruthers is part of the California Department of Public Health's Community Vaccine Advisory Committee (CVAC) and is one of five Disability Advocates serving on the committee. He went on to report that although people who are giving in-home care and other support services are being prioritized along with other health care workers, there is not enough vaccine supply to keep up with the current demand. Advocates on the committee and across the state are still working to get people with disabilities into the first tier of vaccine priority. One of the chairs of the CVAC, Dr. Erica Pan, will present further information on this topic later in the day's agenda.

#### 9. SSAN REPORT

SCDD SSAN representative Wesley Witherspoon provided Councilmembers with an update from the most recent SSAN meeting. The SSAN elected new officers to serve in 2021. A complete summary report from the SSAN meeting was provided in the Council packet.

#### 10. MEMBER SPOTLIGHT

A new agenda item for this year, the Member Spotlight, is a time for Councilmembers to get to know one another and share something about themselves. This month Councilmembers Kara Ponton and Aubyn Stahmer shared their personal stories and offered their unique perspectives.

#### 11. 2021-22 GOVERNOR'S PROPOSED BUDGET

Councilmember Brian Winfield (DDS) presented a report on the Governor's proposed budget for fiscal year 2021-2022. The Governor's budget reflects increased costs related to COVID-19, such as hospital surge capacity, supported living services and in-home respite care. Regional center care for individuals is expected to increase in the coming year, and funding will be made available for evaluation of service access and equity, improvement of current emergency services and response in the regional center system, foster youth trauma care and the expansion of START programs (Systemic, Therapeutic, Assessment, Resources and Treatment). Additional budget updates will be available at the May Council meeting.

#### 12. CYCLE 44 GRANT: REQUEST FOR PROPOSALS

SCDD staff and the State Plan Committee presented the Cycle 44 grant Request for Proposals (RFP) and staff recommendations for funding.

Proposals for grants for inclusive education, and health and safety with a primary focus on mental health and well-being were presented. Councilmembers reviewed the draft proposal language and discussed suggestions for edits and clarification. Proposals for this grant cycle are due on May 15<sup>th</sup>, 2021, and the State Plan Committee will meet in June to review the scoring panel recommendations.

#### **Action 2**

It was moved/seconded (Pegos [F.A.]/Adler [S.A.]) and carried to adopt the proposed Cycle 44 grant RFP's recommended by the State Plan Committee and direct Executive Director Carruthers to implement the Council's approval with edits to be made by the State Plan Committee Chair and SCDD staff. (See minutes page 7 for the voting record of members present.)

#### 13. SPOTLIGHT FOCUS: COVID VACCINE UPDATES AND DISCUSSION

Dr. Erica Pan, Deputy Director of the California Department of Public Health's Center for Infectious Diseases and Chair of the Community Vaccine Advisory Committee (CVAC), joined the Council meeting in the afternoon to provide a presentation with updates regarding the COVID-19 vaccine. Dr. Pan presented valuable information about the current state of the pandemic and gave an opportunity for Councilmembers to engage in a discussion about their concerns around the vaccine and advocacy for priority access for people with disabilities. She reviewed the course of the pandemic over the last year and addressed the values of transparency, safety and equity in vaccine distribution. She emphasized that above all, disability is a part of equity. Currently there is not enough vaccine supply to meet the demand for everyone that would like to receive a vaccine. The CVAC is hopeful that the supply will increase in the coming months and that the distribution process can become much more streamlined. New tools such CalVax and MyTurn will also become available to the public soon, to assist with vaccination appointments and COVID case tracking efficiency.

#### 14. COMMITTEE REPORTS

Council Committee reports for the Legislative and Public Policy Committee (LPPC) and the Self-Advocates Advisory Committee (SAAC) were provided as handouts on the Council's website. Members were asked to review the materials when possible.

#### 15. NEXT MEETING DATE AND ADJOURNMENT

The next Council meeting will be held on March 23rd, 2021. The meeting was adjourned at 3:38 P.M.

Council Meeting Voting Log January 26, 2021										
Name	Action 1	Action 2								
Adler, Nicole	For	For								
Aldana, Sandra	For	Abstain								
Austin, Julie	For	For								
Brodie, Kilolo	For	For								
Bycel, Lee	For	For								
Chiu, Cindy	For	Abstain								
Eriksen, Jeana	For	Abstain								
Garnica, Julio	For	For								
Imparato, Andy	N/A	For								
Lagrand, Matthew	N/A	For								
Lau, Francis	For	For								
Marquez, Maria	For	Abstain								
McNair, Joyce	For	Abstain								
Millender, Karen	For	Abstain								
Nelson, Jonathan	For	For								
Nelson, Richard	N/A	For								
Neward, Julie	For	Abstain								
Pegos, David	For	For								
Ponton, Kara	For	Abstain								
Raynor, Olivia	For	For								
Rodrigues, Joseph	For	Abstain								
Rothschild, Kim Levy	For	For								
Ryan, Rosie	For	For								
Stahmer, Aubyn	For	N/A								
Winfield, Brian	For	For								
Witherspoon, Wesley	For	For								

**MARCH 23, 2021** 

## AGENDA ITEM 6 INFORMATION ITEM

#### STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

#### Chair Report

Council Chair Wesley Witherspoon will provide Councilmembers with an oral report about his recent activities and current priorities for the Council.

**Attachment** 

None

**MARCH 23, 2021** 

## AGENDA ITEM 7 INFORMATION ITEM

#### STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

#### **Executive Director Report and Staff Reports**

SCDD Staff reports have been included in the packet for informational purposes. Additionally, SCDD Executive Director Aaron Carruthers will provide Councilmembers with an oral report regarding recent Council activities.

#### **Attachments**

Cycle 44 Grant Request for Proposals (RFP) fliers

#### Other Attachments

- A) Deputy Director of Administration Report
- B) Deputy Director of Policy and Public Affairs Report (handout)
- C) Deputy Director of Regional Office Operations Report
- D) C.R.A./V.A.S. Update Report
- E) QA Project Update Report



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# PROGRAM DEVELOPMENT GRANT (PDG) CYCLE 44 REQUEST FOR PROPOSALS DUE MAY 15, 2021!

One or more Program Development Grant is available

Up to \$160,000

#### **Health & Safety**

SCDD values innovation and acknowledges that dimensions of wellness include many areas of life. In recognition of the burdens experienced as a result of the COVID-19 public health crisis, (e.g. isolation, lack of access to services, etc.), the Council is invested in the mental health and well-being of people with Intellectual/Developmental Disabilities (I/DD) and their families. The Council is seeking to fund a demonstration project that will address mental health needs among people with I/DD and/or their families. The proposed project may identify promising practices\* and potential barriers and serve as a demonstration model. The expected outcome will be a best practice\*\* model that can be replicated by other programs. Priority will be given to projects that focus on underserved populations (in urban and/or rural settings) throughout the lifespan.

Email any grant questions to kristie.allensworth@scdd.ca.gov.



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# PROGRAM DEVELOPMENT GRANT (PDG) CYCLE 44 REQUEST FOR PROPOSALS DUE MAY 15, 2021!

One or more Program Development Grant is available

Up to \$100,000

#### Inclusive Education - Increasing Inclusive Practices

While the State Council on Developmental Disabilities understands that effective inclusion practices may be available, the Council greatly values innovation. SCDD is seeking a grantee that will identify, improve and implement supportive inclusion opportunities for students with I/DD. The implemented plan will be a model (with demonstrated success at improving inclusion) that can be replicated in other districts throughout the state. Specifically, SCDD is interested in funding a three-part project that will:

- 1) Demonstrate an increase in promising/best inclusive education practices for students with Intellectual/Developmental Disabilities (I/DD);
- 2) Recommend a systems change model for promising and/or best inclusionary practices, which will benefit both typical students and those with I/DD; and,
- 3) After implementation, identify potential barriers to effective inclusive practices.

The grantee will develop a comprehensive plan with specific goals and benchmarks to improve inclusion outcomes, pilot the plan in one or more local education agencies, and report on outcomes. Grantees may or may not be previous recipients of the California Department of Education's Supporting Inclusive Practices (SIP) grants and intend to further increase positive outcomes related to primary, middle and/or

secondary schools serving students with I/DD. Priority will be given to projects that focus on underserved populations (in urban and/or rural settings).

\*Please cite sources for any proposals regarding the use of previous or existing program models.

Email any grant questions to kristie.allensworth@scdd.ca.gov.

# State Council on Developmental Disabilities Deputy Director of Administration Report March 23, 2021

The Deputy Director of Administration exercises broad policy-making authority over the SCDD's administrative functions including personnel, fiscal, contracts, information technology and customer services to fulfill the strategic goals of the SCDD.

This report summarizes the activities the Administration team performed since the January 26, 2021 meeting. Beginning in March 2020, the COVID-19 stay at home order significantly changed the way SCDD staff perform their work. SCDD implemented an Emergency Telework Program (ETP) in March which remains in effect. While all SCDD offices have remained open for essential activities, SCDD staff are continuing to work from home to the greatest extent while still being able to perform mission critical functions.

The Human Resources team (HR) continues to monitor guidance from the Governor and the administration regarding changes to the Stay at Home order and impacts to our emergency telework policy. HR processed several high-level recruitments such as the Deputy Director of Policy and Public Affairs, North Coast Regional Manager, three CPS II vacancies in the field, and two SSA vacancies in the State Plan Unit.

Thanks to the foresight of the Council in approving a 5-year computer replacement schedule in 2018 and data line upgrades for all offices in 2020, the staff have the information technology resources to be able work remotely. If not for the Council's approval of these infrastructure improvements, staff would not be able to work remotely and would be at greater risk of exposure to COVID. SCDD has taken delivery of 20 new laptops and accessories as part of year 3 of the 5-year computer replacement schedule. These laptops will be deployed once COVID travel restrictions are eased.

Since May 2020, SCDD has distributed 106.3 million items of personal protective equipment (PPE) from the Governor's Office of Emergency Services (CalOES) to hundreds of community organizations and to our consumers and their families.

The Administration team continues to work with CalOES and the Regional Office Managers to submit these PPE requests.

SCDD applied for and received a \$365,000 grant from the California Community Foundation to purchase and distribute approximately 4,500 Red Cross disaster backpacks along with disaster preparedness training to consumers and their families in fire prone areas throughout California. We hope to purchase, train and distribute these backpacks by December 2021.

The Contract Analyst has started the Cycle 44 program development grant process. This cycle includes funding up to \$160,000 for Health & Safety and \$100,000 for Inclusive Education initiatives and the proposals are due May 15, 2021.

The Budget Officer continues to track our current year expenditures and provided a mid-year expenditure and projections report to the Administration and Executive Committees on February 23<sup>rd</sup>. In order to more accurately track our expenditures, SCDD implemented new expense codes.

The Clients Rights Assistance staff returned to work at the Porterville Developmental Center and Canyon Springs Community Facility in March and are once again providing on-site assistance and advocacy to the residents.

The Quality Assessment Project is continuing to conduct the in-person surveys using Zoom and we have entered into preliminary discussions with the Department of Developmental Services on a new 3-year contract.

# REPORT FROM: TANIA MORAWIEC DEPUTY DIRECTOR, PLANNING & REGIONAL OFFICE OPERATIONS

REPORT RANGE 1/12/21-2/28/21

#### **Overview:**

PPE distribution events continue in response to community needs. Emergency preparedness and go-ag distribution events also continue. SCDD's success in emergency preparedness has been rewarded by an additional grant from American Red Cross for 1,950 bags and an award of 4,325 go-bags from the California Community Foundation. To better support goals for competitive, integrated employment, SCDD staff member, Scarlett Vonthenen, is taking course work to become a certified work incentives counselor (WIPA). Training on Ticket to Work and employment success stories has been offered during this reporting period.

Project SAFEE (Self-Advocates for Emergency Education), organized by Tamica Foots-Rachal, has begun training preparation. Their three areas of focus include: COVID, Emergency Preparedness and Public Safety, recognizing that many topics fall under the 3 area. The group will develop a mission statement at the next meeting and seceded they would meet the first 2 Fridays of every month from 8:30am-9:30am. The members are very excited and motivated to implement this new Project SAFEE to provide education and training on emergency related topics to self-advocates throughout California. *Project SAFEE would love to come to the Committee to present on their efforts! Please consider adding them to a future agenda.* 

#### SCDD UPWARD MOBILITY & STAFFING

Julie Eby-McKenzie is promoted to joining the Regional Manager Team! Julie will be moving to the North Coast to serve in Ukiah. Her previous position was as a CPS II in the LA Regional Office.

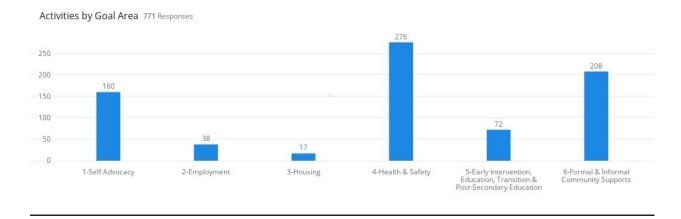
SCDD is also in the process of hiring 2 staff members for the State Plan Team and 2 CPSII positions for our regional offices in San Bernardino and Sacramento.

#### **SCDD IN THE NEWS**

- Bay area stories in the news <a href="https://www.ktvu.com/news/californians-with-disabilities-are-not-prioritized-for-the-covid-vaccine-and-they-fear-their-lives">https://www.ktvu.com/news/californians-with-disabilities-are-not-prioritized-for-the-covid-vaccine-and-they-fear-their-lives</a>
  - "Really, equity is all about addressing disproportional risks and addressing disproportionate impacts," said Sheraden Nicholau, the Bay Area regional manager for the <a href="State">State</a> Council on Developmental Disabilities.
- Northern California 2/8/21

Staff coordinated a radio interview with local community radio station, KZFR 90.1 FM to host SCDD, North State Regional Office and Far Northern Regional Center on North State Give and Take Program that airs every Tuesday evening at 6 PM including live streaming. Staff organized the radio interview with FNRC Executive Director, FNRC Clinical Director, Case

Management Supervisor and Self-Advocate Board Member and SCDD North State Regional Office Manager. The focus on the interview was to educate the North State Community on the developmental disability service system and information about the agencies, including eligibility requirements, services provided and the various vendors in our community that work with people with I/DD and their families throughout our 9 county catchment area. The interview will educate, motivate and provided resources for the community. The interview was recorded and will air in March of 2021. The radio show will be translated into Spanish with captioning and it is the goal to post on the FNRC website for the community to have access to the interview.



