

CALIFORNIA: ANNUAL PROGRAM PERFORMANCE REPORT

SECTION I: IDENTIFICATION

1. *State/Territory*

CALIFORNIA

2. *Fiscal Year*

2020

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SECTION II: COMPREHENSIVE REVIEW AND ANALYSIS

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

<p>Placement options for people with I/DD are typically determined/restricted by the level of care necessary to maintain that client's health and well-being. Community placements are voluntary, outside of placements determined and enforced by a conservator's decision, even against the conservatee's will.</p> <p>The Department of Developmental Services (DDS) reported 366,180 people with I/DD were served by the regional center (RC) system. Of those clients: 999 live in a Skilled Nursing Facility (SNF); 259 live in state-operated facilities; 6% (23,245) live in a Community Care Facility (CCF); 497 live in an ICF/DD; 1% (3,552) live in an ICF/DD - H; <1% (2,096) live in an ICF/DD - N; 1,606 live in a Family Home Agency (with up to 2 beds); 3% (9,354) are receiving Supported Living Services (SLS); 5% (17,666) receive Independent Living Services (ILS); and, 2,575 are reported in 'other' (e.g. homeless, acute care, etc.)</p>
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settings (DDS, 2021, Reported Positive Covid-19, Table 2, p. 2).

While California's range of congregate care settings is typically broad enough to serve the medical/care needs of people with intellectual/developmental disabilities (PwI/DD), there are challenges associated with community integration and inclusion of residents. Intermediate care facilities (ICF) in California are typically 4 to 15-bed facilities (licensed by the Department of Public Health [DPH]), with approximately 1,100 ICF's throughout the state, including 13 large ICF/DD and 677 ICF/DD-H (Habilitation, with up to 15 beds), and 405 ICF/DD-N (Nursing) facilities with 15 or fewer beds (CAHF, 2021). Corporate providers (e.g. California Mentor, etc.) also offer medically-supported services and residential options, including specialized residential (962/853) homes, ICF/DD (with 24/7 nursing, behavioral supports or habilitation services) options, and related services (e.g. SLS, day activity programs, employment services, etc.).

California's Department of Health Care Services (DHCS) reported that more than 13,800,000 (over a third) of the state's residents qualified as being eligible for Medi-Cal (DHCS, 2021, p. 3, Figure 2). When limited to seniors and persons (on Medi-Cal only) with disabilities, that number dropped to a little over 666,000 (p. 4, Table 2). Of those eligible for Medi-Cal, 49.5% reported being Latinx, 17.8% were White, 15.4% did not disclose their race/ethnicity, 9.7% were African-American, 9.7% were Asian/Pacific Islander and 0.4% were of American Indian/Alaskan Native descent (p. 8, Figure/Table 6). Of all those eligible, 16.8% chose a Fee-for-Service model, while 83.2% were enrolled through Managed Care programs (p. 9, Figure/Table 7). Additionally, only 11.1% (1,534,104) of the total number held dual eligibility (p. 10, Figure/Table 8).

COVID-19 is changing policies and practices in congregate care settings (for both children and adults) throughout the state, changes that are likely to continue indefinitely. The Community Care Licensing (CCL) Division of the California State Department of Social Services (DSS) oversees training and licensing of administrators and Community Care Facilities. During the pandemic, a number of training and licensing requirements were waived and/or postponed, although CCL will be evaluating Enhanced Behavioral Support Homes (EBSH), Adult Residential Facility for Persons with Special Health Care Needs (ARFPSHN) and Community Crisis Homes (CCH) on a case-by-case basis, as they are not unilaterally included in the statewide waivers (CCL, 2021, PIN 21-03-CCLD, p. 2). Additionally, ongoing Executive Orders are being issued (current to August 2021), providing authority to DSS for guidance to facilities and administrators about health and safety concerns, including visitation, communal dining, bed/facility capacity, alternate care sites, staff augmentation, etc. (CCL, 2021, PIN 21-10-CCLD, p. 1-5).

During the pandemic, onsite inspections of congregate care settings (e.g. ICFs, CCFs, etc.) were suspended, and visits from friends and loved ones were severely limited and/or suspended completely. This departure from regulatory requirements was a response to the COVID-19 infections and deaths and the uncertainty of transmission (and survival) factors for those in care settings. During the early months of this public health crisis, personal protective equipment (PPE) was in short supply and, for many - completely unavailable, even in commercial supplies. The Council partnered with the federal and California state Office(s) of Emergency Services to disseminate millions of pieces of PPE, though public health scares continued to promote highly restrictive care environments. Although these restrictions were established for valid public safety reasons, access restrictions effectively increased risks to the personal safety of PwI/DD, as the investigative/inspection access to those same facilities became a secondary consideration. Little to nothing is publicly known (or being reported) about suspected abuse and neglect during the past year and a half, as a result, although the

Department of Public Health has stated that "it still sent inspectors to investigate the most severe complaints" (Sharma, KPBS, 2021).

Of the 61,849 PwI/DD living in congregate care settings, 588 people have reportedly died of (identified) Covid-related causes between May of 2020 and July of 2021, with 196 (26%) of those deaths involving CCF residents and 134 (18%) involving patients living in a SNF. Of the 304,331 PwI/DD living in their own home or that of a family member, 156 (21% of all) deaths related to Covid-19 were reported (DDS, 2021, Table 4, p. 4). DDS maintains a Vaccine Dashboard (<https://www.dds.ca.gov/corona-virus-information-and-resources/data/>), which provides up-to-date information about the overall vaccination status of RC clients/consumers, although it relies on data that is voluntarily provided and may not be fully accurate, as a result. As of August 16th, 2021, DDS reported that 84,246 RC clients had received at least the 1st dose of a vaccine (this also included fully vaccinated individuals); 73,928 were fully vaccinated; and, 20,178 RC clients had declined vaccinations. Additionally, of clients living in congregate care settings, it was reported that 26,471 residents had received at least one vaccine dose, 24,757 had been fully vaccinated, and 1,322 had declined the vaccine (DDS, 2021, Reported Vaccination Status).

According to DHCS, the (actual and forecast) number of psychiatric hospital patients receiving mental health services is expected to be approximately 27,672 for FY 2019-20 (Medi-Cal Specialty Mental Health Services, p. 172). These (real and/or potential) population figures are not broken out to identify the number of patients with (co-morbid mental health conditions and) I/DD receiving intensive mental health services and/or treatment. In fact, acute mental health response and treatment through generic and community-based therapeutic models continues to be an overwhelming challenge for PwI/DD and their families and caregivers. Anecdotal reports from parents and caregivers throughout the state relay stories of being turned away from hospitals and acute mental health treatment facilities for PwI/DD, who are referred back to their regional centers for information, referrals and/or behavioral health assistance/care. Poorly trained/paid facility staff (reportedly) often rely on local law enforcement agency personnel to respond to acute, violent behavioral and/or psychiatric events - either with 'threats' of or actual arrests and confinement in law enforcement detention facilities (jails).

DDS maintains a 44-bed facility in Porterville Developmental Center (PDC, including the secure treatment program) for PwI/DD in need of acute psychiatric/behavioral care, with transfers to the Canyon Springs Community Facility (CSCF, with a 10-bed capacity for such placements), in the event of longer-term psychiatric/behavioral/habilitative treatment needs, placements or court-ordered commitments (including those for individuals who require rehabilitation pending court proceedings). As always, treatment at PDC or CSCF is considered transitional, as it is always the intent to allow PwI/DD to live in the least restrictive environment possible, outside of court-ordered placement, treatment or detention/sentencing limitations/requirements. DDS has developed project areas, based on MHSA (Mental Health Services Act) funding, reflecting stakeholder mental health (and other) priorities, which - although reflecting some of the Council's own priority areas - continue to fall behind the broad-reaching mental health needs of PwI/DD in congregate care and other settings (DDS, 2021, Project Priority Areas, p. 1-2).

Resources:

https://www.ahd.com/free_profile/050546/Porterville_Developmental_Center/Porterville/California/.

<https://www.cahf.org/programs/developmental-services>.

<https://www.dds.ca.gov/transparency/facts-stats/quarterly-client-characteristics-reports/>.
https://www.dds.ca.gov/wp-content/uploads/2021/08/DDS_COVID-19_demographics-and-residence_08122021.pdf.
<https://www.dds.ca.gov/corona-virus-information-and-resources/data/>.
<https://www.dds.ca.gov/corona-virus-information-and-resources/data/>.
<https://www.dds.ca.gov/wp-content/uploads/2020/01/cycle5Priorities.pdf>.
<https://www.dhcs.ca.gov/dataandstats/statistics/Documents/Medi-Cal-at-a-Glance-March2021.pdf>.
<https://www.dhcs.ca.gov/dataandstats/statistics/Documents/FastFacts-March2021.pdf>.
<https://www.dhcs.ca.gov/services/MH/Documents/SMHS-Budget-Supplement-M21.pdf>.
<https://www.ca-mentor.com/adult-services/specialized-residential-homes/>.
<https://www.cdss.ca.gov/Portals/9/CCLD/PINs/2021/CCLD/PIN-21-03-CCLD.pdf>.
<https://cdss.ca.gov/Portals/9/CCLD/PINs/2021/CCLD/PIN-21-10-CCLD.pdf>.
<https://cdss.ca.gov/Portals/9/CCLD/PINs/2021/ASC/PIN-21-21-ASC.pdf>.
<https://www.kpbs.org/news/2021/may/18/state-resumes-inspections-california-nursing-homes/>.

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

California provides significant HCBS supports, services and enhanced protections to its three most vulnerable populations: children, elders and 'dependent adults.'

"Dependent adult" means a person (regardless of whether the person lives independently) between the ages of 18 and 64 years who resides in this state and who has physical or mental limitations that restrict his or her ability to carry out normal activities or to protect his or her rights, including, but not limited to, persons who have physical or developmental disabilities, or whose physical or mental abilities have diminished because of age.

California's definition of a "developmental disability" means a disability that begins before an individual reaches 18 years of age; continues, or can be expected to continue, indefinitely; and, presents a substantial disability for that individual. This term includes those with an intellectual disability, cerebral palsy, epilepsy and/or an autism spectrum disorder. This term also includes disabling conditions found to be closely related to intellectual disability or that require treatment similar to what is required for individuals with an intellectual disability but shall not include other impairments that are solely physical in nature.

The Department of Developmental Services (DDS), through California's HCBS Waiver for Californians with I/DD, provides case management and related home and community-based supports/services. DDS accomplishes this work through a contract-based network of 21 regional centers (RCs), which are private, nonprofit agencies providing assessments/diagnoses, service eligibility determinations, case management and yearly, individualized service plans for people with I/DD for life.

Once RC eligibility has been determined, most services and supports provided through RC-vendorized, community-based entities are free, regardless of age or income. While there is no charge for the diagnosis and eligibility assessment process, there may be co-pays required for some services purchased through the RC system. For people with I/DD who are not yet 18 or who are married, Institutional Deeming exempts consideration of parental/spousal income and/or health coverage for RC service payment consideration. RCs are also tasked with funding Early Start assessments and services for at-risk infants and children, as well as those already identified with developmental delays

or disabilities.

Those not being served by HCBS services, however, still need additional attention. In terms of ethnicity, regional center clients demonstrate a different proportional representation than California's overall ethnic distribution:

- 1: Ethnicity
- 2: % of DDS Clients
- 3: % of CA Pop.

1	2	3
Asian	7.04%	15.3%
Black/African American	9.25%	6.5%
Hispanic/Latino	39.05%	39.3%
Native American & Alaska Native	0.35%	1.6%
Native Hawaiian & other Pacific Islanders	2.84%	0.5%
White	31.88%	36.8%
Other/2 or more races	9.57%	*

Identifying those not currently being served (but should be entitled) by established systems is as important as identifying those who are served by HCBS system and the outcomes of those services. Addressing pervasive racial disparities in services must be a part of determining the overall adequacy of HCBS services.

In 2014, California released a report on closing institutions and how to care for former residents within the community. The report was responsive to SCDD's and other advocates' pleas about the difficulty in finding home and/or community-based providers. Similarly, vendors pleaded about inadequate rates. This report recommended a study of the service system rate structure to determine the adequacy of HCBS services. In 2016, the Legislature committed \$3 million to fund a study of HCBS service rates for people with IDD, which was produced in 2019 with a number of findings and recommendations.

There are a variety of different rate-setting methodologies, including statutory rates, median rates, and negotiated rates. This resulted in multiple methodologies applying to the same service codes. Many service codes employ multiple billing units, for example, a daily or hourly rate. After tracking 25 years of rate increases and reductions, the study showed that rate methodologies and practices varied across the state and even between various regional center service codes. Rates also varied for the same service, even within an individual regional center's cost codes. This resulted in a rate and billing system that made it difficult to operate and more difficult to determine the overall adequacy of funding for HCBS services.

The rate study set out to identify, analyze and, if identified, reset any and all inequitable rates. The values used to approach the work included equity, transparency, the advancement of policy goals and objectives, and efficiency. To address the issue of equity, it was determined that providers should receive the same rate for delivering the same service in the same area, rather than assigning rates that varied, based on a provider's historical costs, negotiating prowess, or simply the date when

service delivery originally began. To ensure transparency, it was determined that rate models must specify the factors, values, and calculations that produce the overall rate. Any newly set rates should advance policy goals, which could include improving direct care staff benefits/salaries, increasing the amount or quality of training staff receives, lowering staff-to-consumer ratios, incentivizing services delivered in 'natural' environments, etc. For the purpose of efficiency, models should also have the flexibility to adjust updated, specific cost billing factors, as based on current data and (subject to) available funding.

After restructuring the entire California DD service delivery system with this budgeting approach, the rate study concluded that the California system was underfunded by \$1.8 billion. The Legislature put down an initial 'down payment' of \$400 million, which largely went to across-the-board rate increases but did not address the overall rate structure. Through the next state budget, the Governor and legislature intends to commit to more fully funding and implementing the rate study over a five-year period. SCDD issued public comments that questioned whether additional funds would mean better outcomes for people served by the system:

"SCDD reviews whether policies or systems will lead to a better quality of life for a person with an intellectual and developmental disability (IDD). At this point, it is inconclusive as to whether this rate study, when implemented, would lead to a better quality of life. It is unclear if this rate study would lead to better outcomes for people with IDD."

In 2019, SCDD funded a demonstration grant to identify key service-level, measurable outcomes to promote high-quality service delivery. In 2020, this grant resulted in a framework to measure outcomes, as based on the experience of people who are actually served within the system. In the 2021-2022 budget, the legislature is expected to provide monies to create outcome measurements and quality improvements that are designed to reinforce the system's core values of meeting individual needs based on person-centered planning. These investments in the core HCBS service delivery system - along with development of outcome measures based on individual needs - should identify with more clarity and accuracy the adequacy of HCBS services that are provided.

SECTION III: STATE PLAN IMPLEMENTATION

A. Introduction	Provide an executive summary with cohesive information that provides an overview of the report including, but not limited to the following: (1) targeted areas of emphasis, (2) strategies used to implement activities; (3) significant accomplishments and/or barriers to OMB Approval 0985-0033 Expiration: 11/30/2024 state plan implementation; (4) needs requiring state plan amendments.
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Federal fiscal year 2020 was an exceptionally challenging year for the Council, families/individuals with I/DD and other citizens throughout the nation and in California for several reasons: 1) a worldwide pandemic, which devastated entire communities, health systems, employment

opportunities and job markets, access to housing, access to a free, appropriate public education (FAPE), social/recreational options, and national, state and local health and safety policy decisions; 2) the entire state was again challenged by recurring natural disasters (e.g. wildfires, flooding, etc.); and, 3) the Council was deeply immersed in the work of research, planning and development of its next 5-year State Plan. Each of these series of events was an enormous barrier; all of them together would have been catastrophic to the work of the Council, were it not for the broad-reaching goals of SCDD's (current) 2017-21 State Plan (e.g. self-advocacy, employment, housing, health and safety, education, and formal/informal supports and policy), which provided regional staff throughout the state with the working tools to address every challenge facing Californians with I/DD and their families. Despite these challenges, the Council met its objectives for the year and exceeded its planned workload with hundreds of activities in response to unplanned needs associated with the pandemic and natural disasters.

Over the course of FFY 2020, the California State Council on Developmental Disabilities (the Council or SCDD) engaged in advocacy, systems change, and capacity-building work through a series of six goals, 14 objectives, and a work plan that detailed specific activities and projected metrics for each objective. Additionally, the Council issued three statewide project-based grants and a focused contract project (to the USC UCEDD, one of California's highly valued federal partners). While SCDD engaged in every type of activity in completing the work of its goals and objectives, combined activities required choosing one specific type of activity for the purpose of reporting individual efforts - these were activities which included training and outreach, information/resource dissemination, large events, meetings and partnering with collaborators and coalitions, the use of leveraged, sponsorship/grant and match funding, and technical assistance (TA).

Throughout the course of FFY 2020, SCDD provided a total of 761 trainings, many of which were given in Spanish and/or other threshold languages, reaching 23,268 people. While some trainings were given solely in Spanish, there were many more that also included Spanish (and/or other) simultaneous translation(s). TA was provided during other events and through individual requests a total of 2,679 times (some of which were individual cases of PPE distributions), reaching 398,656 people. Information and resource distribution efforts were split into hard-copy and electronic distributions/e-blasts for a total of 2,517 times, reaching 2,980,968 people. The Council, in collaboration with state and federal relief agencies, disbursed 101,901,800 pieces of personal protective equipment (PPE, with a value of \$60,296,995), which included masks, face shields, gowns, containers of sanitizer, etc. In total, the SCDD impacted and touched the lives of 552,937 people in California and in Native American/Tribal communities stretching from the Three Rivers area of California to the Four Corners regions of neighboring states.

The Council participated in more than 300 community events (some of which were mass PPE distribution events), reaching 111,622 people and worked with over 500 collaborative partners throughout California. Additionally, the Council engaged in: 1) 5 Council meetings throughout the year; 2) 143 Regional Advisory Committee (RAC) meetings, reaching 55,581 people; 3) 6 Employment First Committee (EFC) meetings, involving 191 people; and 4) 4 Legislative Policy and Planning Committee (LPPC) meetings, bringing in 45 people. Regional and headquarters (HQ) staff leveraged \$326,717 in funding (with an additional \$43,999 in match funding), while issuing approximately \$300,000 in grant and/or sponsorship monies, through the Council's range of activities.

The bulk of Council work is produced at the staff level, in 12 regional offices, HQ, and satellite programs inside developmental centers (DC) and within community facilities (CF). Each year, SCDD

and its State Plan Committee (SPC) identify specific goal areas in which to focus more intensive work and attention and release grants to community-based organizations to engage in research, demonstration/validation projects, and other types of programs that may not be funded by other means but which will push forward increased access to programs, services and/or civil rights of persons with disabilities (PwD). For FFY 2020, the Council chose to focus on developing service quality measures and transition/employment for its grant-driven work, resulting in strong outcomes on which further work in these areas may be built. The Council also contracted with a UCEDD to provide accessible in-person (reaching 133 people) and online training (posted to the SCDD website) to individuals and entities about grant-writing requirements, skills and techniques, to expand and strengthen the field of those applying for SCDD grants.

Of particular note is the SCDD grant-supported work of the California Supported Living Network (CSLN), which has developed outcomes-based training and is completing a PAVE Report (this grant project's contract was extended into FFY 2020). This project is expected to impact the lives of families/people with I/DD throughout the state with the development of outcome measures to study and verify the tangible value of California's system of supports and services in the lives of real people. The California Transition Alliance (another grant-funded project of the Council) produced a series of (posted and available) online videos (targeting youth and young adults), the most prominent of which is 'Let's Work!', which has been translated into several languages. The work of this grant was also extended, with a full video release expected sometime in 2021. Finally, the Learning Rights Law Center received SCDD funding to develop a video-based, online educational rights and advocacy training for parents and community members in English, Spanish and Mandarin (through the online self-advocacy training portal). By the close of the fiscal year's project, this well-received series had been viewed by 63 parents through the E-TIGER website, which will be an ongoing resource.

The Council continued its work on other successful projects to benefit families and individuals with I/DD. Specifically, its expertise at providing mission-specific agencies (e.g. law enforcement, disaster relief, health-related entities, etc.) with subject matter expertise (SME) about PwI/DD and other disabilities has resulted in ongoing requests for training, technical assistance and project collaborations. The training and partnership of residential staff, PwD, and emergency personnel in emergency preparedness trainings has continued to be critical in the face of wildfire and flooding disasters in every area of the state. Through collaboration with the Red Cross, staff has provided families and people with I/DD and others with information and resources to prepare evacuation-ready 'go-bags' in case of emergencies and evacuations. Regional staff has provided direct assistance, information, training and tangible supports during evacuation and emergency relief efforts in the aftermath of local disasters. Council (regional and HQ) staff has engaged in ongoing provision of POST-certified disability-related training and support to first responders throughout California, continuing partnerships and sharing subject matter expertise with law enforcement, mental health, and other regulatory/enforcement agencies. Of more immediate value, the Council's mission readiness skills, staffing and connections in communities throughout the state have made it a preeminent partner in the state's outreach efforts to provide vulnerable populations with critical, up-to-date health and safety information and access to life-preserving PPE during the COVID-19 outbreaks.

California's Self-Determination Program is moving forward into full implementation but is still proving to be a slow and arduous process, as confirmed by regional Self-Determination Advisory Committees. Transportation continues to be an ongoing challenge for every community in California in reaching critical services, especially in the face of a pandemic and statewide quarantines. Likewise,

employment and housing will also be an ongoing challenge for families/individuals with I/DD. The Council has streamlined its process of providing survey options (through Qualtrics), although self-advocates and others who attend Council trainings (through online classes/platforms) often require one-on-one support and/or requests to complete them. In an unexpected finding, those whose primary language is not English (who have proven in the past to be reticent to disclose personal/demographic information [e.g. ethnicity, area of residence, etc.] to a governmental entity) have provided more demographic information through the Qualtrics platform, although it is not clear why this is so. SCDD staff are continuing to identify ways to collect and process more accurate, comprehensive data through this platform and are encouraged by early findings and results. While the Council has largely met its 5-year goals and objectives, it will continue to engage in the work of the current State Plan through the end of the 2021 FFY.

Cultural Diversity	Describe the Council's overall efforts to address the needs of individuals with developmental disabilities and their families of a diverse culture through its state plan supported activities.
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This state - like so much of the country - is richly diverse in its ethnic, linguistic and cultural representation. According to the most recent population figures, more than 39% of the California's population is Latinx, making it the single largest ethnic/cultural/linguistic group in the state (). California also has 109 (of 574 nationwide) federally recognized Native tribes - the largest of which is the Yurok - with an additional 78 Native groups submitting petitions for formal/federal recognition (LANAIC, 2021). Early in California's pre-history, there were as many as 135 distinct Native dialects spoken (LoC, 2021). While English is now the primary language used by First Peoples (Koyfman, 2017), there has been a resurgence in the recognition, learning and usage of Native dialects (Kamisher, 2021), with some high schools offering credits for learning a Native language, in addition to a broad range of languages other than English (CDE, 2021). In 2010, the California courts faced discrimination complaints regarding the lack of translation services offered, when it was determined that California's residents spoke "at least 220 languages" (Dolan, 2017). According to CMS, the following represent the top 15 of California's many spoken languages (2021):

- Spanish
- Chinese
- Vietnamese
- Tagalog
- Korean
- Armenian
- Persian
- Russian
- Japanese
- Arabic
- Punjabi
- Mon-Khmer/Cambodian
- Hmong
- Hindi
- Thai

The Council's Designated State Agency (DSA), the Department of Social Services (DSS), clearly

identifies California's language accessibility rights to "free interpretive (oral) and translation (written) services" and to "receive effective language services in a timely manner," with complaint rights through the U.S. Title VI of the Civil Rights Act of 1964 and the California Dymally-Alatorre Bilingual Services Act, Government Code 7290, et seq. (DSS, 2021). SCDD has followed the example of its DSA by providing interpreting and translating services in the activities of the 5-year State Plan. This included the statewide survey, conducted for the purpose of building the upcoming 2022-26 State Plan.

The Council typically approaches its interpretive and translation responsibilities from a foundational standard of presenting information first in plain language. There are, of course, notable exceptions. For example, legislation and legislative analysis is typically written with complex concepts and legal terminology. Likewise, federal reporting typically requires levels of detail, industry-specific jargon and analysis that do not lend themselves to plain language presentation. SCDD does, however, reduce complex material and resources into plain language for public posting, meeting and distribution efforts.

Through the work of the current State Plan, the Council has launched a new website with articles, links and new accessibility features (e.g. language translation settings, alternative viewing options, etc.) that are designed to reduce and eliminate barriers to effectively bringing valuable information to Californians with a range of impairments or disabilities. For material/resource distributions, SCDD staff provides translated materials in the language of choice for those making accessibility and/or accommodation requests. Family/self-advocates are encouraged to make requests regarding translations, interpreting and/or other modifications when signing up for training and/or special events, which allows for such arrangements to be completed by the time of the actual activity. For those unable or unwilling to make such requests ahead of time, staff follows up by providing translated information and resources as soon as possible.

Regional staff independently schedules training, in 12 offices throughout the state. In response to requests, interpreters are provided for in-person and/or remote learning training sessions. Resources (with advance notice) are also provided in the language of choice, as are survey materials. With COVID-related stay-at-home orders in place, staff was still able to contract for interpreting services with online meetings/trainings. Because translation services are expensive, personnel in all of the Council's regional offices have shared materials and the expense associated with translating resources. Translations have first been obtained in Spanish, with other languages added as budgets and/or requests have permitted.

The Council also takes cultural barriers into consideration when planning/implementing activities. In each of SCDD's 12 regions, staff is familiar with the culturally diverse populations and the challenges associated with cultural 'inreach' efforts. In one region, staff has arranged to make presentations at Black churches on Wednesday evenings when Bible studies are held and well-attended. In another region, several culturally/linguistically specific parent support groups provide for Council access to and influence with diverse populations. In yet another regional office, staff has used a tribal community center as a centralized location for training and other outreach events targeting Native families. The institutional memory and knowledge of SCDD's staff is critical to developing and maintaining strong relationships in culturally rich and linguistically diverse communities within California. When possible, Council projects involve SA/FA focus groups that provide cultural insight and linguistic expertise for the development of training, resources and outreach efforts. This has been especially true of the Council's work in the area of regional center service disparities. Parents and

community members of diverse cultures and languages (especially Spanish/Latinx) have been critical to maintaining the integrity and accessibility of the Council's services and inreach efforts.

In planning for future cultural/linguistic challenges, SCDD is considering the development of an online learning resource platform, which would provide on-demand training opportunities designed to be fully accessible to Spanish-speaking/Latinx family/self-advocates. Such resources could then be converted/translated/interpreted into other languages, as the Council engages in the work of the next State Plan cycle. With the restrictions associated with the current pandemic, students and adults with I/DD and their families have become far more conversant with online platforms and resources and this may prove to be of benefit in meeting more needs in more accessible ways.

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B. Evaluation of State Plan Implementation	In this section report on the evaluation activities conducted and results.
B1. Evaluation Activities	Describe the evaluation activities undertaken during the fiscal year being reported, including evaluation activities conducted to strategically assess the overall progress and direction of the state plan implementation.

The State Council on Developmental Disabilities (SCDD) used in a mixed method (qualitative and quantitative) evaluation model for its work and collected and reported information about its activities in a variety of ways, while maintaining transparency in the State Plan implementation process. Council staff documented and reported all work plan activities, events, trainings, etc. on a monthly basis in a newly developed online reporting platform (Qualtrics). The State Plan Team (SPT) spent 6 months developing the initial platform, which had a soft launch in December 2019 and a full launch in January 2020. During this time, staff documented all activities in Excel workbooks, which were later uploaded into the platform and combined with the rest of FFY 2020 data. After a few months working with the new platform, adjustments were made, based on staff feedback, to address issues as they surfaced. One major change to the platform was a shift from custom individual survey links to a single, standard agency-wide survey. This allowed for a more streamlined process, with more oversight, as regional managers were able to review/approve staff activity reports prior to final submission.

The SPT also created a customized FFY 2020 dashboard with filters set for each manager to review/edit their own activities and those of their regional office personnel, which enabled them to view/download reports of their region's activities, trends and associated quantitative and narrative (qualitative) data. Regional reports were then shared with each associated Regional Advisory Committee and local community stakeholders. Immediate access to these activity reports proved to be helpful in planning future activities. In addition, at headquarters (HQ), executive and administrative staff used custom dashboards to track specific activities (e.g. policy-related, trainings, etc.). Quantitative data was pulled on a bi-monthly basis and shared with the Council, its committee members, and communities served throughout the state. Administrative staff produced reports to track the Council's quantitative progress toward meeting overall targeted work, specific activities, grant-funded projects, and the number of people served.

Council staff redesigned post-test and satisfaction instruments that would not only reflect the quality of/satisfaction with the completed activities, but also capture the type of data needed to report through the federal performance measures. After reviewing feedback collected in FFY 2019, the SPT created an online version of survey instruments, so training participants would have the option of taking the post-test/satisfaction surveys electronically or with a hard copy. With the onset of the pandemic March 2020, this link proved crucial as the Council transitioned to a Zoom/online-model for nearly all meetings/trainings/events. As the community and SCDD personnel became more comfortable with the Zoom platform, staff began using the registration and poll features to collect the same data/feedback. With analysis of this data, gaps were identified and the SPT created a list of new questions to add to surveys based on the area(s) of focus. These improvements were substantial

enough to update the Qualtrics platform and move toward customized objective post-tests & satisfaction surveys that included new questions. Demographic data collection efforts were still met with some significant resistance, as family/self-advocates and community members consistently reported that - due to the country's ongoing political climate - they did not feel comfortable disclosing personal or demographic information. As a result, attendees typically refused to sign attendance sheets and/or fill out pre/post-tests and satisfaction survey instruments that were used to collect data.