#### **STATE PLAN GOAL AREAS**

#### **EMPLOYMENT**

#### 2/2/21

• Cornell WIP-C Certification Series - SCDD OCRO staff is taking Cornell University's Work Incentives Planning and Utilization for Benefit Practitioners Certificate Series (with Credentialing as a Benefits and Work Incentives Practitioner) class that meets every Tuesday and Thursday through March 30th with testing in April. This coursework offers staff credentialing to counsel individuals with the interplay between Social Security work incentives and employment (all public benefits programs typically provide incentives for recipients with disabilities to return to work). SCDD OCRO staff has been providing benefits counseling/training through technical assistance and training; however, credentialing allows us to do any or some of the following: (1) to be established as SME's in the interplay between benefits and employment and possibly, provide more "expert" technical policy feedback, suggestions when SSA proposes new regs or changes. We know the needs of the community, and as a CWIC, we understand the role of benefits and employment, and can bridge the two and provide testimony, policy suggestion that align with the needs of the community; (2) collaborate with PSE, community college DSPS offices to make sure each student has the right resources and tools to work through PSE, availing themselves of work incentives such as SEIE, and effectively helping to flip the narrative and

- provide students the resources and tools to pick employment first, versus the current path of long-term SSI benefits and not working for fear of reducing the SSI benefits that was difficult to attain. Additionally, staff will continue to offer TA, trainings, and follow-up clinics.
- SCDD (Sacramento Regional Office, North Bay Office, and San Diego Office) and Pam Haney, Community Work Incentives Coordinator/Employment Developer with Progressive Employment Concepts collaborated to offer a training on Ticket to Work (Social Security Administration Program), Work More, Earn More! Two self-advocates shared their stories of using the Paid Internship Program to help them become familiar to an employer and gain skills and confidence. One of these SA was then hired to work in a dog grooming business. The owner of the business was also a guest on the training and shared his experience getting to know the SA informally and then later letting him work in his shop through PIP and then hiring him. He stated that he had no previous experience interacting with people with disabilities and had no familiarity with programs that assist individuals with disabilities to gain employment. He shared that PEC's approach of helping him get to know Michael before discussing PIP or hiring him, was very effective. As a very small business he would not have been looking to use an agency like PEC. The Job Coach still provides occasional support to both the owner and Michael, as needed. Pam explained about the Ticket to Work Program, Customized Employment vs. Supported Employment, and SSI/SSDI benefits and how they are impacted by wages. A handout was provided which SCDD also translated into Spanish. 187 people registered for the Zoom Training and 91 joined the training2/18/21

#### **SELF-ADVOCACY**

- 1/20/21, SCDD staff assists a meeting of self-advocate leaders to develop plans to reach others
  with projects of interest. They are currently working on a curriculum to teach self-advocates and
  support people how to work together effectively. SCDD staff met with two members of the
  group to begin work on this curriculum to be presented at the next leaders meeting
- 2/5/21, NSRO Staff recruited self-advocate from North State Region to participate in a new project, Project SAFEE (Self-Advocates for Emergency Education) and provided facilitation to the group and self-advocates in collaboration with San Bernardino Regional Office Manager who worked with local self-advocate from her region to develop concept and invited other self-advocates across the regional offices and staff to participate. Staff assisted the group to identify key areas of focus: COVID, Emergency Preparedness and Public Safety, recognizing that many topics fall under the 3 area. The group will develop a mission statement at the next meeting and seceded they would meet the first 2 Fridays of every month from 8:30am-9:30am. The members are very excited and motivated to implement this new Project SAFEE to provide education and training on emergency related topics to self-advocates throughout California.

#### FORMAL AND INFORMAL COMMUNITY SUPPORTS

• 2/16/21, To promote innovation in developmental services during the pandemic, staff hosted the SCDD Festival of Learning # 4. Staff was assisted by the managers from North State and San Diego Regional Offices. The theme of the Festival was Student and Young Adult Experience with Friends and Classmates. Two programs, Pragnya and Young Inquisitive Minds gave presentations about their programs. Along with power points, the presenters showed video clips of testimonials about the programs. 74 people attended the Festival. This Festival is the

- successful outcome of several planning meetings. The result of the Festival is two innovative programs were introduced to people throughout the state and people who attended were encouraged to consider similar type of outreach and innovation in their communities.
- 2/24/21, Rights of Individuals with IDD Training for Illumination Institute 2/24/21 SCDD OCRO staff serves as a board member on Illumination Institute, a newly-formed non-profit organization dedicated to improving the mental health outcomes for students and persons with disabilities and their caregivers, through mindfulness practices and addressing systemic inequity in access to education, healthcare, regional center, and other public benefits through the parent mentor/promotora model. The primary focus of this agency is serving the underserved communities of color with an emphasis on Hispanic and Asian cultures. SCDD OCRO represents the needs of persons with disabilities on this board, particularly focused on helping them increase their reach and networks in the underserved communities of color. As they are a newer organization, SCDD brings the knowledge of the I/DD system to the table and assists with their outreach, networking, and staff capacity building, so that it is a respected and widely utilized free parent mentor service to the community. Again, as they are in its infancy, SCDD OCRO staff is helping to bridge the knowledge gap and informing Illumination Institute of the DD service system by training all their parent mentors and staff. On 2/24/2021, SCDD OCRO presented on Rights of Individuals with IDD to their Executive Director, COO, and 7 parent mentor staff. The training covered an overview of Consumer and Human Rights, including the rights in a licensed facility (W&I 4503), Good Cause Denial of Rights (W&I 4504), and additional principals aimed at staff development and conduct in a group home. All 9 individuals reported being satisfied with the activity and one was new to SCDD. SCDD OCRO staff will provide trainings every Wednesday for 10 total sessions to cover a variety of topics including public benefits, generic resources, regional center services, rights of individuals with I/DD, etc.

#### Health & Safety

PPE distribution events continue in response to community needs. Emergency preparedness and go-ag distribution events also continue. SCDD's success in emergency preparedness has been rewarded by an additional grant from American Red Cross for 1,950 bags and an award of 4,325 go-bags from the California Community Foundation. Regional Office Managers are working collaboratively to identify innovative methods to reach underserved communities.

- 1/28/21, The Sequoia Office held an Emergency Preparedness training for 20 SA at Bullard High School. The students received an emergency backpack each valued at \$75 a pack for a total of \$1,500
- 1/23/21, Staff organized a PPE and Food Bag Distribution Event at the Far Northern Regional Center Chico Office parking lot from 1-4pm in collaboration with Far Northern Regional Center, Disability Action Center (DAC local Independent Living Center), Diversability Advocacy Network (DAN) Health Network, and Anthem Blue Cross. Event included PPE Kits made up of a box of surgical masks, N95 masks and 2 bottles of hand sanitizers. Food bags contained healthy organic items (nonperishable) with a value of \$17 of food. Resources provided including SCDD brochure, FNRC brochure and DAC brochure, emergency preparedness handouts, upcoming health related trainings, and information about the PPE supplies. Anthem Blue Cross provided a \$5k sponsorship for the food supply and all collaborating agencies provided outreach and marketing for the event. 268 people attended the event and received PPE and healthy Food Bags as a

- result of the community collaboration. The next PPE and Food Bag Distribution Event is scheduled for Redding on February 27, 2021 and them in Chico on March 27, 2021.
- 2/1/21, To support the mental and behavioral health of individuals, families and children, staff hosted a meeting between United Parents and Parents and Caregivers for Wellness and mental health advocate organization in Santa Clara County to introduce the services of these two organization and arrange for support to distribute a community announcement. Invited to the meeting from Santa Clara were Friends of Children with Special Needs, San Andreas Regional Center, Parents Helping Parents, and Hope Services. The meeting allowed the two parent organizations to introduce their services and to get support from the meeting participants to have an announcement be sent to a targeted audience. The outcome of this meeting was the expansion and enrichment of the community of mental health care within the IDD community.
- 3/1/21, SCDD staff hosted (virtually) and participated in a Dental Workgroup planning implementation of efforts to increase knowledge of dental providers, explore and promote alternatives to general anesthesia, and promote family and self-advocate education on dental issues and resources. Dr. Glassman reported that meetings are taking place with Alta California Regional Center staff regarding services and supports for dental desensitization, care, and coordination of those needing sedation. They are exploring supports and funding streams. Northstate University and ACRC area also discussing the development of a Dental Clinic and trainings for their dental students. Connections are also being made with the health plans so support efforts. The dental managed care plans are also in discussions of internal supports and system change efforts. SCDD staff suggested a virtual parent Q&A workshop on Disability and Dental Issues. A meeting was planned for next week to develop this concept. This committee meets monthly and reports to the Medi-Cal Dental Advisory Committee for Sacramento County which operates under the direction of the Board of Supervisors. SCDD staff has participated regularly in meetings and has helped to highlight the issues of children and adults with ID/DD and access barriers to dental care.

#### **HOUSING**

Staff participated in the Housing Action Team (HAT) on 2.11.21 and discussed the status of current building projects and potential building projects within the City of Ukiah and Mendocino County. Land Trust Funds were provided by leftover City Redevelopment funds. Three project vied for the funds, a 30 unit senior complex, Gobbi St. mixed use 40-60 units will be completed in May, restricted to seniors over 55. The Orr Creek Commons Rural Community Housing Development Corporation(RCHDC) project in Support of Affordable Housing built 40 units to be completed in Spring of 2021. A planning and building services memo said that the RCHDC Orr Creek Commons project is an affordable multifamily/special needs housing project and is now almost complete. This is an affordable 40-unit housing complex targeting low/moderate family households and individuals with developmental disabilities and homeless veterans. The Regional Center and RCHDC collaborated on this housing project with like 40 unit project to be completed in Kelseyville, Lake County. The funds from the county grant would go to the construction of roads, sidewalks, curbs, and gutters, and the funding request was for \$1,420,931. According to the county on the RCHDC project, it was "shovel ready and stood the highest likelihood of funding. Other potential projects were discussed. The Sherwood Valley Tribe housing project is on hold while they complete water core drilling. The coast Housing Action team is continuing to

- work on a housing Land Trust and continues to pursue funding for a Tiny House Village. SCDD staff provides support and resources to the group and assists in coordinating community workshops to develop housing. There were 1 FA and 10 others in attendance.
- CCRO was requested by Housing Choices to provide public comment in support of an affordable housing development by Eden (Freedom site) in Watsonville. CCRO staff attended the three hour meeting and shared public comment. This project is not only 100% affordable (vs the other project discussed during the city council which was 20% affordable) but includes 6 units specifically for people with IDD. CCRO staff provided public comment in support of the Eden development including: Watsonville is home to 745 people with developmental disabilities. And approximately half of those individuals are adults, 70% of whom are still living at home with their aging parents. This is often not by choice but due of the lack of affordable housing options. This need will only continue to grow. Eden Housing has helped to address this challenge by collaborating with the Housing Authority of Santa Cruz County, so that apartments for people with IDD will have Project-Based Vouchers, and therefore will be affordable even to people with the most limited of incomes. Some members of the city council, including Mayor Dutra, raised concerns about the Eden development pulling from section 8 housing lists because those people likely aren't from Watsonville given the lists are by county. Parking concerns were also raised. City council voted in favor (6 yes, 1 no - the latter being the mayor) of approving this development and cited the need for affordable housing for the different communities, including IDD and farm workers, and also because of the great relationship and track record the city of Watsonville has with Eden. The number of public attendees at this zoom council meeting were not shared so only the city council members and guests/others who spoke were counted in this AR.

#### **EARLY INTERVENTION, EDUCATION, TRANSITION**

2/17/21, SCDD staff participated in the Help Me Grow Yolo County Leadership Team which strives to be the access point for all families with children ages 0-5 years old in Yolo County. It is a collaborative of 125 different agencies serving young families. This Leadership Team meets twice annually. From July through December, Help Me Grow hosted over 500 events for young families, hosted 120 play groups, and screened over 300 children for developmental, social, emotional, and behavioral issues, and physical health concerns. 3-4-year olds is their highest age group for assessments. They are working to develop a handout for parents to understand when they visit their Primary Physician and are told "let's wait and see". It is important that families understand what it is they should be monitoring with their child and what the doctor may be concerned about. This will be developed in English and Spanish and piloted with a local health clinic. They are working to develop a Referral Roadmap for young families, and they are collaborating with a native Spanish speaking Intern from LEND at UCD Mind Institute to help develop some of these handouts. A case study was presented showing some of the challenges non-English speaking families have when going through the Intake process at ACRC. SCDD encouraged reaching out to have the Yolo County Supervisor or Jennifer Bloom, Director of Children's Services with ACRC, attend future meetings to discuss these concerns.



#### Clients' Rights Advocacy and Volunteer Advocacy Services

#### SCDD AT WORK INSIDE CALIFORNIA DDS STATE OPERATED FACILITIES

Developmental Center/Community Facility/STAR Unit Census as of March 1, 2021 **Total Population: 265** 

Porterville DC 213

Central STAR 3

Southern STAR 4

Canyon Springs CF 36

Desert STAR

Program Activity for January and February 2021

#### **COVID-19 Update**

CRA/VAS team ended telework protocols and returned to facility-based offices on March 1st, 2021. DDS offered COVID vaccinations to our SCDD on-site team. All DDS and CRA/VAS staff working on grounds are screened daily, provided a mask, and tested if there is a known positive in the facility. The DDS facility I/DD surge bed units at Porterville and Fairview DCs are in warm shut-down mode. On March 1st, there were 5 admitted to the Fairview DC Surge Unit and 1 admitted to the Porterville DC Surge Unit. CRA/VAS team continues to assist SCDD Regional Offices to distribute PPE and emergency

#### Canyon Springs Community Facility and Desert STAR Unit

backpacks in the local regional areas.

CRA reviewed 5 denial of rights; 6 IPPs; 4 human rights/behavioral meetings, 4 transition meetings, facilitated 8 self-advocacy meetings, attended 8 Emerging Risk Notification; assisted with 1 request for release, assisted 5 clients with court communication, provided 3 rights and other trainings staff. VAS attended 2 IPPs, 20 transition meetings, 2 court hearings, 6 emergency kits distributed. VAS Coordinator attended 5 meetings and/or trainings. CRA and VAS are working with DDS staff to facilitate better communication and/or visits with families. Advocate assisted a client after passing of community staff person. VAS is advocating for clients inside CS and in the community for greater social opportunities while remaining COVID safe. All but one VAS individual who transitioned from Canyon Springs to the community has received their COVID vaccination. This person will be vaccinated in March 2021.

#### Southern STAR Unit and Former FDC Individuals in the Community

CRA attended the following meetings for Southern STAR residents: 5 special/IPP, 2 STAR transition meetings, and 38 FDC Surge Unit meetings. VAS Coordinator and advocates attended 2 health care reviews, and 2 IPP meetings, 2 program review meetings and made over 8 follow up contacts for individuals who transitioned from Fairview DC. SCDD VAS program at FDC ended on January 31, 2021 after serving individuals for 12 months after transition to the community.