The Council's sub-grant-funded entities are all required to provide quarterly reports identifying progress on work associated with individual projects. Unlike the Council's regional staff, grant-funded entities' 2019 year-end reports were based more specifically on federal performance measures and yielded more valuable data specific to FPMs. Because Council staff transitioned to using improved FPM-relevant survey instruments this FFY, the data yield has improved from past years. In order to increase the volume of valuable data for FFY 2021, the Council will continue to refine the process of long-range data collection for outcomes associated with events outside of discrete trainings (e.g. resource fairs, conferences, etc.).

B2: Evaluation Results	Report the broad results of the evaluation activities described above (B1), including a broad assessment of the overall progress of Council supported activities.
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The State Council on Developmental Disabilities (SCDD) began using new online survey instruments that are more closely aligned with federal performance measures and track activities better as they relate to individual/family advocacy and/or systemic change efforts. While the Council collected and reported quantitative data about all activities, qualitative feedback about Council efforts was limited to verbal feedback from participants through a variety of survey instruments (e.g. Qualtrics surveys, Zoom registration/polls/chats and hard-copy surveys).

Family/self-advocates (SA/FA) and professionals consistently provided positive feedback, both during and following activities. Narrative pre/post-test and survey information (in hard-copy and/or electronic format) was uniformly positive, in response to specific training, projects, events and activities. Feedback from participants of large events (e.g. conferences, fairs, and other outreach events) tends to be anecdotal and provided by only a few participants, as there are typically so many people engaged in diverse activities. Because much of the Council's regional and 'large event' work is collaborative in nature, staff receives feedback from collaborative partners in real time, adjusting outreach and engagement activities, curriculum and material distribution accordingly. This is especially true of law enforcement-related trainings, the evaluations for which were designed, implemented and collected by individual agencies (e.g. Peace Officer Standards and Training, etc.). Law enforcement agencies and personnel tend to be highly expressive and immediately abandon instructors and/or programs that are not effective or well-received. Given those factors, the Council's success in that environment has been particularly notable.

SCDD staff continued to report that collecting satisfaction/survey information (either in-person or over the phone/email) after events was especially cumbersome and impractical, as staff is heavily engaged in outreach, training and other activities throughout the month. Event-based survey instruments also continue to meet with some hesitancy, reluctance, and/or outright opposition on

the part of attendees, who are focused on the event (e.g. training, etc.) and have limited time and attention to spare for activities that do not directly benefit and/or inform them. Ongoing mistrust associated with self-identification information has also prompted family/self-advocates to avoid completing demographic questions and/or satisfaction surveys.

The Council's 'head count' (IFA 1.1 and 1.2) numbers are currently reflective of the actual number of events and attendees. Some system change (SC) FPMs were also collected, as well as FPMs associated with IFA-related outcomes/sub-outcomes. Surveys taken at the actual time of an activity yielded 'intended' outcomes, as desired and anticipated and expressed by participants, but did not necessarily reflect 'actual' outcomes, based on implementation and post-event surveys. While there was an increase in the volume of quantitative data in comparison to past years, staff recognized the need for continued improvement, and began further developing the process and adapting data instruments.

The Council's new online survey data collection instrument/process is now designed to capture system change implementation and results, in the aftermath and as a direct result of Council activities. The shift to an online survey allows staff to spend more time engaged in the actual work of the Council (e.g. training, resource fairs, conferences, collaborative meetings, etc.) and either collect feedback/data by sharing a Qualtrics link for participants to fill out after the event, or by collecting demographic data/FPMs during Zoom registration and other FPMs and satisfaction feedback in real time, using Zoom polls. Since transitioning to the collection of online feedback (through Qualtrics/Zoom), staff has noticed an increase in the number of overall responses and, specifically, IFA responses. Staff has noted gaps in collecting feedback on SC data and created new surveys to collect this data in FFY 2021. The Council will continue to refine the process to meet both workload expectations and the community's needs.

B3. Lessons Learned and Future Work of the Council	Report on how the Council will use lessons learned from state plan implementation and the data gathered from the evaluation activities to move forward the work of the Council.
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FFY 2020 was a year of trials for the California Council, which was also experienced at a national level. The pandemic required Councils throughout the country to develop new, creative and effective ways of reaching families/individuals with I/DD with important information, training and support. Staff time that had been set aside for research and State Plan development was suddenly diverted by emergency activities to reach people with PPE. In-person trainings (frequent in previous years) were reduced and nearly phased out, to be replaced by virtual/online platform-based training, technical assistance and clinics. Typical outreach, training and advocacy efforts that were almost generational (as people naturally aged), requiring the Council to progress in reaching 'new' sets of families and self-advocates as their life changes produced new information and support needs - now changed to exigent, sometimes life-preserving activities, such as public emergency health/safety/evacuation alerts, reaching service providers and families with critical personal safety equipment, and working to influence and change COVID-related policies that affected civil, medical and educational rights and services on behalf of people with I/DD and their families and service systems.

SCDD renewed its Qualtrics platform in 2020, extended the pilot and added to the available number

of electronic post-activity surveys available to regional staff, as it was proving to be an effective data-collection tool. Efforts to collect demographic and satisfaction data shifted (largely) to electronic data-gathering, which also produced changes in the types and configuration of data sets that were collected, compared and analyzed over the course of the current 5-year State Plan. SCDD continued to collect/analyze hard-copy reports from grantees, although it plans on also shifting to collecting only electronic grant-related data collection in the future.

As the Council sent out both (statewide) electronic and paper surveys to identify needs for the development of the next 5-year (2022-26) State Plan cycle, it reached out to focus groups and Regional Advisory Committees (RAC) to obtain more granular data from those already advocating within the systems of supports and services for family/people with I/DD. This information (combined with survey data from all 12 of the Council's regional offices and personnel) and direction from the State Plan Committee (SPC) informed the development of the 2021-22 workplan and Requests for Proposals for future SCDD grant funding. The Council agreed that it was imperative to move forward with planned grant projects and its annual workplan, while also meeting exigent, pandemic-related needs, which required establishing integrating new data sets for activities that were in line with the workplan but produced unexpected amounts and types of information. This, in turn, required periodically updating the Qualtrics system (with new sets of survey queries) to accommodate this influx of information. New queries produced new data sets, which meant that 'spare' information was collected that was not necessarily compatible with information/data sets collected in previous years - but was valuable nonetheless and will help analytical staff better design upcoming 2021 activity surveys.

SCDD's analytical staff, in an attempt to individualize data platforms for regions, created individual data surveys and dashboards for each staff member, a critical error that immediately produced problems in collecting and comparing disparate data for statewide analysis. Changes to individual staff surveys proved time-consuming and had to be replicated for each member. Mid-year, SCDD shifted to a single survey-based platform with individual dashboards for every office/staff. This allowed managers to track and manage regional activities and report back to their community stakeholders about regional work and accomplishments, consistent with emergent needs and the annual workplan, while still maintaining the integrity of statewide data. Cleaning and verifying data (collected earlier) was accomplished, though it proved time-intensive.

The pandemic required a number of in-house, statewide changes to the way the Council did business. The most striking of these changes was a primary shift to online training, which resulted in SCDD providing fewer trainings during the year, but also reached more people (761 trainings, reaching 23,268 people) with information and resources. When the statewide quarantines hit, SCDD experimented with a number of online meeting and training platforms (e.g. Zoom, Go-To Meetings/Trainings, Microsoft Teams, WebX, etc.), finally contracting with Zoom. Regional staff was adjusting to the new Qualtrics system, but not all regions were able to collect/preserve online activity satisfaction and demographic data effectively (e.g. through Zoom polls, etc.), so data was neither collected or reported uniformly between the Council's 12 state regions. And, although more demographic data was collected (through Qualtrics), analytical staff identified that it was not categorically differentiated by SA/FA/other - another 'cleanup' issue that will have to be resolved in the future. Staff also identified a way to differentiate urban/rural activity demographics by collecting participants' town/city data and cross-checking against database information (U.S. Census Bureau [2019]) to determine the number of rural residents (responding to survey demographics) who were served through SCDD activities.

SCDD also recognized that there have been problems in collecting grant-related data in a timely manner, as grantees have not been uniformly meeting reporting deadlines and data doesn't always conform to the federal performance measures. Changes will be made to the RFP, moving forward, to clarify reporting requirements, and the analytical staff will develop and provide training for grantees on reporting procedures and metrics. The Qualtrics system was highly beneficial in tracking supplies of PPE. The Council was initially flooded with PPE and struggled to find adequate storage, relying heavily on collaborative community partners. By tracking inventory, PPE delivery requests, distribution events, etc. through Qualtrics, the Council was able to shorten delivery times for critical safety equipment and broaden its reach in scheduled, monitored distribution efforts.

Another challenge surfaced, as a direct result of the pandemic. As regional staff encountered quickly changing field conditions, secondary to COVID-19, the analytical team realized that a mechanism was necessary to collect newly emerging information and issues to provide to the executive staff as quickly as possible. The Qualtrics surveys were again expanded to include data sets for emerging issues, anecdotes and outcomes/successes. As an immediate result, the Council was able to identify problems in providing free lunches to children with disabilities, collaborate with the State Department of Education, and quickly resolve statewide inequities in food access for underserved children. Now that regional staff has a vehicle for reporting emerging issues more efficiently, Qualtrics will have to be updated with an in-house tracking process to ensure that issues are routed to the correct manager/executive and handled expeditiously, which will be a system update project for 2021.

Yet another benefit to the Council's investment in Qualtrics has been providing up-to-date information to Council and Committee members about statewide and regional activities, the number and range of people reached, and newly surfacing concerns. The analytical team's capacity to pull together large amounts of data also allowed it to compare and contrast overall needs to planned activities. As the State Plan Committee met to consider the next 5-year State Plan, it was able to step back and reconsider the format used in previous plans, based on needs identified in current, comprehensive survey material and its overall mission, as defined by the Federal DD Act. What staff and SPC members realized, in looking at the data over an extended period of time, was that regional staff were exceptional at identifying and responding to immediate and/or individual advocacy and/or capacity-building needs within communities throughout the state. Less clear, however, was a statewide strategy for making and reporting systems change that could be implemented and accomplished regionally, as well as at the statewide level. As a result, the State Plan Committee used these trends to change California's next 5-year State Plan to one that is specifically built on self-advocacy, systems change and capacity-building goals. This may serve to focus the reporting of outcomes on those mission-focused actions, rather than strictly topics of concern.

C. Input on National Priorities	
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The COVID pandemic brought into focus how OIDD can collaborate with other federal entities to care for the needs of people with intellectual and developmental disabilities, their families, and their caregivers:

Plain Language Information: Partner with various federal entities to provide information needed during an emergency in plain language, with picto-graphics, and in multiple languages. Issues include:

How to Stay Healthy

What Should I Do If I Think I'm Sick?

What I Should Do If I Get Sick

What to do if Family or a Caregiver Gets Sick

Create a COVID-19 Health Passport

Coronavirus Scams and Fraud Alert

Top Questions from Self-Advocates

Top Questions from Family Advocates

Ideas for Activities While Sheltering in Place

10 Tips to Support Someone During Times of Change

Virtual Meetings: Getting Started & Tips

Phone Tree Tips

COVID-19 and IDEA Part B Special Education

COVID-19 and IDEA Part C Early Intervention (Early Start)

Have You Lost Your Job or Hours at Work?

Accessing CalFresh

Buying Food Online with CalFresh at Amazon

Buying Food Online with CalFresh at Walmart

Data: Partner with the Center for Disease Control and Prevention (CDC) to include I/DD and other disabilities in COVID surveillance measures.

PPE: Partner with FEMA to procure and distribute personal protective equipment (PPE) to people with I/DD, their families, and caregivers. The critically needed PPE includes surgical masks, N95 masks, face shields, gloves, gowns, hand sanitizer, and sanitizing wipes.

Education: Partner with the US Department of Education to educate parents on how to receive special education services during the pandemic, adapt it remotely and receive associated services.

Other long-standing issues would benefit from creative collaboration:

Prevalence: Partner with the National Institutes of Health, Centers for Disease Control and Prevention, a UCEDD, or other health research entity to update the prevalence rate for IDD. The CA DD Council uses the Gollay and Associates national prevalence estimate of 1.58%. This rate is woefully inadequate to the rate increase documented by more recent studies, like the 2020 report by the National Health Statistics National Health Statistics Reports, Number 139, February 19, 2020 (cdc.gov) and the 2017 CDC Data Brief Products - Data Briefs - Number 291 - November 2017 (cdc.gov) While these reports look at prevalence and trends among diagnoses for children, this information signals the need to update the prevalence statistic for whole populations, including children, adults, and older adults.

Housing: Partner with Housing and Urban Development for targeted housing programs for people with IDD. In California, approximately 68% of adults with IDD live with aging family members or caregivers. This creates a hidden bubble of people who are truly in unstable housing situations and at risk of homelessness. To prevent a crisis, targeted housing programs need to be developed, including building new, accessible housing and paying for rent.

Emergency Preparedness and Response: Partner with FEMA to prepare people with IDD for wildfires, floods, hurricanes, tornadoes, and earthquakes. With the rate of extreme weather increasing, creative partnerships with emergency response entities are needed to both help people with IDD prepare and respond to this emerging reality.

SECTION IV: STATE PLAN IMPLEMENTATION PROGRESS REPORT

Planned Goals

Goal 1: Self-Advocacy

Section IV: A

Area of Emphasis	Planned for this Goal	Areas Addressed
Quality Assurance	Yes	Yes
Formal and Informal Community Supports	Yes	Yes

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

Intermediaries and Collaborators	Planned for this Goal	Actual
State Protection and Advocacy System	Yes	Yes
University Center(s)	Yes	Yes
State DD Agency	Yes	Yes
Other Collaborators	Yes	Yes

Goal Narrative

Federal fiscal year 2020 (FFY 20) presented challenges that required the State Council on Developmental Disabilities (SCDD or Council) to use innovative approaches for capacity-building on behalf of both family and self-advocates in each of the 58 counties throughout California. Self-Advocates, being especially vulnerable to complications due to COVID-19, have suffered greatly from the social isolation imposed by stay-at-home orders. The Council stepped in to address the need for socialization, information and training, and was able to expand the availability of training and resources by quickly implementing the use of online platforms. Regional and headquarter staff engaged in 1,471 self-advocacy activities, using approaches that met the needs of 169,247 family/self-advocates and others (31,079 self-advocates [SA], 78,314 family advocates [FA] and 59,854 others), meeting targeted goals in every area of emphasis, with the exception of childcare (which was largely an unavailable service during the pandemic).

The Council provided facilitation and tangible supports for family/self-advocates through training, information, leadership and self-governance opportunities, with an emphasis on the service and civil rights of individuals and their families. SCDD developed and/or updated 29 curricula (21 for the Self-Determination Program [SDP], 7 SDP curricula in Spanish, 1 curriculum for the Statewide Self-Advocacy Network [SSAN]), and it prepared 363 family/self-advocates to become peer trainers, while providing valuable information to 179 others, as well. The Council's SSAN peers led 6 trainings, reaching 129 people (105 SA, 8 FA and 16 others). Regional and headquarter staff collaborated with peer trainers to provide 41 Self-Advocacy trainings, reaching 732 SA, 91 FA and 340 others (a total of 1,163 people), and 23 trainings about boardsmanship/leadership, reaching 434 people (247 SA, 88 FA and 99 others). Staff also provided 66 Self-Determination trainings (13 in Spanish), reaching 161 SA, 785 FA and 593 others.

Transitioning to virtual/online systems allowed staff to conduct more trainings (including T4T) that focused on capacity-building for family/self-advocates in a variety of topics. The use of virtual reporting platforms has also produced a slight increase in the number of satisfaction surveys received. Virtual meeting platforms such as Zoom (with registration and polling features) presented a promising practice for increasing data collection and survey responses in future trainings. The use of virtual software to conduct trainings (and meetings) reduced travel time/expenses and provided staff, as well as members of the Council and its committees and self-advocacy and advisory groups, with the ability to attend and engage in more activities remotely.

The Council provided facilitation and tangible supports for 216 regional Self-Determination Advisory Committee (SDAC) meetings, reaching 476 SA, 1,702 FA and 1,668 others. The Council provided supports for 27 SSAN meetings (serving 182 SA, 14 FA and 99 others) and 4 Self-Advocate Advisory Committee (SAAC), reaching 87 SA, 9 FA and 58 others. Regionally, the Council provided tangible supports and services through 205 local self-advocacy meetings, serving 3,368 people (2,432 SA, 191 FA and 754 others). SCDD relied on virtual meeting platforms and social media to further extend its reach, which included 236 electronic distributions of self-advocacy-related information and resources to a total of 154,639 people (25,079 SA, 74,443 FA and 55,101 others). Through training and other activities, the Council provided information in plain language (English), Spanish, Cantonese, Mandarin, and Korean.

The Council systemically increased the autonomy of self-advocates through its work on the soft rollout of California's Self-Determination Program (SDP) and targeted statewide self-advocacy networks and organizations through 10 in-person and virtual conferences (e.g. hosting events, marketing, curriculum development, etc.), reaching 662 SA, 25 FA and 104 others with information

dissemination, training and technical assistance (TA) opportunities. The Council also provided valuable services in helping state and local agencies reach people with I/DD, distributing personal protective equipment (PPE), and providing information related to emergency assistance programs and resources (reported in Goal 4). Council staff responded to 475 requests for TA and provided guidance/assistance, information/resources, and referrals to 475 SA, 462 FA and 337 others.

Due to the ongoing public health crisis, SCDD staff was required to restructure previously scheduled self-advocacy related trainings and events to be delivered virtually rather than in person. Most large, in-person events in which Council staff has historically been involved (through planning and/or tangible support) were canceled. During the initial transition period in March, scheduled SAAC, RAC, and other self-advocacy meetings were canceled, due to public health concerns. While there were limited activities due to COVID-19 restrictions, staff across the state saw an increase in turnout and awareness of SCDD self-advocacy activities and continued to make great strides in promoting self-advocacy in California. SCDD staff began developing several promising practices and programs aimed at increasing autonomy and leadership skills of family/self-advocates across the state. Regional office staff worked to develop virtual leadership training programs for family/self-advocates, along with topical, facilitated chats (set to begin during FFY 2020-21) to provide advocates with resources and address the statewide need for interaction and relationship-building during the ongoing stress and isolation of required social distancing.

Although the Council met or exceeded most of its projected activity and outreach/training numbers for this objective, it also recognizes that the work of promoting self-advocacy is an ongoing, integral component in ensuring that Californians are able to access the supports and services necessary to ensure that people with I/DD and/or cross-disabilities have a voice in decisions that affect their lives and communities. SCDD will continue to integrate the lessons learned, along with new tools/approaches to self-advocacy in an effort to support individuals with I/DD, their families and those entities and individuals invested in self-advocacy efforts and activities throughout the course of the current 5-year State Plan and into the 2022-2026 5-year State Plan.

4 Year Overview: A description of how the Council will use and build from knowledge gained and progress made to move forward in the next state plan cycle.

The California State Council on Developmental Disabilities (SCDD) is committed to building the capacity of all Californians with I/DD. Goal 1 of the SCDD 2017-2021 State Plan exemplifies this commitment:

Californians with I/DD and their families reflecting the diversity of the state will have increased information and supports to advocate for civil and service rights to achieve self-determination, integration and inclusion in all areas of community life.

The activities of SCDD's first objective focused on California's commitment to increase knowledge about self-determination and person-centered planning, while the work of the second objective involved the training, promotion and support of self-advocates with intellectual, developmental and/or cross-disabilities in taking leadership roles in statewide and/or local self-advocacy networks. To meet both of its objectives, SCDD worked with its federal partners (Disability Rights California and California's 3 UCEDDs), statewide agencies (Department of Developmental Services [DDS], regional centers [RCs], Independent Living Centers [ILCs]) and regional nonprofit and self-advocacy entities (including the Office of Clients Rights Advocacy and local People First chapters).

With nearly 156,000 square miles, 58 counties and a population of more than 39 million people (roughly translating into 250 people per square mile), SCDD encounters significant challenges in face-to-face outreach efforts, a process that requires creativity and heavy reliance on social media and other types of communication (e.g. emails, Constant Contact, etc.) to extend its reach throughout the state. Using a combination of events (10 in 4 years), trainings (34 curricula and 757 trainings), handouts, collaborative meetings (593 meetings with 6,364 SA and 1,385 with agency and legislative partners), website postings (1,036 postings and other social media-based events), the Council reached over 1 million people with self-advocacy-related information. Social media has also been especially effective in soliciting input and personal stories from people about the Council's advocacy, capacity-building and policy/system change efforts.

While, during FFY 2017, staff did not track or report leveraged funds, during FFY 2018, 2019 and 2020 staff was able to capture a more complete picture of SCDD's financial impact in the work of its self-advocacy goal. Over the past 4 years, SCDD leveraged over \$100,551,000 toward self-advocacy efforts, was awarded \$5,003.79 in sponsorships/grant funds, and identified \$21,853 in match funds. SCDD did not track technical assistance (TA) prior to FFY 2018, resulting in a significant increase of TA reported in FFY 2018 and 2019. There was a drop in the number of requests for self-advocacy-related TA in 2020, largely due to the public's focus on responding to COVID-19.

During the current state plan period, the Council faced some significant challenges in the initial (pilot) roll-out of the Self-Determination Program (SDP). While SCDD provided substantial SDP-related training (in Spanish and English - to family/self-advocates, RC personnel, community members, vendors, potential Independent Facilitators, etc.) over the past 4 years, the program has not been smoothly implemented through the 21 regional centers in the state (in fact - not all RCs have even implemented the SDP, to date), leading to frustration for self-advocates and their family members. Reported difficulties included the uneven process of recruiting and assigning eligible clients to the program, inconsistent standards for/application of budget/service/expenditure approvals by RC staff, pandemic-related difficulties in finding, hiring and/or retaining staff, etc. Because the Council takes the lead in holding regional and statewide Self-Determination Advisory Committee meetings, it has experienced much of the public's perception and/or assignment of 'blame' (and, certainly, frustration) regarding the program's deficiencies. While SCDD is fully supportive of person-centered planning and self-determination, it also recognizes that the SDP's statewide implementation deficits have produced significant barriers to the very people it was designed to benefit (e.g. insufficient SA/FA support from RCs, lack of education about the SDP on the part of RCs and personnel, disparities in program access by underserved populations, etc.). The Council is working with the Department of Developmental Services to address the identified shortcomings and will continue to support the goals of the SDP through training, outreach, monitoring and ongoing recommendations.

The Council excels at supporting self-advocates in statewide, regional and local SA groups, providing tangible supports (e.g. in-person meeting space, virtual meetings through Zoom, GoToMeeting, etc. and related technical assistance), facilitation, resources, training, etc. SCDD staff focused on developing online training modules to support leadership development for self-advocates in California. The Statewide Self-Advocacy Network (SSAN), an ongoing project of the Council, is active in engaging self-advocates throughout California in SA groups, peer training, special projects, etc. and produces a yearly report outlining its contributions to the statewide self-advocacy movement. The Council's Self-Advocacy Advisory Committee meets regularly to go through Council agendas, provide input to the full Council, review Council materials and resources for plain language and accessibility,

etc. Regional offices maintain ongoing support for and collaboration with dozens of SA groups throughout the state, resulting in tangible benefits for both self-advocates and the Council.

The Council reaps significant benefits from collaborating with SA groups, such as receiving SA input for needs surveys and work plans, emerging issues, connections with other disability representative or service groups, program suggestions, etc. SA groups, most importantly, gave the Council fast, in-depth access to people most in need of personal protective equipment (PPE) and related emergency assistance and related information in the midst of wildfires, floods, and the pandemic. SCDD staff focused early outreach efforts on distributing personal protective equipment to self-advocates and family advocates across California. While these efforts were not directly related to self-advocacy, they made a tremendous impact on the sense of security of self-advocates and family advocates across California and made it possible for advocates to resume advocacy work and access community-based and personal services. SCDD has also benefitted from the work of self-advocates who were T4T-trained by the Council in such subject matter areas as: Emergency Preparedness, Personal Safety, Leadership/Boardmanship, Self-Advocacy Skills, Telling Your Story (to legislators/policymakers), etc. These are the people who have become peer trainers and co-presenters (with Council staff) and/or who provide their own presentations in SA groups and other venues throughout the state.

While the Council has fully met its projected 4-year metrics and planned activities in the area of self-advocacy, it will continue to work on developing an online training platform and resource center to increase accessibility and reach for self-advocates and others and will integrate virtual training, meeting and survey collection technologies to better capture the full impact of the Council's work. Through a combination of reporting, data collection tools (Qualtrics, surveys, etc.), and digital meeting/training platforms (Zoom/GoToMeeting), SCDD hopes to continue making significant strides in educating family/self-advocates, professionals and others on the rights, services and supports available in the California DD System. SCDD will continue to advocate, promote and implement the policies and practices that achieve self-determination, independence, productivity and inclusion in all aspects of community life for Californians with developmental disabilities and their families through the end of the current plan and in the implementation of its 2022-26 State Plan.

Objective 1: The Council will increase knowledge about self-determination and person-centered planning by monitoring, supporting and actively engaging in the implementation of the Self-Determination Program.

3. This objective is:	System Change
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4. This objective is:	Ongoing
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5. This objective is:	
Fulfilling a Self-Advocacy DD Requirement	Yes
Targeted disparity	No
DD Network Collaboration	No

A demonstration project of New Approaches to Services and Supports	No
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A demonstration of projects or activities	No
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6. Stage of Implementation:	Implementation
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7. Provide an overall description of this effort:	<p>The focus of Objective 1.1 is to provide collaboration, support, information, and outreach to Californians with I/DD and/or cross-disabilities and their families that will promote person-centered planning, self-determination and self-advocacy efforts throughout the state. As an advocacy, systems change and capacity-building entity, the California State Council on Developmental Disabilities has been in the forefront of the movement toward making self-determination and person-centered planning the standard for the provision of supports and services for people with I/DD. This objective, in alignment with State Plan (development) survey results, formalizes the independent work of the Council in monitoring the planning and implementation of the statewide Self-Determination Program and preparing and bringing information and support to family/self-advocates and others. The Council has also been given statutory authority to engage in the work of this objective and provide statewide information-gathering/sharing activities with families and self-advocates with I/DD, in response to federal approval of the CMS HCBS Waiver.</p>
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Outputs Achieved	
8. Expected Outputs	9. Outputs Achieved
2 updated SDP curricula (1 in plain language & 1 in Spanish); 18 SDP trainings (12 in plain language, reaching 425 people & 6 in Spanish, reaching 90 people)	NO
Support for 2 statewide SDAC meetings (supporting 28 people) and 50 local SDAC meetings (supporting 700 people)	Yes
Hard-copy resource distributions (as requested) and 24 electronic resource distributions (reaching 9,000 people)	Yes
100 people reached with TA, as requested	Yes

<p>10. The report should include the following:</p>	<p>(a) A narrative progress that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenged to achieving the objective and unexpected benefits.</p> <p>(b) For system change activities, include a description of the stage of implementation (Planning, initiation, implementation, outcome/fully integrated) of the system change initiative.</p> <p>(c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.</p> <p>(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report)</p>
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In FFY 2020, SCDD engaged in 692 self-advocacy/determination, person-centered planning (PCP), Self-Determination Program (SDP), and person-centered thinking (PCT) activities, reaching 74,137 people. SCDD staff developed/revise/updated curriculum (21 times in English and 7 in Spanish) a total of 28 times. SDP training (in English) was provided 53 times, reaching 145 self-advocates (SA), 469 family advocates (FA), and 569 others. These trainings were also provided in Spanish 13 times, reaching 16 SA, 316 FA, and 24 others. Staff assisted 22 times in Statewide Self-Determination Advisory Committee (SDAC) meetings (including sub-committee meetings), supporting 181 SA, 294 FA, and 459 others. Staff aided in regional SDAC meetings 216 times, supporting 476 SA, 1,702 FA and 1,668 others. Resources, information and materials were provided electronically 105 times, reaching 66,947 (7,460, SA, 36,706 FA and 22,781 others) people. Council staff provided TA 247 times, assisting 92 SA, 411 FA and 222 others. SCDD planned, implemented and presented at conferences (e.g. Supported Life, the San Francisco/Bay Area Autism Society Conference at Stanford University, etc.), providing information/sessions on the SDP, PCP, IF requirements, Circles of Support, Individual Program Plans (IPP), financial management and billable services, Fiscal Management Services (FMS), etc. - in both English and Spanish. Council staff encouraged participants to complete surveys, with low-to-moderate success (i.e. of the 70 people attending a Supported Life session on the SDP, only 32 people completed surveys). SCDD provided TA, training and materials in each of California's 58 counties, reaching people in Chinese (Cantonese and Mandarin), Korean, Spanish, Tagalog and Vietnamese. In developing and updating (Self-Determination Program [SDP] and Independent Facilitator [IF]) curriculum and materials, SCDD helped other regional and community-based agencies, providing translations. The Council initiated innovations in SDP and IF trainings by collaborating with SA/FA in building and presenting specific components. SCDD integrated material into IF curriculum (e.g. emergency preparedness, abuse/neglect prevention/identification, and crisis response) to ensure that IF's are prepared to respond to emergencies on behalf of PwI/DD. SCDD converted 6-hour SDP 'live trainings' into accessible, recorded, self-paced, 6-module components. Staff integrated feedback from 'live trainings,' including PowerPoint units, transcriptions, Google-based accessible materials/resources, and live recordings. SCDD provided SDP training to SA groups throughout the state (e.g. People First, SAC6, San Francisco/Bay Area Autism Society, the ARC, etc.), collaborating with peer trainers. SCDD combined regional work to translate and present audio/visual material as

side-by-side presentations, so that people who were monolingual could familiarize themselves with (bi/multilingual) industry-specific terms in preferred languages and English. While the SDP offers a flexible funding model, hiring staff has been a barrier for FA/SA, so SCDD provided training on IHSS and SDP hiring issues (Best Practices for Helping SDP Participants Employ Home Attendants). Using Zoom, SCDD empowered SA (with personal/professional experience working with and hiring personal care attendants), who shared valuable resources, information and responses with others. SCDD was instrumental in planning, development, training and implementation of the SDP introductory pilot and soft roll-out. SCDD hosted and facilitated the Statewide Self-Determination Advisory Committee (SSDAC) and all regional committees (SDAC), each of which is associated with one of the 21 regional centers throughout the state. SCDD took a lead role in developing and providing SDP and IF training. In Los Angeles County alone, SCDD trained over 1,000 people to become Independent Facilitators. SCDD educated people throughout the state about PCP/PCT, DDS regulations and directives, roles/responsibilities associated with the SDP, promising/best practices, etc. In so doing, SCDD collaborated with Disability Rights California (DRC), the Clients Rights Advocates, all 21 regional centers, the Association of Regional Center Agencies (ARCA), current and/or potential service providers, etc. (the SDP has opened new business opportunities for people interested in providing fiscal management services or becoming independent facilitators), who rely on Council outreach and training. With its partners, SCDD (in a Community of Practices Collaboration) is putting together a report on emerging barriers associated with the SDP, potential solutions, and recommendations for DDS. SCDD identified issues with the SDP development and tiered roll-out process: 1. Spending plans have been denied because RCs would not 'approve' those that are allowable, highlighting a need for RC staff training about SDP authorizations. 2. RCs and SDACs received no new funding to cover additional costs associated with SDP implementation, so staff was given 'extra assignments,' affecting morale and reducing time for client support and casework. 3. It took time to transition from traditional services to those authorized by the SDP and IFs have not been reimbursed for providing extra supports (e.g. advocacy, direct representation, guidance, etc.). 4. Anecdotally, service/access disparities associated with ethnicity, language, socio-economic status, etc. - components that are found in RC purchase-of-service disparity data - persist in the SDP. IFs noted that those who fare better in the RC system (e.g. white, English-speaking, and/or higher-income families) are also more successful in the SDP. Other issues surfaced. RCs are struggling to provide adequate rates during budget adjustments, ensuring cost neutrality between DDS funding and service market costs. There is also significant variance between RC's, in budget calculations and reimbursement rates for supports and services. Families that have experienced economic hardship and job losses are now providing personal, in-home care for family members with I/DD to supplement or replace lost income - resulting in quality-of-care concerns, caregiver burnout and safety issues. SCDD engaged in training and outreach for service providers/vendors and others about SDP, PCP/PCT, FMS, budgets/spending plans, RCs and service coordinators, safety-related issues and mandated reporting. Council staff leveraged access during SA events by providing information on the U.S. Census and rights and responsibilities associated with voting, providing Pledge cards and other resources to encourage full voting and census participation. Outreach efforts resulted in staff providing training through Regional Occupational Programs (ROP), transitional classes, and teacher training programs. In addition to comments and survey responses, SCDD staff has noted that training participants remained fully engaged, asking questions, offering resources and information, etc. People in underserved populations wanted information about the SDP. Providing resources to people who are monolingual (in a language other than English) was a crucial part of reaching out to marginalized communities. SCDD took a leadership role in providing information and training in everyone's language of choice. To empower FA/SA to be effective participants in the SDP and S/SDAC process, the Council provided people with training and information about Robert's Rules of Order,