#### Porterville Developmental Center and Central STAR Unit

CRA attended 9 human rights meetings, 2 IPPs, 3 transition meetings, 16 escort reviews, 10 denial of rights reviews, provided conducted 2 staff training, submitted 2 incident reports, 4 committee meetings and trainings. VAS serves 55 people at PDC and in the community. The program attended: 14 IPPs, 24 transition meetings, 8s escort reviews, 14 denial of rights, provided 4 emergency backpack trainings, 3 DOR trainings, 1 RAC meeting, and 2 self-determination committee meetings. Routine medical services are delayed in the community due to COVID protocols. Our team continues to advocate for these and generic services. Every VAS individual who transitioned from PDC to the community has received their COVID vaccination.



# Quality Assessment Project (QAP) Report

#### Cycle: In-Person Survey (IPS)

With over two months into the IPS cycle, 2,065 surveys statewide have been completed by approximately 180 independent contractors and SCDD QA Coordinators (QAC). **See Figure 1** and **Table 1** for Regional Center breakdown.

Surveys are conducted with individuals with intellectual/developmental disabilities (I/DD) and/or proxies who have been identified as knowing the individual well. Proxies can include family members, friends and service providers. Those eligible to participate in the survey are adults who receive at least one regional center funded service in addition to case management. Participation in these surveys remain voluntary.

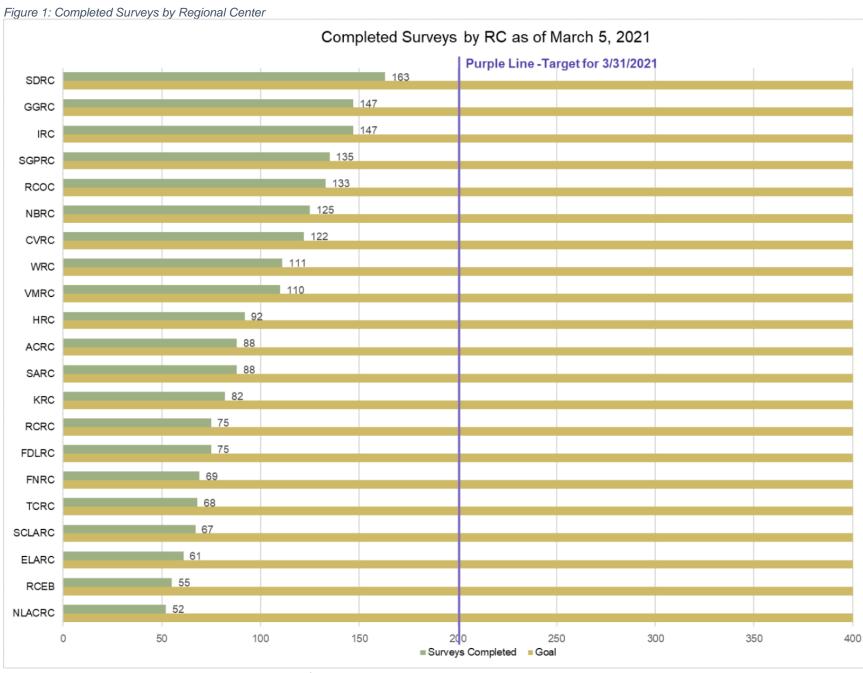
In response to the pandemic and the precautions necessary to ensure the safety of everyone involved in the survey process, surveys continue to be conducted remotely using Zoom Healthcare, a HIPPA compliant video conferencing platform. The target for all 21 regional centers remains 400 each for a statewide goal of 8400 surveys.

QA Coordinators continue to support contractors through shadowing surveyors and providing technical assistance. Additional online resources are available through the QAP Interviewer Portal that allows access to training videos, manuals, FAQ, forms and survey tools and other resources.

#### **Progress by Race/Ethnicity:**

DDS has historically sought to collect a random sample of 400 individuals from each of the 21 RCs in the state. A sample of 400 from each RC yields a valid sample which allows for a statistical comparison between RCs. For the 2020-2021 cycle, DDS has chosen to enhance data collection with a focus on obtaining a sample from each RC that has proportionate representation from five ethnoracial groups (i.e., African American/Black, Asian, Hispanic, White, and Other).

To ensure balanced representation of individuals who are receiving services from all 21 RCs is obtained, the RC sample of 400 was divided among the five ethnoracial categories based on the percentage of the RCs population that is identified as a member of that group. See **Figure 2** and **Table 2** for progress by Race/Ethnicity.



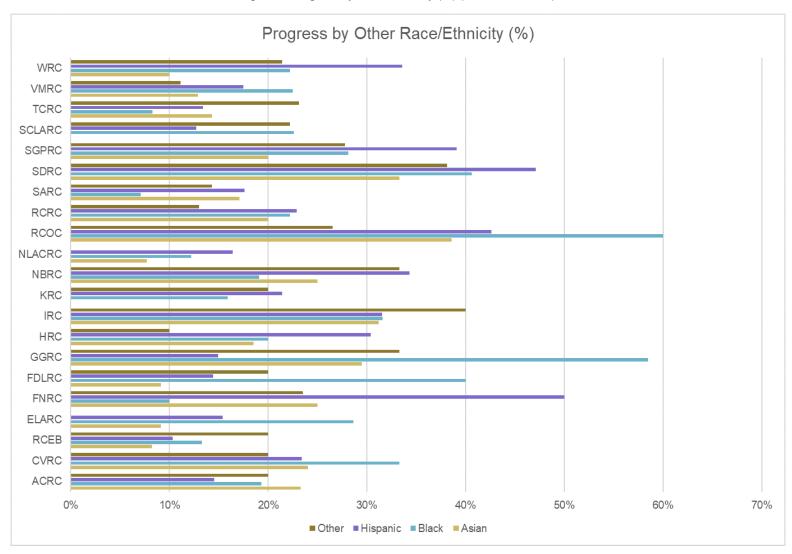
Page **2** of **7** 

Table 1: Completed Surveys by Regional Center

RC	DEC	JAN	FEB	MAR (3-5-2021)	YTD Completed	% Completed
SDRC	0	67	83	13	163	41%
GGRC	11	61	69	6	147	37%
IRC	0	18	113	16	147	37%
SGPRC	1	26	102	6	135	34%
RCOC	2	62	64	5	133	33%
NBRC	11	51	43	20	125	31%
CVRC	0	36	71	15	122	31%
WRC	2	40	67	2	111	28%
VMRC	0	39	63	8	110	28%
HRC	2	22	67	1	92	23%
SARC	0	29	48	11	88	22%
ACRC	0	31	55	2	88	22%
KRC	0	5	51	26	82	21%
RCRC	2	34	37	2	75	19%
FDLRC	3	28	38	6	75	19%
FNRC	4	29	32	4	69	17%
TCRC	0	3	46	19	68	17%
SCLARC	0	13	52	2	67	17%
ELARC	1	26	32	2	61	15%
RCEB	0	19	22	14	55	14%
NLACRC	1	18	33	0	52	13%

For Statewide and Regional Center Reports regarding past completed survey cycles, please go to: <a href="https://www.dds.ca.gov/rc/nci/">https://www.dds.ca.gov/rc/nci/</a>

Figure 2: Progress by Race/Ethnicity (%) (other than White)



Target sample size for each ethnoracial category (other than White)

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	ACRC	CVRC	RCEB	ELARC	FNRC	FDLRC	GGRC	HRC	IRC	KRC	NBRC	NLACRC	RCOC	RCRC	SARC	SDRC	SGPRC	SCLARC	TCRC	VMRC	WRC
Asian	30	) 2	5 6°	55	5 8	3 55	105	54	. 1	16	11 2	24 20	6 5	57	5 7	6 3	0 4	5 5	14	31	20
Black	57	7 30	0 90	7	10	35	41	55	5 5	57	44	17 49	9 1	0	9 1	4 3	2 3	2 137	12	40	117
Hispanic	55	5 188	8 68	3 272	32	2 153	3 67	138	3 16	35 1	154 (	67 14	3 10	)8 3	5 13	1 13	8 192	2 228	134	114	119
Other	25	5 10	0 20	) 9	17	7 10	21	30	) 1	15	15 2	24 !	9 3	34 2	3 2	1 2	1 18	9	13	18	28

Page **4** of **7** 

Table 2: Progress by Race/Ethnicity

Regional Center	Target Sample	Asian	Target Sample	Black	Target Sample	Hispanic	Target Sample	Other
ACRC	30	23%	57	19%	55	15%	25	20%
CVRC	25	24%	30	33%	188	23%	10	20%
RCEB	61	8%	90	13%	38	10%	20	20%
ELARC	55	9%	7	29%	272	15%	9	0%
FNRC	8	25%	10	10%	32	50%	17	24%
FDLRC	55	9%	35	40%	153	14%	10	20%
GGRC	105	30%	41	59%	67	15%	21	33%
HRC	54	19%	55	20%	138	30%	30	10%
IRC	16	31%	57	32%	165	32%	15	40%
KRC	11	0%	44	16%	154	21%	15	20%
NBRC	24	25%	47	19%	66	34%	24	33%
NLACRC	26	8%	49	12%	146	16%	9	0%
RCOC	57	39%	10	60%	108	43%	34	27%
RCRC	5	20%	9	22%	35	23%	23	13%
SARC	76	17%	14	7%	131	18%	21	14%
SDRC	30	33%	32	41%	138	47%	21	38%
SGPRC	15	20%	32	28%	192	39%	18	28%
SCLARC	5	0%	137	23%	228	13%	9	22%
TCRC	14	14%	12	8%	134	13%	13	23%
VMRC	31	13%	40	23%	114	18%	18	11%
WRC	20	10%	117	22%	119	34%	28	21%

#### **Mover Longitudinal Study Update**

All Mover Longitudinal In-Person interviews continue to be suspended as of March 17, 2020 due to the Covid-19 crisis. After continuous delays, DDS now anticipates that the MLS will begin Mid-March.

MLS cohorts will no longer be followed past two years post and the Early Closure cohorts will no longer be followed at all. This reduces the Mover Longitudinal Study enrollment from 612 to 313.

There have been no changes since last reported: MLS In-Person interviews completed to date statewide is 1,963. Please see Table 2 for Regional Center and Survey Type breakdown.

Table 3: MLS In-Person Surveys Completed

Regional Center	3 Month	6 Month	1 Year	2 Year	3 Year	4 year	Total
Alta California	55	51	48	40	7	0	201
Central Valley	53	49	41	35	15	6	199
East Bay	85	84	83	38	11	3	304
Eastern LA	5	5	5	2	2	1	20
Far Northern	10	10	10	8	4	0	42
Frank D. Lanterman	4	4	3	3	1	0	15
Golden Gate	67	67	67	44	12	3	260
Harbor	10	9	10	6	4	1	40
Inland	4	4	4	1	1	0	14
Kern	25	20	17	11	7	0	80
North Bay	79	76	75	25	14	0	269
North LA County	11	11	10	10	6	1	49
Orange County	62	58	30	10	8	1	169
Redwood Coast	3	3	3	3	2	0	14
San Andreas	6	6	6	4	0	0	22
San Diego	39	25	23	18	8	1	114
San Gabriel/Pomona	5	5	4	3	3	0	20
South Central LA	18	17	16	10	2	1	64
Tri-Counties	10	9	5	3	1	0	28
Valley Mountain	3	3	3	1	1	0	11
Westside	8	7	7	6	0	0	28
Grand Total	562	523	470	281	109	18	1963

#### **About National Core Indicators**

National Core Indicators<sup>™</sup>(NCI) strives to provide states with valid and reliable tools to help improve system performance and better serve people with intellectual and developmental disabilities and their families.

Through a contract with Department of Developmental Services (DDS), State Council on Developmental Disabilities (SCDD), using the NCI Survey tools, collects quantitative data on consumer satisfaction, provision of services, and personal outcomes. Data collection is completed through face to face interviews with consumers as well as mail-in surveys from families.

This data collection effort will enable DDS to evaluate the quality and performance of California's developmental disability service delivery system and among all the 21 regional centers over time.

For results of past surveys go to: https://www.dds.ca.gov/rc/nci/reports/

For more information about the NCI go to: https://www.nationalcoreindicators.org/

Scan QR code below to go to QA Project Webpage scdd.ca.gov/qap





### QAP Regional Center Assignments

Deborah Kindley
Support Staff: Michele Sloane
Far Northern
North Bay
Redwood Coast

Ron Usac • Angel Wiley Support Staff: Valerie Buell East Bay Golden Gate San Andreas San Diego

George Lewis
Support Staff: Marigene Tacan-Regan
Alta California
Central Valley
Valley Mountain

Jonathan Arevello-Parrish • Brianna Reynoso • Jenny Villanueva Support Staff: Marina Bchtikian East Los Angeles

Frank D. Lanterman
Harbor
North Los Angeles
San Gabriel Pomona
South Central Los Angeles
Westside

Nicholas Bui
Support Staff: Steven Dieu
Orange County

Carol Nakamura-Robinson Support Staff: Valarie Macias Inland Kern Tri-Counties **MARCH 23, 2021** 

## AGENDA ITEM 8 INFORMATION ITEM

#### STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

#### Statewide Self-Advocacy Network (SSAN) Report

The Statewide Self-Advocacy Network (SSAN), which is a project of the Council, provides a Summary Report of their recent activities. SCDD SSAN Representative Matthew Lagrand will provide Councilmembers with a short presentation on the SSAN report.

Attachment

March 2021 SSAN Report

# March 11, 2021 AGENDA ITEM 8. INFORMATION ITEM



# STATE COUNCIL ON DEVELOPMENTAL DISABILITIES Report from the Statewide Self-Advocacy Network

**Recent Activity:** The Statewide Self-Advocacy Network (SSAN) held their first meeting of 2021 on March 10<sup>th</sup> & 11<sup>th</sup>, 2021 using Zoom.

#### **Focus of Meeting:**

Due to ongoing COVID—19 concerns, the March 2021 SSAN was held over two days using Zoom. SSAN opened Day 1 of the March 2021 SSAN meeting by celebrating March as Developmental Disabilities Awareness Month with a discussion the importance of recognizing the month and shared their advocacy stories.

SCDD Executive Director Aaron Carruthers provided SSAN members with an update on SCDD activity since the December SSAN meeting. This focused on the agency's efforts to advocate for people with I/DD to be considered a vaccine priority. Starting March 15<sup>th</sup> people with disabilities and certain health conditions will be eligible to receive the vaccine. DDS and other agencies are developing guidance on how to notify clients about their eligibility, including the documentation needed to verify eligibility.

Members participated in a training on Emergency Preparedness that incorporated materials from both DDS resources and Prep It Forward and talked about their personal experiences responding to emergency situations.

On Day 2 of the SSAN meeting, members listened to an update on how the Self–Determination Program is impacting a SSAN member. Members participated in a dynamic training on how Conflict impacts us as an individual and the different types of approaches to conflict resolution. SCDD Deputy Director of Policy and Public Affairs Bridget Kolakosky, provided members with a presentation on the initial set of bills being recommended by LPPC for the Council to take a position on.

#### March 11, 2021

# AGENDA ITEM 8. INFORMATION ITEM

# STATE COUNCIL ON DEVELOPMENTAL DISABILITIES Report from the Statewide Self-Advocacy Network



The SSAN workgroups met to discuss current and potential projects.

#### **Actions Taken:**

- Approved the Minutes from the December 2020 SSAN Meeting
- Approved the SSAN Youth Survey
- Approved the March 2021 Edition of SSAN Newsletter

#### 2020—2022 SSAN Leadership:

Chair: Desiree Boykin, ARCA Representative

Vice-Chair: Paul Mansell, SCDD San Diego Regional Representative

Secretary: Robert Levy, UC Davis MIND Institute UCEDD Representative

#### **SSAN Workgroups:**

- Officers
- Bylaws
- Membership
- Self-Determination
- Employment
- Legislative and Civic Engagement
- Newsletter and Communications
- Youth Engagement

The next SSAN Meeting is scheduled for June 2021 over Zoom. Please visit the <u>SSAN</u> Page on the SCDD website for more information.

**MARCH 23, 2021** 

# AGENDA ITEM 9 INFORMATION ITEM

#### STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

Member Spotlight: Julie Neward and Larry Yin

Councilmembers Julie Neward and Larry Yin will provide brief presentations as part of a new series for 2021, "Member Spotlights."

**MARCH 23, 2021** 

### AGENDA ITEM 10 INFORMATION ITEM

#### STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

#### SCDD 2021-2022 Draft Budget

Executive Director Aaron Carruthers will present the 2021-2022 SCDD draft budget. SCDD budget documents are included in the packet for review and consideration.

#### **Attachments**

- Draft FY 2021/22 Budget
- Basic Support Grant (BSG) Draft Budget PowerPoint Presentation
- FY 2021/22 BSG Budget Description of Line Item Changes
- Budget Process Timeline

# State Council on Developmental Disabilities State Council Budgeted Base Draft Fiscal Year 2021-22 Budget

Categories	Basic State Grant (BSG)	Client's Rights Advocates/ Volunteer Advocacy	Quality Assessment	TOTAL
	Federal Grant	State Reimbursement	State Reimbursement	
1. Personal Services				
	<b>4.</b> –		<b>*</b>	
Net Salaries & Wages	\$3,748,000	\$927,000	\$1,393,000	\$6,068,000
Temporary Help / Honorarium	\$87,000	\$0	\$0	\$87,000
Worker's Compensation	\$55,000	\$5,000	\$3,000	\$63,000
	400,000	<b>4</b> 2,232	40,000	¥ 2 2 , 2 2 2
Staff Benefits Less 5% Salary Savings From Vacancies	\$1,938,000 (\$291.000)	\$436,000	\$664,000	\$3,038,000
2003 070 Salary Savings From Vacancies	(Ψ231.000)			
Total Personal Services	<u>\$5,537,000</u>	<u>\$1,368,000</u>	<u>\$2,060,000</u>	<u>\$9,256,000</u>
2. Operating Expense and Equipment				
General Expense	\$75,000	\$5,000	\$45,000	\$125,000
Printing	\$45,000	\$9,000	\$50,000	\$104,000
Communications	\$100,000	\$10,000	\$30,000	\$140,000
Postage	\$20,000	\$1,000	\$46,000	\$67,000
Travel In-State	\$300,000	\$32,000	\$70,000	\$402,000
Travel Out-of-State	\$20,000	\$32,000 \$0	\$70,000	\$20,000
	\$35,000	\$15,000	\$6,000	\$46,000
Training (Tuition & Registration)				
Facilities Operations (Rent) Utilities	\$600,000 \$6,000	\$24,000 \$0	\$268,000	\$892,000 \$8,000
			\$2,000	
Interdepartmental Services	\$225,000	\$134,000	\$174,000	\$533,000
External Contract Services	\$250,000	\$3,000	\$200,000	\$453,000
Information Technology	\$465,000	\$45,000	\$60,000	\$570,000
Statewide Cost Allocation Plan (SWCAP)	\$25,000	\$0	\$0	\$25,000
Other Items of Expense	\$5,000	<u>\$91,000</u>	<u>\$0</u>	<u>\$96,000</u>
Less Previously Approved One-Time Projects	<u>(\$325,000)</u>			
Total Operating Expense and Equipment	<u>\$1,846,000</u>	<u>\$369,000</u>	<u>\$951,000</u>	<u>\$3,156,000</u>
3. Community Grants	<u>\$260,000</u>	<u>\$0</u>	<u>\$0</u>	<u>\$260,000</u>
4. Total Council Budget (1 + 2 + 3)	<u>\$7,643,000</u>	<u>\$1,737,000</u>	<u>\$3,011,000</u>	<u>\$12,391,000</u>
5. Total Basic State Grant Award	\$7,708,000			
	7.,. 33,000			
6. Difference between Total Council Budget and Basic State Grant Award	\$65,000			
7. Cash Reserve	\$1,750,000			
8. Estimated Unexpended Funds Available for the Council to Spend	\$445,000			

# State Council on Developmental Disabilities

**Basic Support Grant (BSG) Draft Budget** 

July 1, 2021- June 30, 2022



### **Explanation of Terms**

- Expenditure Items bought and paid for within a fiscal year
- Calendar Year January 1 thru December 31
- State Fiscal Year (SFY) July 1 thru June 30
- Federal Fiscal Year (FFY) October 1 thru
   September 30th



# What is a budget?

- It is a spending plan
- An itemized summary of likely income and expenses for a given period

- Basic State Grant (Federal Funds)
- Quality Assessment (State Contract)
- Clients' Rights Advocates/Volunteer
   Advocacy Services (State Contract)



### Draft SFY 2021/22 Budget

# State Council on Developmental Disabilities State Council Budgeted Base Draft Fiscal Year 2021/22 Budget

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Categories	Basic State Grant (BSG)	Client's Rights Advocates/ Volunteer Advocacy	Quality Assessment	TOTAL
	Federal Grant	State Reimbursement	State Reimbursement	
1. Personal Services				
Net Calarias & Warra	\$3,748,000	\$927,000	\$1,393,000	\$6,068,000
Net Salaries & Wages	\$3,748,000	\$927,000	\$1,393,000	\$6,068,000
Temporary Help / Honorarium	\$87,000	\$0	\$0	\$87,000
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Worker's Compensation	\$55,000	\$5,000	\$3,000	\$63,000
THE RESERVE AND ADDRESS OF THE PARTY OF THE				
Staff Benefits	\$1,938,000	\$436,000	\$664,000	\$3,038,000
Less 5% Salary Savings From Vacancies	(\$291.000)			
Total Personal Services	<u>\$5,537,000</u>	<u>\$1,368,000</u>	<u>\$2,060,000</u>	<u>\$9,256,000</u>
2. Operating Expense and Equipment				
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General Expense	\$75,000	\$5,000	\$45,000	\$125,000
Printing Communications	\$45,000 \$100,000	\$9,000 \$10,000	\$50,000 \$30,000	\$104,000
Postage	\$20,000	\$10,000	\$46,000	\$140,000 \$67,000
Travel In-State	\$300,000	\$32,000	\$70,000	\$402,000
Travel Out-of-State	\$20,000	\$0	\$0	\$20,000
Training (Tuition & Registration)	\$35,000	\$15,000	\$6,000	\$46,000
Facilities Operations (Rent)	\$600,000	\$24,000	\$268,000	\$892,000
Utilities	\$6,000	\$0	\$2,000	\$8,000
Interdepartmental Services	\$225,000	\$134,000	\$174,000	\$533,000
External Contract Services	\$250,000	\$3,000	\$200,000	\$453,000
Information Technology	\$465,000	\$45,000	\$60,000	\$570,000
Statewide Cost Allocation Plan (SWCAP)	\$25,000	\$0	\$0	\$25,000
Other Items of Expense	\$5,000	\$91,000	<u>\$0</u>	\$96,000
Less Previously Approved One-Time Projects	<u>(\$325,000)</u>			
Total Operating Expense and Equipment	<u>\$1,846,000</u>	<u>\$369,000</u>	<u>\$951,000</u>	\$3,156,000
2.0	****			****
3. Community Grants	\$260,000	<u>\$0</u>	<u>\$0</u>	\$260,000
4. Total Council Budget (1 + 2 + 3)	\$7,643,000	\$1,737,000	\$3,011,000	\$12,391,000
4. Total Council Budget (1 + 2 + 3)	\$7,843,000	\$1,737,000	\$3,011,000	\$12,351,000
5. Total Basic State Grant Award	\$7,708,000			
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Difference between Total Council Budget and     Basic State Grant Award	\$65,000			
7. Cash Reserve	\$1,750,000			
1. Outil Reserve	\$1,730,000			
8. Estimated Unexpended Funds Available for	\$445,000	/ / / / / / / / / / / / / / / / / / /		
the Council to Spend	\$440,000			
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	72			

### PERSONAL SERVICES - SALARIES & WAGES

The Personal Services category contains a single line item that includes the salaries, wages and benefits of the staff and the Honoraria payments to the members.



### Salaries & Wages, Including Benefits

\$5,537,000

Includes 5% merit increases to eligible staff and increases to retiree and current employee health benefit contributions. Also includes a 5% salary savings due to vacancies.

### Specific examples include:

- Civil Service Salaries
- Social Security and Medicare taxes
- Health, Dental and Vision Insurance contributions
- PERS Retirement contributions
- State Disability Insurance tax
- Unemployment insurance tax
- Life Insurance
- Temporary help wages (Retired Annuitants, Graduate Student Interns)
- Council Member Honorarium



### **OPERATING EXPENSE & EQUIPMENT**

The Operating Expense and Equipment category consists of several line items that cover all the statewide operational costs of doing business.



### **General Expense**

\$75,000



Unchanged from SFY 2020/21

This line item includes a wide variety of expenses that may not fall under specific line items.

- Office supplies [paper, pens, staples, etc.]
- Office equipment purchase and service contracts
- Association dues, membership fees and subscriptions to publications.
- Meeting rooms, conference facilities and fees
- Office relocation-[movers]

### **Printing**

\$45,000

Unchanged from SFY 2020/21

This line item includes the production of all printed materials such as:

- Copier maintenance in all offices
- Council and committee agenda packets
- Pamphlets, leaflets, brochures, etc.
- State Plan and reports
- Printed manuals, forms, stationery and business cards
- Copy paper



### **Communications**

\$100,000

Unchanged from SFY 2020/21

This line item funds our Policy and Communications expenses.

This line item also includes all telecommunication related expenses such as:

- Telephones and Mobile devices (iPhone, iPad, wireless Internet access devices)
- Zoom for meetings
- Conference Call Services
- Constant Contact

### **Postage**

\$20,000

Unchanged from SFY 2020/21

This line item includes postage related expenses such as:

- Postage meter rental, repairs, postage refills and stamps
- Overnight mail [FedEx, UPS]



### **In-State Travel**

\$300,000

\$35,000 less than SFY 2020/21

This line item includes all staff and member travel expenses within California such as:

- Airfare
- Taxi, bus, shuttle, rental car, Uber, Lyft fare
- Personal car mileage, parking expenses and bridge tolls for staff
- Hotel rooms
- Meal allowances and incidentals [per diem]
- Travel agency fees



# **Out - of - State Travel**

\$20,000

Unchanged from SFY 2020/21

Same as in-state travel but for travel outside California approved by the Governor.



### **Training**

\$35,000

Increased \$10,000 from SFY 2020/21

This line item includes required and desired trainings for staff and members and the costs of staff providing SCDD-related training in the community. Examples include:

- Ethics, Sexual Harassment, Basic Supervision, Leadership and other required trainings
- Tuition and training fees
- Training materials [books and supplies]

# **Facilities Operations**

\$600,000

Unchanged from SFY 2020/21

This line item includes the monthly lease/rent costs for Headquarters and the 11 regional offices.



### **Utilities**

\$6,000

Unchanged from SFY 2020/21

This line item includes the monthly water, electricity, gas and trash expenses in offices where they are not included in the lease/rent agreement.



### Inter-departmental Services \$225,000

❖ \$186,000 less from SFY 2020/21

This line item includes the cost of contracts with other state agencies for required services such as:

- Department of Social Services [accounting and IT support]
- Department of Human Resources (CalHR) [HR advice and consultation]
- Department of Justice [expert legal advice and litigation]
- Department of General Services [facilities support, purchase order and contract review]
- State Controller [expedited processing of payments]



### **External Contract Services**

\$250,000

Increased \$175,000 from SFY 2020/21

This line item includes the costs of contracts with non-governmental entities and local vendors for required services such as:

- Janitorial services for field offices where it is not included in the lease/rent agreement
- Worksite/ergonomic evaluations
- Captioning, interpreting and translation services
- Consultants, presenters

This item also includes \$175,000 in previously approved one-time IT projects:

- •\$25,000 Website redesign project approved March 2019
- •\$75,000 Online training portal project approved July 2020
- •\$75,000 Regional Center service codes portal project approved July 2020



### **Information Technology**

\$465,000

Increased \$450,000 from SFY 2020/21

This line item includes costs related to information technology such as:

- Department of Technology data lines for Internet access in Headquarters and regional offices
- Department of Technology [website maintenance and support]
- Computer hardware peripherals and accessories [computer parts, monitors, printers]
- Software licenses [Windows 10 operating system,
   Microsoft Office 365, Adobe Professional, Qualtrics]
- IT supplies [toner, ink, etc.]

This item also includes \$150,000 for the previously approved one-time IT regional office firewall and switch project



# **SWCAP**

\$25,000

The Statewide Cost Allocation Plan (SWCAP) represents the SCDD's share of support for statewide general administrative costs (i.e., indirect costs incurred by central service agencies) from federal funding sources. By statute, SCDD's share is fixed at \$25,000. This charge applies only to the federal Basic Support Grant as the CRA/VAS and QA programs are funded by the Department of Developmental Services, which is a non-federal funding source.



# Other Items of Expenses

\$5,000

This line item captures miscellaneous charges that don't fall under the other line items.



### **Community Program Development Grants** \$260,000

Currently unchanged from the typical regional grant funding levels.

The community program development (Cycle) grants are competitively awarded annually as directed by the Council.