Bagley-Keene Act requirements, the function/importance of bylaws, and other topics about governance. SCDD addressed/provided for other practical needs of family/self-advocates in SDP meetings by providing Zoom platforms (at no cost to participants and other agencies), organizing/facilitating training and meetings, translating materials, etc. Due to emergent conditions created by the pandemic and quarantine restrictions, the Governor temporarily suspended some requirements of the Bagley-Keene Open Meeting and Brown Acts (Executive Order N-29-20) and SCDD provided updated information (in plain language) and technical assistance (TA) to agencies and individuals throughout the state. TA was requested and provided by Council staff about the SDP, its requirements, DDS' soft program roll-out, translations, etc. As quarantines were implemented, questions arose over personal/in-home care practices: how to stay safe, obtain PPE, hire/keep staff, identify/implement appropriate relational boundaries and staff expectations, etc. 'Normal' service provision was abandoned (e.g. day programs, supported employment opportunities, transportation, etc.) and 'new' service models had to be approved. Many people had difficulty arranging IPP's with RCs, as staff was seldom available to take calls and distancing requirements reduced willingness to schedule and attend in-person meetings. FA/SA also needed TA about issues like fingerprinting for personal/in-home care staff. SCDD was positioned to help state and local agencies reach PwI/DD - connecting people with emergency assistance programs and resources and helping navigate new online communication systems/platforms. People without networking service(s) were unable to effectively access information, virtual meetings, and training. Rural, underserved populations were isolated when information was most critical. The Council stepped up with creative ways of connecting school districts and government and community-based agencies (with equipment and internet resources) with SA/FA in need of tangible assistance.

Expected Outcomes Achieved	
11. Expected Outcomes	12. Outcomes Achieved
People will have information about SDP in plain language & Spanish	Yes
Statewide and local SDACs will have supports to engage in SDP efforts	Yes
People will have information & resources about PCP/SDP & self-advocacy	Yes
People will have access to TA, as requested	Yes

13. Progress towards achieving outcomes for overall objective:

While SCDD met or exceeded many of its projected numbers for this objective and its work plan activities, some activities did not reach projections, although SCDD continued to provide support for PCP and SDP. Early in the FFY, SCDD created a dedicated Facebook page for SDP (which greatly extended electronic outreach efforts), for sharing of information and resources. The use of social media has expanded the reach of the SDP program. The work SCDD does in regard to PCP and SDP will continue for the remainder of the 5-year State Plan period, pending additional information from regional staff and/or Californians about changing needs. The Council will continue to provide information and support for PCP and SDP to regional communities, self-advocates, families, and

others in California. SCDD will also continue to provide support to its statewide and regional SDACs in the course of the State Plan's remaining year.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community).

Independent Facilitators (IF) have been frustrated with implementation barriers in the Self-Determination Program (SDP). A newly convened group of IF's thanked SCDD for facilitating their meeting, as they had been feeling alone, disconnected, and unaware of the bigger picture. They reported that this meeting (and the Council's valuable assistance) helped to fill that void. The Council has taken the initiative in providing language-accessible information to family and self-advocates a priority. Staff assisted a monolingual Spanish-speaking family member who expressed interest in applying to represent the Council on a regional SDAC. The family advocate reported that she felt welcomed and is excited about the possibility of being appointed, in contribution to the Self-Determination Program. A community advocate provided input about monolingual Spanish-speakers who want to attend the regional SDAC meetings but do not because of the regional center's consistent failure to provide translations. The Council stepped into this void by providing SDAC-related training and materials in Spanish throughout California.

Objective 2: The Council will promote self-advocates in leadership roles in statewide networks a) through the strengthening of a statewide self-advocacy organization and by supporting self-advocates; b) within cross-disability leadership coalitions; and c) in training other self-advocates to become leaders.

3. This objective is:	Individual & Family Advocacy
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4. This objective is:	Ongoing
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5. This objective is:	
Fulfilling a Self-Advocacy DD Requirement	Yes
Targeted disparity	No
DD Network Collaboration	No

A demonstration project of New Approaches to Services and Supports	No
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A demonstration of projects or activities	No
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6. Stage of Implementation:	Implementation
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<p>7. Provide an overall description of this effort:</p>	<p>California is deeply committed to empowering people with I/DD and/or cross-disabilities in becoming self-governing, strong self-advocates. Due to the Council's extensive and ongoing work in this area, the community's expressed need for self-advocacy support services ranked sixth (6th) in importance through the State Plan development survey. Self-advocacy remains the Council's first area of priority, however, as Objective 1.2 focuses on supporting self-advocacy networks and entities, as well as providing training. Additionally, the work of this objective supports self-advocates in bringing information and peer-led training to peers and advocacy-related activities. The Council also recognizes that functional facilitative, administrative and financial support is critical to establishing a strong foundational base from which self-advocates can learn and practice the principles of governance and share their skills with policymakers, service providers, and/or other self-advocates within their own communities.</p>
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Outputs Achieved	
8. Expected Outputs	9. Outputs Achieved
24 prep sessions, reaching 150 people; 24 peer-collaborative self-advocacy/Boardsmanship/Leadership trainings, reaching 140 people; 10 collaborative outreach efforts, (reaching 100 SA peers)	Yes
1 curriculum; 5 peer-led trainings/outreach efforts (reaching 100 SA peers)	Yes
4 SSAN meetings (reaching 40 people), 6 SAAC meetings (reaching 40 people) & 80 local self-advocacy meetings (reaching 800 people) convened, with tangible support (e.g. travel, lodging, meeting arrangements, facilitation, etc.) provided, as needed	Yes
Hard-copy resource distributions (as requested) and 24 electronic resource distributions (reaching 20,500 people)	Yes
50 people reached with TA, as requested	Yes

<p>10. The report should include the following:</p>	<p>(a) A narrative progress that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenged to achieving the objective and unexpected benefits. (b) For system change activities, include a description of the stage of implementation (Planning, initiation, implementation, outcome/fully integrated) of the system change initiative. (c) All narratives must describe what numbers make up the</p>
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	<p>performance measures number for the activities being reported in the narrative.</p> <p>(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report)</p>
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This objective centered heavily on partnering with self-advocates, state and local agencies, and regional representative/support entities (working either directly or conducting outreach in each of California's 58 counties) that are also invested in supporting the self-governance efforts of people with I/DD and/or cross-disabilities. COVID-related concerns eliminated the option to have in-person meetings with self-advocates, so fewer people were reached in prep meetings than was planned. Beyond that, the Council met and/or exceeded the rest of its planned work in this objective. Staff partnered with more than 30 other organizations and individuals to organize meetings, events and trainings related to self-advocacy (most provided virtually), using Zoom and other networking/meeting platforms. Data was collected during Zoom meetings, through attendance at events, and feedback from family/self-advocates. Much of the in-person work involved the distribution of personal protective equipment (PPE) to family and self-advocates and community partners. The Council organized/collaborated/hosted over 648 activities (reaching more than 7,434 people), providing training, tangible and logistical supports, and up-to-date information to people with I/DD for the purpose of promoting and supporting self-advocacy efforts throughout the state. Staff engaged in planning sessions for large-scale events and conferences scheduled throughout the year and later canceled due to COVID-19 restrictions. SCDD staff engaged in 236 meetings (SAAC, SSAN, and Local SA Groups), working with more than 3,800 people. Additionally, T4T sessions provided peer training candidates with the information to engage in 70 peer-based/collaborative outreach and trainings, reaching more than 1,000 self-advocates. Electronic resources and information (including newsletters, e-blasts, e-mails, etc.) were distributed throughout the state 131 times, reaching 87,676 recipients. SCDD staff continued to provide tangible support (e.g. travel, facilitation, hosting/scheduling meetings - both in person and by teleconference, administrative supports, etc.) to the Self-Advocates Advisory Committee (SAAC), the Statewide Self-Advocacy Network (SSAN) and local/regional self-advocacy related groups throughout the state. SAAC met 5 times, reaching 114 people. The March 2020 meeting (much like other meetings and trainings) was canceled due to COVID-19 and a statewide travel ban. During SAAC meetings, members provided staff with vital feedback on language used in person-centered plan-related materials, regional center service codes, and the California Department of Developmental Services (DDS) HCBS Final Rule. Many meetings focused on the impact that COVID-19 had on self-advocates across the state. SAAC members raised concerns about the pandemic's spread in skilled nursing facilities and urged staff to continue distributing PPE to vulnerable populations in California. SAAC members also raised concerns about the impact COVID-19 and social distancing had on the mental health of self-advocates and families. In response to these concerns, the Council partnered with government agencies, coalitions and organizations to ensure that people with I/DD were involved in conversations about COVID-19 response efforts. SSAN met 4 times, reaching 120 people, and held 23 workgroup meetings for SSAN officers. During SSAN meetings, topical information was provided, such as: access to long-term services and supports, leadership development programs, supports/services for people with I/DD, etc. Members were also educated on the importance of participating in the Census and November elections. Staff from the California Department of Transportation (DOT) provided members with

updates on access-related projects and asked for feedback on how to improve transportation experiences on Amtrak for people with access and functional needs. The SSAN Newsletter and Communications workgroup developed and distributed 4 quarterly newsletters (Voices of SSAN). SSAN also provided SCDD with recommendations about ideas for legislation. SCDD provided statewide communities with vital services and supports to increase inclusion of people with I/DD in all aspects of community life. In the early months of COVID-19, staff worked with self-advocates to transition to virtual meetings. Staff collaborated with family/self-advocates to develop and give 64 trainings about boardmanship, leadership, self-advocacy, the ABLE Act, the HCBS Final Rule, voting rights, and the Census, reaching 979 SA, 179 FA and 439 others. Staff, SA/peer trainers and the National Disability Support Network provided a training (on Zoom) about design strategies to support people and build self-advocates' capacity through Zoom. The shift to Zoom meetings has allowed staff to increase the number of new people reached (through meetings) and awareness of the Council's work. In one meeting alone, the office was able to reach 10 new SA, 2 new FA and 10 new others. Attendance at events and meetings is no longer limited by geographic location, as attendees signed in from all over country (with one attendee from South America) - just one example of how SCDD was able to increase its reach with online meetings. COVID-19 created an increase in isolation, loneliness and social disconnection in the state. The Council responded to self-advocates' frustrations regarding pandemic-related restrictions by helping a local self-advocacy group plan and organize virtual trips to the coast, creating connection and community in the shared experience. The transition to virtual service delivery models also allowed staff the opportunity to put together and store virtual trainings. Staff developed Project Leadership, an 11-week peer-supported training program, a series designed to increase the ability of families to advocate for children and youth with disabilities and encourage more families to take on leadership roles. Local family advocates provided a crucial role in determining curriculum and outcomes, with members of the planning team taking an active part in delivering the series. Staff collaborated with self-advocate members of one of SCDD's 12 Regional Advisory Committees (RAC) to develop and provide 3 peer-lead information/training sessions on advocacy, including a video (My History, My Future) to help participants understand what advocacy can mean and find effective ways to advocate. Participants discussed the meaning and importance of self-advocacy, those things that are important to self-advocates and how to get involved in SCDD's self-advocacy groups (SSAN, SAAC, SDAC and RAC's). The 3 trainings reached a total of 180 SA, 2 FA, and 33 others, including 91 new people. Regional staff provided facilitation and technical assistance (TA) to SAC 6 (a regional self-advocacy group), which included setting up Zoom calls and assisting with general facilitation. SCDD presentations are standing items on SAC6 agendas. Staff provided both individual and system-level support to empower self-advocates to tell their own stories, speak about self-advocacy issues and organize large training events. Topics included Youth Advocacy, student rights, and civic participation. TA included material development, speaking notes, and other conference needs, including support in advocates' interactions with the Conference Committee. The Council engaged in planning the 25th Annual Statewide Self-Advocacy Conference, which was canceled - a common occurrence in 2020. The Council collaborated with UCEDD self-advocate employees and SSAN members, representing UC Davis Mind Institute and USC Children's Hospital, for a presentation at the 2019-20 AUCD Conference. The presentation provided an overview of SSAN and its collaboration between the UCEDDs and other disability-related advocacy agencies in California. SCDD provided substantial technical assistance and support in the planning process for Disability Capitol Action Day, organized by the Disability Action Coalition. In past years, this event has brought people from throughout California to Sacramento for a day of collective advocacy. To mark the 30th anniversary of the ADA (ADA for the Next Generation), a virtual event was held. 22 SA and 2 others were involved in the planning for the event. SCDD participated in the legislative subcommittee responsible for creating event materials and partnered with NextGen Policy to create a legislative

advocacy training and a call-to-action presentation. SCDD began development of monthly Statewide Self-Advocacy Chats designed to help self-advocates connect with others in California to reduce isolation and talk about issues that are important to them. Staff also provided TA, facilitation and support to self-advocates in developing a self-advocacy leadership series, which drew from SSAN and an existing 6-week self-advocacy development program. The new project is a bridge across communication gaps separating self-advocacy groups from one another, with a focus on legislative advocacy. This innovative approach is one of the promising practices to come out of the recent shift in service delivery models.

Expected Outcomes Achieved	
11. Expected Outcomes	12. Outcomes Achieved
Peers will be prepared to provide peer-led, collaborative training; SA will receive peer-led training about self-advocacy, etc., and will be engaged in outreach activities through SA peers	Yes
SSAN members will be empowered to collaborate & provide peer-led training & outreach activities for SA peers throughout the state	Yes
SSAN, SAAC and other self-advocacy groups throughout the state will be supported in their self-advocacy efforts/activities	Yes
People will have information & resources about self-advocacy, etc.	Yes
People will have access to TA, as requested	Yes

13. Progress towards achieving outcomes for overall objective:

Although the Council met or exceeded most of the projected activities and outreach/training numbers for this objective, it also recognizes that the work of promoting self-advocacy is an ongoing, integral component in the network of supports and services necessary to ensure that people with I/DD and/or cross-disabilities have a voice in the decisions that affect their lives and communities. Due to the ongoing Public Health Crisis of COVID-19, SCDD staff were required to restructure previously scheduled self-advocacy related trainings and events to be delivered virtually instead of in-person. Additionally, large scale in-person events, that Council staff have historically been involved with either through planning or providing tangible support, were canceled. The shift in delivery saw an increase in the number of trainings offered using Zoom and other virtual platforms. During the transition period in March, planned SAAC and RAC meetings were canceled due to Public Health concerns. While there were a limited number of activities due to COVID-19 restrictions, staff across the state saw an increase in turnout and awareness of SCDD self-advocacy activities and continued to make great strides in promoting self-advocacy in California. SCDD will continue to engage in

supporting individuals with I/DD and those entities invested in their self-advocacy efforts and activities throughout the course of its 5-year State Plan.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community).

After the Council's leadership class, a participant reported that it had a major impact on her life: She stopped avoiding tasks and placed an ad to hire a new IHSS worker - her first major accomplishment to achieve success in her life. One self-advocate who would only communicate through the chat box is now managing the chat box and reading messages to the rest of the group.

Section IV: B

Individual & Family Advocacy Performance Measures

Race and Ethnicity

Race/Ethnicity	#	%
White alone	25	23.58%
Black or African American alone	27	25.47%
American Indian and Alaska Native alone	0	0%
Hispanic/Latino	43	40.57%
Asian alone	3	4.72%
Native Hawaiian & Other Pacific Islander alone	5	4.72%
Two or more races and Race unknown	3	2.83%
Gender	#	%
Male	204	38.78%
Female	322	61.22%
Other	0	0%
Category	#	%
Individual with DD	525	91.46%
Family Member	49	8.54%
Geographical	#	%
Urban	191	74.32%
Rural	66	25.68%

I. Output Measures

Objective	Performance Measure: IFA 1.1 People with DD	Performance Measure: IFA 1.2 Family members

	who participated in activities	
The Council will increase knowledge about self-determination and person-centered planning by monitoring, supporting and actively engaging in the implementation of the Self-Determination Program.	8376	39983
The Council will promote self-advocates in leadership roles in statewide networks a) through the strengthening of a statewide self-advocacy organization and by supporting self-advocates; b) within cross-disability leadership coalitions; and c) in training other self-advocates to become leaders.	22696	38322
Total # of Output Respondents	561	358

II. Outcome Measures

Performance Measures	Percent (%)
IFA 2.1 Percent of people with DD	94
IFA 2.2 Percent of family members who increased advocacy	61

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

Projects	# People with Developmental Disabilities	# Family Members
The Council will increase knowledge about self-determination and person-centered planning by monitoring, supporting and actively engaging in the implementation of the Self-Determination Program.	64	268
The Council will promote self-advocates in leadership roles in statewide networks a) through the strengthening of a statewide self-advocacy organization and by supporting self-advocates; b) within cross-disability leadership coalitions; and c) in training other self-advocates to become leaders.	492	31
Total # of Sub-Outcome Respondents	556	299
IFA 2.3 Percent of people better able to say what they need	99.11%	83.52%

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

Projects	# People with Developmental Disabilities	# Family Members
The Council will increase knowledge about self-determination and person-centered planning by monitoring, supporting and actively engaging in the implementation of the Self-Determination Program.	51	184

The Council will promote self-advocates in leadership roles in statewide networks a) through the strengthening of a statewide self-advocacy organization and by supporting self-advocates; b) within cross-disability leadership coalitions; and c) in training other self-advocates to become leaders.	442	24
Total # of Sub-Outcome Respondents	493	208
IFA 2.4 Percent of people participating in advocacy activities	87.88%	58.10%

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

Projects	# People with Developmental Disabilities	# Family Members
The Council will increase knowledge about self-determination and person-centered planning by monitoring, supporting and actively engaging in the implementation of the Self-Determination Program.	51	116
The Council will promote self-advocates in leadership roles in statewide networks a) through the strengthening of a statewide self-advocacy organization and by supporting self-advocates; b) within cross-disability leadership coalitions; and c) in training other self-advocates to become leaders.	347	19
Total # of Sub-Outcome Respondents	398	135
IFA 2.5 Percent of people on cross disability coalitions	70.94%	37.71%

II. Outcome Measures

Satisfied	Percent (%)
IFA 3 The percent of people satisfied with a project activity	96
IFA 3.1 Percent of people with DD satisfied with activity	100
IFA 3.2 Percent of family members satisfied with activity	63

Section IV: C

Systems Change Performance Measures

SC 1: Output Measures

Objective	
The Council will increase knowledge about self-determination and person-centered planning by monitoring, supporting and actively engaging in the implementation of the Self-Determination Program.	
SC 1.1 Number of policy/procedures created/changed	0
SC 1.2 Number of statutes/regulations created/changed	0

SC 1.3.1 Number of promising practices created	0
SC 1.3.2 Number of promising practices supported	0
SC 1.3.3 Number of best practices created	0
SC 1.3.4 Number of best practices supported through Council activities	0
SC 1.3 Number of promising and/or best practices created and/or supported	
SC 1.4 Number of people trained/educated	25758
SC 1.5 Number of Systems Change activities with other organizations	291

Objective	
The Council will promote self-advocates in leadership roles in statewide networks a) through the strengthening of a statewide self-advocacy organization and by supporting self-advocates; b) within cross-disability leadership coalitions; and c) in training other self-advocates to become leaders.	
SC 1.1 Number of policy/procedures created/changed	0
SC 1.2 Number of statutes/regulations created/changed	0
SC 1.3.1 Number of promising practices created	0
SC 1.3.2 Number of promising practices supported	0
SC 1.3.3 Number of best practices created	0
SC 1.3.4 Number of best practices supported through Council activities	0
SC 1.3 Number of promising and/or best practices created and/or supported	
SC 1.4 Number of people trained/educated	34085
SC 1.5 Number of Systems Change activities with other organizations	319

Systems Change SC 2: Outcome Measures

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

III. Sub-Outcome Measures

Objective	Number (#)
The Council will increase knowledge about self-determination and person-centered planning by monitoring, supporting and actively engaging in the implementation of the Self-Determination Program.	
SC 2.1.1 Policy, procedure, statute, regulation improvements	0
SC 2.1.2 Policy, procedure, statute, regulation implemented	0
SC 2.1.3 Number of improved promising or best practices	0
SC 2.1.4 Number of implemented promising or best practices	0

Objective	Number (#)
The Council will promote self-advocates in leadership roles in statewide networks a) through the strengthening of a statewide self-advocacy organization and by supporting self-advocates; b) within cross-disability leadership coalitions; and c) in training other self-advocates to become leaders.	
SC 2.1.1 Policy, procedure, statute, regulation improvements	0

SC 2.1.2 Policy, procedure, statute, regulation implemented	0
SC 2.1.3 Number of improved promising or best practices	0
SC 2.1.4 Number of implemented promising or best practices	0

Goal 2: Employment

Section IV: A

Area of Emphasis	Planned for this Goal	Areas Addressed
Employment	Yes	Yes
Transportation	Yes	Yes
Formal and Informal Community Supports	Yes	Yes

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

Intermediaries and Collaborators	Planned for this Goal	Actual
University Center(s)	Yes	Yes
State DD Agency	Yes	Yes
Other Collaborators	Yes	Yes

Goal Narrative
<p>In a year marked by a national pandemic, the Council was able to meet and/or exceed the projected metrics for its Employment goal, engaging in 436 activities and reaching a total of 150,191 people (19,663 self-advocates [SA], 69,859 family advocates [FA] and 60,669 others) with information, resources, training, events and technical assistance. Regional staff developed or updated 5 curricula and provided 35 workshops and/or training events, reaching 502 SA, 312 FA and 343 others, for a total of 1,157 people. The Council held or attended 121 collaborative meetings with 15,276 people (910 SA, 97 FA and 14,269 others), 17 of which were for the purpose of planning or executing hiring events. SCDD also worked on 2 innovation-gathering projects (with 10 SA, 10 FA and 338 others) and 15 outreach events (296 SA, 201 FA and 262 others). Staff (electronically) sent out information and resources a total of 160 times, reaching 132,280 people (17,854 SA, 69,180 FA and 45,246 others). Regional staff provided technical assistance (TA) 98 times, as requested, serving 90 SA, 57 FA and 210</p>

others (357 people).

The Council is working to move to an online training platform, in response to pandemic quarantine/stay-at-home requirements and ongoing capacity-building needs. This will allow regional staff to reach more people than anticipated with information about competitive integrated employment (CIE). Unfortunately, the pandemic's crushing impact on large and small employers alike drastically reduced the availability of entry-level jobs, leaving transitioning students/young adults with few viable opening career options for CIE. This void became especially noticeable as the Council received just over a quarter of the number of requests for technical assistance (TA), resources, and information about/referrals for related support services, when compared to 2019.

Despite the limitations imposed by California's prolonged stay-at-home orders (for public health/safety reasons), the Council gained significant forward momentum in its policy work (more completely described in Objective 6.4 as in FFY 2018, the Council merged its separate policy objectives into a single objective beneath Goal 6 [Formal/Informal Community Supports] to allow for more concentrated policy-related activities and reporting).

Through the Council's Employment First Committee (EFC), two workgroups were developed to a) more effectively collaborate with state agencies in developing and updating information for a new Data Dashboard (that will continue to be hosted on a state agency website), and b) address statewide economic recovery plans that will include PwI/DD and/or cross-disabilities. As reported in previous years, state-level agencies tasked with updating information for the Council's CIE-related Data Dashboard have not provided the necessary metrics, becoming barriers themselves, in effect, to providing Californians with up-to-date information about employment for PwI/DD. The new Dashboard is now expected to launch in FFY 2020-21, prior to the close of the current 5-year State Plan cycle. Other major employment-related policy work involved collaboration with the Governor's Office on promoting the hiring of PwD in state service and the creation of a statewide strategic plan on CIE for PwD.

Although the Council has set projected employment-related activity metrics for FFY 2020-21, the work of this goal has largely been met - with the Employment Data Dashboard being the last major project to accomplish. While this goal will have successfully concluded by the end of the current 5-year State Plan cycle, the Council will still engage in ongoing support for CIE and PwI/DD through the work of the next State Plan (2022-26).

4 Year Overview: A description of how the Council will use and build from knowledge gained and progress made to move forward in the next state plan cycle.

The Council's employment-related work is centered on achieving competitive, integrated employment (CIE) for people with I/DD (PwI/DD). While the goal originally included legislative and systems change/policy advocacy work, the Council chose to move those activities to Goal 6, leaving only Objective 2.1, which states:

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

This has allowed SCDD to collaborate with educators, employers, service providers, state and other

agencies, Pw I/DD and/or cross-disabilities and their families to identify, build and/or disseminate information about evidence-based, best employment practices to stakeholders and engage employers to recognize the tremendous workforce potential of people with disabilities. The Council's employment-related activities were geared to target and influence stakeholders in ways that are tailored to meet specific needs while promoting the message that people with disabilities are 1) able and motivated to work, and 2) want competitive, integrated employment.

This work relied heavily on statewide collaboration with employment-related stakeholders. Collaborative efforts included meetings, conferences, resource fairs, training and the development of relationships between agencies with a common goal of increasing the number of PwI/DD employed in CIE opportunities across the state. SCDD staff worked with employers, Regional Center (RC) personnel, service/support agencies, and One-Stop Career Centers throughout California to coordinate skill development, job search, and employment support efforts between service systems. The Council's regional offices were also used as job sites for paid internships through local RC and SELPA/school district employment programs.

The Council has been relied upon to provide 'gap' assistance with communities and collaborative partnerships on complicated employment-related matters (e.g. CalABLE), filling those gaps by providing training and accurate, timely information. Council staff provided leadership on statewide, regional and local employment-related committees and task forces. Because of the Council's successful track record for sponsoring, planning and/or hosting large statewide and regional conferences, staff was asked to engage in planning activities, keynote addresses, set-up of conference venues for presentations, social activities and breakout presentations, facilitation of self-advocates' participation in events, resource tables, and information about current employment-related policy initiatives.

Technical assistance (TA) was provided primarily to community-based organizations, collaborative partners, and prospective employers about topics such as: micro-enterprise options, paid internships, workforce diversity, culturally competent strategies and resources to facilitate competitive, integrated employment (CIE) of people with ID/DD, workforce development, and the benefits associated specifically with the hiring and retention of employees with disabilities.

Through this work, the Council found that the most important and effective types of advocacy and capacity-building activities involved work that helped form/change public perceptions about the employment of people with disabilities. SCDD determined, through working directly with employers, vendors and service providers, that there are still those who hold outdated or uninformed views about the employability of people with I/DD. Employers searching for qualified workers reported that they do not always perceive people with disabilities as such and have not understood how to effectively employ, train, and/or retain employees with disabilities, being unfamiliar with the variety of accommodations and available assistive technology options.

SCDD staff provided vendors, providers, and potential employers with information about the benefits associated with hiring people with disabilities. The Council facilitated interactions between employers and job seekers with disabilities during regional hiring events, symposiums/conferences, and other public outreach events. The Council provided trainings to help organizations transition to effective, community-focused job coaching, which included topics such as the Employment First policy and related legislation, reasonable accommodations, the Discovery Model, transitioning to CIE, internships, micro-enterprise options, the Workforce Innovation and Opportunity Act (WIOA),

benefits associated with strong workforce diversity, and hiring and retaining employees with disabilities.