# TOTAL PRELIMINARY 21/22 COUNCIL BUDGET ALL PROGRAMS

Basic State Grant (BSG)

**Federal Funds** 

\$7,643,000

Quality Assessment (QA)

**State Contract** 

\$3,011,000

Client's Rights Advocates

Volunteer Advocacy(CRA/VAS)

**State Contract** 

\$1,737,000

**Total Council Budget** 

\$12,391,000

# **Questions?**



# State Council on Developmental Disabilities Draft Fiscal Year 2021/22 BSG Budget Description of Line Item Changes

The draft State Fiscal Year (SFY) 2021/22 BSG budget would increase \$414,000 from \$7,510,000 to \$7,924,000. This document describes the proposed changes to specific line items in the preliminary SFY 2021/22 budget from the SFY 2020/21 budget.

#### **Net Salaries and Wages**

This line item is projected to increase \$235,000 from \$3,513,000 to \$3,748,000. This includes the Basic State Grant (BSG) share of the proposed termination of the 9.23% Personal Leave Program to all employees on July 1, 2021 and 5% merit salary adjustments for staff not at the top salary step.

#### **Temporary Help/Honorarium**

This line item is projected to remain unchanged from the previous year and covers honoraria payments to Council members.

#### **Staff Benefits**

This line item is projected to increase \$136,000 from \$1,802,000 to \$1,938,000 due to a collectively bargained increase of \$3,120 per employee per year for employer paid healthcare premiums and contributions to retiree health care benefits.

#### **General Expense**

This line item is projected to remain unchanged from the previous year and includes:

- NACDD and other association dues and subscriptions
- Office Equipment and Furniture purchase and repair
- Meeting rooms and audio/visual services for in-person Council & committee meetings

#### **Printing**

This line item is projected to remain unchanged from the previous year and includes:

- Copier maintenance in all offices
- Pamphlets, brochures, business cards, etc.
- Copy paper

#### **Communications**

This line item is projected to remain unchanged from the previous year and includes:

- \$60,000 annual legislation, policy and communications budget to implement a comprehensive statewide communications plan
- Land line and mobile telephones devices and usage, Zoom licenses, overnight delivery services (FedEx)

#### **Postage**

This line item is projected to remain unchanged from the previous year and includes:

- Postage meter rental, repair and supplies
- Postage permits, stamps, etc.

#### **Travel In-State**

This line item is projected to decrease \$30,000 from the previous year to \$300,000 due to a permanent reduction in post-pandemic travel for Council/committee members and SCDD staff by

utilizing videoconference technology for meetings and dissemination of trainings and other State Plan activities. Travel includes:

- Commercial airfare
- Train fare
- Overnight lodging
- Meals
- Private car mileage and Enterprise rental car charges
- Public transit, taxi, Uber, Lyft, shuttle, etc.

#### **Travel Out of State**

This line item is projected to remain unchanged from the previous year and includes Governor-approved out-of-state trips for required meetings with the Administration on Community Living, NACDD and other DD Act partners as required as part of our Basic Support Grant.

#### **Training**

This line item is projected to remain unchanged from the previous year and includes:

- Tuition and registration for all required and job-related skills development and leadership development training to rank and file and managerial staff
- Contract with CalHR and external trainers for staff training and development

#### **Facilities Operations**

This line item is projected to remain unchanged from the previous year and includes:

- Rents/leases for SCDD offices
- DGS planning and lease management services
- Janitorial services
- Security/alarm services

#### **Utilities**

This line item is projected to remain unchanged from the previous year and includes electricity, gas, water, sewer and garbage disposal for SCDD offices where utilities are not included in the rent/lease.

#### **Interdepartmental Services**

This line item is projected to decrease \$186,000 from the previous year to \$225,000 due to the redirection of IT expenditures to the Information Technology line item and includes:

- \$175,000 annual contract with the Department of Social Services for administrative support services
- Contracts with other state agencies for their services (State Treasurer, State Controller, Attorney General, CalHR, etc.)
- Audit charges for SCDD audits by control agencies (State Auditor, State Personnel Board, Department of General Services, Department of Finance, etc.)

#### **External Contract Services**

This line item is projected to increase \$175,000 from the previous year to \$250,000 to fund the following one-time IT projects previously approved by the Council:

- \$25,000 Website redesign project approved March 2019
- \$75,000 Online training portal project approved July 2020
- \$75,000 Regional Center service codes portal project approved July 2020

This line item also includes:

Interpreting, translation, and captioning services

Personal services and consultant services contracts (meeting facilitators, presenters, etc.)

#### Information Technology

This line item is projected to increase \$450,000 from the previous year to \$465,000 due to changes in expense coding of CDT data line charges from Interdepartmental Services to this line item and includes:

- \$115,000 annual CDT website hosting and data line charges for all SCDD offices
- \$50,000 purchase of computers, monitors, printers, copiers, etc. per the 5-year equipment refresh schedule
- \$100,000 annual license for the Qualtrics data management product
- \$50,000 annual software purchase and renewal (Windows Operating System, Office 365, Adobe, etc.)
- \$150,000 One-time firewall and switch project for the regional offices

#### **SWCAP**

This line item represents SCDD's share of state administrative overhead and is statutorily capped at \$25,000.

#### Other Items of Expense

This line item is projected to remain unchanged from the previous year and represents expenses that do not fall under any of the above categories.

#### **Community Program Development Grants**

This line item is projected at \$260,000 for statewide grants.

Dates	State Budget Process	Federal Budget Process	SCDD Budget Process
January	January 10 Governor releases proposed budget for State Fiscal Year (SFY) starting July 1.  Legislative Analyst's Office (LAO) submits analysis of the proposed budget.	Federal agencies develop their funding proposals for potential inclusion in the President's proposed budget for the upcoming FFY.	HHSA Secretary reports to the Council on the Governor's proposed HHSA budget for the upcoming budget year (BY) beginning July 1.  Staff prepares the 6-month expenditure report, analysis and expenditure projections for the current year (CY) budget.
February	February 1 Department of Finance (DOF) provides to the Legislature all proposed statutory changes (Budget Trailer Bills), that are necessary to implement the Governor's Budget.  February-April Legislative budget subcommittee staff hold budget pre-hearings with LAO, DOF and departments. (SCDD funding is included in the Health & Human Services Agency budget assigned to Assembly and Senate Budget Sub Committees.	Typically, by the first Monday in February The President gives Congress his proposed budget for the Federal Fiscal Year (FFY) starting October 1.	February-April Staff monitor both the Governor's proposed budget and the President's proposed HHS budget and incorporates the proposed funding into the SCDD's proposed operating budget.  Staff presents the proposed SCDD operating budget to the Executive and Administration Committees for approval as well as CY expenditure data, analysis and projections.

	Legislative budget subcommittees hold budget hearings.		Staff presents the proposed SCDD operating budget to the full Council for preliminary approval, pending any May Revision changes or federal funding changes.
March		March-September The House and Senate each draft a budget resolution setting overall spending levels.  A conference committee of House and Senate members resolves differences to create a final version that each chamber votes on.  House and Senate appropriations committees divide the budget resolution into 12 appropriations bills. (SCDD funding is included in the Labor, Health & Human Services appropriations bills assigned to the Labor, Health & Human Services and Related Agencies subcommittees)	

		The full House and Senate vote on their bills.  Both versions of each bill go to a conference committee to merge the two.  Both chambers vote on the merged version and if approved, it goes to the President.	
April	April 1 DOF issues May Revision update of revenues and expenditures.		
May	May 11 Governor releases May Revision proposed budget.  Legislative budget committees hold May Revise budget hearings to approve changes.  Budget Act and Trailer Bills are sent to the floors for a vote.  Conference committee of		May-June Staff presents the final proposed SCDD operating budget to the full Council for final approval as well as the final estimate of unspent funds from the CY.
	Assembly and Senate reconciles differences.		

June	June 15 Constitutional deadline for the Legislature to pass the Budget Act.  By June 30 The Governor signs the Budget Act.		
July	July 1 SFY begins		July-June Staff monitors expenditures to the approved budget.
August	Departments begin preparing the next year's budget change proposals (BCPs) and submit them to DOF for possible inclusion in the January 10 Governor's proposed budget.		August Staff prepares the year-end expenditure report.  August-September Staff determines if any BCPs are needed for the next year. If yes, submits them to DOF (BCPs are confidential until released as part of the Governor's proposed budget on January 10)
September	September-December DOF approves/rejects BCPs and works with departments on the completion of required adjustments.	By September 30 The President signs the 12 bills into law. (Short term continuing resolutions (CR) to temporarily fund the government while Congress and the President negotiate have become common)	

October	Departments submit their budget galleys to DOF for inclusion in the January 10 Governor's proposed budget.	October 1 FFY begins. If bills are not signed and there is no CR, all or part of the government shuts down.	October-December Staff calculates the federal funds carryforward from the FFY ending September 30.  Depending on the timing of award of our federal funding, staff may recommend one-time and ongoing budget increases/reductions to the Executive and Administration committees and the full Council.
November		November-December Federal agencies develop their funding proposals for potential inclusion in the President's proposed budget for the upcoming FFY.	
December	The details of the Governor's proposed budget are confidential until it is released on January 10.		

#### MARCH 23, 2021

### AGENDA ITEM 11 ACTION ITEM

#### STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

#### 2021 Legislative Positions, Recommendations and Priorities Update

The Legislative and Public Policy Committee (LPPC) met on March 9<sup>th</sup> to, among other things, review and make recommendations on 13 legislative bills. Members used the current State Plan, Council approved Legislative Platform, and Policy Priorities to guide the discussion and subsequent recommendations.

Councilmembers will be presented with the legislative packet outlined on the agenda for consideration. A legislative bill chart and presentation summarizing each bill recommendation will be provided to members prior to the meeting. Additionally, the electronic meeting agenda contains hyperlinks to each bill so that members may access these readings on the California Legislature's website prior to the Council meeting.

Additionally, members will be provided an update on the Governor's COVID-relief package and Council priorities.

#### Action Recommended

Adopt LPPC's recommendations on introduced legislation.

#### **Attachments**

2021 Policy Platform 2021 Policy Priorities

#### **Handouts**

Legislative presentation dated March 18, 2021 Legislative Bill Chart dated March 18, 2021



# CALIFORNIA STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

### **POLICY PLATFORM 2021**

#### STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

Over 50 years ago, the State Councils on Developmental Disabilities were established in federal statute. The Councils are currently authorized in the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (DD Act) in each of the 56 states and territories to "promote self-determination, independence, productivity, integration and inclusion in all aspects of community life" for individuals with intellectual and developmental disabilities (I/DD) and their families through advocacy, capacity building, and systems change. The Lanterman Act established the California State Council on Developmental Disabilities (Council) to fulfill those rights.

The Council is comprised of 31 members appointed by the Governor including individuals with I/DD and their families, representatives from the DD Act partners (Disability Rights California and the three University Centers for Excellence in Developmental Disabilities), and mandated state agencies that provide services and supports to individuals with I/DD. To implement the rights in the DD Act, the Council develops and implements a five-year state plan that contains goals, objectives, strategies, and outcomes designed to improve and enhance the availability and quality of services and supports. In addition to the Council's Sacramento headquarters, regional offices support individuals with I/DD and their families through activities such as advocacy, training, monitoring, and collecting and disseminating public information.

The Council works with policymakers and other stakeholders to ensure policies pertaining to the rights of individuals with I/DD are protected and enhanced by ensuring individuals with I/DD can experience equality of opportunity, full participation, independent living, and economic self-sufficiency. These four pillars are enshrined in the Americans with Disabilities Act of 1990 (ADA). The Council supports the full and robust implementation and enhancement of state and recent federal policies that enshrine the values of the ADA such as the Workforce Innovation and Opportunities Act (WIOA), Home and Community-Based Services Setting Rule (HCBS), Every Student Succeeds Act (ESSA), and Achieving Better Life Experience (ABLE) Act.

The Council believes that individuals with I/DD and their families must be included and consulted in all aspects of the policy making process to ensure their needs are adequately and appropriately addressed. The Council works to address disparities in access, outcomes, and quality for all services and supports. The Council believes in ensuring transparency and accountability for state and federal programs providing services and supports to individuals with I/DD. Furthermore, the Council believes that complexities in the service delivery system must be reduced and that assistance in navigating services

and supports should be provided to individuals with I/DD and their families. The State of California must ensure that funding is used to achieve positive outcomes for individuals with I/DD and their families.

Disparities in services and supports can result in severe health, economic, and quality of life consequences. Services and supports must be distributed equitably so that individual needs are met in a culturally appropriate and linguistically competent manner regardless of race, ethnicity, income, intellectual or physical ability, age, and geographic location. Information and materials must be provided in plain language and/or alternative formats as requested.

# PROMISE OF THE LANTERMAN ACT

The Lanterman Act promises to honor the needs and choices of individuals with I/DD by establishing an array of quality services throughout the state. Services must support people to live inclusive lives in their communities. Access to needed services and supports must be inclusive and not be limited through service caps, means testing, median rates, family cost participation fees, or other financial barriers. California must not impose artificial limitations, delays, or reductions in community-based services and supports that would compromise the health and safety of people with I/DD.

# **SELF-DETERMINATION**

Individuals with I/DD and their families must be given the option to select and direct their services and service dollars through Self-Determination. The person with I/DD is in charge. With the support of those they choose and trust, individuals with I/DD and their families are empowered to develop their own unique needs, develop their own life goals, and construct those services and supports most appropriate to reach their full potential. The process begins with a Person Centered Plan (PCP) which details their unique needs, competencies, and aspirations. Self-Determination gives individuals with I/DD the tools and the basic human right to pursue life, liberty and happiness in the ways that they choose.

# **SELF-ADVOCACY**

Individuals with I/DD must be in charge of their lives and be respected for the choices made. They must be provided the opportunity and support to be heard and be leaders in the service system and society including voting and other civic responsibilities. Individuals with I/DD must be protected against voter suppression and provided the same access to vote independently as individuals without disabilities. Self-advocates must have access to training, assistive technology, information, and materials in plain language and opportunities to participate in the policy making process.

# EMPLOYMENT AND ECONOMIC SELF-SUFFICENCY

Every person with a developmental disability should have the opportunity to be employed in competitive integrated employment (CIE). CIE means full or part time work at minimum wage or above, with wages and benefits similar to those without disabilities, fully included

with co-workers without disabilities, and located in the community. California must invest in systems change efforts that will result in a measurable increase in CIE for people with I/DD. This priority is consistent with California's Employment First Law that states CIE is the priority outcome for working age individuals with I/DD regardless of the severity of their disability.

Policies, service delivery practices, and financing must set expectations for CIE, microenterprise training, and/or self-employment. Individuals with I/DD must have access to information, benefits counseling, transition planning, job training, and inclusive post-secondary education. Adequate provider rates must be established for the provision of services and to incentivize quality and inclusive employment outcomes.

Employers must be engaged, prepared, and supported to employ individuals with I/DD. New or expanded pathways to CIE, including apprenticeships and internships, must be developed and supported for all individuals with I/DD regardless of severity of disability. The Council supports the phasing out and elimination of subminimum wage and/or segregated employment for all individuals with I/DD.

# **TRANSPORTATION**

Access to transportation is essential to education, employment, healthcare, and inclusion of individuals with disabilities. Timely accommodations must be available to people with I/DD that are available to people without disabilities. Mobility training must be a standard program among transportation providers to increase the use of available transportation and reduce reliance on costlier segregated transportation systems. Barriers between geographic areas and transportation systems must be addressed so people with I/DD can travel as safely and easily as people without disabilities. Emerging transportation options must be available and accessible to people with I/DD. Opportunities for car ownership must be increased.

# **HEALTH CARE**

Every person must have access to comprehensive, timely, quality, and affordable health care, dental care, and wellness services as well as access to plain language information and supports to help in understanding health plans and making informed decisions about their health care. This requires informed consent, individualized and appropriate medication and treatments, and an adequate network of health professionals. Individuals with disabilities must have equal access to intensive medical services, testing, and vaccinations for communicable diseases as individuals without disabilities. Testing for communicable diseases must be provided in the same timeframe as it is provided to individuals without disabilities regardless of the person's living situation (live at home, live with family, or live in congregate living.)

All individuals with disabilities, including individuals with multiple health care needs, must have access to routine preventative care, mental and/or behavioral health treatment, dental care, durable medical equipment, and reproductive health needs. Service system complexities must not delay, reduce, or deny access to services. Individuals must be

reimbursed for insurance co-pays, co-insurance, and deductibles when their health insurance covers therapies that are on their Individual Program Plans (IPPs).

# **EDUCATION**

Every student has the right to be safe in school and to receive a quality education with their peers that prepares them for post-secondary education and/or competitive integrated employment (CIE). Schools must ensure robust implementation of the Individuals with Disabilities Education Act (IDEA), Every Student Succeeds Act (ESSA), and other federal and state laws and regulations. Students with disabilities must be provided a free and appropriate public education and have access to the same opportunities for learning, in the classroom and online, as students without disabilities. School districts and other educational agencies must be held accountable for implementing all state and federal laws.

Students with disabilities must be educated alongside their peers without disabilities in the least restrictive environment (LRE). The needs of the student must not impact the child's placement in LRE. Parents must be provided information and training regarding how to access Free Appropriate Public Education (FAPE) and LRE. Students with disabilities must have access to the same virtual learning models as students without disabilities, and all related services must be provided for students with disabilities to access their education. Parents and students must have equal participation in the Individual Education Program (IEP) process including the ability to give informed consent. Comprehensive transition planning must be considered as part of the IEP process.

Teachers, school leaders, paraprofessionals, and other school-based professionals must be trained to use valid, positive, and proactive practices such as individualized school-wide positive behavior interventions and supports with fidelity. Schools must ensure that robust policies and practices are created and implemented to reduce bullying and harassment of students with disabilities. The Council opposes the use of all forms of seclusion and restraint. All school-based professionals and staff must be provided training on how to interact with students with disabilities.

# **HOUSING**

Statewide inclusive living options for individuals with I/DD must be increased and enhanced through access to housing and subsidies that are paired in a timely manner with needed supports and services. Community education and integration must be provided to reduce discrimination. Permanent, affordable, accessible, safe and sustained housing options must be continually developed to meet both current and future needs.

# **COMMUNITY PARTICIPATION**

Individuals with I/DD must have access to and be fully supported to fully participate in their communities with their peers without disabilities through opportunities in all areas of community life including but not limited to education, employment, recreation, organizational affiliations, spiritual development, and civic responsibilities that provide a life similar to individuals without disabilities.

# TRANSITION TO ADULT LIFE

All services, including education, rehabilitation, independent or supported living, and regional center services, must support students and adults to transition to competitive integrated employment, post-secondary education, or other opportunities including volunteering that will lead to meaningful employment in the community. Transition services must be considered at the earliest possible opportunity and across the lifespan. Adults with I/DD must have access to meaningful activities of their choice with the appropriate services and supports including aging adults.

# **SAFETY**

All people have a right to be safe. Every person must be provided emergency preparedness training for all types of emergencies or disasters. Individuals with I/DD experience a much greater rate of victimization and a far lower rate of prosecution for crimes against them. The same level of due process protections must be provided to all people. Individuals with I/DD should be trained on personal safety, how to recognize crimes, how to protect themselves against becoming victims of crime including on the internet, how to protect themselves from human trafficking, and how their participation in identification and prosecution can make a difference. In addition, too many interactions between law enforcement and individuals with I/DD end in avoidable tragedy. Law enforcement personnel, first responders, emergency medical professionals, and people in the judicial system must be trained in how to work with individuals with I/DD during the course of their duties including those who are suspects, victims, or witnesses of crimes. The Council opposes the use of all forms of seclusion and restraint

# QUALITY AND RATES FOR SERVICES AND SUPPORTS

Having access to and receiving quality individualized services and supports is the cornerstone for individuals with I/DD to be safe, healthy, and to promote self-determination, interdependence, and inclusion. An adequate safety net must be in place to immediately and timely address medical, mental health, behavioral, residential, staffing, equipment, or other needs when those services or supports fail, are interrupted, are not available, or additional services and supports are necessary for urgent or immediate need.

The state must streamline burdensome and duplicative regulations and processes that do not lead to positive, inclusive outcomes for individuals with I/DD and their families. Quality and timely assessment and oversight must be provided. The state must measure what matters, and the results must be administered in a culturally competent manner. The results must also be made public and be used to improve the system of services and supports. The state must restore and provide ongoing monitoring of rates to adequately support the availability of quality services for individuals with I/DD. A planned and systematic approach to rate adjustments must prioritize and incentivize quality services and supports.

For more information, contact: scdd@scdd.ca.gov | 916-263-7919



# CALIFORNIA STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

# **POLICY PRIORITIES 2021**

# PROTECTING AND ENHANCING CIVIL RIGHTS

Every person with a developmental disability has the right to self-determination, equality of opportunity, full participation, independent living and economic self-sufficiency regardless of how significantly the person is impacted by their disability.

The Council will work to ensure civil rights including identification and reduction of racial and ethnic inequalities and disparities are protected and enhanced. The Council will work to ensure the full and robust implementation of state and recent federal policies that enshrine the values of the Americans with Disabilities Act including but not limited to the Workforce Innovation and Opportunity Act, Home and Community-Based Services Settings Rule, Every Student Succeeds Act and Achieving Better Life Experience Act.

# **GUARANTEEING ACCESS TO EDUCATION AND EMPLOYMENT**

Every student has the right to be safe in school and to receive a quality inclusive education with their peers that prepares them for post-secondary education and/or competitive integrated employment (CIE). Students with disabilities must be provided a free and appropriate public education and have access to the same opportunities for learning, in the classroom and online, as students without disabilities.

Every person with a developmental disability should have the opportunity to be employed in CIE. Policies, service delivery practices and financing must set expectations for CIE, microenterprise training and/or self-employment. People with developmental disabilities must have access to information, benefits counseling, transition planning, job training, career exploration and information and support for inclusive post-secondary education. New or expanded pathways to CIE must be developed and supported, including apprenticeships and internships. The Council supports the phasing out and elimination of subminimum wage and/or segregated employment.

The Council will work to ensure the full and robust implementation of the Individuals with Disabilities Education Act, Every Student Succeeds Act and other federal and state policies to ensure that students with developmental disabilities are provided the services and supports needed to receive quality inclusive education.

The Council will work to ensure the full and robust implementation of the Workforce Innovation and Opportunity Act and California's Employment First Law. The Council will work to ensure that policies and practices improve opportunities for and incentivize CIE. The Council will work to create incentives and supports for all types of employers and contractors for hiring. The Council will work to make California a model state employer.

# PROMOTING ACCESS TO QUALITY SUPPORTS IN THE COMMUNITY

Every person with a developmental disability should have access to and be fully supported to fully participate in their communities. Having access to and receiving quality and individualized services is the cornerstone for people with developmental disabilities to be safe, healthy and to promote self-determination, interdependance and inclusion. Services and supports in the community require adequate wages for providers. The state must restore rates. A planned and systematic approach to rate adjustments must prioritize and incentivize quality services. Disparities in access, outcomes and quality for all services and supports must be addressed. Complexities in the service delivery systems must be reduced.

The Council will work to continue to restore the Department of Developmental Services programs cut in 2009. The Council will work to make meaningful improvements to the service delivery system to reduce disparities, increase transparency and accountability and increase quality outcomes. The Council will support efforts to provide adequate wages to providers for inclusive and quality supports. The Council will work to ensure successful implementation of the Self-Determination Program.

# **ENSURING SAFETY IN THE COMMUNITY**

Every person has a right to be safe. Every person with a developmental disability must be provided emergency preparedness training, training in personal safety, how to recognize crimes and how to protect themselves. Law enforcement personnel, first responders, emergency medical professionals and the judicial system must be trained in how to work with people with developmental disabilities (including those who are suspects, victims or witnesses of crimes) during the course of their duties.

The Council will work to ensure people with developmental disabilities are safe, free from abuse and neglect and have access to services and supports in their communities during all types of disasters or emergencies. The Council will work to ensure an adequate safety net for people in crisis and access to adequate crisis intervention services.

# IMPROVING HOUSING AND COMMUNITY LIVING

Every person with a developmental disability should have the opportunity to live in the community. Permanent, affordable, accessible, safe and sustained housing options must be continually developed. Statewide inclusive living options for individuals with developmental disabilities must be increased and enhanced through access to housing and subsidies that are paired in a timely manner with needed services and supports.

The Council will work to implement the policy recommendations in the Statewide Strategic Framework for Housing. The Council will work to create a dedicated housing fund to support integrated community housing for people with developmental disabilities.

MARCH 23, 2021

# AGENDA ITEM 12 INFORMATION ITEM

# STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

Spotlight Focus: Update on Vaccines for People with Developmental and Other Disabilities

Executive Director Aaron Carruthers will provide the Council with the most recent updates about the COVID-19 vaccine for people with developmental and other disabilities. Members will have the opportunity to participate in a discussion regarding new information and concerns about the vaccine.

## **Attachments**

- Excerpts from the March 5, 2021 Community Vaccine Advisory Committee Meeting presentation
- CDPH Fact Sheet (updated March 11, 2021)
- CDPH Provider Bulletin to All Vaccinators and Local Health Departments (updated March 11, 2021)
- DDS Directives Letter regarding Contacting Consumers Ages 16 through 64 Regarding Eligibility for COVID-19 Vaccination
- Letter to Governor Gavin Newsom, co-signed by SCDD and others regarding equitable vaccine access and the MyTurn system



# Vaccinate ALL 58

Together we can end the pandemic. Juntos podemos acabar con la pandemia. 我們可以一起終止疫情。

# California Health and Human Services Agency (CHHS) California Department of Public Health (CDPH)

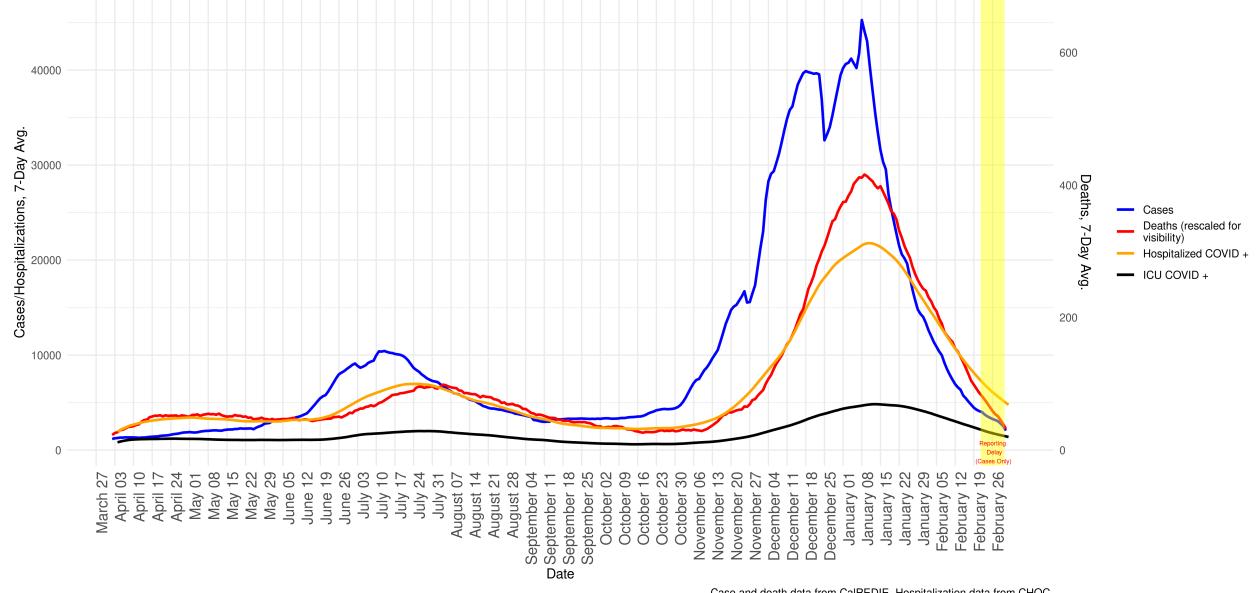
Community Vaccine Advisory
Committee

Meeting #11

March 5, 2021

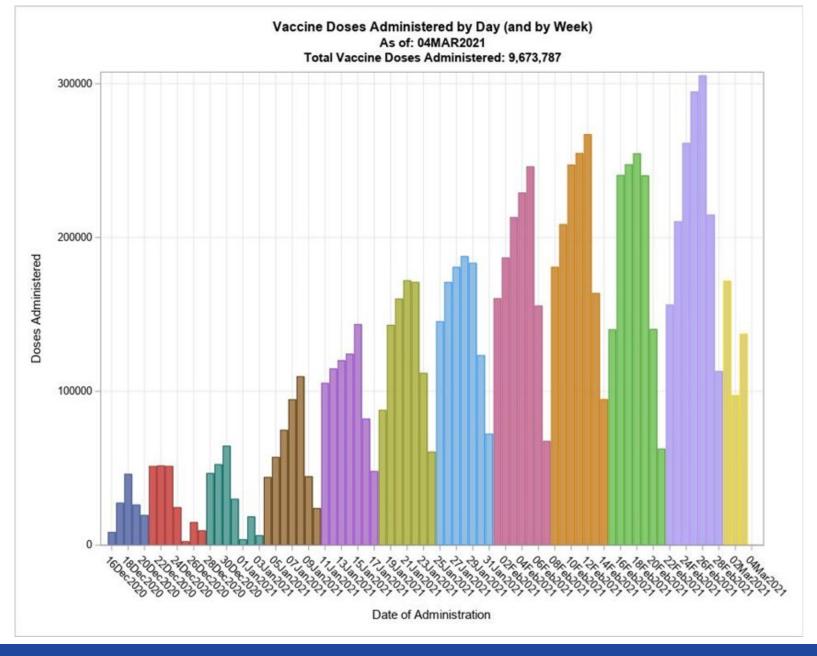
12:00 PM - 2:00 PM





Case and death data from CalREDIE. Hospitalization data from CHQC 2021-03-04 16:58:35