SCDD recognized that social messaging to PwD and family members promoted reliance on public entitlements, with little to no consideration given to the social and personal value of equal employment opportunities. This social messaging, along with misinformation about (and fear of) losing public entitlements/benefits, has led many PwD to not seek CIE, despite a desire and ability to work, become financially independent, and contribute to communities. Some self-advocates and family members who have experienced sheltered workshop environments expressed fear/resistance about transitioning into community-based employment and/or losing important supported day activities.

To combat such negative and/or inaccurate (FA/SA) perceptions, SCDD provided training to address specific financial concerns (e.g. SSI eligibility/appeals, work incentives, reporting earnings, and the ABLE Act). SCDD also worked to include family/self-advocates in peer training support roles to inform others about the changing landscape of employment services (e.g. requesting appropriate modifications and accommodations in the workplace, gaining/sharing actual employment experience, thinking about interpersonal workplace skills, etc.). The Council is continuing to standardize statewide curriculum and support peer trainers to ensure that people with disabilities are able to learn from others who have already achieved and successfully maintain competitive, integrated employment within fully inclusive workplaces. Other trainings included information about interviewing, communication and resume development, time management, job performance, and employer expectations (e.g. interpersonal/soft skills, punctuality, task completion, etc.).

There is still much work to be done to change the reality and perceptions about the employment of people with disabilities - and to educate employers about the benefits of actively including people with I/DD in business hiring plans. The Council recognizes that the transition to community-based CIE requires a focus on advocacy and capacity-building, along with dedication to promoting widespread systemic change. The Council will continue its efforts to promote the employment of people with disabilities in the final year of this State Plan and beyond, with the knowledge that achieving competitive, integrated employment is a critical step toward independence, financial success, personal satisfaction and self-governance for people with disabilities.

Objective 1: The Council will increase and promote culturally competent strategies and resources that facilitate competitive, integrated employment (CIE) of people with I/DD.

3. This objective is:	System Change
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4. This objective is:	Ongoing
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5. This objective is:	
Fulfilling a Self-Advocacy DD Requirement	No
Targeted disparity	No
DD Network Collaboration	No

A demonstration project of New Approaches to Services and Supports	No
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A demonstration of projects or activities	Yes
Project Name	
Original Start Date	

6. Stage of Implementation:	Implementation
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7. Provide an overall description of this effort:	In consideration of developing goals for the 5-year State Plan, respondents to the Council's statewide survey reported that employment was a significant need for people with I/DD and/or cross-disabilities in California, rating it as second in importance only to formal/informal supports. Self-advocates, family members and service providers continue to report back through the Council's regional offices, acknowledging the ongoing need for culturally competent strategies and resources to promote CIE in communities throughout California. This objective allows the Council and its staff to collaborate with educators, employers, service providers, state agencies and people with I/DD and/or cross-disabilities to identify and disseminate evidence-based best practices to stakeholders and encourage employers to recognize the tremendous workforce potential of people with disabilities.
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Outputs Achieved	
8. Expected Outputs	9. Outputs Achieved
3 employment-related curricula; 29 employment-related workshops/trainings, reaching 600 people	Yes
Collaboration, meetings, planning & execution of 5 hiring events (with 36 meetings), reaching 1,000 people	Yes
2 events, reaching 290 people	Yes
Hard-copy resource distributions (as requested); 24 electronic resource distributions, reaching 15,000 people	Yes
45 people reached with TA, as requested	Yes

10. The report should include the following:	(a) A narrative progress that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenged to achieving the objective and unexpected benefits.
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	<p>(b) For system change activities, include a description of the stage of implementation (Planning, initiation, implementation, outcome/fully integrated) of the system change initiative.</p> <p>(c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.</p> <p>(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report)</p>
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During the past year, SCDD met or exceeded its projected benchmarks in every area of the employment-related objective's work plan, engaging in 436 activities and reaching a total of 150,191 people (19,663 self-advocates [SA], 69,859 family advocates [FA] and 60,669 others) with information, resources, training, events and technical assistance. Regional staff created and/or updated 5 curricula and provided 35 workshops and/or training events, reaching 502 SA, 312 FA and 343 others, for a total of 1,157 people. The Council held or attended 121 collaborative meetings with 15,276 people (910 SA, 97 FA and 14,269 others), 17 of which were for the purpose of planning or executing hiring events. SCDD also worked on 2 innovation-gathering projects (with 10 SA, 10 FA and 338 others) and 15 outreach events (296 SA, 201 FA and 262 others). Staff (electronically) sent out information and resources a total of 160 times, reaching 132,280 people (17,854 SA, 69,180 FA and 45,246 others). Regional staff provided technical assistance (TA) 98 times, as requested, serving 90 SA, 57 FA and 210 others (357 people). The Council's approach to employment is strategically informed by nationally recognized best practices and leverages multidisciplinary change agents in diverse ways. Resources and information are provided in multiple threshold languages (e.g. Spanish, Mandarin, Cantonese, etc.). Data collection (reported through Qualtrics) tracks attendance, completed surveys, the number of people who have gained skills, planned advocacy efforts and planned participation in leadership activities. Qualtrics allows staff to collect, track, itemize and conduct diverse qualitative and quantitative data analysis on regional and headquarter activities.

Employer Collaborations: Council events provided an increased awareness of the value of a labor pool of PwI/DD, educated employers about the bottom-line benefits of hiring individuals with disabilities, provided employer-focused resources, and dispelled common myths about requirements associated with providing appropriate workplace modifications and accommodations. Regional staff assisted in:

- Planning and implementation of an employer appreciation/awareness event - Expanding positions in tech-related events - Promoting the use of the state's Paid Internship Program (PIP) - Extending California's limited examination and appointment process (LEAP) for people with disabilities - Participating in NorCal Business Ad Council meetings to provide advocacy and support for Pw I/DD - Participated in meetings to educate employers on the benefits of hiring PwD

Curriculum Development, Education, Outreach and Training (Transition and Employment): Research shows the primary reasons PwD do not seek competitive, integrated employment (CIE) is misinformation about or fear of losing public entitlements/benefits. SCDD sought out WIPA training to better meet demands for TA that focused on benefits consultation and work incentives.

Responding to employment-related issues (e.g. social health determinants, etc.), SCDD staff educated hospital-based, specialty-service personnel about the benefits of CIE and ways to connect patients with the Department of Rehabilitation (DOR) through direct referrals. The Council also collaborated

with DOR to provide training on pre-employment transition skills for PwD in the community and (in collaboration with community and state partners) developed/updated employment-related curricula:

- Employment: Interview Success - Breaking down the Job Interview - Prepping for a Job Interview - 8 Common Interview Questions - Reasonable Accommodations -

Employment First One of the Council's primary accomplishments was the state and nationally released production of its grant-funded documentary, Let's Work, a film that showcased the success of eight young adults who find competitive, integrated employment and explored the perspectives of key stakeholders (e.g. parents, employers, etc.). Staff held employment skills workshops, covering: 1) communication, self-advocacy and resume development (reaching 189 people); 2) breaking down the interview process and sharing tips for effective performance during interviews (serving 71 people); and, 3) time management to increase skills to aid PwD in getting and keeping a meaningful job. The Council provided training (Soft Skills for Employment) at several high schools (serving 33 people), which was designed to explain the concept of soft (social/employment) skills and provide encouragement for first-time job-seekers. In collaboration with ESSC, the Council produced the WorkFirst Transition Project, for students 14-25, providing post-secondary education (PSE), job exploration and career blueprints and resources for customized employment, career paths and financial literacy. Mid-FFY 20, SCDD quickly transitioned to remote (e.g. Zoom, etc.) training platforms and provided electronic resource distributions/updates in response to community demand and pandemic safety precautions. Through 160 electronic resources, the Council reached 132,280 people.

Interagency Collaborations: - Staff collaborated with workforce agencies on the California Committee on Employment of People with Disabilities (CCEPD) and 2 of its subcommittees for more outcomes-based CIE programming and development of business 'bottom line' resources/materials for employers - SCDD's advocacy (and outcomes) potential was enhanced by being named to the Disability Rights California (DRC) Building Back Better summit planning committee, which aims to help employers rebuild the post-Covid economy with disability-inclusive recruitment and hiring practices -

- SCDD serves on an apprenticeship committee to move the WIOA agenda/goal forward for upward mobility through increasing disability representation in high-demand apprenticeships -
- SCDD worked with the Assistant Deputy Director of Education and Outreach for the Department of Fair Employment and Housing, meeting/corresponding about collaborations in the education of SA/FA about employment and housing rights -
- SCDD participated in the Woodland Innovation Forum (a workforce collaborative addressing current employee/labor needs and how PwI/DD can meet labor needs) in collaboration with: 1) Job Center staff; 2) Woodland Community College - Student Services personnel; 3) Workforce analysts; 4) agriculture employers; and 5) Ms. Aguiar-Curry, Assembly member, 4th District -
- The Council engaged with the Employment Development Department (EDD) to present innovative ways of collaborating with agencies (e.g. the Business Advisory Council [BAC]) to publicly recognize employers who hire PwI/DD -
- Regional staff provided TA at a collaborative local partnership agreement (LPA) training -
- SCDD provided information about micro-business fairs to the Workforce Development Board (WDB) -
- Staff provided training (Verdugo Jobs Center) to educate job seekers about CIE supports, where they can be obtained, and the impact of work on one's life

Family Education SCDD provided: - Resources for CIE, DOR and discrimination in employment at a family resource night for SA and FA -

- Trainings (in English and Spanish) to SA/FA attendees -
- A leadership series (in Spanish) for SA/FA/community leaders -
- A presentation to families and self-advocates about Employment First and vocational services -
- An Employment Options Panel and resource table

Community Provider Supports SCDD engaged in the Commission on Accreditation of Rehabilitation Facilities (CARF) audit, providing input to auditors on the organization's inclusive efforts, critical systemic improvements and suggestions on how vendors can provide more inclusive services to the community of PwI/DD. Staff also collaborated directly with vendors to provide training on Competitive Integrated Employment.

Resource Provision and Innovation The Council: - Maintained an 'Interview Ready' clothing closet for self-advocates actively searching for employment - Provided work experience for Workability students who assisted and received on-the-job training for general office/clerical skills in Council offices - Engaged in program expansion, identifying 20 employers willing to serve as job shadow sites - Presented innovative ideas to service providers about employee retention and beginning small businesses with PwD - Created a document on how to access unemployment benefits for job losses incurred due to the COVID-19 pandemic and stay-at-home orders

Systems Change: SCDD's legislative advocacy work includes co-sponsorship of SB 639 (Durazo), introduced in FFY 2020, to stop issuance of 14-C subminimum wage certificates and phase out programs with below-minimum wage practices. The State Council on Developmental Disabilities, leading by example, won an award as California's Small State Employer of the year from the Association of California State Employees with Disabilities (ACSED). ACSED's award criteria included the percentage of employees (within the agency) with disabilities, the number of people with disabilities hired during the past year, and the number of people with disabilities promoted in the past year. In FFY 2019-20, 30% of the Council's workforce self-identified as being people with disabilities (PwD). The pandemic created major barriers to employment options throughout the country and California was not spared its secondary effects on young adults with disabilities and other PwI/DD who sought meaningful CIE opportunities. The Council continued its efforts to promote the employment of PwD and will continue to do so through the last year of this State Plan cycle, knowing that CIE is a critical step to independence, financial success and self-governance for people with disabilities.

Expected Outcomes Achieved	
11. Expected Outcomes	12. Outcomes Achieved
People will have training & information about competitive, integrated employment; teachers/instructors will have information about CIE	Yes
People will have collaborative opportunities to plan &/or attend hiring events	Yes
Innovative employment ideas/projects will be identified	Yes
People will have information & resources related to CIE	Yes
People will have access to TA, as requested	Yes

13. Progress towards achieving outcomes for overall objective:

The Council made significant progress in providing outreach, training, resources and technical assistance during FFY 2020, in spite of challenges associated with the pandemic. Unfortunately, the economic downturn seriously reduced employment opportunities for those persons with disabilities seeking entry-level employment options and stay-at-home orders further inhibited transition services and supports. While the Council's work in this objective was successful and met projected

benchmarks, SCDD will continue its employment-related work through the concluding year of the current State Plan cycle.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community).

Community members have reported that people who are historically underserved are having a difficult time navigating the Unemployment Insurance (UI) application process. Due to the Council's statewide distribution of the UI document in plain language, professionals at regional centers, local EDD offices, and other community-based organizations have reported that they are using the SCDD two pager as a guide and community resource. Thank you. So helpful. Now I understand it (Employment First) much better. My project is mentoring members of Fly Brave to give a seminar on what their hopes are for work. We started this months ago, then the pandemic hit. We are just getting started through Zoom, to meet and develop speeches. I wanted to thank you so much for your resource information that you shared yesterday. The site and the resources are amazing! I sent them off to all of our teachers who work with this population, my special education director and to our SELPA which oversees Burbank, Glendale and La Canada Unified School districts. Hope you are hanging in there, staying healthy and safe! Workability Coordinator, Burbank Unified School District SCDD hosted the Festival of Learning recordings. Families reached out to say that this has been the most upbeat and optimistic presentation they have seen, giving them hope for the future. Regional staff met with the local regional center (RC) Employment Coordinator about expanding Paid Internship Program (PIP) opportunities for the Sacramento Superior Court. The RC has confirmed it is in negotiations with the Court to add employees and use the PIP program!

Section IV: B

Individual & Family Advocacy Performance Measures

Race and Ethnicity

Race/Ethnicity	#	%
White alone	12	25.00%
Black or African American alone	7	14.58%
American Indian and Alaska Native alone	4	8.33%
Hispanic/Latino	14	29.17%
Asian alone	6	2.08%
Native Hawaiian & Other Pacific Islander alone	1	2.08%
Two or more races and Race unknown	4	8.33%
Gender	#	%
Male	97	32.66%
Female	200	67.34%
Other	0	0%
Category	#	%

Individual with DD	227	53.92%
Family Member	194	46.08%
Geographical	#	%
Urban	136	80.47%
Rural	33	19.53%

I. Output Measures

Objective	Performance Measure: IFA 1.1 People with DD who participated in activities	Performance Measure: IFA 1.2 Family members
The Council will increase and promote culturally competent strategies and resources that facilitate competitive, integrated employment (CIE) of people with I/DD.	19663	69859
Total # of Output Respondents	227	194

II. Outcome Measures

Performance Measures	Percent (%)
IFA 2.1 Percent of people with DD	55
IFA 2.2 Percent of family members who increased advocacy	70

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

Projects	# People with Developmental Disabilities	# Family Members
The Council will increase and promote culturally competent strategies and resources that facilitate competitive, integrated employment (CIE) of people with I/DD.	106	132
Total # of Sub-Outcome Respondents	106	132
IFA 2.3 Percent of people better able to say what they need	46.70%	68.04%

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

Projects	# People with Developmental Disabilities	# Family Members
The Council will increase and promote culturally competent strategies and resources that facilitate competitive, integrated employment (CIE) of people with I/DD.	38	56
Total # of Sub-Outcome Respondents	38	56
IFA 2.4 Percent of people participating in advocacy activities	16.74%	28.87%

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

Projects	# People with Developmental Disabilities	# Family Members
The Council will increase and promote culturally competent strategies and resources that facilitate competitive, integrated employment (CIE) of people with I/DD.	20	32
Total # of Sub-Outcome Respondents	20	32
IFA 2.5 Percent of people on cross disability coalitions	8.81%	16.49%

II. Outcome Measures

Satisfied	Percent (%)
IFA 3 The percent of people satisfied with a project activity	56
IFA 3.1 Percent of people with DD satisfied with activity	45
IFA 3.2 Percent of family members satisfied with activity	69

Section IV: C

Systems Change Performance Measures

SC 1: Output Measures

Objective	
The Council will increase and promote culturally competent strategies and resources that facilitate competitive, integrated employment (CIE) of people with I/DD.	
SC 1.1 Number of policy/procedures created/changed	0
SC 1.2 Number of statutes/regulations created/changed	0
SC 1.3.1 Number of promising practices created	0
SC 1.3.2 Number of promising practices supported	0
SC 1.3.3 Number of best practices created	0
SC 1.3.4 Number of best practices supported through Council activities	0
SC 1.3 Number of promising and/or best practices created and/or supported	
SC 1.4 Number of people trained/educated	60669
SC 1.5 Number of Systems Change activities with other organizations	166

Systems Change SC 2: Outcome Measures

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

III. Sub-Outcome Measures

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

Goal 3: Housing

Section IV: A

Area of Emphasis	Planned for this Goal	Areas Addressed
Housing	Yes	Yes

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

Intermediaries and Collaborators	Planned for this Goal	Actual
State Protection and Advocacy System	Yes	Yes
University Center(s)	Yes	Yes
State DD Agency	Yes	Yes
Other Collaborators	Yes	Yes

Goal Narrative
<p>The Council has continued working to address the lack of affordable and accessible housing for Californians with intellectual and developmental disabilities. The already limited supply of housing was significantly impacted in 2020 by the largest wildfire season in California's history. In a state that regularly suffers from a high cost of living and low housing stock, these natural disasters - combined with the economic impact of the COVID-19 pandemic - greatly exacerbated the already insufficient housing supply.</p> <p>The COVID-19 pandemic equally affected the Council's ability to engage in advocacy and capacity-</p>

building work over the course of the 2020 FFY. Quarantine and social distancing restrictions required that trainings, meetings, and events be canceled or delivered remotely. Council staff quickly transitioned to Zoom and other online meeting platforms to 1) provide support for family and self-advocates and 2) maintain the Council's collaborative efforts with community partners and housing-related stakeholders. Staff reported an overall reduction in the number of requests for training and technical assistance related to housing, as the primary focus was on COVID-19 and health/safety-related issues.

Despite these barriers, the Council was able to reach over 80,000 people with training, events, collaborations and housing-related information distribution efforts. SCDD collaborated with housing networks 38 times, reaching 541 housing advocates, developers, and other housing stakeholders to promote housing development for people with I/DD. The Council engaged with its collaborative partners, meeting with policy leaders and community-based organizations 18 times, reaching a total of 188 people.

The Council developed/updated 4 housing curricula and provided a total of 21 trainings, educating a total of 506 self-advocates, family advocates and professionals on topics such as housing rights, AB 1505 (Bloom), housing application processes, HUD Section 8 vouchers, the HCBS Setting Rule, inclusion and how to advocate for family/self-advocates. SCDD participated in 7 outreach events/activities, reaching a total of 1,031 people.

An ongoing focus of the Council is to provide family/self-advocates and professionals with current information and materials. The Council developed, updated, posted and/or distributed information and materials about housing in 70 electronic distribution efforts, reaching more than 76,000 people through the work of this goal. Regional staff provided technical assistance (TA) more than 117 times, supporting a total of 1,219 people.

Although the Council works with self-advocates to assist in applying for Section 8 vouchers, wait lists can be years long and program requirements make it difficult to find qualified housing in the short allotment period. In response to such limited options, parents of people with disabilities have expressed interest in purchasing housing to create living spaces for 3-4 self-advocates when aging caregivers can no longer provide care for them within the family home setting. There is still some uncertainty about whether this would be allowed under HCBS settings requirements.

Although the Council was able to meet or exceed the majority of its work plan numbers for this goal, it is clear that adequate access to housing for people with disabilities and their families will remain an ongoing issue. While the state worked to mitigate the effect of the COVID-19 pandemic on the housing market, implementing an eviction moratorium and rental assistance programs to keep vulnerable Californians in their homes despite their inability to pay rent, the efforts are currently a pandemic-related stopgap measure. The Council has developed effective tools for PwI/DD and their families to advocate for safe, accessible, affordable housing - but inadequate housing stock is an ongoing and, as yet, insurmountable barrier. As California navigates uncharted waters with its public health crisis (coupled with natural disasters that have decimated the housing market), the Council will continue to collaborate with housing stakeholders to ensure that the needs and the voices of people with disabilities are represented.

4 Year Overview: A description of how the Council will use and build from knowledge gained and progress made to move forward in the next state plan cycle.

California's housing market is known for its supply shortages, high costs, and under-funding of new housing development. The lack of affordable, safe and accessible housing especially impacts people with I/DD, who fall on the low- to moderate-low income level and often cannot afford housing without obtaining a housing voucher, with wait lists that can be years long. Over the past few years, housing needs for people with I/DD have increased as California's Developmental Centers closed, with a need to ensure that PwI/DD are integrated into communities of their own choice and able to access resources that allow them to live independent, meaningful lives. Though housing construction is an ongoing process, California builds fewer homes annually than are needed (given the housing market). Existing housing stock is also threatened by increasingly destructive wildfire seasons, leaving thousands of Californians vulnerable to homelessness as more people compete for less housing and the cost of available housing continues to rise. The Council's objectives have been to identify and decrease barriers to securing housing and expanding the availability of suitable housing by collaborating with housing developers/builders, governance/regulatory agencies, community-based public interest and private non-profit organizations.

SCDD participated in 743 housing-related collaborations over the course of the last 4 years, participating in 202 meetings and reaching 5,271 people. Council staff planned and participated in 12 housing events, providing information and resources to 1,335 people. Although the number of meetings and collaborations went down in 2020 due to the pandemic, the Council still met its goals for the year and consistently met or exceeded projections over the 3 previous years. Council staff responded to 464 requests for TA over the last four years, reaching 3,523 people, with requests from regional centers, housing coalitions, city councils, housing planning teams, family/self-advocates and others. TA requests varied significantly in nature and required Council staff to sort through complex sets of issues to determine needs and frame complaints, in order to provide referrals, resource information, and/or suggestions for next steps. Staff also reached 3,925 self/family advocates and others with 133 trainings, covering topics such as fair housing laws, HCBS settings rules, renters' rights, rent and rent hikes, housing discrimination, reasonable accommodations, and eviction-related rights. The Council distributed electronic resources related to housing 437 times (in English, Spanish, plain language and other languages, as requested), reaching 361,147 family/self-advocates and others with critical information.

The Council approached the issue of housing in a variety of ways over the course of the past 4 years, finding success in collaborative efforts, training and grant projects, with both regional and statewide impact. In 2017, the Lanterman Housing Alliance received a Council grant to conduct research into California's housing issues and the effect on people with I/DD. The data was used to develop a report (Statewide Strategic Framework: Expanding Housing Opportunities for People with Intellectual and Developmental Disabilities) that now serves as a valuable resource, providing models for the development of affordable housing, innovative systems of creating additional housing, sources of available funding for start-up and operational subsidies, and examples of how leveraged funding can be used to provide housing for vulnerable populations. In 2019, the Council partnered with a non-profit (the Kelsey) to conduct a needs assessment on affordable housing for people with I/DD. One promising practice to come out of this meaningful partnership was the development of a 6-part, Zoom-based housing leadership development program (Raise the Roof), which allowed self-advocates across the state to become housing advocates.

During the past 4 years, the Council has worked on several successful projects in the Mendocino area,

which (as in all of California) has a high cost of living, coupled with a high level of homelessness. In 2017, SCDD staff collaborated on a \$1.3 million grant-funded project to build 35-42 studio and 1-bedroom 'tiny house' project units on land purchased by a non-profit entity (Redwood Community Services [RCS]) for unhoused people with behavioral health needs. In 2018, the Council began collaborating with Mendocino County's Homeless Services Continuum of Care to determine the needs of the growing homeless population. In 2019, the Council and COC combined efforts to create an MOU between the regional center (RC) and a behavioral health entity to develop housing and report on ongoing housing issues. SCDD staff also participated as part of the review and scoring team for the Federal Homeless and Emergency Assistance Program (HEAP) grant applications for the HUD's Continuum of Care (CoC). Collaborative efforts in Mendocino continued into 2020, when SCDD staff connected the local RC with the Rural Community Housing Development Corps to provide funding for an 80-unit housing facility, with 20 set-aside units at each of its two locations for applicants with disabilities.

In FFY 2019-20, the Council's regional staff reported increased interest in developing creative solutions to the lack of available housing for people with I/DD. Family/self-advocates expressed a desire to create 'intentional communities;' some families want to purchase homes for a number of self-advocates to experience independent living in a peer-structured community setting. Another popular living arrangement includes the use of accessory dwelling units (ADUs), which includes in-law units, basement apartments, and tiny homes. The development of these options led to an increase in requests for information about Home and Community-Based Services (HCBS) rules, as families are uncertain about options associated with receiving services within preferred living environments. The Council also received reports of self-advocates being turned away from supported and independent living services, as RCs have not uniformly recognized ADUs as a legitimate form of independent living. While SCDD continues to train and assist families with making informed choices and provide TA to meet self-advocates' needs for information in a tailored, individual way, the Council also recognizes a need for such issues to be addressed at a state level, as well, in order to achieve uniformity and consistency in messaging.

Although the Council continues to adjust to new methods of collecting/reporting data, trainings and meetings (conducted primarily through online platforms like Zoom) have produced reliable, quantifiable information. Projecting, collecting and reporting on systems change data metrics (in conformance with ACL's federal performance measures) has been more challenging, however, as the Council struggled with describing and quantifying its activities in annual work plans and reports. The Council finally invested in updating its system for data collection, analysis and reporting, beginning the pilot implementation of a new data platform (Qualtrics) in 2020. California's Council has historically faced challenges in successfully collecting demographic data, due to public concerns about the sharing of personal information. The Council has now developed a promising practice by using electronic, real-time polling during online trainings to collect demographic information - a technique that appears to feel less invasive to participants.

While the Council has consistently met targeted metrics in both objectives of this goal, housing has been and will continue to be an area of significant need going forward into the final year of the current State Plan and will be continued in the next 5-year State Plan. Looking to the future, the Council is developing plans to support self-advocates to engage in projects for systems change in the area of housing, while continuing to develop and improve practices, policies and regulations in ways that will benefit people with I/DD and protect their right to full community inclusion. The Council will continue to collaborate with its community partners to increase housing and provide technical

assistance to meet the evolving needs of PwI/DD and their families as they seek inclusive, appropriate, safe and affordable living arrangements. The Council will also advocate for changes outlined in the Statewide Strategic Housing framework and distribute this resource to inform housing stakeholders of the unique needs of people with disabilities throughout the state.

Objective 1: The Council will work with housing entities to increase the development and/or provision of community housing for people with I/DD.

3. This objective is:	System Change
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4. This objective is:	Ongoing
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5. This objective is:	
Fulfilling a Self-Advocacy DD Requirement	No
Targeted disparity	No
DD Network Collaboration	No

A demonstration project of New Approaches to Services and Supports	No
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A demonstration of projects or activities	No
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6. Stage of Implementation:	Implementation
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7. Provide an overall description of this effort:	In its survey of the community about needs (to develop the Council's 5-yr goals), community feedback ranked housing as 5th in importance, as reported by family/self-advocates. Regional staff, however - all of which are deeply embedded at regional levels and knowledgeable about regional issues affecting people with I/DD and/or cross-disabilities - ranked housing as the #1 emerging concern in communities throughout California. Two (2) prevailing concerns included affordability and accessibility (regarding both physical and service-related barriers associated with community-based housing). While community-based housing may not appear to be an issue for every family or individual with I/DD, it is an issue that cuts across all disabilities and communities and can suddenly become an unexpected, critical need at some point in anyone's life. California's most vulnerable populations are also most at risk in the state's current
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	housing crisis. The Council, through its constituency and this objective, must work to tackle an important social services and community need for accessible, affordable housing within a profit-based, private construction, rental and sales industry and associated governmental entities throughout California. This objective is designed to develop cross-disciplinary relationships between the private and public sectors, building collaborations that will work toward increasing the supply of integrated, affordable and accessible housing for people with I/DD and/or cross-disabilities.
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Outputs Achieved	
8. Expected Outputs	9. Outputs Achieved
1 curriculum; 10 presentations/trainings, reaching 220 people	Yes
12 collaborative meetings, reaching 170 people; 5 collaborative outreach efforts, reaching 250 people	Yes
Hard-copy resource distributions (as requested); 24 electronic resource distributions, reaching 10,000 people	Yes
45 people reached with TA, as requested	Yes

10. The report should include the following:	<p>(a) A narrative progress that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenged to achieving the objective and unexpected benefits.</p> <p>(b) For system change activities, include a description of the stage of implementation (Planning, initiation, implementation, outcome/fully integrated) of the system change initiative.</p> <p>(c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.</p> <p>(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report)</p>
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The Council engaged in 139 activities, reaching 4,010 SA, 13,916 FA and 13,072 others, and reaching into 51 of California's 58 counties. In the process, SCDD developed/updated 1 curriculum and held 11 trainings, reaching 293 people (51 SA, 123 FA and 119 others). SCDD met and/or collaborated with agencies throughout the state 40 times, 38 of those activities with housing networks, specifically. Regional staff engaged in 5 outreach events, serving 527 people (4 SA, 40 FA and 483 others).