Vaccine Doses Administered by Day (and by Week) as of March 4, 2021

**Total Doses Administered:**9,673,787



# Who Can Get Vaccinated Now?

# Phase 1A

Est. 3M people

# NOW VACCINATING

- · Healthcare workers
- · Long-term care residents

# Phase 1B

Est. 12M people

# NOW VACCINATING AS SUPPLIES ALLOW

- Individuals 65 and older
- Sector populations:
  - Agriculture and food
  - Education and childcare
  - · Emergency services



# Who Can Get Vaccinated?

Beginning March 15, healthcare providers may use their clinical judgement to vaccinate individuals aged 16-64 who are deemed to be at the very highest risk to get very sick from COVID-19 because they have the following severe health conditions:

- Cancer, current with weakened immune system
- Chronic kidney disease, stage 4 or above
- Chronic pulmonary disease, oxygen dependent
- Down syndrome
- Solid organ transplant, leading to a weakened immune system
- Pregnancy
- Sickle cell disease
- **Heart conditions**, such as heart failure, coronary artery disease, or cardiomyopathies (but not hypertension)
- Severe obesity (Body Mass Index ≥ 40 kg/m²)
- Type 2 diabetes mellitus with hemoglobin A1c level greater than 7.5%

# OR

- If as a result of a developmental or other severe high-risk disability one or more of the following applies:
- The individual is likely to develop severe life-threatening illness or death from COVID-19 infection
- Acquiring COVID-19 will limit the individual's ability to receive ongoing care or services vital to their well-being and survival
- Providing adequate and timely COVID care will be particularly challenging as a result of the individual's disability.





# Vaccines for People with High-Risk Medical Conditions or Disabilities

On March 15, people with certain significant, high-risk medical conditions or disabilities will become eligible for vaccines statewide, to help save the lives of people who are at high-risk of death and severe complications from COVID-19. The national supply of the vaccine remains limited, so appointments for the estimated 4.4 million Californians with these conditions or disabilities will not immediately be available to all who are eligible. As supply increases throughout the spring, more appointments for vaccines will become available.

What high-risk conditions or disabilities make a person under 65 eligible for a vaccine after March 15?

People ages 16-64 can be eligible if they are <u>deemed to be at the very highest risk</u> to get very sick from COVID-19 EITHER because they have one or more of the following severe health conditions:

- Cancer, current with weakened immune system
- Chronic kidney disease, stage 4 or above
- Chronic pulmonary disease, oxygen dependent
- Down syndrome
- Solid organ transplant, leading to a weakened immune system
- Pregnancy
- Sickle cell disease
- Heart conditions, such as heart failure, coronary artery disease, or cardiomyopathies (but not hypertension)
- Severe obesity (Body Mass Index ≥ 40 kg/m2)
- Type 2 diabetes mellitus with hemoglobin A1c level greater than 7.5%

OR if, as a result of a developmental or other significant, high-risk disability, one or more of the following criteria applies:

- A COVID-19 infection is likely to result in severe life-threatening illness or death; OR
- Acquiring COVID-19 will limit the individual's ability to receive ongoing care or services vital to their wellbeing and survival; OR
- Providing adequate and timely COVID care will be particularly challenging as a result of the individual's disability.

These three criteria include people with a range of physical and behavioral disabilities. Examples include: all enrolled consumers of Regional Centers, Independent Living Centers, In Home Supportive Services, Community Based Adult Services/Adult Day Health Centers, Medi-Cal HIV/AIDS Waiver, Medi-Cal Home and Community-Based Alternatives Waiver, Medi-Cal Assisted Living Waiver, Program of All-Inclusive Care for the Elderly, California Children's Services Program (if the child is 16-21 years old), and California Genetically Handicapped Persons Program.

### How do people with these high-risk conditions or disabilities get a vaccine?

There are five primary ways you may be able to find an appointment after March 15. Vaccine supply remains limited nationwide.

- 1. Your Health Care Provider: We strongly recommend individuals with these conditions seek vaccination with a primary health care provider or system, or in an alternate clinical setting. Check first with your usual health care provider to see if they have vaccines and available appointments. Health care providers who have vaccines may also begin reaching out to you, as a patient with a significant, high-risk medical condition or disability known to the provider, to schedule your vaccine appointment.
- 2. *Pharmacies*: You can check your local pharmacies to see if they have vaccines and available appointments. For the month of March, federal direction is that all school and child care staff are prioritized for pharmacy vaccines, so supply for other populations remains limited.
- 3. Your Local Health Department: Your local health department's website will continue to have information about how to find available vaccine appointments, even as national supply remains limited.
- 4. Community Pop-Up Clinics: Community pop-up clinics for people with high-risk medical conditions and disabilities will roll out in mid-March and will be targeted for equity to those living in communities with the lowest Healthy Place Index scores. Community partners will outreach to people eligible for the pop up clinics.
- 5. *MyTurn*: Throughout the spring, as vaccine supply increases and the statewide vaccinator network grows, you will be able to schedule an appointment through California's MyTurn, in two ways:

**On-line** at www.myturn.ca.gov. The MyTurn website is accessible to people with disabilities and in eight languages: English, Spanish, Tagalog, Vietnamese, Mandarin, Cantonese, Korean, and Japanese.

**Calling the COVID-19 Hotline** at 1-833-422-4255 or 1-833-4CA-4ALL (M-F 8AM-8PM, Sa-Su 8AM-5PM). The Hotline is accessible to people with disabilities and offers services in English and Spanish, with connections to interpretive services in more than 250 languages.

You will be asked to state that you have a high-risk medical condition or disability, either to book an available appointment or to register for notice of future appointments made available as supply increases. You will be able to request an accommodation at your vaccine site through MyTurn.

## Will I need to verify I have a high-risk medical condition or disability when I go to my appointment?

To protect confidentiality, verification documentation of the diagnosis or type of disability is not required but instead anyone meeting the eligibility requirements will be asked to sign a self-attestation that they meet the criteria for high-risk medical conditions or disabilities.

### Will vaccine sites be accessible?

All vaccine clinics in California are required to ensure sites and services are accessible in accordance with the ADA (Americans with Disabilities Act) requirements.

### How do I get a vaccine at home, if I am unable to travel to a vaccine site?

For current options, check with your health care provider, local health department, or local pharmacy.

### How do I get transportation to a vaccine site?

For current options, check with your health care provider, local health department, or local pharmacy.

If you receive Medi-Cal through a managed care plan, contact your plan's member service department to request assistance for transportation to received covered benefits. If you receive Medi-Cal through Fee-for-Service (FFS), you can access a list of Non-Medical Transportation (NMT) providers in your county and you can contact them directly to arrange transportation to your appointments. If there is not a provider in your area, the California Department of Health Care Services (DHCS) can assist if you email them DHCSNMT@dhcs.ca.gov. Please do NOT include personal information in your first email. DHCS staff will reply with a secure email asking for your information about the appointment. If you have a need for Non-Emergency Medical Transportation, please inform your medical provider who can prescribe this service and put you in touch with a transportation provider to coordinate your ride to and from your appointment(s).



# Provider Bulletin Updates since 02/12/2021

Updated on March 11, 2021 to:

Include individuals in specified settings who are eligible to be vaccinated due to increased risk beginning March 15. This includes individuals who reside in a high-risk congregate setting and public transit workers. Provide clarifications on the implementation of vaccines for people with high-risk medical conditions or disabilities.

**To**: All vaccinators and local health departments

**From**: California Department of Public Health



We thank you for your tremendous work to vaccinate Californians.

This bulletin is meant to update you on current guidance for distributing vaccine.

### Vaccine Prioritization (as vaccine supply allows)

- 1. Currently vaccines may be distributed to populations identified in Phase 1A and Phase 1B, Tier 1.
- 2. Beginning March 15, healthcare providers may use their clinical judgement to vaccinate individuals age 16-64 who are deemed to be at the very highest risk for morbidity and mortality from COVID-19 as a direct result of one or more of the following severe health conditions, and individuals in specified settings are eligible to be vaccinated due to increased risk, as specified in this provider bulletin:
- Cancer, current with debilitated or immunocompromised state
- Chronic kidney disease, stage 4 or above
- Chronic pulmonary disease, oxygen dependent
- Down syndrome
- Immunocompromised state (weakened immune system) from solid organ transplant
- Pregnancy

- Sickle cell disease
- Heart conditions, such as heart failure, coronary artery disease, or cardiomyopathies (excludes hypertension)
- Severe obesity (Body Mass Index ≥ 40 kg/m2)
- Type 2 diabetes mellitus with hemoglobin A1c level greater than 7.5%

OR

If as a result of a developmental or other severe high-risk disability one or more of the following applies:

The individual is likely to develop severe life-threatening illness or death from COVID-19 infection;

Acquiring COVID-19 will limit the individual's ability to receive ongoing care or services vital to their well-being and survival;

Providing adequate and timely COVID care will be particularly challenging as a result of the individual's disability;

OR

Update on March 11, 2021: Individuals who reside or work in a high risk congregate residential setting, such as an incarceration/detention facility, homeless shelter, or behavioral health facility, as these settings are high risk for outbreaks and have a concentration of individuals with high risk chronic health conditions. This includes all people experiencing homelessness, who are at risk of transitioning into congregate settings at short notice.

OR

Update on March 11, 2021: Public transit/airport and commercial airlines. Public transit workers, including airport and commercial airline workers (but not private airplanes) will be eligible for COVID-19 vaccinations. They are at high risk for occupational exposure and maintaining continuity of transportation operations is critical.

The list of eligible conditions is subject to change as additional scientific evidence is published and as CDPH obtains and analyzes additional state-specific data.

This provider bulletin is meant to clarify and update California's vaccine administration prioritization policy. It may be updated periodically to aid all vaccinators as the state moves through its efforts to vaccinate all eligible populations and as supplies increase over time.

Thank you for your partnership and work to protect Californians during the pandemic.

# DEPARTMENT OF DEVELOPMENTAL SERVICES

1600 NINTH STREET, Room 240, MS 2-13 SACRAMENTO, CA 95814 TTY (916) 654-2054 (For the Hearing Impaired) (916) 654-1897



March 9, 2021

TO: REGIONAL CENTER EXECUTIVE DIRECTORS

SUBJECT: DEPARTMENT DIRECTIVE 01-030921: CONTACTING CONSUMERS AGES

16 THROUGH 64 REGARDING ELIGIBILITY FOR COVID-19 VACCINATION

Welfare and Institutions (W&I) Code section 4639.6 authorizes the Director of the Department of Developmental Services (Department) to issue directives to regional centers as the Director deems necessary to protect consumer rights, health, safety, or welfare, or in accordance with W&I Code section 4434. Regional centers must comply with any directive issued by the Director pursuant to this section.

# Outreach to Regional Center Consumers Ages 16 through 64

Public health guidance from the California Department of Public Health states that, effective March 15, 2021, the following persons will be eligible for vaccination:

- Individuals ages 16 through 64 who are deemed by the clinical judgment of their health care provider to be at the very highest risk for morbidity and mortality from COVID-19 as a direct result of one or more of the following severe health conditions:
  - o Cancer, current with debilitated or immunocompromised state
  - o Chronic kidney disease, stage 4 or above
  - Chronic pulmonary disease, oxygen dependent
  - Down syndrome
  - Immunocompromised state (weakened immune system) from solid organ transplant
  - Pregnancy
  - Sickle cell disease
  - Heart conditions, such as heart failure, coronary artery disease, or cardiomyopathies (excludes hypertension)
  - Severe obesity (Body Mass Index ≥ 40 kg/m2)
  - Type 2 diabetes mellitus with hemoglobin A1c level greater than 7.5%

OR

# If as a result of a developmental or other severe high-risk disability, one or more of the following applies:

- The individual is likely to develop severe life-threatening illness or death from COVID-19 infection
- Acquiring COVID-19 will limit the individual's ability to receive ongoing care or services vital to their well-being and survival
- Providing adequate and timely COVID-19 care will be particularly challenging as a result of the individual's disability

Please note that eligibility for vaccination does not guarantee access to the vaccine due to limited supply.

"Building Partnerships, Supporting Choices"

Regional Center Executive Directors March 9, 2021 Page two

In order to provide verification of consumer eligibility for vaccination, by March 15, 2021 regional centers should begin providing personalized letters to each consumer described on page 1 of this Directive, who is not already known to be vaccinated. Regional centers must use the template letter enclosed with this Directive for this purpose.

Pursuant to W&I Code section 4639.6, to reduce risks associated with COVID-19, regional centers are directed to conduct outreach to, and make contact with, regional center consumers ages 16 through 64 who are not already known to be vaccinated, their family or conservator, or with the administrator of their licensed residential facility. Outreach to consumers most at-risk from COVID-19 complications should be prioritized.

Outreach and contact should be accomplished by telephone, in-person or via an online platform such as Zoom, WebEx, FaceTime, or Teams. Contact should be made in preferred languages, whenever possible. Emails, text, Everbridge messages or other written communications may be used when direct phone or in-person efforts are unsuccessful.

With this outreach, the regional center shall make every reasonable effort to provide the following information to consumers, families, conservators or home administrators:

- Information about where consumers can obtain a vaccine.
- Information about how to schedule an appointment to receive a vaccine.
- Options for assistance in accessing vaccines, including regional center or service provider assistance, making appointments, transportation, public telephone hotlines or websites and similar resources.
- When needed, provide information about the vaccines and their safety, such as from the Department's Frequently Asked Questions and other resources found here: https://www.dds.ca.gov/corona-virus-information-and-resources/vaccine-testing/
- Remind them to bring their personalized letter to the vaccination site to verify eligibility for vaccination.

The regional center shall make every reasonable effort to obtain and document the following information for each regional center consumer, if the consumer or conservator consents to provide it:

- Information necessary to populate all applicable vaccination fields required in SANDIS, including but not limited to:
  - Date(s) of vaccination
  - o Brand of vaccine
  - Any significant adverse reaction, as specified in SANDIS
  - Whether the consumer or conservator declines vaccination
- Any request by a consumer for assistance in scheduling and accessing a vaccination, and the type of assistance requested.

In the interest of public health, time is of the essence. Therefore, the regional center may utilize its own employees to make these contacts, or may utilize the individual's existing service providers to do so, if necessary. Regional centers' communication efforts should include

Regional Center Executive Directors March 9, 2021 Page three

notifying consumers and/or families that someone other than their individual service coordinator may be contacting them about vaccinations, if such a decision is made.

This Directive is necessary to protect the health of consumers from the risks associated with potential COVID-19 infection and is effective immediately.

The Department will make available on the Department's website de-identified data on vaccinations collected as a result of this Directive.

# **Regional Center Relief**

The Department recognizes the extra effort required to contact each consumer, their family or conservator, or the administrator of their licensed residential home. The focus of available employee time should be on consumer health and obtaining available vaccination. Therefore, individual regional centers may make requests of the Department that would provide relief to that regional center to assist in increasing available resources to comply with this Directive. Proposals and requests should be submitted to <a href="mailto:DDSC19Directives@dds.ca.gov">DDSC19Directives@dds.ca.gov</a>.

Consumers, family members or providers should contact their local regional center with any questions regarding this Directive. Questions from regional centers should be directed to <a href="mailto:DDSC19Directives@dds.ca.gov">DDSC19Directives@dds.ca.gov</a>.

Sincerely,

Original signed by:

NANCY BARGMANN Director

**Enclosure** 

cc: Regional Center Board Presidents

Regional Center Administrators

Regional Center Directors of Consumer Services Regional Center Community Services Directors

Association of Regional Center Agencies

























February 19, 2021

Governor Gavin Newsom 1303 10th Street, Suite 1173 Sacramento, CA 95814

**Re: Equity Must Drive Vaccine Distribution** 

Dear Governor Newsom,

We write today as organizations representing the millions of low-income people of color in California, including those served by community health centers, independent physician practices, and counties - most of whom are on Medi-Cal or uninsured. This is the very population the state is focused on vaccinating in an equitable manner, and significant resources are being spent on combatting fear and hesitancy via trusted messengers and providers. These individuals trust their healthcare providers because these providers understand their patients' unique concerns and needs - all of which will be effectively forsaken due to the state's push for speed and centralization of the vaccine administration in California. We urgently request the state maintain the current system that has allowed for vaccines to be distributed through counties, while the state works to ensure that community health centers, independent community practices, and counties are all: part of the distribution system; appropriately contracted and onboarded with the new Blue Shield Third Party Administrator (BS TPA); and that the general public understands the new system. There remains much confusion about the vaccination process at both the state and local levels. Furthermore, a complete shift to myTurn should not be made until the system can achieve a series of critical functions.

We appreciate the vision the state has put forward via the TPA. Creating a statewide integrated data system for vaccines is admirable, and once developed, could help to target and ensure the vaccine is administered appropriately and expediently. However, the speed of the rollout threatens to block safety

net and community-based providers from receiving and administering the vaccine. The Blue Shield TPA has proposed providing financial incentives to providers, should they refer and their patients be vaccinated by other providers that have been onboarded by the TPA. While we appreciate the idea to include all providers, we advise against developing a new referral system instead of simply allowing these providers to continue receiving and administering the vaccine. We also strongly recommend that the state require the TPA to utilize similar strategies to the FEMA sites, allowing community-based organizations to register their members for reserved appointments and soliciting community input regarding the most effective mobile vaccination sites. If the state would simply allow all providers to be onboarded before shutting off the current system, these incentive tools wouldn't be necessary, and patients could receive a vaccine from their already trusted providers.

Furthermore, the current functionality of myTurn is not yet ready. The system is not yet available in all of the threshold Medi-Cal languages, nor is there a clear timeline in place to do so. It also does not have functionality to target the people most in need of the vaccine. For example, there is no way to indicate that an individual registering for a vaccine appointment is homebound, in need of transportation, or needs a specific accessibility or policy modification. The system must be fully operational and easy to use for both providers and patients in order for any county or the state to go live with this tool as the central mechanism to distribute and administer the vaccine. If the state moves too quickly, it will only create more confusion and frustration for Californians seeking to receive the vaccine. We recommend that no county be moved to the new TPA system until the following is achieved:

- myTurn is available in all Medi-Cal threshold languages.
  - Currently, the system is only available in English and Spanish. In order for all Californians to access the vaccine via MyTurn, it must be made available in all languages spoken by Californians, including indigenous languages.
- myTurn has both private and public clinic functions.
  - Currently, the site only has the "public clinic" function which means any vaccine clinics scheduled will be publicly viewable through the myTurn appointment site.
  - The public clinic is easily accessible to many individuals and vaccine appointments are not easily saved for those who are most in need - older, brown and black, Native Americans and Native Hawaiians and Pacific Islanders, others at high-risk, and vulnerable populations including agricultural workers, homeless, and essential workers.
- Providers and community-based organizations (CBOs) have resources to help patients navigate the myTurn site.
  - Many of the people most in need of the vaccine cannot navigate the myTurn site. There
    are digital literacy, reading level, and broadband divides inhibiting easy use of myTurn.
     We are witnessing these barriers in real time as older adults and those with limited
     English proficiency (LEP) struggle to navigate the vaccine registration process.
  - Safety net providers, CBOs, and independent physician practices need resources for staff to help their patients and constituents schedule through myTurn.
- Providers have been trained and onboarded to myTurn
  - All current vaccinating providers, particularly the CHCs, independent physician practices, and counties, need to be supported in onboarding to myTurn.
  - The state should focus on building interfaces with all the electronic medical records and prioritize those utilized by the safety net first.

Given the state's announcement that individuals 16-64 years old who are deemed to be at very high risk for morbidity and mortality from COVID-19 are eligible to be vaccinated beginning March 15, we further urge that the state work in an expedited fashion to answer key questions like how the TPA and its network will successfully vaccinate individuals in this population.

Finally, we recommend that more robust and uniform data on vaccine administration be released regularly in order to make allocation decisions and ensure accountability of the TPA. The TPA must be held accountable to specific and transparent equity goals. Specifically, we recommend the following:

- Provide a greater level of disaggregation in the race/ethnicity data, including Asian and Pacific Islander subpopulations who have vastly different levels of vulnerability and access to health systems and whose disproportionate impact is often masked by being included in the larger racial category.
- Add sexual orientation and gender identity data in order to accurately access and address vaccine access gaps for the community.
- Allow for data to be viewed in an intersectional manner. For example, the race/ethnicity breakdown of people 65+ who have received the vaccine.
  - Siloing demographic information ignores the compounding impact of discrimination that COVID-19 has brought to bear and limits our ability to measure the state's progress toward equitable distribution.
  - Furthermore, the state must work with the TPA to report data across other metrics, including for example, whether an individual resides in a congregate setting, or has multiple chronic conditions or a functional limitation.
- Working with CHCs and CBOs to map vaccine distribution using a measure of social vulnerability
  that includes measures beyond the Healthy Places Index (HPI) to more clearly determine
  whether the vaccine is reaching the places of highest need or where we need to direct
  additional outreach and allocation.
  - Composite tools, like the Healthy Places Index, are important, but there is value in augmenting the HPI with additional indices and tools that consider racial equity, language spoken or LEP, multi-generational households, and COVID-19 risk. We recommend that the state, TPA and local health jurisdictions augment the HPI with additional indices, if used. We would recommend exploring other tools, such as the UCLA Pre-Existing Health Vulnerability (PHV) index, created specifically for the pandemic, which captures the risks or severity of COVID-19 infection due to preexisting health conditions.
  - Regardless of the risk/vulnerability index that is used, mapping COVID-19 risk is not the only way to vaccinate against COVID-19 and achieve health equity. In many communities, geography is a far less useful than how people associate. Many communities congregate around churches, CBOs, cultural centers or other central hubs regardless of where they reside. Moreover, dispersed communities will orient around a single church or organization, making that entity the access point. Furthermore, some small, isolated communities have fewer points of access, need culturally or linguistically competent services, and require targeted outreach. Therefore, CBOs, CHCs, and others working with high-risk populations, i.e., racial/ethnic communities, immigrants, LEP individuals, persons with disabilities, etc. should lead the strategy to most effectively reach COVID-19 vulnerable populations.

California cannot achieve an equitable end to this pandemic without all CHCs, independent physician practices, and counties participating. We respectfully ask the Administration to prioritize and include all CHCs, independent physician practices, and counties to be a part of the Blue Shield TPA, and only once all of these providers are onboarded would the county switch from the current system to the new TPA. Once this is accomplished and the switch has occurred, we urge you to utilize robust and uniform disaggregated data collection and reporting mechanisms to the TPA accountable to provide equitable access to the vaccine.

We welcome the opportunity to discuss how to equitably vaccinate California to achieve herd immunity. Andie Martinez Patterson, VP of Government Affairs, (<a href="mailto:apatterson@cpca.org">apatterson@cpca.org</a>) can coordinate a follow-up meeting as soon as possible.

Sincerely,

Carmela Castellano Garcia, Esq.

President and CEO

California Primary Care Association

annela Castellan Gami

Rhonda M. Smith

**Executive Director** 

California Black Health Network

Silvia Yee

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cc:

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Nadine Burke Harris, MD, MPH, California Surgeon General, Office of the California Surgeon General Erica Pan, MD, State Epidemiologist & Deputy Director for Center for Infectious Disease, California Department of Public Health

William Lightbourne, Director, California Department of Health Care Services Jacey Cooper, State Medicaid Director and Chief Deputy Director for Health Care Programs, Department of Health Care Services

Cora Hoover, MD, MPH, Public Health Medical Officer, California Department of Public Health

# **MARCH 23, 2021**

# AGENDA ITEM 13 INFORMATION ITEM

# STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

# **Committee Reports**

SCDD Committee reports have been provided in the packet for review and informational purposes.

# **Attachments**

- A. The Administrative Committee met on 2/23/21. The meeting summary is attached.
- B. The Employment First Committee met on 2/4/21. The meeting summary is attached.
- C. The Executive Committee met on 2/23/21. The meeting summary is attached.
- D. The Self-Advocates Advisory Committee will meet on 3/22/21. The meeting summary will be provided as a handout.
- E. The Statewide Self-Determination Advisory Committee (SSDAC) met on 2/16/21. The meeting summary is attached.

# AGENDA ITEM 13A.

# ADMINISTRATIVE COMMITTEE SUMMARY

# Date of Meeting

February 23, 2021

# Meeting's Focus

The Administrative Committee met on February 23, 2021 to receive an update on current year budget expenditures, review and provide input on the 2021-22 Proposed SCDD Budget.

Members provided feedback on the materials presented and agreed to share that feedback with the Executive Committee who were scheduled to meet and review, among other things, the Administrative Committee's recommendation on the proposed budget later that day.

# Items Acted Upon

- Approval of the June 2019 and February 2020 meeting minutes.
- The Committee acted to recommend that the Executive Committee move the FY 2021/22 Proposed SCDD Budget to the Council in May.

# Future Meeting Dates

To be determined.

# AGENDA ITEM 13B.

# **EMPLOYMENT FIRST COMMITTEE SUMMARY**

# Date of Meeting

February 4, 2021

# Meeting's Focus

The Employment First Committee (EFC) met on February 4, 2021. The meeting began by welcoming new members to the Committee and providing them with a brief overview of the Committee's history and purpose. Members then heard from each department and/or organization member and were provided an update on activities designed to get people back into the workforce in light of the pandemic.

The focus of meeting included breaking into two groups to work on the first draft of the 2020 EFC Report and beginning their targeted discussions on data, the service delivery system, emerging practices, and education and training. This targeted discussion was the result of action taken at the September 2020 to identify issues to work on at each 2021 meeting so that Committee activities are better linked to recommendations in the 2021 EFC report. One of the activities that excited the Committee was the possibility of partnering with SCDD to apply for the ASPIRE Grant. However, following further research, some of the Committee partners were unable to meet the timing requirements for this Grant opportunity. SCDD staff will work with the Committee to develop a game plan for future opportunities.

Members concluded their meeting by receiving updates on standing agenda items such as the implementation status of data sharing legislation, the CIE Blueprint, Workgroup updates and more.

# **Items Acted Upon**

The Committee approved the September 2020 meeting minutes.

# Future Meeting Dates

May 6th, July 22nd, October 7th

# AGENDA ITEM 13C.

# **EXECUTIVE COMMITTEE SUMMARY**

# Date of Meeting

February 23, 2021

# Meeting's Focus

The Executive Committee met on February 23, 2021. The meeting's focus centered on building a sense of community among the Executive Committee members and honing in on best practices for the Council in the year ahead. Executive Director Aaron Carruthers also provided Committee members with a report of recent Council activities, and Deputy Director Doug Sale gave an update on the SCDD budget.

# **Items Acted Upon**

The Committee acted on the following items:

- The October 2020 Executive Committee meeting minutes were approved.
- The Chairs of each SCDD Committee provided updates on their respective committees as well as a discussion of their personal values and Council-related goals for the coming year.
- Committee members received a leadership training session from Angela Castillo-Epps, Technical Assistance Specialist for the NACDD Information and Technical Assistance Center (ITACC).
- The Committee reviewed current fiscal year budget updates and the draft budget for the coming fiscal year (2021-2022).
- The Committee reviewed updates to the Out of State Travel policy.

# **Future Meeting Dates**

April 13, 2021

# AGENDA ITEM 13E.

# STATEWIDE SELF-DETERMINATION ADVISORY COMMITTEE (SSDAC) SUMMARY

# Date of Meeting

February 16, 2021

# Meeting's Focus

The Statewide Self-Determination Advisory Committee (SSDAC) met on February 16, 2021. Committee members began the meeting by approving the September 2020 meeting minutes and then moved on to hear updates from the Co-Chair's on SSDAC activities that had taken place since the September meeting. The Committee then turned its focus to breaking into groups to develop recommendations using data collected from each regional center Chair. Following the breakout session, breakout facilitators presented their group's recommendations to the full Committee for consideration and discussion.

# **Items Acted Upon**

- Approval of September 2020 minutes
- Committee members approved the recommendations in concept and delegated the SSDAC Co-Chairs and Workgroup Members to synthesize the recommendations that were designed to assist regional centers in completing more enrollments before June and distribute those recommendations.

# Future Meeting Dates

TBD

**MARCH 23, 2021** 

# AGENDA ITEM 14 INFORMATION ITEM

# STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

# Next Meeting Date and Adjournment

The Council's next meeting is scheduled for Tuesday, May 25th, 2021.