Resources, information (much of it related to emergency relocation, evacuation updates, etc.) and materials were electronically distributed 37 times, reaching 3,890 SA, 13,661 FA and 11,945 others. TA was provided 44 times, giving assistance to 26 SA, 35 FA and 51 others. The state's largest wildfire season struck in 2020. According to the California Department of Forestry and Fire Protection (CAL FIRE, 2021 2020 Incident Archive), there were 9,917 incidents that burned 4,257,863 acres, destroyed 10,488 structures and took 33 lives. The Center for Disaster Philanthropy stated that the number of acres "burned in 2020 are the most in a single year since CalFire began keeping records, and more than the last three years combined" (CDP, 2020 2020 North American Wildfire Season). This devastating wildfire season only added to the already dismal housing shortage within the state. With this shortage comes a further lack of accessible, safe and affordable housing, threatening the safety of people with disabilities as they are unable to acquire a suitable and permanent, affordable, accessible, safe residence. The city of Paradise in Northern California's Butte County continues to live with the devastation caused by the Camp Fire of November of 2018. NPR reported in November of 2019 that "the Camp Fire destroyed 11,000 homes. A year later, only 11 have been rebuilt" (NPR, 2019). This article continued: There was already a housing shortage - especially an affordable housing shortage - in rural Butte County before the fire. In search of cheaper housing, survivors have moved to states like Oregon, Idaho and Texas. The threat of homelessness due to lack of housing inventory is a daily reality for the residents within this community. It has been shown that people with I/DD fall into the low - moderate income category, making it even harder to access housing that is within their budget and located in their own community. Even if the individual has obtained a coveted housing voucher, the barriers can continue to stack against them; whether it be unyielding landlords, years-long wait lists, or ultimately securing qualified housing that meets program (and personal) requirements. SCDD has continued to work tirelessly to assist PwI/DD and their families to gain secure, accessible and fair cost housing. In a 4-month period, staff in 1 office alone provided technical assistance 9 times to self-advocates and family members who expressed frustration with the increasing costs and limited availability of rental properties. Staff was asked to provide information on Section 8 vouchers and resources regarding homelessness. As result of this TA, 1 SA and 1 FA got housing support. Statewide, SCDD has collaborated with housing networks 40 times (in 17 counties) reaching a total of 569 housing advocates, developers, and other stakeholders to promote further housing development. Staff participated in 5 outreach/event activities meeting with 527 people, and leading 11 trainings educating 51 self-advocates, 123 family advocates and 119 professionals on topics such as Housing Rights, AB 1505, housing application processes, HUD Section 8 vouchers, HCBS Setting Rules, inclusion and how to advocate for self/family members. SCDD gave testimony at a City Council meeting to express SCDD's support of the Downtown Opportunity Sites project and recommended that the most affordable apartment units be included for PwI/DD. Bay Area and Central Coast regional staff have collaborated with local and reliable housing coalitions and stakeholders (e.g. Housing Choices, MidPen, etc.) to advocate for community inclusion and provide affordable housing for PwI/DD. In a letter submitted to the City Council by Housing Choices, they stated that the housing need for people with developmental and other disabilities is growing as the "number of people with developmental disabilities in San Mateo County increased by 34% in the decade since 2008" (Housing Choices). This statistic is supported by the online resource, disabledworld.org, which states that the percentage of PwD in San Mateo County is 8.4%. Because of SCDD's advocacy, strong housing stakeholder partnerships, and statewide influence, the City Council unanimously voted that 8 of the project's set-aside units would be designated specifically for residents with I/DD. In Sacramento and Placer counties, parents have stated that "they would like to buy homes and make them available for 3-4 SA to live together, with some ILS/SLS supports," though it is unclear whether this option is allowed under HCBS settings. Many parents feel that this option is a solution to the limited openings for residential care and could give SA another living option when

aging FA can no longer provide for loved ones in the family home. In response to the emerging issue, SCDD provided training on housing rights, HCBS settings rules, RC policies, and transitions from segregated to inclusive living environments. Of the 12 parents who participated in the training, 8 completed the survey, stating that "no one ever tells us all this" and that the training was very informative. In Los Angeles, staff presented a training on inclusive housing development to a monolingual Spanish-speaking parent group. SCDD has been flooded with requests for this type of training, as communities seek information and tools to advocate for more affordable, inclusive housing. Training topics have included how the California Department of Housing and Community Development can be of assistance, the purpose of the city's Housing Element, and the importance of Assembly Bill 1505 (Bloom), which affects zoning regulations and land use. Of 42 participants, 18 family members were better prepared to advocate going forward, 17 were better able to say what is important to them, 15 were satisfied with the activity and 5 new people were reached. Several FA stated that "the information was important, interesting, and that it created new opportunities for them to learn and empower themselves." The Council's collaborative efforts were far-reaching and highly effective, as regional staff worked with the Irvine Community Land Trust Housing Collaboration to make their newest apartments set-aside units for PwI/DD and that a continuum of affordable housing options be made available for future use. In the north Bay Area, staff established a new working relationship with a housing counseling agency, Fair Housing Advocates of Northern California, which provides varying levels of "fair housing services to homeowners and those who have experienced discrimination based on their membership in a protected class" (FHANC). This collaboration will help to ensure housing support and information is provided (in English and Spanish) to under-served PwD. In Sacramento, staff participated in the planning and execution of the 5th Annual Regional Affordable Housing Summit. Several collaborative meetings took place throughout the year to coordinate, create and execute the event (Breaking New Ground: Rising Together), hosted by Sacramento Housing Alliance. SCDD provided the keynote address (Housing Blueprint for People with Intellectual Disabilities) to stress the need for more accessible, affordable units in the community of people with I/DD. In northern California, SCDD has worked with the Mendocino Housing Action Team "on projects to address the serious and chronic challenges facing the region's renters by significantly expanding the supply of permanently affordable homes - especially housing that low- and moderate-income workers and families can afford" (HAT, 2020). Pacific Builders, in partnership with Rural Community Housing Development Corps (with which the Council has advocated), broke ground on an 80-unit housing facility (with two locations), which has 20 set-aside units at each campus for residents with disabilities. SCDD connected RCHDC with a local RC, which will provide funds to turn this project into reality. This year's pandemic devastated the job and housing market in California, as "the unemployment rate hit nearly 15% in April - the highest it's been since World War II, and some 23 million Americans are out of work. Low-income households have been particularly hard hit... these are people who struggled to cover their housing expenses and other monthly bills before the pandemic" (LAT, 2020). Through its activities in this objective, the Council drafted, created or changed 18 policies and/or practices associated with housing. While the Council met or exceeded all of its projected metrics in this objective (falling short of only 9 SA training attendees), it will continue to pursue the development of additional affordable, accessible and safe housing stock throughout California for families and people with intellectual/developmental and/or cross-disabilities for FFY 2021 and through the course of the next 5-year State Plan cycle.

Expected Outcomes Achieved	
11. Expected Outcomes	12. Outcomes Achieved

Stakeholders will have training & information about the development/provision of inclusive housing for PwD in California	Yes
The Council will collaborate with housing networks & other community stakeholders to address the housing needs of PwD	Yes
People will have electronic &/or hard-copy (as requested) information about the development &/or provision of community-based housing for PwD	Yes
People and agencies will have access to TA, as requested	Yes

13. Progress towards achieving outcomes for overall objective:

2019 was another devastating year for fire damage throughout the state of California, further depleting the already tragically low housing supply. Between January 1st and November 22nd of 2019, over 46,000 fires ripped through the state in Sonoma, Butte, Los Angeles, Riverside and Ventura counties destroying well over 14,000 homes (<https://www.iii.org/fact-statistic/facts-statistics-wildfires>; 12.19.20). Despite these tragic events, SCDD staff was able to meet most of its projected targets, while also focusing on assisting individuals, families and communities who lost everything in the wildfires. In order to promote and increase housing development and to better serve the I/DD community, Council staff provided resources at 69 outreach events collaborating with development policymakers, vendors, planning department staff, housing action teams, etc. Staff will further participate in statewide taskforces and distribute copies of the SCDD Strategic Housing Framework to further highlight housing opportunities throughout the state. California's housing crisis is not simply a pitched battle; it has become an economic war, with PwI/DD and their families as casualties, along with many other underserved and impoverished groups. In the upcoming year, SCDD will continue to be a voice on behalf of those with disabilities in responding to the need for safe, affordable, accessible housing in California.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community).

Thank you, friends of inclusive and affordable housing for people with intellectual and developmental disabilities, for writing emails, making calls, and testifying yesterday before the Board of Supervisors of Santa Clara County. After a brief and rushed public comment period, the Board of Supervisors approved a total of \$10 million to help create 60 affordable homes for people with developmental disabilities as part of three affordable housing projects planned in Palo Alto, Sunnyvale, and Santa Clara with a total of 214 rental units. . The County's funding will leverage more than \$150 million of other funding, including significant commitments of city funding and land. Each of these projects is

the product of enormous faith, grit and determination by families and other members of our community who have shown up over a period of several years to educate Planning Commissions, City Councils, and neighbors about the benefits of creating housing affordable for people of all incomes and all abilities. City leaders in Sunnyvale, Santa Clara, and Palo Alto, and development partners (Related CA, Palo Alto Housing, and Freebird Development) have been unwavering in their support for the projects. There were so many times when they could have abandoned the goal of including our community of people with I/DD in the housing, but they were steadfast. As the Rev. Dr. King said, "If you want to go fast, go alone; if you want to go far, go together." We are going far, and that's because we are going together. The Board of Supervisors also acknowledged the shortfall in funding for the Wilton Court project in Palo Alto and directed staff to direct any unused funds to that project. Finally, the Board directed staff to focus on the next "tranche" of \$10 million, recognizing that this is necessary to create a pipeline of these projects in cities across Santa Clara County. Thank you for all your efforts. Let's keep up the momentum. And please send a quick note of thanks to the Supervisors, reminding them of the next \$10 million.

Objective 2: The Council will identify and decrease barriers to housing for people with I/DD.

3. This objective is:	Individual & Family Advocacy
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4. This objective is:	Ongoing
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5. This objective is:	
Fulfilling a Self-Advocacy DD Requirement	No
Targeted disparity	No
DD Network Collaboration	No

A demonstration project of New Approaches to Services and Supports	No
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A demonstration of projects or activities	No
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6. Stage of Implementation:	Implementation
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7. Provide an overall description of this effort:	Changing and evolving state/federal priorities regarding home and community-based services have created an increased urgency for securing sufficient sources for integrated, community-based housing for people with I/DD. Given the disparity between State Plan survey respondents and the State Council on Developmental Disabilities (SCDD or Council) regional staff in regard to identifying housing as a primary need, this objective is designed to educate
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	<p>family/self-advocates and others about obstacles to obtaining available, affordable and accessible housing. While the ultimate objective is to identify and decrease barriers to housing, those barriers are numerous and complex and can also be person-specific, including such diverse issues as self-determination, employment, financial assets and public entitlements, transportation, and community-based service availability. A significant change in or loss of any one of these components can have an adverse cascading effect, with the subsequent loss of access to housing and/or related services. California and its diverse terrain and population are also subject to a range of manmade and natural disasters, resulting in loss of available housing and related services due to fire, earthquake, flooding, mudslides, and more. This objective and its work plan pull together these components with training and information distribution.</p>
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Outputs Achieved	
8. Expected Outputs	9. Outputs Achieved
2 curricula; 10 trainings/presentations, reaching 200 people	Yes
12 collaborative meetings, reaching 120 people; 2 events, reaching 300 people	Yes
Hard-copy resource distributions (as requested); 24 electronic resource distributions, reaching 17,500 people	Yes
50 people reached with TA, as requested	Yes

<p>10. The report should include the following:</p>	<p>(a) A narrative progress that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenged to achieving the objective and unexpected benefits.</p> <p>(b) For system change activities, include a description of the stage of implementation (Planning, initiation, implementation, outcome/fully integrated) of the system change initiative.</p> <p>(c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.</p> <p>(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report)</p>
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2020 was a crushing year for people with I/DD and cross-disabilities and their families in search of affordable, safe, accessible housing. Natural and economic disasters, coupled with a raging pandemic that isolated millions across the state, decimating housing stock and the ability to afford what little housing was available, and California's housing crisis was mirrored across the country. While the Council continued its efforts to promote the development of affordable housing, losses in employment (related to the COVID-19 crisis) added to the potential displacement of millions of Americans - a disaster that has been momentarily halted with a temporary moratorium on evictions. With the national and state attention on housing deficits, the Council ensured that the voices and needs of PwI/DD were recognized, as it engaged in 138 housing barrier reduction-related activities throughout the state. With existing curricula and 3 new presentations, regional staff provided 10 trainings, reaching more than 200 people with information. SCDD personnel engaged with its collaborative partners, meeting with policy leaders and community-based organizations 16 times and holding 2 outreach events, reaching more than 500 people. The Council issued 33 eBlasts, reaching 47,313 people and provided technical assistance 73 times, supporting a total of 1,121 people. In the San Francisco/Bay area, the Council has piloted a practice of providing 'pocket-sized' trainings during Board meetings in a regional center (RC), in response to requests from the Directors. Each training provides 10-15 minutes of presentation, with a one-page resource sheet including the top 5 ways that family/self-advocates, board members and others can engage to create change on behalf of PwD in their own communities (Advocacy Top 5 for Housing!). One meeting of each year, staff will provide housing advocacy updates. This included a summary and excerpts from the Lanterman Housing Alliance Statewide Strategic Framework for Expanding Housing Opportunities for People with IDD, as well as recommendations from that framework, and was an update following the (pocket-sized) basic housing advocacy training provided the previous year. The entire series has been well-received and gives the Council consistent, trusted access to the Directors, providing a critical level of credibility when the Council needs to bring other concerns before the Board. Other housing curricula were developed (some in partnership with Fiesta Educativa) and/or translated directly into Spanish (and other languages, as requested), due to the high number of monolingual Spanish-speaking families in California. The Council provided sign language interpreting during training, as requested. Because transition-aged youth and young adults look forward to moving out of the family home and into places of their own, the Council provided self-advocates and families with information about the differences in housing options available within larger communities, which typically involved meeting eligibility criteria, timelines, and waiting lists. Training also included the many types of housing options (e.g. home ownership, apartment living, residential housing with services, accessory dwelling units [ADU], shared housing with roommates, etc.), as well as the supports and services needed, potential/available funding sources (e.g. employment, SSI, etc.), and subsidized housing (e.g. Section 8, public housing agencies [PHA], etc.) opportunities. Not only did the Council provide information and training about renters' rights, but it also encouraged family/self-advocates to become actively involved with local Planning Commissions and Housing Authorities to address the need for more accessible, affordable and safe housing (including policies encouraging the approval/development of ADU's). Family/self-advocates throughout the state noted that they receive information about housing options from the Council that is never provided or shared or offered by regional center staff during IPP's, etc. In addressing community-based housing options and barriers, SCDD shared information about housing discrimination, the Fair Housing Act, Section 504 of the Rehabilitation Act, and reasonable modifications and accommodations to provide appropriate levels of accessibility. While community-based residential settings are (potentially) less restrictive and/or more desirable, family/self-advocates also expressed a need for information about the entire continuum of care and residential options that are available and may be critical support systems as an individual's needs change. In addition to community-based options, the Council provided information and training

about the full range of licensed care facilities that are available for people with developmental and/or physical/medical impairments. This included community and intermediate care and skilled nursing facilities, as well as acute care/hospital settings, which may become necessary for short periods of time. The Council addressed emerging/ongoing regional housing needs through a series of unique projects. One such project has been the development of 4 Community Crisis Homes (CCH) for children (throughout the state) involved in the foster/dual agency care system (e.g. RC's, etc.). Specifically, these have been children with I/DD and behavioral/mental health needs in need of crisis intervention services who are also at risk of being placed into highly/more highly restrictive environments or are transitioning out of such placements. One of the homes (in the San Francisco/Bay Area) was set aside specifically for children who are non-ambulatory. Intensive support services (e.g. RC, mental health, etc.) will help children achieve transition into less restrictive environments and will be implemented and monitored through 30, 60, and 90-day crisis stabilization plans. The Council was instrumental in interviewing funding candidates for developing/running these service/residential home models. Another long-term (3-year) project (associated with an underserved population) was the Council's work in collaboration with the Jewish Federation Family Service (JFFS)s to improve the conditions and quality of services in licensed Adult Residential Facilities (ARF's), designed to provide residents with supports, services and activities that align with the Jewish faith and its traditions. Due to funding challenges, there was little to no visible progress by the JFFS, which is now attempting - as yet unsuccessfully - to divest its responsibilities and turn over the contract for services to an outside provider. The Council will continue to monitor and collaborate with community-based agencies on these housing-related projects. Throughout the state, the Council collaborated with housing and regulatory agencies to address funding and housing availability. In northern California, the Council is a member of the Mendocino County Continuum of Care (COC), with other representatives from 23 health-related, emergency response, and other governmental response and service organizations. During the pandemic, homeless funding was reportedly being diverted for Covid-19 response efforts. In the Los Angeles region, the Council worked with its partners in Housing and Community Development/Fair Housing meetings, providing its Statewide Strategic Housing Framework report and stressing the need to link affordable housing with accessible transportation services. In the San Diego/southern California area, the Council worked with a coalition of service providers, family/self-advocates and others to identify opportunities for public input with housing authorities around such options as ADU's, granny flats, tiny houses, etc. The Council and others also addressed the availability of rental properties/units, eviction processes/trends, etc., on behalf of people and families with I/DD.

Expected Outcomes Achieved	
11. Expected Outcomes	12. Outcomes Achieved
SA/FA/others will have information about housing, such as on tenant rights, overcoming housing barriers, etc.	Yes
The Council will collaborate with community stakeholders to identify and decrease barriers to housing for PwD	Yes
People will have up-to-date electronic &/or hard-copy (as requested) information about tenant rights,	Yes

overcoming barriers to obtaining housing, etc.	
People will have access to TA, as requested	Yes

13. Progress towards achieving outcomes for overall objective:	
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The challenges presented as the result of the pandemic shifted the focus of most families and individuals to that of basic survival and medical/quarantine/social distancing needs - many of which were sought in individual family and congregate care settings. Within this housing objective, not all planned training targets were met during FFY 2020. While Californians' need for housing has certainly not diminished, the availability of affordable, safe, accessible housing stock decreased significantly. While staff excelled in providing technical assistance and surpassed its goals for the number of people reached at events, the amount of trainings that staff provided was lower than expected. Moving forward, SCDD staff will continue to provide housing-related trainings - not only to self and family advocates - but also to landlords and developers alike. As the social quarantine/distancing limitations imposed by the recent pandemic lessen, it is expected that Californians with I/DD and their families will again be looking for an increase in accessible housing opportunities and a decrease in housing barriers. The Council has been highly successful in bringing the (availability and barrier-related) housing needs of PwI/DD and their families to the attention of state legislators and local community leaders and housing developers, property managers, and regulatory agencies. Because of the increased attention to housing deficits for the entire population within the state of California, the Council has had the opportunity to use its voice to draw specific attention to the needs of PwI/DD, as a breakout group that is distinct from people in the aging, homeless, and/or veterans' populations (although PwI/DD also make up segments of each of those groups, as well). This issue will continue to be important within the Council's overall platform, especially as aging family caregivers and self-advocates look to meet their own end-of-life and transition/independent living and succession care/planning needs.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community).	
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As a result of having demonstrated subject matter expertise, SCDD staff was asked by a self-advocate's treating psychologist to provide information, direction and technical assistance to the patient and her family. The client was a 50+ year-old woman with intellectual/developmental disabilities whose parents had recently put her childhood home up for sale without telling her about their plans. She became frightened and decided that she did not want to be an ongoing 'burden' to her aging parents and then attempted to take her own life by firing a shotgun blast to her chest. SCDD staff found that the family's regional center (RC) staff had been unresponsive to repeated pleas from the self-advocate and her family about transition/futures planning, independent living options, or discharge and mental health supports and services. In the frantic aftermath of the attempted suicide, the Council was able to assist the family in developing a safety response plan that involved temporary placement in an intermediate care facility, as the self-advocate convalesced from her injuries. This

also put her in a different RC catchment area and the Council ensured that the new RC service coordinator would be willing to work with the self-advocate and her family on an independent living situation. SCDD staff assisted the team in obtaining a NED (Non-Elderly Disabled) voucher - negotiating for 24/7 supported living skills/supports and locating an available and affordable apartment in southern California, where the now-thriving self-advocate is living her best life independently. Additionally, as a result of the Council's efforts in addressing the underlying issues in this case, the original RC has undergone a systemic policy review to examine its practices/policies regarding placement and supportive transition services for people moving out of institutional settings into communities of choice.

Section IV: B

Individual & Family Advocacy Performance Measures

Race and Ethnicity

Race/Ethnicity	#	%
White alone	4	18.18%
Black or African American alone	4	18.18%
American Indian and Alaska Native alone	2	9.09%
Hispanic/Latino	4	18.18%
Asian alone	4	9.09%
Native Hawaiian & Other Pacific Islander alone	2	9.09%
Two or more races and Race unknown	2	9.09%
Gender	#	%
Male	23	24.73%
Female	70	75.27%
Other	0	0%
Category	#	%
Individual with DD	25	28.41%
Family Member	63	71.59%
Geographical	#	%
Urban	45	77.59%
Rural	13	22.41%

I. Output Measures

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

The Council will work with housing entities to increase the development and/or provision of community housing for people with I/DD.	4010	13916
The Council will identify and decrease barriers to housing for people with I/DD.	6391	24827
Total # of Output Respondents	43	106

II. Outcome Measures

Performance Measures	Percent (%)
IFA 2.1 Percent of people with DD	100
IFA 2.2 Percent of family members who increased advocacy	100

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

Projects	# People with Developmental Disabilities	# Family Members
The Council will work with housing entities to increase the development and/or provision of community housing for people with I/DD.	18	40
The Council will identify and decrease barriers to housing for people with I/DD.	24	60
Total # of Sub-Outcome Respondents	42	100
IFA 2.3 Percent of people better able to say what they need	97.67%	94.34%

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

Projects	# People with Developmental Disabilities	# Family Members
The Council will work with housing entities to increase the development and/or provision of community housing for people with I/DD.	16	19
The Council will identify and decrease barriers to housing for people with I/DD.	9	30
Total # of Sub-Outcome Respondents	25	49
IFA 2.4 Percent of people participating in advocacy activities	58.14%	46.23%

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

Projects	# People with Developmental Disabilities	# Family Members
The Council will work with housing entities to increase the development and/or provision of community housing for people with I/DD.	16	25

The Council will identify and decrease barriers to housing for people with I/DD.	6	26
Total # of Sub-Outcome Respondents	22	51
IFA 2.5 Percent of people on cross disability coalitions	51.16%	48.11%

II. Outcome Measures

Satisfied	Percent (%)
IFA 3 The percent of people satisfied with a project activity	96
IFA 3.1 Percent of people with DD satisfied with activity	92
IFA 3.2 Percent of family members satisfied with activity	98

Section IV: C

Systems Change Performance Measures

SC 1: Output Measures

Objective	
The Council will work with housing entities to increase the development and/or provision of community housing for people with I/DD.	
SC 1.1 Number of policy/procedures created/changed	0
SC 1.2 Number of statutes/regulations created/changed	0
SC 1.3.1 Number of promising practices created	0
SC 1.3.2 Number of promising practices supported	0
SC 1.3.3 Number of best practices created	0
SC 1.3.4 Number of best practices supported through Council activities	0
SC 1.3 Number of promising and/or best practices created and/or supported	
SC 1.4 Number of people trained/educated	13071
SC 1.5 Number of Systems Change activities with other organizations	51

Objective	
The Council will identify and decrease barriers to housing for people with I/DD.	
SC 1.1 Number of policy/procedures created/changed	0
SC 1.2 Number of statutes/regulations created/changed	0
SC 1.3.1 Number of promising practices created	0
SC 1.3.2 Number of promising practices supported	0
SC 1.3.3 Number of best practices created	0
SC 1.3.4 Number of best practices supported through Council activities	0
SC 1.3 Number of promising and/or best practices created and/or supported	
SC 1.4 Number of people trained/educated	18126
SC 1.5 Number of Systems Change activities with other organizations	25

Systems Change SC 2: Outcome Measures

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

III. Sub-Outcome Measures

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

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

Goal 4: Health and Safety

Section IV: A

Area of Emphasis	Planned for this Goal	Areas Addressed
Quality Assurance	Yes	Yes
Health	Yes	Yes
Formal and Informal Community Supports	Yes	Yes

Strategies	Planned for this Goal	Strategies Used
Outreach	Yes	Yes
Training	Yes	Yes
Technical Assistance	Yes	Yes
Supporting and Educating Communities	Yes	Yes
Interagency Collaboration and Coordination	Yes	Yes
Coalition Development and Citizen Participation	Yes	Yes
Informing Policymakers	Yes	Yes

Intermediaries and Collaborators	Planned for this Goal	Actual
State Protection and Advocacy System	Yes	Yes
State DD Agency	Yes	Yes
Other Collaborators	Yes	Yes

Goal Narrative

This goal includes SCDD's comprehensive 'Health and Safety' activities and is designed to produce distinctly separate (health or safety-related) data in reaching family, self-advocates and professionals. The events of FFY 2019-20 presented unique challenges (shared throughout the nation) that bridged those concerns in unique ways, bringing them into close alignment and presenting jointly-related needs, activities, data and emerging issues. While staff reported activities within separate categories (health or safety), there was significant crossover health and safety work provided in virtually every activity during the last 7 months of the federal fiscal year. Additionally, the goal was split into objectives that each targeted very different populations: the first was designed to provide family (FA) and self-advocates (SA) with information (knowledge and awareness) about availability of/access to health and public safety-related rights, services and supports; the second was targeted to health and safety personnel, to provide information/training about disability-related health and safety issues (including the civil rights of persons with disabilities [PWD]).

The California State Council has been a strong, willing leader, providing other state and territorial Councils (as well as federal officials) with up-to-date emergency evacuation information/guidance, resources (including trainings, definitions, translations, brochures, flyers, pamphlets, accessibility guides, etc.), and other types of technical assistance (TA) in plain language, Spanish, and other languages (as requested). SCDD maintains strong relationships with its member agencies, the Governor's Office, governing bodies, and community-based agencies throughout the state, providing a unique flexibility, resource access and a nimble response capacity (based on changing conditions and emerging issues). This allows the Council to be quickly responsive to the needs of California's richly diverse population but has also made it a reliable source for subject matter expertise in health and public safety/crisis response-related issues.

Within California, the overall work of this goal (throughout FFY 2020) produced 2,361 separate activities, reaching a total of 2,063,036 people (243,008 SA, 1,426,134 FA and 393,894 others). Technical assistance was provided 726 times, as requested within California, reaching 384,994 people (89,476 SA, 242,813 FA and 52,705 others) with information, guidance, resources, referrals, etc. Given the nature of California's public health and safety crises, the Council was able to provide guidance and technical assistance to 376 professionals/state and local agency personnel, which greatly increased the Council's reach, advocacy and systems change capacity throughout the state. The Council prepped 149 family and self-advocates to become peer advocates/trainers in matters relating to both health and safety. In collaboration with peer trainers, the Council provided 15 safety-related (reaching 209 people) and 17 health-related trainings (reaching 304 people). Council staff alone provided an additional 71 safety-related trainings (reaching 2,477 people) and 42 health-related trainings (reaching 3,013 people).

The Council has engaged in some notable collaborative efforts, capitalizing on partnering with the many local/state entities serving vulnerable and/or underserved populations. These efforts have served to benefit both people with disabilities and the professionals that support and serve them. The Council is leading in the work to provide people with I/DD with more effective tools for self-advocacy and personal governance. In line with its health and safety trainings, SCDD has been working with Ignite Futures to certify trainers to provide best practices-based courses in sexuality, reproductive health, boundaries, relationship-building and prevention, recognition and/or reporting of abuse.

Throughout the state, SCDD staff (often with the assistance of peer trainers) trained law enforcement

recruits and advanced and field training officers about disabilities, identification and communication tips, and tactical/de-escalation techniques for working safely and effectively with PwD. Concurrently, the Council - with its cadre of peer SA/FA trainers and presenters - provided training to people with disabilities, family and community members, and service providers on safe interactions with law enforcement, abuse/bullying prevention and reporting of abuse.

As a result of the Council's proven expertise, staff is serving on the board of CACITA (the California Crisis Intervention Team Association), which works to establish evidence-based practices & program support for crisis intervention training (using the Memphis Model) throughout California. Council staff is also now on the board of CIT International, Inc., promoting effective interactions between law enforcement, mental health care professionals, and those with mental illness throughout the United States and internationally. Through these valuable partnerships, the California Council is ensuring that the voices of people with I/DD (PwI/DD) and their families are heard at the state, national and international levels in training and supporting law enforcement, correctional and mental health personnel, and other first responders and service providers.

Council staff applied to/joined regional Public Safety Energy Advisory Boards, where they were able to represent the health and safety needs of PwD for developing and implementing state and regional disaster and emergency response plans, which includes statewide participation and consideration of disability and functional needs. Another statewide issue that captured the Council's attention and response was the impact of COVID-19 on aging caregivers and people with disabilities. SCDD worked to build awareness of the critical nature of supported decision-making, as opposed to court-ordered conservatorships of PwI/DD, in order to promote independence and self-determination efforts - especially as regional center (RC) clients are losing their aging parents in the current pandemic and finding themselves without lifelong homes and family support systems. Families and PwI/DD worked with the Council and California's RC system to begin planning for and implementing independent and supported living opportunities prior to the complete loss of critical family-based residential options.

The Council also participated in Aging and Disability Resource Connections (ADRC), a system of twelve (12) state grant-funded, cross-disciplinary collaboratives throughout the state that assist people with disabilities and aging-related needs in obtaining access to effective services, no matter what agency they choose to first approach. Partner agencies represent the fields of housing, food/nutrition programs, regional centers, case management, transportation, etc. and maintain MOU's that provide 'warm hand-offs' (designed to be 'no-hassle' referrals) to any or all the partner agencies. To further assist with this cross-referral process, each agency uses a uniform ADRC application, so that information is consistent, and applicants are not inundated with unnecessary paperwork and wait lines. ADRC's are most often associated with the aging population, so the Council's representation has provided a critical (and often missing) piece to the provision of wraparound service(s) for PwI/DD and their families/aging caregivers.

The Council's timely planning and subject matter expertise has opened doors throughout the state on behalf of PwI/DD and their families. While the Council has completely met its Health and Safety goal (and related objective) metrics, as originally envisioned, its full implementation uncovered additional health and safety-related needs throughout the state. As a result, the Council continued to deepen its reach and scope of work in meeting the needs of PwI/DD and their families for capacity-building, advocacy and systems change through activities related to this goal. SCDD has not been able to fully access hospital-based and judicial platforms to provide training and advocacy, although it continues to work toward increased influence and training opportunities in these areas. Additionally, the

Council's many successes in reaching law enforcement and other first responders with disability-related information revealed additional advocacy, systemic change and capacity-building needs within the health and public-safety fields, in which SCDD will continue to work through the remainder of the current 5-year State Plan cycle.

4 Year Overview: A description of how the Council will use and build from knowledge gained and progress made to move forward in the next state plan cycle.

The health and safety needs of individuals with disabilities are complex and encompass physical, emotional/psychological, medical, relational, and social issues. The Council's goal activities were separated between 'health' and 'safety,' although there was often overlap, with resource fairs and trainings offering the opportunity to address a variety of related topics (e.g. emergency response, personal safety, independent living skills, etc.). The objectives in this goal are designed to address the needs of family/self-advocates and public safety/care professionals and focus on both capacity-building and systems change efforts. Objective 4.1 activities include trainings and information regarding both legal and civil rights (self-advocacy), personal health and wellness (healthy relationships, hygiene, exercise and nutrition, stress management, independent living skills, oral hygiene, emotional changes, vaccinations, etc.), and emergency response/preparation (e.g. active shooter training, preparing for fires and earthquakes, interacting with law enforcement, etc.). Objective 4.2 was created in response to public concerns about public safety training standards and interactions between law enforcement and people with disabilities, as well as a lack of disability-specific training for those in public safety, court and medical fields/systems.

In critical system change efforts, the Council supported legislation requiring enhanced training standards for law enforcement officers, which were implemented in 2017, creating an opportunity for Council staff to step in as subject matter experts and to provide disability-specific training to fill the statewide need. As part of the Council's preparation in the first year of this State Plan cycle, the California Highway Patrol partnered with the Council to provide staff with POST-certified (California Commission on Peace Officer Standards and Training) instructor training for both recruit academy and advanced officer training classes, including training for field training officers. The Council developed curricula to increase the ability of officers and recruits in recognizing intellectual, developmental and/or cross-disabilities and communicating effectively with people with disabilities. Trainings included information about victim/witness/suspect interviews, arrest/control safety-related issues and de-escalation techniques. Over the course of 4 years, the Council determined (through participant feedback) that these trainings are most impactful when they are provided in collaboration with family/self-advocate peer trainers and/or guest speakers with direct experience with disabilities. Peer advocates provide role-playing/scenario training opportunities and real-life examples while also providing disability-related information in an accessible way, which encourages officers to interact directly with PwI/DD and ask questions that they may be uncomfortable asking outside of a classroom setting. Partnerships between the Council and law enforcement agencies have also allowed officers to be involved in trainings designed to teach self-advocates how to safely interact with police and other public safety personnel, increasing the knowledge, skills and confidence of individuals on both sides of the exchange. In the midst of civil rights protests and social unrest during the summer of 2020 (along with adverse LE-related incidents across the country involving people with disabilities) the Council saw a renewed concern among those in the I/DD community about police use-of-force tactics and interactions with PwD, calling attention to the need for ongoing, perishable skills training. Work in this goal area produced beneficial changes, and continued efforts to expand

this partnership will enhance the careers of law enforcement officers and produce better outcomes in interactions between law enforcement and people with disabilities.

Over the last 4 years, California has seen a marked, steady increase in the severity of its annual wildfire season, making emergency preparedness a regular and important part of the Council's safety-related and preparedness/response training activities. In addition to fire/flood/earthquake-related safety trainings, the Council held trainings covering topics such as bullying, active shooter response, disaster planning, the dangers of smoke inhalation, safety/danger/emergency relocation notifications, the 911 reporting and dispatch system, and IEP/IPP personal safety/preparedness planning. In recent years, SCDD has begun using these trainings as an opportunity to distribute 'go-bags' (each donated bag equates to \$50 in leveraged funding), which are emergency kits that include checklists, flashlights, water and other materials necessary for sudden evacuations. To enhance these resources, staff is working with family/self-advocates across the state to include medication/health profiles in every go-bag, which will contain emergency contact information, along with information about medications, disability and functional needs (DAFN) and/or sensory/behavioral issues.

In 2019, California utility companies implemented rolling power outages (known as public safety power shutoffs [PSPS]) as a fire mitigation/prevention strategy. In response, SCDD began working with regional public utility companies (PUC) to ensure the needs of vulnerable populations were met, while also keeping the community of people and families with I/DD informed of these events, using email campaigns (and frequent updates to the SCDD website) to provide up-to-date information that included fire maps, evacuation orders, and locations of open and/or accessible shelters. During the 2020 wildfire season, the Council assisted shelters and/or emergency response personnel to make DAFN assessments and provide appropriate modifications and accommodations, as needed. SCDD helped first responders and emergency response personnel locate resources and identify other evacuation-related needs for people with disabilities during emergencies, evacuations and relocations. The Council will continue to promote these strategies (as promising and/or best practices) in the coming years and will maintain its dedication to providing training, information and resources throughout California to mitigate the effects of both natural and manmade disasters on people with disabilities and their families.

The focus of health and safety-related activities again shifted significantly (during 2020), in response to the COVID-19 public health crisis. The pandemic impacted people with disabilities in unique ways, as many in the I/DD community (and their aging family members and caregivers) are immunocompromised and at increased risk of severe complications and death. Stay-at-home orders, along with masking and social distancing guidelines, left self-advocates isolated and often without access to crucial in-home services, making it necessary for families to fill in gaps in personal care services that had previously been filled by professional care workers. A devastating shortage of commercially available personal protective equipment (PPE) made it difficult for families to safely access necessities (e.g. groceries, medications, public transportation services, etc.) and left residents and staff of group homes and care facilities at increased risk of exposure, transmission and service barriers/losses. Through contact with the Governor's Office of Emergency Services, the Council played a pivotal role in delivering PPE to families and service providers, holding drive-by distribution events at regional centers, schools, Council offices and community-based locations throughout the state. The Council developed and updated health and safety curricula as more became known about the virus and how it spreads. Online communication became a critical tool for outreach and maintaining community and service connections. The Council used social media and online platforms (e.g. Zoom, GoToMeetings, etc.) to host meetings and conduct training. This online outreach allowed the Council

to establish widespread communication with family/self-advocates, service/health providers and other types of care professionals throughout the state, creating networks for distributing information and resources that will be useful over the coming years in navigating ongoing and swiftly changing health and/or other emergent public safety needs. In this work, the Council has noted an increased need for online meetings and/or trainings and will continue to work to create an online (on-demand) resource center to house and provide accessible, statewide information and trainings for the purpose of increasing accessibility.

While the Council has consistently met or exceeded most of its work plan activities and target numbers for both objectives of this goal, the need for many of these activities is ongoing due to the recurrent nature of many of the emergency situations and environmental disasters that Californians with disabilities face each year. Because emergency response is a perishable skill, there will always be need for additional training and related activities (e.g. active shooter, emergency preparedness, evacuation, go-kit distribution, etc.). Self-advocates and families will also continue to benefit from training, information and TA about personal health and wellness as they navigate California's health care systems and transition between life stages. Though SCDD has had great success in training law enforcement, efforts to make this training widespread (extending into the medical and court systems) and mandatory will be ongoing. The Council will continue to use its wide reach to respond to and prepare for emergencies and disasters, assist self-advocates in maintaining their health and safety, and work to form partnerships between the I/DD community and the public safety and health professionals that serve them.

Objective 1: The Council and its federal partners will increase knowledge and awareness for people with I/DD and their families about the availability of and access to health and public safety-related services and supports.

3. This objective is:	Capacity Building
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4. This objective is:	Ongoing
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5. This objective is:	
Fulfilling a Self-Advocacy DD Requirement	No
Targeted disparity	No
DD Network Collaboration	No

A demonstration project of New Approaches to Services and Supports	No
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A demonstration of projects or activities	No
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6. Stage of Implementation:	Implementation
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<p>7. Provide an overall description of this effort:</p>	<p>The Council's statewide survey, conducted in-person and through the use of Survey Monkey, pointed to health and safety as the fourth highest area of concern among people with I/DD and their families. Healthcare arose as an issue because of secondary medical and physical supports needed by people with I/DD and/or cross-disabilities. Safety, a critical component of health, is a paramount concern for all Californians, due to ongoing, seasonal floods, year-round wildfires, earthquakes, and crime rates. Much of the qualitative data from both the statewide surveys and regional office field assessments specifically identified a need for disaster preparedness, safety for self-advocates, and abuse prevention. Given the concerns affecting people with I/DD in the state, the Council was compelled to include health and safety as a goal within the 2017-21 State Plan. The work of this objective is to provide health and safety-related information to family/self-advocates throughout the state, in response to those stated needs.</p>
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Outputs Achieved	
8. Expected Outputs	9. Outputs Achieved
2 safety & 2 health-related curricula; 12 safety-related trainings, reaching 375 people; 12 health-related trainings, reaching 375 people	Yes
13 SA/FA peer trainers prepped in 6 sessions (for safety-related training); 12 SA/FA peer trainers prepped in 6 sessions (for health-related training)	Yes
12 safety-related outreach events, reaching 80 people; 12 health-related outreach events, reaching 170 people	Yes
Hard-copy safety-related resource distributions (as requested); 18 electronic safety-related resource distributions, reaching 11,300 people; hard-copy health-related resource distributions (as requested); 18 electronic health-related resource distributions, reaching 9,500 people	Yes
Reach 36 people with TA, as requested	Yes

<p>10. The report should include the following:</p>	<p>(a) A narrative progress that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenged to achieving the objective and unexpected benefits.</p> <p>(b) For system change activities, include a description of the</p>
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	<p>stage of implementation (Planning, initiation, implementation, outcome/fully integrated) of the system change initiative.</p> <p>(c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.</p> <p>(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report)</p>
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This objective was originally designed to provide distinct health or safety-related activities for people with I/DD (PwI/DD), their families and others. In most cases - and especially during the last 7 months of the federal fiscal year - the pandemic merged public health and safety needs, requiring activities, information and resources associated with both health and public safety. Emerging needs became the focus of curriculum development/changes/updates. Outreach and health fairs quickly transformed into opportunities to provide personal protective equipment (PPE) during a pandemic that spread throughout the state - along with rallies and riots, flooding, earthquakes and wildfires. Supplies prepared for 'go bags' now included face masks, gloves and hand sanitizer, and face/eye shields pulled double duty, protecting wearers from falling ash and the widespread proliferation of Coronavirus. PwI/DD and their families became proficient at using technology to stay both socially connected and distanced. In response, SCDD engaged in 1,580 health/safety-related activities, reaching a total of 230,558 self-advocates (SA), 1,386,735 family advocates (FA) and 337,076 others, in all 58 of California's counties (with 94 statewide activities provided through HQ work). SCDD prepared 72 self-advocate peers and 36 family advocates as trainers in 7 health and 7 safety-related peer preparation trainings. Peer trainers, who played a pivotal role in outreach/training efforts, co-presented in 12 health and 7 safety-related trainings, reaching 148 SA, 29 FA and 117 others. Due to quarantine requirements, SCDD provided 7 of the planned 8 trainings in both health and safety and reached 4 fewer peer trainers than planned in health-related trainings. SCDD provided 38 health-related trainings (with 12 new/updated curricula), reaching 2,360 FA/SA and 524 others. Staff (with and without peers) provided 42 safety-related trainings (with 10 new or updated curricula), reaching 780 FA/SA and 277 others. In 12 peer-led, health-related trainings, SCDD reached 6 fewer FA than planned, although the overall number of people reached exceeded expectations. Council staff collaborated in 76 meetings with 1,623 health-related partners and attended/hosted 23 meetings with 752 safety-related agency and/or individual partners. While meetings were conducted in person during the first 5 months of the year, Council staff converted attendance to Zoom and/or comparable (virtual, online) platforms. Online communication became a critical tool in reaching out to communities in need of timely, accurate information. The Council provided 466 electronic distributions with health-related information (reaching 1,272,993) and 206 distributions, reaching 178,240 people with safety-related information. Staff did not collect/report data for distributions, as efforts typically covered topics from several goal areas, with no reliable method for reporting on any one. SCDD provided training/resources (in plain-language [56 times]) and engaged in outreach a total of 273 times to culturally specific and underserved populations in other (non-English) languages (as requested), including: Cantonese (2), Hindi (1), Hmong (6), Japanese (1), Khmer (1), Mandarin (5), Mien (3), sign language (8), Spanish (182), Tagalog (2) and Vietnamese (6 times). In distributing personal protective equipment (PPE) and related supplies, SCDD worked closely with the Mexican

Consulate, ensuring that (primarily Spanish-speaking) people who were able to receive health screenings were also provided PPE. In southern California, the Council established weekly check-in meetings and updates for monolingual Spanish-speaking, Latinx parent leaders. At-risk populations served by SCDD included those with housing/food insecurity, veterans, refugees, Early Start, foster and out-of-home-placed children, homeless families, and those receiving drug rehabilitation services. Staff distributed PPE in: 1) children's receiving homes, small hospitals throughout the state, and counseling centers serving people with disabilities; 2) group homes and acute, rehabilitative and long-term care facilities; and, 3) regional centers, Native American communities, and scattered pockets of undocumented people. By the end of May 2020, SCDD had maximized its strategic partnership with the California Governor's Office of Emergency Services as it received/distributed more than 101,901,800 pieces of PPE (valued at \$19,000,000 in leveraged funding), including: - 43,607,400 disinfectant wipes - 882,950 N95 masks - 28,578,500 surgical masks - 2,967,030 cloth masks - 202,400 cloth masks with clear plastic insert - 1,474,434 face shields - 22,073,100 gloves - 76,053 1-gallon bottles of sanitizer - 826,110 16-oz bottles of sanitizer - 654,562 8-oz bottles of sanitizer - 559,275 surgical gowns Overall, SCDD reached 6,771 people in safety-related and 108,606 people in health-related outreach activities and held 135 health and safety-related events (many were related to the COVID-19 crisis), reaching 115,377 people. Through these efforts and requests for technical and other assistance (e.g. individual/mass distributions of PPE and other resources), the Council provided technical and/or tangible assistance to 381,055 people, reaching 94,784 new people (11,052 SA, 40,893 FA and 42,839 other new people). Civil rights disturbances produced training requests about interacting safely with law enforcement. SA and professionals working with youth populations asked for training on law enforcement, gang recruitment tactics and bullying, as young PwD have proven especially vulnerable to gang pressure (disguised as 'friendship'). In southern California, training was provided in Spanish, due to the heavy concentration of Latinx youths with disabilities. SA groups also asked for and received training about racial differences, systemic discrimination, civil protests/disobedience, advocacy/political involvement opportunities and racism. SCDD gave trainings about safe policing and safety for Black families of children with disabilities, with discussions about systemic racism in enforcement and/or justice systems. Families of Black children (with cognitive, mental health, behavioral, and/or learning disabilities) are especially vulnerable, concerned, and anxious, with many not trusting police to keep children safe at school. Civil rights/safety issues surfaced in employment/residential settings for PwI/DD, including sexual harassment, hand-washing/hygiene and safe/appropriate relationships, as well as information about scams/fraud. In the Los Angeles area, SCDD provided Mental Health Support training online (Facebook Live), reaching 826 viewers (85% of which were FA). In a disturbing (and emergent) series of events, SCDD responded to cases of people with I/DD who had been hospitalized with sudden health emergencies, but without healthcare or end-of-life directives in place. Rather than relying on RC advocates (familiar with residential group home clients) for direction, some medical staff contacted uninvolved relatives to gain permission to withhold care and/or place patients into hospice. SCDD has now developed training to specifically address healthcare advocacy, I/DD and ethics considerations for professionals. Curriculum was developed about mental health and issues relating to dementia, including diagnostic overshadowing and medication management, treatment options, side effects, behavioral concerns, etc. SCDD gave SA, families and community members training about aggression, treatment services/supports, sensory regulation, anxiety reduction and creative communication for people with behavioral challenges. Because of an ongoing shortage of dentists experienced and willing to treat adults with I/DD and an extreme shortage of hospital time blocked out for anesthesia dentistry, the Council is continuing to work to increase compliance with dental procedures through training about desensitization techniques and increased preventive care. California's wildfire mitigation efforts included rolling power outages, affecting millions of residents

throughout the state. The Council responded with training for - not only emergency/disaster preparation, but also - readiness and awareness skills, with contacts for information about public safety-related information and services for people with I/DD, elders, and other at-risk populations during power shutdowns, evacuations, etc. This included instructions on registering for the Medical Baseline Program through local power companies. SCDD incorporated adult learning techniques throughout all curricula, engaging participants in hands-on training scenarios and proficiency demonstrations, in lieu of surveys, allowing for multimodal learning opportunities in safety and health-related training. In many classes, 'go bags' (each equated to \$50 in leveraged funding) were provided, with emergency kits and checklists, flashlights, and other critical equipment for sudden evacuations. Staff worked with family/self-advocates throughout the state to include health profiles in every go-bag, with emergency contact information, medications, behavioral issues, functional needs information, etc. Until early spring of 2020, training was provided onsite with groups of self-advocates and professionals; after widespread stay-at-home directives were ordered, trainings were converted to Zoom and other online-based platforms. Virtual and online training opportunities actually increased the number of people reached in training efforts and opened opportunities for those quarantined at home to continue to access current information, training and safety advisories. Feedback on virtual/online trainings was gathered with surveys, polling and email responses after sessions were complete; responses to the shift in training were very positive, with self-advocates, family members and professionals asking for even more virtual training.

Expected Outcomes Achieved	
11. Expected Outcomes	12. Outcomes Achieved
People will have health & safety-related information	Yes
SA/FA will be prepared to provide people with peer-led training about health &/or safety	Yes
The Council will engage with new people through SA/FA-led outreach efforts	Yes
People will have up-to-date electronic &/or hard-copy (as requested) information about tenant rights, overcoming barriers to obtaining housing, etc.	Yes
People will have access to TA, as requested	Yes

13. Progress towards achieving outcomes for overall objective:

The Council met its work plan activities and target numbers for both the health and safety areas of this objective. Because of emergent, disaster-related events throughout California, however, the Council expanded on the original set of planned activities in order to respond to the circumstances and needs of family/self-advocates with I/DD during floods, fires and the national pandemic. In recognition of the many potential environmental and manmade disasters that are a recurrent feature

of the California landscape and the fact that emergency response is a perishable skill, the Council will continue its public campaign to educate, prepare and remind family/self-advocates about responding effectively and quickly to local, regional, and/or statewide disasters and emergencies. Additionally, the Council will continue to monitor and respond quickly to threats against Medicaid services and those health systems that serve people with I/DD and/or cross-disabilities throughout the state.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community).

During FFY 2020, 1% of the DDS caseload tested positive for Covid-19. By the end of September 2020, 3,000 people with I/DD statewide had been diagnosed with Covid-19 and 162 had died. In the 10-county Sacramento region alone, 143 people with I/DD had been diagnosed with Coronavirus and 10 died (5 decedents were from 1 care home). 77 direct service providers and 1 regional center staff in the Sacramento region tested positive. In California, 844,000 people had tested positive and 16,350 had died by the end of September. Extensive distribution of PPE to the disability community and other vulnerable populations within California helped keep people safer, along with extensive education (handouts in plain language and languages other than English), trainings, and supplemental supports. We know we saved lives, but the lives that were counted...were those that were lost to us. For those lives, we stand silent and heartbroken. Our group members have been so, so, so grateful for the PPE we have been provided, and all thanks to SCDD. Some have said that they would not be able to go our safely if they had not received the PPE because it has been too expensive to buy. - One family that we gave PPE told me that they had gotten to the point where they had to choose between purchasing PPE or food items for their home. Things are so expensive, and PPE is insane! We are so grateful for the resources SCDD has given us. - We are so blessed by SCDD! Thank you so much! I am thrilled and in disbelief that this resource has not made its way to at least the RC before now. For 29 years I have beat my head against the wall wasting hundreds of hours working to find resources and programs for my son. Living in a rural community makes finding things so much harder, but with Aunt Bertha, the playing field can be leveled for those of us who live outside the larger cities that have easy access to what they need. Many thanks for your hearts that drove the development of such a resource. That has been my vision and dream for many years. I am a MOM!!!! Thank you for applying yourself here... You will bless many lives through this and save parents of disabled kids, countless hours of frustration. Through a Council PPE distribution event, a family advocate (who is also a licensed therapist) picked up PPE for her child and family. Once she realized that (by request) there were also face shields available, she contacted other therapists who were struggling to find needed shields, in order to resume in-person therapy. One regional office had at least 10 therapists (both physical and behavioral) and 1 psychologist come to the event to obtain critical supplies, including face shields. What a great presentation, congratulations to all! It was obvious that a lot of time and effort went into collecting the data and putting it all together. Impressive!! The interpreter did a good job considering that speakers often forgot to slow down for her to translate. It was a lot of technical data that is not easy to keep up with and translate...great job. I learned so much and also enjoyed it. I want to thank you for all you have done to support our center and those we serve during this COVID-19 crisis. The masks and sanitizer you were able to get for us will really make a difference for so many! We are planning to set up a drive-thru distribution center here at the Center. You'll no doubt see multiple notices as we send them out to our Clients and Service Providers. You've been a great partner for a long time, but this time you've really outdone yourself! With gratitude, Phil Bonnet, Alta

California Regional Center, Executive Director. Thanks so much for providing us with protective "gear". Very much appreciated. Our small household consists of four at-risk people. So we are still avoiding to do any shopping except delivery and curbside pickup. And these items have not been available to us. So THANK YOU so much for organizing this event. Hello SCDD! I want to personally 'thank you' all for organizing and distributing masks and hand sanitizer to our family! I arrived at the Sacramento location last Wednesday with my daughter and we were greeted immediately by pleasant staff. The generosity...well, quite honestly was overwhelming. We now feel better prepared to ease into our next phase of establishing a new normal, which involves allowing our IHSS homecare gal to resume her work schedule supporting our daughter! Thank you for helping to keep my daughter healthy! I just wanted to thank you for organizing and participating in the PPE drive and giveaway yesterday. The amount of PPE you hauled all over and load and unload is amazing. I just wanted to personally thank you for all that you do to help support all of our clients and providers by keeping us well stocked with PPE supplies. You have been amazing!! Many thanks! First of all, I want to thank you for the masks and face shields that I picked up from your organization last Friday, we really appreciate it. One of our counselors who works specifically with both Department of Rehabilitation and Workability clients asked if we may be able to get more masks for her clients and their families; most of whom are actually working right now through our subsidized employment program. Please let me know if you may be able to provide us with additional masks in the near future. Thank you again for all that you do. We miss out on important information because it's never in Spanish! We are so thankful to SCDD for always thinking of us and giving us the information in our language. This makes us feel valuable and important. We really, really, really appreciate it! I wanted to jump in to express our sincere appreciation on behalf of everyone at the Sacramento Children's Home. One of our Counseling Center staff sent me the SCDD PPE donation opportunity and we were delighted to learn we would be able to pick up this protective gear. We remain committed to the safety and health of our staff and clients, and this will certainly make a positive impact for us as we continue to provide essential services to local kids and families during the ongoing pandemic. Thank you! Thank you so much for driving to my home to drop off PPE for my family. My child is medically fragile, and I don't have transportation so I would not be able to drive to a pick up event. Thank you so much. Thank you again for all of the wonderful PPE! My daughter and I delivered a bunch of it to our special needs Bible group members last night and others came and picked up some today. They all asked that I thank you so much! They are so appreciative and were in desperate need. The aides thought it was Christmas when they received theirs! As Council staff delivered a supply of PPE, the recipient care home operator was in tears, describing the difficulty of obtaining safety equipment and the critical need to maintain client and staff safety, as 3 clients required changing on a 2 to 3-hour basis. Thank you so much for clarifying that our rights are still generally the same during this time. Everything feels so uncertain right now, but you helped us feel more calm with the information. Thank you so much! I feel so much better after hearing you and after seeing all the resources we have available. Thank you so much for this training. I had never thought about aging and the importance of being aware of it for my young children. This will help now and in the future. Thank you for increasing my awareness of this importance of this. - Wow! So interesting. Thank you. This is not a common topic but so important. - I never realized how important it is to track my child's aging and functioning to watch out for dementia in the future. My son has downs and I am grateful for this information. - I am so grateful that you guys (SCDD) always think of everything! This is not a common topic and I am so glad you guys did it and that I was able to be here. - SCDD staff are always so good. And thank you for introducing us to people that can help is with the aging part and all of that too. - Thank you! Such a great presentation. Thank you so much for delivering PPE! It's been impossible for me to go pick it up. I don't have a car and I really don't feel safe asking anyone for a ride right now. I so appreciate you coming all the way over here. - Thank you so much for coming to deliver. These supplies are so

helpful. Masks and hand sanitizer is so, so expensive these days. This may sound extreme, but I had started to think about needing to choose between buying masks or food. It's been rough. This helps us so much. Thank you for the work you and the team do to make life better for us all. As soon as isolation and shelter in place was in place, my son who lives independently with IHSS and Supported/Independent Living, I chose to bring him home to be in a more protected environment. Both caretaking companies have multiple clients and a total of seven providers go in and out of the house in a 7-day period.

Objective 2: The Council, its federal partners, and self-advocates will increase information and training to law enforcement, court personnel, health care providers and/or other care professionals about disability-related health and safety issues.

3. This objective is:	System Change
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4. This objective is:	Ongoing
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5. This objective is:	
Fulfilling a Self-Advocacy DD Requirement	No
Targeted disparity	No
DD Network Collaboration	No

A demonstration project of New Approaches to Services and Supports	No
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A demonstration of projects or activities	No
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6. Stage of Implementation:	Implementation
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7. Provide an overall description of this effort:	Public concerns about public safety training standards and interactions between law enforcement and people with disabilities propelled the development and activities of this objective. Statutory mandates implemented in 2017 mandated enhanced training for law enforcement officers, without clearly identifying or specifying a source of trainers with subject matter expertise. Family/self-advocates and professionals alike have noted the lack of disability-specific training for those working within public safety, court, and medical systems, although these are clearly service provision networks on with which people with disabilities interact, access services, and rely upon regularly. As a natural corollary of providing family/self-advocates with
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	information about health and safety and emergency response systems, the Council tasked itself with providing disability and accessibility-specific training by subject matter experts, including family/self-advocates, to public safety and medical professionals.
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Outputs Achieved	
8. Expected Outputs	9. Outputs Achieved
2 safety-related curricula & 12 trainings, reaching 300 people; 2 health-related curricula & 4 trainings, reaching 100 people	Yes
3 safety-related SA/FA prep sessions, reaching 20 people; 3 health-related SA/FA prep sessions, reaching 20 people; 5 safety-related training/outreach activities for professionals (with SA/FA), reaching 50 people; 5 health-related training/outreach activities for professionals (with SA/FA), reaching 50 people	Yes
36 collaborative safety-related meetings, reaching 360 people; 36 collaborative health-related meetings, reaching 750 people	Yes
6 safety-related community events, reaching 180 people; 6 health-related community events, reaching 440 people	Yes
Hard-copy safety-related resource distributions (as requested); 12 electronic safety-related resource distributions, reaching 1,250 people; hard-copy health-related resource distributions (as requested); 12 electronic health-related resource distributions, reaching 1,250 people	Yes
Reach 30 people with TA, as requested	Yes

10. The report should include the following:	<p>(a) A narrative progress that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenged to achieving the objective and unexpected benefits.</p> <p>(b) For system change activities, include a description of the stage of implementation (Planning, initiation, implementation, outcome/fully integrated) of the system change initiative.</p> <p>(c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.</p> <p>(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data</p>
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	collection methods; (logic model and evaluation plan may be attached to the report)
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This objective is designed to provide activities for health or safety-related professionals. In most activities, however - and especially during the last 7 months of the federal fiscal year, the COVID-19 pandemic merged public health and safety needs, requiring activities, information and resources associated with both health and public safety for community professionals in virtually every occupation serving people with disabilities and their families (as well as the general public). Emerging needs became the immediate focus of activities, curriculum development and changes/updates to resources. The Council used 23 new or updated (16 safety and 7 health-related) curricula to reach 1,595 professionals (and 56 family/self-advocates) with 40 (36 safety and 4 health-related) trainings; 41 FA/SA peers were prepped by the Council and aided in an additional 13 (8 safety and 5 health-related) training/outreach activities, reaching 194 professionals and 25 family/self-advocates. SCDD staff met with 15,416 people in (11,711 in health and 3,705 in safety-related) 359 collaborative (100 safety and 259 health-related) meetings throughout the state. SCDD also reached 4,046 people in a total of 28 health and 10 safety-related outreach events. 80 health and 29 safety-related electronic distributions reached another 82,381 people (65,746 in health and in 16,635 safety-related distributions). As requested, the Council provided technical assistance a total of 183 times, serving 3,939 people and reached 301 new people (1 self-advocate, 13 family advocates and 287 professionals) in a variety of health and safety-related matters. Health and safety-related activities targeting professionals were provided in culturally diverse communities, including Native Americans. As family/self-advocates also attended trainings for professionals and others, Council staff supplemented training, resources (28 in plain-language) and outreach activities a total of 100 times in other languages, including Cantonese (4), Farsi (1), Mandarin (2), sign language (1), Spanish (54), Tagalog (4) and Vietnamese (5). In the San Francisco, SCDD collaborated with one of California's 21 regional centers (RC) in an effort to develop and fund sexual education classes and psycho-social/educational services for transition-aged youth and young adults, as both research and anecdotal data have revealed this population to be at especially high risk for criminal victimization, unsafe and/or illegal sexual conduct, and sexually transmitted infections (STI's). In engaging in illegal and/or risk-taking lifestyles, some PwI/DD have also lost valuable services or are at risk of doing so. Regional staff are working with RC staff to review and select proposals from qualified clinicians/providers for these educational services. In southern California, staff is working with Kaiser representatives to develop training for professionals and family caregivers, recognizing the stressors associated with statewide quarantines, changes in service/support systems (due to the pandemic), and support and caregiving needs for PwD. SCDD is also working with Area Agencies on Aging to address convergent needs of aging caregivers and PwD, all of whom benefit from services for the aging. SCDD has held classes on disability identification for human trafficking and homeless counselors, to reach more people with I/DD who have not been previously identified or received critical community-based services. Because enforcement agencies have been highly satisfied with the Council's training and curriculum, they continue to seek out SCDD for disability-related classes. As SCDD increases its provision of training to law enforcement (LE) officers and recruits, it has strengthened its collaborative efforts with departmental training/academy staff in revising curriculum, based on enforcement needs, officers' requests for information, and regulatory training requirements. And, as LE personnel have built knowledge and experience about PwD, they have come back with requests for additional training components (e.g. 'invisible' disabilities, referrals for social services/supports, etc.). Because of state LE training protocols, evaluations are developed by specific agencies and submitted either to that agency and/or to the Commission on Peace Officer Standards

and Training (POST) for course certification. After classes, officers and recruits (many of whom have family members with I/DD and other disabilities) routinely express heartfelt appreciation for the information and expertise of SCDD staff. While training provides clear definitions/information about co-occurring disabilities/disorders, staff noted that there is still some confusion in LE circles about what officers refer to as 'mental illness' (psychiatric disabilities) versus 'mental disabilities' (intellectual/developmental disabilities). In addition to its departmental recruit and advanced officer training, the Council is providing curriculum and instruction in CIT trainings across the state, as well as on mandated reporting (of suspected abuse) and other disability-related topics (e.g. Fetal Alcohol Syndrome, drug-induced psychosis, etc.). Selected departments throughout the state have requested training in response to adverse legal actions (regarding officer-related incidents of violence involving people with disabilities) or because they had not had recent training around disability-related issues and wanted officers to receive up-to-date information from subject matter experts. SCDD staff chairs CACITA's (California Crisis Intervention Training Association) Virtual Workgroup Committee to identify, highlight and teach best practices for LE interactions with PwD. In southern California (in response to the shooting of a young man with ASD who was killed by an off-duty officer), the Riverside County DA's Office is working with SCDD to address systemic concerns regarding interactions with LE, provide additional opportunities for LE to partner on trainings with families and advocates, and increase community outreach and education. Due of the diversity of its expertise, scope of work and statewide reach, the Council has maintained a coordinating, advisory and 'supply hub' role (throughout disaster relief efforts and the Covid-19 pandemic cycle) with state governmental, enforcement and public health officials, people with disabilities, educational entities, and representatives from other vulnerable or at-risk populations (e.g. the aging, minority communities, etc.).

During and in the aftermath of California's fire season, the Council, its administration and staff: - Provided up-to-date information on fire maps, evacuation orders and open and/or accessible shelters, maintaining information on its website - Assisted shelters to make disability access and functional needs (DAFN) assessments, locate available resources and identify other evacuation-related needs for people with disabilities during natural disasters - Collaborated with emergency agencies and first responders in developing and/or executing evacuation plans for people with age-related and other disabilities - Worked with regional public utility agencies to ensure the needs of vulnerable populations continue to be addressed through scheduled/rolling power shutoffs

Emerging issues during the public health crisis in 2020 required the Council to engage in ongoing policy and practice-related work across a number of areas. The Council identified emerging needs throughout California and its administration immediately engaged with the Governor's Office and began collaborating with other state agencies to provide practical, field-based suggestions and solutions. As Covid-related events unfolded over a period of weeks, professionals and family/self-advocates reported that the lack of commercially available PPE seriously increased the odds of infection for those who relied on family and outside caregivers and for those in congregate living/care environments. Parents of at-risk children with medical and specialized educational needs reported that free lunches were only disbursed if eligible children physically accompanied a parent/caregiver. Quarantines (in response to public health risks) reduced the availability of personal/in-home care workers, public and private transportation, day activity programs/activities and other personnel and services that are critical in the lives of people with disabilities, elders, and families. Hospitals refused to allow entry to family members and caregivers of people with disabilities, even those who could not self-advocate due to severe illness, unfamiliarity with their own health conditions, discomfort or fear associated with unfamiliar surroundings, etc. In response to Council advocacy: - Local stores, law enforcement agencies and other providers accepted letters that identified authorized people to provide food shopping, medication deliveries and other critical services on behalf of people with disabilities - The Department of Health Care Services

(DHCS) issued a ruling that hospitals were to allow at least one family member/caregiver to accompany elders and/or people with disabilities in acute care facilities (e.g. hospitals, etc.) - The Department of Education (DOE) determined that parents of children receiving special education services could pick up free lunches without having the child physically present, thereby reducing further public/personal health and/or behavioral risks - The Governor's Office of Emergency Services used the Council's influence and grassroots reach to disseminate statewide supplies PPE to at-risk populations and people with disabilities and their families, caregivers, and service providers

Expected Outcomes Achieved	
11. Expected Outcomes	12. Outcomes Achieved
Health & safety-related professionals will have information about disability-related health and safety issues	Yes
SA/FA will be ready to provide information/training & engage in outreach activities about disability-related health & safety issues with professionals	Yes
The Council will engage in collaborative partnerships with health & safety-related agencies	Yes
People will have access to information, resources &/or TA through community-based events	Yes
People will have electronic &/or hard-copy (as requested) information about health & safety-related issues	Yes
People will have access to TA, as requested	Yes

13. Progress towards achieving outcomes for overall objective:

In its fourth year of implementing activities within this objective, the Council has made positive forward motion in continuing to partner with local, regional and statewide enforcement agencies and allied public safety and health personnel for the purpose of training and awareness about the specific needs of people with I/DD and/or cross-disabilities. This partnership is producing tangible, beneficial changes in the way that law enforcement and other public safety personnel and health and safety providers understand, interact with and serve people with disabilities. This work has also proven to field experts that they can count on - and call on - the expertise of the Council. SCDD will continue to solidify these relationships and collaborative efforts through the entire course of the 5-year State Plan implementation period. Through its outreach and training efforts, the State Council is changing and enhancing the careers of entire generations of law enforcement officers in ways that will affect future interactions with people with disabilities. The experience of working with law enforcement will inform the Council's efforts in reaching out to and training court, correctional, and other public safety and healthcare personnel over the final year.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community).

Thank you for all the PPE provided today. Let me know if you need more help to distribute to others. Have a wonderful day! Health Education Council, Mexican Consulate Through the ongoing work of the 2017-22 State Plan, the Council has reached out to partner with community-based cultural organizations and provide critical services to underserved populations through these relationships with professionals. One such collaboration has been with the Mexican Consulates in California, which have partnered with SCDD to reach migrant LatinX populations, providing personal protective equipment (PPE) and resource materials about I/DD that have already been translated into Spanish through the Council's work. The Council was able to provide trucks of PPE for distribution in hard-to-reach LatinX communities and has secured the Consulate's partnership in future projects, including an offer to assist in translating other Council materials into Spanish at no cost. Awesome job, and thanks for all the PPE. Congratulations! Ana Rosa Ochoa, Consulado General de Mexico en Sacramento

Section IV: B

Individual & Family Advocacy Performance Measures

Race and Ethnicity

Race/Ethnicity	#	%
White alone	63	25.51%
Black or African American alone	43	17.41%
American Indian and Alaska Native alone	18	7.29%
Hispanic/Latino	65	26.32%
Asian alone	26	4.45%
Native Hawaiian & Other Pacific Islander alone	11	4.45%
Two or more races and Race unknown	21	8.50%
Gender	#	%
Male	302	26.70%
Female	829	73.30%
Other	0	0%
Category	#	%
Individual with DD	764	68.52%
Family Member	351	31.48%
Geographical	#	%
Urban	440	67.59%
Rural	211	32.41%

I. Output Measures

Objective	Performance Measure: IFA 1.1 People with DD who participated in activities	Performance Measure: IFA 1.2 Family members
The Council and its federal partners will increase knowledge and awareness for people with I/DD and their families about the availability of and access to health and public safety-related services and supports.	230555	1386735
The Council, its federal partners, and self-advocates will increase information and training to law enforcement, court personnel, health care providers and/or other care professionals about disability-related health and safety issues.	12447	39398
Total # of Output Respondents	760	360

II. Outcome Measures

Performance Measures	Percent (%)
IFA 2.1 Percent of people with DD	100
IFA 2.2 Percent of family members who increased advocacy	66

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

Projects	# People with Developmental Disabilities	# Family Members
The Council and its federal partners will increase knowledge and awareness for people with I/DD and their families about the availability of and access to health and public safety-related services and supports.	738	215
The Council, its federal partners, and self-advocates will increase information and training to law enforcement, court personnel, health care providers and/or other care professionals about disability-related health and safety issues.	1	13
Total # of Sub-Outcome Respondents	739	228
IFA 2.3 Percent of people better able to say what they need	97.24%	63.33%

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

Projects	# People with Developmental Disabilities	# Family Members
The Council and its federal partners will increase knowledge and awareness for people with I/DD and their families	707	133

about the availability of and access to health and public safety-related services and supports.		
The Council, its federal partners, and self-advocates will increase information and training to law enforcement, court personnel, health care providers and/or other care professionals about disability-related health and safety issues.	1	5
Total # of Sub-Outcome Respondents	708	138
IFA 2.4 Percent of people participating in advocacy activities	93.16%	38.33%

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

Projects	# People with Developmental Disabilities	# Family Members
The Council and its federal partners will increase knowledge and awareness for people with I/DD and their families about the availability of and access to health and public safety-related services and supports.	269	72
The Council, its federal partners, and self-advocates will increase information and training to law enforcement, court personnel, health care providers and/or other care professionals about disability-related health and safety issues.	1	2
Total # of Sub-Outcome Respondents	270	74
IFA 2.5 Percent of people on cross disability coalitions	35.53%	20.56%

II. Outcome Measures

Satisfied	Percent (%)
IFA 3 The percent of people satisfied with a project activity	87
IFA 3.1 Percent of people with DD satisfied with activity	92
IFA 3.2 Percent of family members satisfied with activity	76

Section IV: C

Systems Change Performance Measures

SC 1: Output Measures

Objective	
The Council and its federal partners will increase knowledge and awareness for people with I/DD and their families about the availability of and access to health and public safety-related services and supports.	
SC 1.1 Number of policy/procedures created/changed	0
SC 1.2 Number of statutes/regulations created/changed	0

SC 1.3.1 Number of promising practices created	0
SC 1.3.2 Number of promising practices supported	0
SC 1.3.3 Number of best practices created	0
SC 1.3.4 Number of best practices supported through Council activities	0
SC 1.3 Number of promising and/or best practices created and/or supported	0
SC 1.4 Number of people trained/educated	337056
SC 1.5 Number of Systems Change activities with other organizations	287

Objective	
The Council, its federal partners, and self-advocates will increase information and training to law enforcement, court personnel, health care providers and/or other care professionals about disability-related health and safety issues.	
SC 1.1 Number of policy/procedures created/changed	0
SC 1.2 Number of statutes/regulations created/changed	0
SC 1.3.1 Number of promising practices created	0
SC 1.3.2 Number of promising practices supported	0
SC 1.3.3 Number of best practices created	0
SC 1.3.4 Number of best practices supported through Council activities	0
SC 1.3 Number of promising and/or best practices created and/or supported	0
SC 1.4 Number of people trained/educated	56819
SC 1.5 Number of Systems Change activities with other organizations	463

Systems Change SC 2: Outcome Measures

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

III. Sub-Outcome Measures

Objective	Number (#)
The Council and its federal partners will increase knowledge and awareness for people with I/DD and their families about the availability of and access to health and public safety-related services and supports.	
SC 2.1.1 Policy, procedure, statute, regulation improvements	0
SC 2.1.2 Policy, procedure, statute, regulation implemented	0
SC 2.1.3 Number of improved promising or best practices	0
SC 2.1.4 Number of implemented promising or best practices	0

Objective	Number (#)
The Council, its federal partners, and self-advocates will increase information and training to law enforcement, court personnel, health care providers and/or other care professionals about disability-related health and safety issues.	
SC 2.1.1 Policy, procedure, statute, regulation improvements	0
SC 2.1.2 Policy, procedure, statute, regulation implemented	0
SC 2.1.3 Number of improved promising or best practices	0

SC 2.1.4 Number of implemented promising or best practices	0
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Goal 5: Early Intervention, Education, Transition & Post-Secondary Education

Section IV: A

Area of Emphasis	Planned for this Goal	Areas Addressed
Quality Assurance	Yes	Yes
Education and Early Intervention	Yes	Yes
Child Care	Yes	Yes
Health	Yes	Yes
Employment	Yes	Yes
Formal and Informal Community Supports	Yes	Yes

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

Intermediaries and Collaborators	Planned for this Goal	Actual
State Protection and Advocacy System	Yes	Yes
University Center(s)	Yes	Yes
State DD Agency	Yes	Yes
Other Collaborators	Yes	Yes

Goal Narrative
<p>Goal 5 is the Council's vehicle for providing information and outreach about education throughout the lifespan to people with I/DD, their families and communities in California. SCDD engaged in a total of 897 education-related activities through its 3 objectives in this goal area, reaching 228,664 people (38,239 self-advocates [SA], 116,994 family advocates [FA] and 73,431 others). Staff provided 103 trainings, reaching 3,685 people (78 SA, 3,174 FA and 433 others), and engaged in 212 collaborative meetings, working with 105 SA, 1,225 FA and 2,959 others (a total of 4,289). In 30 outreach events throughout the state, regional staff served 3,257 people (618 SA, 1,669 FA and 970 others). 201,327 people (24,354 SA, 109,006 FA and 67,967 others) were reached with information electronically, and the Council served 16,099 people (13,084 SA, 1,919 FA and 1,096 others) with resources, information,</p>

guidance and referrals through 317 requests for technical assistance (TA).

While the Council met many of its projected metrics for this goal, there were some notable deficits registered throughout the state. Many of SCDD's collaborative agency partners experienced technical and staffing difficulties as a direct result of the pandemic-related stay-at-home orders. People with disabilities and family members experienced significant disruptions in supports and services (e.g. in-home care, day programming, transportation, respite, etc.) and were limited in their access to activities or found their priorities to be significantly changed. Family and young self-advocates were frustrated by changes (which often supplanted/derailed the services 'promised' in existing IEPs) within the educational delivery system in SELPAs and districts throughout the state and needed to know how to navigate the new reality. In addition to responding to requests for technical assistance (TA), regional staff engaged collaborative partners in virtual/online consultative and planning meetings to find and/or implement solutions to significant problems (e.g. limited provision of individualized services, loss of access for educational and speech/occupational/physical education/therapy-related services, nutrition/food insecurity issues, etc.). The Council and Disability Rights California (DRC - a federal partner) issued an appeal to the Governor's Office and the Department of Education (CDE) for strong guidance that would be applied consistently in all of California's 1,037 school districts and 11,891 schools (CA Dept. of Ed. 2020).

Infants, toddlers, school-aged children and young adults in California experienced a critical disruption in services during the past federal fiscal year. Services through early childhood education (ECE) programs (overseen by both California's Health and Human Services Department and the Department of Education) were largely curtailed, due to public safety/social distancing requirements. Public elementary, middle and high school classes converted to distance learning, creating barriers for low-income families (without resources to purchase and/or otherwise obtain electronic/computer devices) and others without sufficient internet access (e.g. rural areas). Distance learning proved to be a major barrier for students receiving special education services, as individualized instruction was typically limited to/available for only minutes per day - and not necessarily every day. Transition programs for young adults were equally impacted, as in-person learning opportunities dried up, along with a statewide loss of entry-level jobs (and employment support and education programs), transportation disruptions/stoppages, and adult program shut-downs.

To make matters worse, school district administrators in the southern California area took to hiring law firms that essentially 'took over' communication and/or negotiations with parents of children in the special education system, effectively curtailing parents' rights and their children's access to FAPE/IDEA/special education services. The educational crisis triggered by the pandemic has required a level of innovation and flexibility not previously (or typically) experienced in the public education system. The ongoing situation is evolving and will (eventually) result in a litany of 'lessons learned.'

In spite of the barriers associated with COVID-19, the Council stepped forward and fulfilled its (ongoing yearly) mission of providing and/or increasing the information and technical assistance (TA) to family and self-advocates and others by providing in-person, Zoom and/or other online platform-based trainings, holding clinics to broaden technical assistance efforts, and providing family and self-advocates and professionals with more individualized TA, as requested. As a result of its flexibility in providing services, the Council will not have to make changes to its current goals and objectives.

As with other goals, collection of federal performance measure (FPM) data and demographic information was accomplished through activity reports (submitted through Qualtrics soon after

activities are completed), with survey results (of completed surveys or Zoom-related polls taken during training), narrative descriptions of the activity, collaborative partners, and the noting of emerging issues, technical assistance, and development or planning of future events (based on requests for follow-up).

For events such as resource fairs, panel presentations, conferences, and/or other collaborative events (held prior to stay-at-home orders) that were not suitable for survey-based data collection, staff collected anecdotal data from participants and others, including such information in activity reports (submitted by all staff engaged in field work). Additionally, the Council maintains yearly TA, eBlast, and collaborative partner logs (by objective). Staff maintains copies of attendance logs, surveys, newly developed/updated curricula, sign-in sheets, and photos taken during events. As Council staff updates and maintains yearly logs of its collaborative partners (by objective), it typically does not report the number of agencies engaged in specific, individual activities.

Resources

California Department of Education (2020). CalEdFacts: Fingertip facts on education in California. Data and Statistics. Retrieved on 4.15.21:1800 from <https://www.cde.ca.gov/ds/sd/cb/ceffingertipfacts.asp>.

4 Year Overview: A description of how the Council will use and build from knowledge gained and progress made to move forward in the next state plan cycle.

In its statewide survey, SCDD identified education as the 3rd most important area for families and Pw I/DD. This goal addresses education throughout the lifespan, beginning with the identification of infants/children/youth/young adults/families that will qualify or benefit from services and extending into an individual's transition into adulthood and independent/community living. One of the 4 original objectives (and associated legislative/policy-related work) was merged with Goal 6. The 3 remaining objectives cover each major stage of education. Objective 5.1 focused on Early Intervention, with activities to increase awareness of developmental disabilities, typical developmental milestones and early intervention services. Objective 5.2 builds awareness about the availability of services which support inclusive, free and appropriate public education (FAPE). Objective 5.3 is designed to assist in the transition from secondary to post-secondary education and into adulthood and independent living and employment opportunities with individualized effective transition plans. Although the activities of this goal are primarily advocacy and capacity-building activities, it is through training, resources, information and technical assistance (TA) that SCDD identifies and responds to emerging systemic issues.

The work of 5.1 allowed SCDD to identify families of children with I/DD and those who require assistance entering the system. To achieve this objective, SCDD focused on underserved populations (e.g. non-English speakers, tribal and ethnic communities, parents with I/DD, etc.) who are not always exposed or otherwise inclined to reach out for resources. The Council used a combination of outreach techniques that included local/regional events, training for families/community members and medical/educational professionals, and TA to support early detection and intervention for parents/professionals serving children (aged 0-3) throughout California. Parent/community trainings provided information about I/DD, including information about developmental milestones and risk factors (e.g. substance abuse, etc.). SCDD provides information about the differences between Early Start and other SpEd services, the Lanterman Act (including RC eligibility criteria and services), and

training to help families understand and engage in advocacy activities. Trainings incorporate disability history, the disability-related civil rights movement, and effective planning and implementation of advocacy efforts. Trainings for professionals target early intervention providers, CPS, Probation, childcare, school personnel, foster/kinship programs, neonatal and peer support specialists. Training was designed to promote early identification/intervention, to promote inclusive practices, and to acquaint community partners with the education, regional center and generic services available to families. Although there other community-based entities (e.g. FRCs, FRNs, RCs, etc.) that engage in 'find and serve' activities (providing training, outreach, TA, referrals, resources, etc.), SCDD's focus in educating professionals and providing targeted outreach to Asian monolingual (e.g. Cantonese, Mandarin, Korean, and Vietnamese), Native American, and African-American populations has been crucial to bringing historically underserved communities into the service delivery system during a critical early stage in childhood development.

The work of objective 5.2 allows SCDD to reach the students who receive school-based services through IEPs - but who may/may not be eligible for RC services. This also assists with identifying those families/students who qualify for RC services but may be unaware of the supports that are available. With this objective, the Council brings its institutional memory, updated knowledge and staff skills to the process of providing collaborative outreach and information, training, resources and TA to Californians and educational agencies. Each year, the number of people trained and reached with both TA and electronic information distribution has been greater under this objective than either of the other education objectives. Requests for assistance with IEP and/or SpEd-related issues are received daily and come with a sense of urgency, as failure to receive services or assessments has an immediate impact on students' academic success and self-esteem. SCDD provides training on the IEP/ITP process, inclusion, person-centered planning and FAPE rights to help students and their families advocate for educational rights and services.

Though the work of this objective is primarily capacity-building, it has been through providing critical resources to families that SCDD has identified systemic issues and patterns of non-inclusivity at the state/regional/SELPA/district levels and responded immediately, collaborating to address outreach and strategic planning to ensure appropriate services and full inclusion for students with I/DD. Collaborative efforts with SELPAs and districts led to outreach/presentation opportunities with the Advisory Commission on Special Education (ACSE), which provides recommendations and advice to the State Board of Education, the State Superintendent of Public Instruction, the Legislature, and the Governor in new or continuing areas of research, program development and evaluation in California special education. The Council worked directly with districts and community partners (e.g. Disability Rights California, a federal partner) to address systemic issues, whether statewide (e.g. pandemic-related service disruptions) or regional (e.g. problems related to specific district policies/practices).

SCDD established a notable parent training and advocacy partnership with Training Individuals for Grassroots Education Reform (TIGER). The TIGER program was designed in collaboration with the Learning Rights Law Center (LRLC), a SpEd public interest law firm representing people in underserved communities on a pro bono basis to expand capacity, training and access to needed services. This collaboration has evolved innovative approaches over the course of a 4-year cycle, providing 35 hours of beginner, intermediate, and advanced courses to prepare people to become advocates in SpEd and related service systems.

In 2018, SCDD issued a grant (with LRLC) to create an online advocacy training (e-TIGER) portal with a 4-part training series (in English, Spanish, and Mandarin) to develop and enhance parents' and self-

advocates' abilities in advocating for their rights to an inclusive, free, appropriate public education (FAPE). This project was extended to include an additional series to teach people how to recognize and advocate for RC services. Training covered basic information about RCs (e.g. eligibility, services, locations, etc.), differences between RC services and those provided by schools, and transition (between early intervention/Early Start services and school and from school services into adult services/programming/opportunities). To expand program impact, SCDD has begun offering a bonus year of training for TIGER graduates that will give parent advocates extensive information about the transition to adult services and supports. Over the course of this state plan cycle, the TIGER program has expanded its curriculum to cover all objectives of Goal 5 and its reach - with online content in multiple languages, making it an outstanding resource for the I/DD community and an example of the type of comprehensive training that families require as they explore and navigate education throughout the lifespan.

The transition from high school into post-secondary education, employment and/or independent living options is the final piece of the Council's education goal. The work of 5.3 addresses a range of transition-related issues, needs, options and supports/services for young adults with I/DD and/or cross-disabilities. In addressing these needs, the Council has focused on providing training, information, outreach and TA. Transition-related training includes such topics as conservatorship/civil rights, CIE, CalABLE, post-secondary education and related programs, self-determination, independent living supports/services, and other topics (e.g. transportation, housing, SSI, budgeting, etc.). The Council has also served professionals, who often seek assistance, referrals, information and additional resources outside of their own expertise and professional reach. SCDD provides TA regarding IEP/ITP/PCP-related issues, giving families information about SSI/IHSS eligibility and supports available outside of the school system (e.g. health benefits, DOR/EDD resources, etc.). Each year, a new cohort of students enters this transitional phase and self-advocates begin to take the lead in their own self-advocacy efforts. The Council will continue to offer these capacity-building activities to support self-advocates in making informed choices about the future and important supports/services as they enter adulthood.

Objective 1: The Council and its federal partners will increase knowledge and awareness of developmental milestones and intervention services for families of young children and professionals.

3. This objective is:	Capacity Building
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4. This objective is:	Ongoing
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5. This objective is:	
Fulfilling a Self-Advocacy DD Requirement	No
Targeted disparity	No
DD Network Collaboration	No

A demonstration project of New Approaches to Services and Supports	No
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A demonstration of projects or activities	No
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6. Stage of Implementation:	Implementation
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7. Provide an overall description of this effort:	<p>The early identification of delays in or missed developmental milestones typically begins with a parent's, friend's or doctor's question(s) and quickly progresses to a search for more extensive information. The Council has a reputation for being a reliable clearinghouse for up-to-date information, technical assistance, and training opportunities for all family/self-advocates. The Council's community outreach efforts throughout the state, provision of training, information, and technical assistance (individual advocacy and capacity-building), and overall system advocacy work locks together to prepare parents, family members, guardians and their children with I/DD to begin what will become a lifetime of family/self-advocacy efforts. The work of this objective is simply the opening salvo in the Council's (Goal 5) continuum (through 4 objectives) of advocacy and training efforts on behalf of children and families learning to thrive with intellectual, developmental, and/or cross-disabilities. Not only are the Council's efforts and activities aimed at families of at-risk and/or newly diagnosed children, but they also target those medical and educational professionals whose work in early identification and intervention are crucial to a child's development and eventual transition into the education system.</p>
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Outputs Achieved	
8. Expected Outputs	9. Outputs Achieved
1 curriculum; 6 early-intervention trainings, reaching 60 people	Yes
40 meetings, reaching 790 people; 4 outreach/events, reaching 250 people	Yes
Hard-copy resource distributions (as requested); 12 electronic resource distributions, reaching 7,000 people	Yes
100 people reached with TA, as requested	Yes

10. The report should include the following:	(a) A narrative progress that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenged to achieving the objective and unexpected benefits.
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	<p>(b) For system change activities, include a description of the stage of implementation (Planning, initiation, implementation, outcome/fully integrated) of the system change initiative.</p> <p>(c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.</p> <p>(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report)</p>
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The work of this objective is critical to statewide early identification and intervention supports for infants and toddlers who may be at risk of having or acquiring a developmental and/or cross-disability. While most of the training in this area is done by the Council's collaborative partners (e.g. Family Resource Centers/Networks, UCEDDs, etc.), SCDD is active in providing outreach, monitoring, resource/referral provision and technical assistance to families and guardians of very young, at-risk children. The Council engaged in 139 activities in the work of this objective (reaching a total of 34,338 people [with 375 new people, 4,155 self-advocates {SA}, 16,573 family advocates {FA} and 13,610 others]). This included developing/updating a curriculum (for the NICU Family Alliance Symposium) and providing 30 trainings, serving 683 people (10 SA, 523 FA and 150 others). SCDD and its collaborative partners also held 42 meetings, engaging 2 SA, 76 FA and 815 others. The Council participated in 4 outreach events, reaching 456 people (5 SA, 261 FA and 190 others), and provided 36 electronic distributions to 32,217 people (4,123 SA, 15,691 FA and 12,403 others). Additionally, the Council responded to technical assistance (TA) requests 26 times, serving 89 people (15 SA, 22 FA and 52 others) with guidance, resources, referrals, etc. Council activities were provided in languages other than English (Japanese, sign language and Spanish) 32 times and held in 51 of California's 58 counties. Regional Council staff met monthly in sessions throughout the year to plan and execute the Early Start Symposium (central California) and worked on both the planning and implementation of the NICU Symposium (northern California), reaching 50 FA and 120 professionals/educators/medical staff with information about developmental milestones, community resources, and self-advocacy skills for early intervention, healthcare and education. In the Los Angeles area, staff provided a workshop (in Spanish) on Special Education Eligibility Criteria at Fiesta Educativa's 41st Annual Statewide Conference. In southern California, regional staff engaged in 9 advocacy clinics, in collaboration with Help Me Grow Orange County. These clinics (Special Education and Regional Center Advocacy Clinic: Ask an Advocate) are an especially effective way to connect with new parents who are unfamiliar with the developmental support, resource and service systems for very young children. These clinics are also designed to prepare parents for the series of transitions that their children will face, moving from early diagnosis and intervention to the school system and beyond, into transition and their adult years. In the San Francisco/Monterey/Bay Area, the Council discovered that toddlers were not being transitioned from early intervention services into the school system by local districts. SCDD collaborated with regional center (RC) staff and a local health provider, Health Plan of San Mateo, which stepped up to provide Medi-Cal-funded bridge services until the situation could be effectively resolved with district services. The Council is now concerned that it is seeing an ongoing pattern in Black communities - with a lack of adequate community-based services for children who are not yet of school age. Training became an important opportunity to respond to

families' fears about their children's services and developmental progress during the pandemic and the subsequent 'stay-at-home' orders in effect throughout the state. The Council worked with its collaborative partners (listed below) to provide 30 trainings, with topics and collaborators, as listed:

Trainings - Disability Awareness - Understanding Educational Rights during COVID 19 (Spanish) - Cue the Parenting Support - Understanding Intellectual/Developmental Disabilities - Behavior, Sleep & Wake Cycles for Children during Stressful Times - What is I/DD: Culturally Appropriate Supports and Services (outreach/training for African-American families) - Special Education Eligibility - IEP Meetings Part II: How They Work and How to Get What You Want (Spanish) - Building Bridges (Spanish) - Transition from Individual Family Support Plan (IFSP) to Individual Education Plan (IEP) (ASL) - I/DD: From Early Childhood Development to Self-Advocacy (underserved African-American community) - Developmental Milestones: Building Capacity & Eliminating Barriers (4-part series in Spanish) Collaborative Partners - Exceptional Parents Unlimited - Disability Rights of California (DRC) - Achievement by Design - Deirdre Fitzgerald, PhD, BCBA-D - Fiesta Educativa - Mary Immaculate Catholic Church - Amador Tuolumne Community Action Agency (ATCAA) - Regional Centers - Sonora Spanish Parent Group - Rowell Family Empowerment of Northern California (RFENC) - CSUN Family Focus Resource Center (FFRC) The Council intensified its collaborative efforts in identifying and meeting needs in diverse communities, alongside other key agencies. SCDD is an active participant in Detect & Connect OC - a group of medical providers/representatives, community stakeholders, and community agencies addressing systemic gaps in screenings, early diagnosis, intervention and support services for children with I/DD and/or cross-disabilities with information about updates in tracking Adverse Childhood Experiences (ACE), parent education, mapping of critical messaging, data-sharing and updated assistive technology. Although the Council has consistently worked to reach LatinX communities throughout the state, regional staff also made concerted efforts to gain in-reach within Black communities, as well. When in-person activities were curtailed, due to stay-at-home orders, the Council quickly pivoted its outreach efforts using Zoom and other online communication and meeting platforms - using technology and expertise to provide other entities with ways to continue operations (e.g. regional centers, telehealth providers, etc.). Regional staff spent innumerable hours making phone calls to families and agencies in communities throughout California, working to identify pockets of need and developing programs and activities designed to meet those needs as quickly as possible. The Council's extensive work with families and PwI/DD and its strong relationship with the Governor's Office made it a valuable planning partner and a reliable conduit for information, outreach and collaborative, community-based work during the course of California's pandemic response efforts. SCDD regional staff joined forces with the Emergency Child Care Task Force, an outgrowth of the Orange County Child Care and Development Planning Council's Inclusion Collaborative, on which the Council participates as a member agency. SCDD, through this task force, worked to deliver critically important personal protective equipment (PPE) to childcare providers and families of young children. The collaborative also assisted essential (critical infrastructure) workers in finding childcare, funded through the Governor's Executive Order that provided for expanded access waivers for after-school programming and subsidized emergency childcare provisions (announced on 4.10.20). The order also provided for flexibility in SNAP benefit guidelines to reduce childhood food insecurity (during the pandemic) through low-to-no-cost nutrition programs. \$100M was set aside to support childcare services for essential workers and vulnerable populations, while \$50M was diverted to the Department of Education to be used to pay for up to 20,000 limited-term, state-subsidized childcare slots. Another \$50M was designated for the Department to ensure childcare centers, facilities and family provider homes are safe and clean for children and families serve, providing reimbursement for the purchase of gloves, face coverings, cleaning supplies, and labor related to cleaning, in accordance with federal and state public health and safety guidelines. Because of critical

shortages in the commercial availability of safety supplies, the Council's work in distributing millions of pieces of PPE proved to be an important safety bridge for childcare workers and other providers of services for families and their children with I/DD.

Expected Outcomes Achieved	
11. Expected Outcomes	12. Outcomes Achieved
People will have information about disabilities, early identification/intervention, & other topics related to education throughout the lifespan	Yes
Families of young children and professionals will have knowledge and awareness of developmental milestones and intervention services throughout the state through the work of the Council & its collaborative partners	Yes
People will have electronic &/or hard-copy (as requested) information about disabilities, early identification/intervention & other topics related to education throughout the lifespan	Yes
People will have access to TA, as requested	Yes

13. Progress towards achieving outcomes for overall objective:

It is the Council's intent to continue to reach family advocates, professionals, and community members and to increase knowledge and awareness of developmental milestones and intervention services for professionals and families of young children. With that charge, Council staff used all available federal strategies, engaging in highly collaborative work through meetings, outreach efforts and events, training and presentations, and other types of activities, working with its federal partners and addressing every federal area of emphasis. The Council is part of a larger network of collaborators (e.g. FRNs, FRCs, etc.), many of which already provide the activities (e.g. training, resources/materials, etc.) that have been part of the Council's work plan, reducing the needs of FA/SA/others for those same services/supports and resources through the Council and, thereby, reducing fulfillment of many of the projected targeted activities. While the Council met several of its work plan activities and targeted goals for this objective, there is an ongoing need - especially in light of the current pandemic - to provide family advocates and professionals with information about developmental milestones and early identification of and intervention for children with I/DD. With every suspicion or confirming diagnosis, another family is plunged into unfamiliar territory and needs current information and technical assistance to navigate the complex system(s) of care, service and

support needed by children with I/DD. The Council will continue the work of this objective through the remaining year of the 5-year State Plan cycle.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community).

I wanted to thank you again from the bottom of my heart for the information you provided (I will be reading as much as I can for my son's sake) and for your words of encouragement. It's people like you who give these vulnerable kids a fighting chance to be successful and give parent the courage to be the best informed advocates for their children. Thank you again. Thank you for bringing this concern to our attention. I am so sorry that any of our families had this experience. This is not the experience we want any of our families to have during this difficult time. We are working to ensure we improve messaging to our teams and service to our community. Please stay well! (Sacramento City Unified School District) Hello, the meeting went well. You were right, they were reluctant to evaluate her. They said she wasn't as bad as other kids that need help. Thank you for giving me a heads-up; otherwise I may have just walked away from the meeting without pushing to get her evaluated. They did in the end agree to have her evaluated. They sent me some forms to fill out, which I did. They have scheduled an IEP meeting in March. Thank you for your help. I just wanted to drop a quick note to kudos to you for setting up the chat - she was great. My child had sleep issues for years so we know how tough that can be. I love how she focused families on giving the individual control. Thanks!

Objective 2: The Council, in consultation with its federal partners and other stakeholders, will increase awareness and knowledge for families and self-advocates about the availability of and access to services which support inclusive education.

3. This objective is:	Capacity Building
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4. This objective is:	Ongoing
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5. This objective is:	
Fulfilling a Self-Advocacy DD Requirement	No
Targeted disparity	No
DD Network Collaboration	No

A demonstration project of New Approaches to Services and Supports	Yes
Project Name	
Original Start Date	

A demonstration of projects or activities	No
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6. Stage of Implementation:	Implementation
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<p>7. Provide an overall description of this effort:</p>	<p>The SCDD's regional offices field frequent requests from family advocates for assistance on how to obtain services from their assigned school districts. Individual Education Plan (IEP) meetings are essential for students to receive needed services because a potentially wide array of supports will be identified upon in these meetings. Once the IEP is drafted and signed, it becomes a legally binding document that local education agencies (and families) must honor. The most recent numbers from the California Legislative Analyst's Office show that about 10% of students in the state school system receive special education services. In the Council's statewide survey, special education was ranked as the third-highest area in which families and people with I/DD have the greatest need for service. In addition, over the course of the year, the Council's regional offices received 900 telephone requests for assistance with IEPs and obtaining delivery of special education services. Since 44% (representing 149,609 people) of Californians receiving regional center services are between the ages of 3 and 21, this remains a pivotal area for many people with I/DD and their families. What's more, a full 560,197 students between the ages of 3 and 21 have a (n intellectual and/or developmental or cross-) disability significant enough that they are deemed eligible to receive special education. This means that 410,588 students may receive school-based services through IEPs, but do not, for a variety of reasons, qualify for regional center case management, to assist in navigating the school system and self-advocate for their civil and educational rights within that system. The Council's activities within this objective area are part of a continuum of work that spans a lifetime of learning, designed to prepare people (and generations) with disabilities to be independent, productive members of the society in which they choose to live, learn, play and work.</p>
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Outputs Achieved	
8. Expected Outputs	9. Outputs Achieved
2 curricula; 24 inclusive education-related trainings (FAPE/inclusion/SA/Disability Awareness), reaching 1,500 people	Yes

48 meetings, reaching 280 people; 6 outreach/events, reaching 500 people	Yes
Hard-copy resource distributions (as requested); 20 electronic distributions, reaching 12,800 people	Yes
90 reached with TA, as requested	Yes

<p>10. The report should include the following:</p>	<p>(a) A narrative progress that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenged to achieving the objective and unexpected benefits.</p> <p>(b) For system change activities, include a description of the stage of implementation (Planning, initiation, implementation, outcome/fully integrated) of the system change initiative.</p> <p>(c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.</p> <p>(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report)</p>
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In support of a free, appropriate public education (FAPE) for students with I/DD, the Council engaged in 570 activities for this objective, reaching 166,387 people (30,676 self-advocates [SA], 86,488 family advocates [FA] and 49,223 others). Staff engaged in 110 meetings with the Council's collaborative partners, working with 2,429 people (89 SA, 1,084 FA and 1,256 others). SCDD participated in 8 outreach events, reaching 669 people (37 SA, 362 FA and 270 others). Staff responded to 241 requests for technical assistance (TA), serving 15,678 people (13,049 SA, 1,642 FA and 987 others). SCDD issued 153 electronic resource distributions, reaching a total of 145,262 people (17,475 SA, 81,282 FA and 46,505 others) with resources and information to assist people in accessing FAPE rights. In providing services in 52 of California's counties, the Council developed and/or updated 4 curricula and provided training and materials in English (and plain language), Mandarin, Cantonese, Japanese, sign language, Spanish and Vietnamese. SCDD provided 53 trainings, reaching 2,345 people (26 SA, 2,117 FA and 187 others). In revising curriculum, staff stresses that mental health services are a requirement (1984's AB 3632) through the IEP and programming changes must be agreed upon by the team. SCDD has, in collaboration with federal and community-based partners, developed training to support FA/SA in navigating the SpEd system, including identifying/assessing children at-risk for learning &/or developmental disabilities, transitions from early intervention into public schools, FAPE/IDEA and inclusive educational rights, supplemental services, due process/compliance complaints (and investigation/adjudication/resolution agencies), etc. SCDD held clinics after some trainings to serve FA/SA with case-specific questions or concerns. SCDD brings in collaborative partners (e.g. DRC/OCRA, legal experts, etc.) to provide expertise and assistance during clinics. In the Santa Cruz area, the County Probation Department requested Council training on the SpEd system and IEP basics, as probation officers serve as student advocates during IEP and school meetings. Once

COVID hit, SCDD surveyed communities to identify needs. Training about FAPE rights - especially for non-English-speaking populations - was quickly identified as a widespread need. As quarantines and social distancing requirements were imposed, SCDD turned to social media and other platforms (e.g. Zoom) to provide trainings. This allowed a statewide reach, such as a summer training series that was presented as a webinar (<https://www.youtube.com/playlist?list=PLr7ROA1-vQugRsl1v9aMwOkwePuQHtiFU>). While this proved an effective training model, SCDD has not perfected a system of collecting survey/demographic data. Additionally, the technology/internet access necessary to make use of these resources is not yet available to many underserved, low-income populations and/or heavily rural/frontier areas in California. For non-English speakers who were able to access training, SCDD partnered with community-based entities (e.g. CSUN Family Focus Resource Center [FFRC], Gonzales Parent Group, Fiesta Educativa, Latino Padres Mentores, Padres Empoderando Padres en Educacion Especial, Padres Unidos Por el Autismo [PUPA], etc.) to provide information with side-by-side translations or solely in the language of choice (e.g. Spanish, Cantonese/Mandarin, Vietnamese, etc.) Religious instructors (at the Mary Immaculate Catholic Church) who teach Catechism classes for students with special needs requested training (in Spanish) for students' families. Family advocates expressed appreciation for resources. In response to a request from Fiesta Educativa and in collaboration with the Mexican-American Opportunity Foundation (MAOF), the Council provided a 4-part training series for Spanish-speaking family advocates who serve as parent leaders in the community. The intent of the series was to help advocates develop more robust leadership and advocacy skills by targeting cultural disparity and preparing parent leaders who will then support other Spanish-speaking family advocates. Technology is often unaffordable for low-income families. SCDD responded to this need with a training about assistive technology (Fabulous Freebies: Assistive Technology [AT] for No Cost and Adaptation Ideas for Very Little Cost) for family/self-advocates and others, featuring low-tech AT ideas, accessibility features, and free assistive downloads/software for reading support, e-book, text to speech, plain language software, etc. The Council encouraged families and professionals to include a goal (in preparing IEPs) to address emergency preparedness planning (for the unique needs of students with disabilities) involving disasters (e.g. earthquakes, tornadoes, fires, floods, hurricanes, active shooter situations, etc.). Families have reported that their children are not familiar with what to do at school during emergency drills. Parents are concerned that children with special needs are not being considered or included in emergency planning and practice drills at school. SCDD provided examples of what to discuss in IEP meetings about safety planning with a sample IEP safety goal, which may also contain objectives to address bullying, online safety considerations, personal/sexual boundaries and reproductive health training needs, etc. SCDD planned, hosted, and/or participated in several outreach events prior to the pandemic onset. Regional staff collaborated with Exceptional Parents Unlimited (EPU) to provide a Parent Summit (with simultaneous Spanish translations) for family advocates and community stakeholders, bringing information about the inclusive/special education system, reaching 160 people. Other Council education-related events included: -2nd Annual Parents Helping Parents (PHP) Special Needs Resource Fair (with 60 agencies and 200 attendees) - Bilingual Special Needs Parent Conference (20 agencies and 60 attendees) - Fetal Alcohol Spectrum Disorders Network of Southern California Conference - 5th Annual Brighterside of Down Syndrome (TBODS) Conference: Educating Children with Down Syndrome (100 attendees) - Family Community Strengthening and Education Conference African-American and other Multi-Racial families (planning and resource table) - Free Screening: Autism Goes to College (with Spanish subtitles) - Special Education Parent Summit and Resource Fair (resource table) While the focus of this objective is advocacy and capacity-building, there are activities and situations that give rise to the need for systems change work. SCDD has received innumerable requests for information, TA and resources from parents whose children have not received the supports and

services identified in their IEPs, due to distance learning requirements, disorganization at the district level, and quarantine restrictions. The Council is working with districts and parents to reduce the need for compensatory education and the potential for children to lose ground with the loss of appropriate services. In a meeting with a Latinx parent support group (AGAVE), participants reported problems with a local district and SCDD offered training and provided information, TA and resources/referrals. One parent reported that the district was found to be in violation of 6 separate IEP-related issues and the child's principal had requested that the parent drop the complaint. SCDD provided TA in protecting the child's FAPE/IDEA rights and helping the parent understand the appropriate and available procedural safeguards. Council staff met with several parent advocates and representatives from Disability Rights California (DRC) to strategize in the face of the rampant use of law firms (one firm in particular) by districts to take over communication with parents of children in the SpEd system, subverting legitimate requests and due process rights and using aggressive intimidation tactics. Parents reported a pattern of retaliatory, dismissive, racist and exclusionary behavior against parents and students with I/DD in underserved populations. Although SCDD and DRC have developed systemic strategies to ensure FAPE rights of students and families with disabilities, districts have proven (under the guidance of legal advisors) unwilling to engage in direct communication with parents, relying on adversarial attorneys to serve as the sole form of communication. Plans for a class action suit are being considered but will take time for a solution to emerge. SCDD (with experience in 'legal' harassment tactics) is providing training/support services to family advocates and TA to DRC. SCDD, through Public Record Act requests, has used information (regarding these cases and bills that are paid to attorneys using LEA tax dollars) to persuade members of local Boards of Education to consider issuing orders to restrict/stop abusive and preemptive actions. In FFY 2019, SCDD funded a sub-grantee (the Learning Rights Law Center [LRLC]), which requested an extension. Fortuitously (given a pandemic), the project was an internet-based, electronically-accessible video series, entitled e-TIGER (electronic - Training Individuals for Grassroots Education Reform). While e-TIGER was designed as a 4-part training series to uphold and enhance parents' and self-advocates' abilities in accessing rights to an inclusive FAPE, the Council grant allowed LRLC to extend the series to teach people how to recognize and advocate for RC services. By the end of FFY 2020, the e-TIGER videos had garnered 63 (SA/FA) viewings in English, Mandarin and Spanish. As a result of Council grant funding, this series will be maintained (and be translated into other non-English languages) in the LRLC training archives, providing dividends from the Council's original investment (with funds from the Loyola Marymount University School of Education).

Expected Outcomes Achieved	
11. Expected Outcomes	12. Outcomes Achieved
People will have disability & education-related information throughout the state	Yes
The Council & its collaborative partners will have access to (disability & education-related) subject matter experts throughout the state; and the Council will engage with new people through outreach events	Yes
People will have electronic &/or hard-copy (as requested) information about	Yes

disabilities, FAPE & other topics related to education throughout the lifespan	
People will have access to TA, as requested	Yes

13. Progress towards achieving outcomes for overall objective:

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

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community).

I am very grateful to have access to the workshops provided to help families. Very professional and informative. Amazing resources and ideas! A family advocate expressed always feeling so inadequate and unprepared for IEP meetings, which often resulted in no changes to the IEP, which as not reflective of her child's needs. She stated: But NOW - oh boy, I feel ready! I know I have a lot more to learn but I am not where I used to be and I want to thank SCDD for that. Thank you so, so, so much! Muchas gracias por la informaci n selos agradezco mucho yame registre ojal hay gan recibido mi informaci n me encantan excelen seminario que presentan ala comunidad bendiciones. I just want to thank you for your excellent presentation and interpretation of the IEP (individual education program plan) a few moments ago. I am truly immediately grateful for your work for special education parents and especially in these times of uncertainty where we need more support! Thank the other presenters and a thousand thanks again! Blessings. Thank you for making this workshop, the excellent information and also the translation possible for our Hispanic community. Information provided by parents is critical in following and responding to emerging issues quickly and effectively. As Council staff provided technical assistance, a family advocate shared a district letter (sent only to families) outlining what to expect in the upcoming year and stating that the school district - not parents - would develop a distance learning plan/emergency IEP. This is obviously neither legal nor accurate and has resulted in parents falsely believing that their input was not necessary or relevant. The Council provided this information to the State Department of Education (the Director of which is an agency member of the Council) and a solution is being discussed. The Council will continue to monitor and respond to the situation. Ten family advocates reported on how beneficial they found the training to be. They said that, although they had attended other IEP-related trainings where translation was provided, they had never been able to capture the depth of the information that was shared in the Council's training and that, due to the shortage of trainings in Spanish, there continues

to be disparity between the knowledge that Latino parents have and what other parents have. They were extremely grateful and reported that they felt new confidence in being able to represent and advocate for their child in IEP meetings. In what could have produced a horrible outcome, a school nurse administered the wrong insulin dosage to a student with Type I diabetes. The Council provided TA to the parents to develop a 504-based emergency/safety plan for the child, providing a safer environment within the school site. The Council provided technical assistance for a child who had been expelled from an after-school program because of behavioral issues. As a result of the Council's work, the child is now receiving wraparound, school and home-based behavioral intervention and counseling services and will again be considered for participation in an after-school enrichment program. As the pandemic quarantine restrictions took effect throughout California, districts and school sites began providing free lunches to qualified students, which were picked up by parents and caregivers who were required to have the eligible child(ren) with them (in the vehicle) during pick-up. This created an immediate problem for parents/caregivers with children who had behavioral, sensory and/or medical conditions. The Council advocated with the Governor's Office and worked with the California Department of Education (CDE) to lift such restrictive requirements and develop a more reasonable, safe option. As a result, CDE issued updated guidance for districts (<https://www.cde.ca.gov/ls/he/hn/schoolmeals.aspx>), which provided children with safe options for receiving their school lunches. In the city of Sacramento alone, this policy change affected nearly 48,000 children and their families. The Council provided tangible assistance to a large coastal SELPA that was failing to provide Spanish interpretation for its CAC meetings. Council staff arranged for an introduction with one of its community collaborative partners, which will now be providing translations for the SELPA's CAC meetings. This is expected to reduce the disparity in service requests from Spanish-speaking parents. Additionally, the Council provided the SELPA with assistance in using the Zoom platform and its translation feature. From a service provider: I really appreciated your presentation. Most of our students, if not all, were not educated on the topic. I was able to forward your contact information and was confident at least one of our interns would be contacting you with questions. Again, it was a pleasure having you and learning from you. The Council requested that a local SELPA and a district's Board of Education remove the practice of student restraint from policy. The Board declined. Shortly after the meeting, the SELPA Chair reported the rest of the story: ...at the SELPA IV Executive Council meeting today, Dr. Dewan, Assistant Superintendent, announced that the County is banning use of prone restraint and asking all districts to follow their lead. I thought that just may make your Friday a bit better! Cheers! The Council received a call regarding a local district that was systemically failing to follow the requirements of intact IEPs. Regional staff met with the district Superintendent, principal and teacher(s), after which the Superintendent assured parents and the Council that the district would thereafter honor the implementation requirements of every IEP, as written.

Objective 3: The Council, in consultation with its federal partners and in collaboration with educators and stakeholders, will increase information and technical assistance to prepare and empower students, families and professionals in developing individualized transition plans that lead to employment, post-secondary education &/or independent living options & opportunities.

3. This objective is:	Capacity Building
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4. This objective is:	Ongoing
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5. This objective is:	
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Fulfilling a Self-Advocacy DD Requirement	No
Targeted disparity	No
DD Network Collaboration	No

A demonstration project of New Approaches to Services and Supports	No
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A demonstration of projects or activities	No
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6. Stage of Implementation:	Implementation
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7. Provide an overall description of this effort:	<p>The transition from high school into post-secondary education, employment and/or independent living options is another significant developmental milestone in the lives of family and self-advocates. Within the full continuum of those individual and family needs that are part of the larger education-related goal, the work of this goal's 3rd objective addresses the range of transition-related issues, needs, options and supports/services for young adults with I/DD and/or cross-disabilities. In addressing young adult (family/self-advocates) transitional needs, the Council has focused on 2 primary areas: Providing training, information, outreach and technical assistance. **Note: Although 'transition,' in regard to people with I/DD and/or cross-disabilities, is traditionally defined as that gradual, planned, and protracted stage between the ages of 16 and 22 (as young adults move from the education system into adult life and community-based service systems), it should also be noted that any single event in the life of an adult with I/DD can trigger a major (period of) transition, as well (e.g. the death of one or more parent(s)/caregiver(s), job loss, eviction, changes in public entitlements and/or services, age-related health/cognitive changes, etc.). Life-changing events may be either positive or negative (e.g. marriage and/or divorce, the birth and/or the death of a child, etc.), but are destined to change an individual's life and will cause needs (e.g. person-centered planning, education/training, housing, etc.) to surface that are directly associated with the triggering event and the resulting period of transition.</p>
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Outputs Achieved	
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8. Expected Outputs	9. Outputs Achieved
2 curricula; 20 trainings (ITP, Employment, PSE, Disability Awareness, & SA); reaching 500 people	Yes
50 meetings, reaching 200 people; 15 outreach/events, reaching 2,000 people	Yes
Hard-copy resource distributions (as requested); 12 electronic resource distributions, reaching 5,000	Yes
90 people reached by TA, as requested	Yes

10. The report should include the following:	<p>(a) A narrative progress that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenged to achieving the objective and unexpected benefits.</p> <p>(b) For system change activities, include a description of the stage of implementation (Planning, initiation, implementation, outcome/fully integrated) of the system change initiative.</p> <p>(c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.</p> <p>(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report)</p>
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This objective provided advocacy and capacity-building activities for transition-aged youth and families in 56 of California's 58 counties. SCDD engaged in 188 activities, reaching 27,939 people (3,408 self-advocates [SA], 13,933 family advocates [FA] and 10,598 others). Staff developed/updated 2 curricula and provided 20 trainings, reaching 657 people (42 SA, 534 FA, and 81 others). Staff held/attended 60 meetings with 967 collaborative partners (14 SA, 65 FA and 888 others). Prior to the pandemic, SCDD engaged in 18 transition/employment-related events, reaching 2,132 people (576 SA, 1,046 FA and 510 others). Technical assistance (TA) was provided 50 times, assisting 332 people (20 SA, 255 FA and 57 others). SCDD sent out 38 eBlasts, reaching 23,848 people (2,756 SA, 12,033 FA and 9,059 others) with information/resources. As with many activities this FFY, the ability of Council staff to provide community-based, education-related trainings was severely hampered. In providing 20 trainings, the Council engaged Vietnamese, Spanish-speaking, and Native American people/families with I/DD, professionals and college students, in training topics (and information/support materials) that covered: - Understanding I/DD: Diagnostic Criteria and Terminology - Disability awareness: Common Challenges and Supportive Strategies Associated with I/DD - Alternatives to Conservatorship: Supported Decision-Making - Barrier Elimination: Accessing appropriate special education services (4-part series) -Your Rights and Self-Advocacy - Life After High School: Transition to Adulthood - CalABLE vs. Special Needs Trusts - Life after High School: Employment and Post-Secondary Education (PSE) - RC: Transition - SpEd: IPPs, IEPs and Transition Plans (ITPs) - Transition: Vocational Planning Expectations SCDD provided training

(Understanding I/DD) for Irvine Valley College, reaching 30 students with an interest in education (28 students were new to SCDD services and/or events and all 30 reported that they were satisfied with the activity). SCDD reached Spanish-speaking community members with information about the civil rights of young adults after high school (Alternatives to Conservatorship). In collaboration with the CSUN Family Focus Resource Center (FFRC), staff provided a 4-part series (Barrier Elimination: Accessing appropriate SpEd services) in Spanish. Of 32 FA surveys collected, 31 people identified that they had more advocacy skills and abilities; 30 reported being better able to say what was important to them, and 31 reported being satisfied with the activity. SCDD provided training to a post-secondary class of students with I/DD (Your Rights and Self-Advocacy), all of whom reported positively on the activity. Staff learned that none of the students had ever had a job, nor were any of them working toward a high school diploma. After training, staff was approached for TA about RC services. Staff provided training (SpEd, Transition, IPPs, and IEPs) for professionals and parents (in Vietnamese), to increase their capacity to advocate for appropriate FAPE and RC supports for people facing language and cultural service barriers. In southern California, SELPA staff and CAC members requested training (Life after High School) about the IDEA, transitional/adult service systems for PwI/DD, post-secondary education (PSE) options, housing, employment, and a range of providers. The SELPA's psychologist praised the training and recommended it to other districts and SELPAs. SCDD collaborated with an RC's Native American Training and Technical Assistance (NATTA) group to target Native American families and PwI/DD for training, resources and information about IEP's and related advocacy work. Due to power shutoffs, families were unable to attend training; SCDD gave NATTA staff resources/information to provide SA/FA in the RC's 4-county, northern California catchment area. SCDD provided a Zoom-based training series (Transition to Adulthood) in Spanish for Unidos Con Mision y Poder (UCMP), a parent support group for Spanish-speaking parents of children/youth/young adults with I/DD. SCDD collaborated with a local church to provide training (Transition to Adulthood) for monolingual Spanish-speaking parents (Antelope Valley Seed and Grow Parent Support Group). Funding was leveraged for space, technology, etc. SCDD provided training (Transition, IPPs, and IEPs) for another support group (Chaparosa Parent Group) of Latinx parents, with leveraged funds for a Spanish-speaking interpreter. While SCDD provides training as a capacity-building activity, it also knows that family/self-advocates and others who receive training are better prepared to engage in system change activities within their own agencies and community systems of case management, service and support, which benefits others with I/DD. Although employment and educational opportunities have been limited, SCDD's transition-related work on behalf of PwI/DD and their families has proven encouraging to people who know that they will have resources and information when businesses and schools are operating at full capacity. The Council maintains collaborative partnerships with entities that are invested in transition planning, services, PSE, housing, employment, and micro-business opportunities for youth and young adults: - Point of Transition and Interagency Partnership -Disability Support Program Services (DSPS) of San Joaquin Delta College - Family Support Networks - SELPAs throughout the state - College of the Desert Consortium for Early Learning Services - Supported Employment Living Interagency Team (SELIT) - California Adult Education Program (CAEP) Disability Support Services (DSS) Consortium - Santa Ana College Disabled Students' Program & Services (DSPS) - Orange County Adult Transition Task Force (OCATTF) - Summer Transitions Coalition SCDD uses meetings with collaborative entities to engage in event/systems change planning/implementation, training and information - to raise emerging issues, etc. SCDD has been instrumental in providing constituents and collaborative partners with access to/training about using Zoom and related social communication platform(s) to work with families and PwI/DD through the constraints of pandemic-related social isolation. Prior to quarantine limitations, SCDD assisted in planning and implementation of several events related to students with I/DD and families in transition: - Transition to Independence Fair:

Stepping up for Independence (Keynote address & resource table) - San Jose: Disability Awareness Day (resource table & technical assistance [TA]) - The Autism Community in Action (TACA) National West Coast Autism Conference: Life After High School (presentation, resource table & TA) - Irvine Adult Transition Program Parent Information Night (resource table) - San Diego Unified School District Transition Fair (resource table) - Napa Valley College/American Canyon High School Transitional Job Fair (resource table) - Esperanza Education Center Adult Transition Program Resource Fair (resource table) - West End SELPA Career Fair (resource table) - (3) VMRC Transition Fairs (planning, resource video and virtual Resource Book) - California State University Fullerton (CSUF)/La Sierra High School Transition Resource Fair (resource table) - Parents Helping Parents Family Resource Center of San Jose Transition Fair (resource table & TA) - Sweetwater Union High School District Transition Resource Fair (resource table) - 9th annual Chabot College with a Disability - Vision for the Future: Educational Opportunities for Students with Disabilities (planning/tangible support, presentations & resource table) - Workability Sonoma Transition Fair (planning & resources) - Butte County SELPA Transition Fair: Abilities and Possibilities (TA, planning and resources) Although not always logged as individual activities, SCDD found that providing information and informal TA was an important part of every interaction. Transition students and their families have experienced difficulties during California's pandemic-related shutdown. Families were unclear about RC staff availability for ITPs/IPP and reported difficulty in setting IEP meetings. In addition to frustrations about the lack of meaningful transition plans, parents expressed anxiety that service providers and community-based programs will not survive long-term closures, jeopardizing critical services. SCDD fully engaged the legislature and Governor's Office in addressing these issues and sought bridge funding for at-risk entities. SCDD assisted by providing interpreters for events, providing/facilitating the use of media platforms, and responding to PwI/DD and families in need of information/TA to bridge service/support gaps during the pandemic. The Council supported a grant-funded documentary project (Let's Work! V monos a trabajar!) with California Transition Alliance, which sub-contracted with outside agencies for the scripting, acting, filming, editing and final video production, using self-advocates for the actual work and supporting four best practices: - Telling stories about work - Building networks of allies for mentoring - Developing interviewing skills - Providing work experience The series focused on SA in CIE, while employing a total of 27 people with I/DD (20 male/7 female; 3 African-American, 11 Latinx, 2 Asian, 2 mixed race, 1 other and 8 white PwI/DD). The final products (17 videos) and resource guide have been viewed (through a YouTube channel created for that purpose) statewide, nationally, and highlighted in national NDEAM and ADA100 celebrations. The YouTube channel (with 183 subscribers) was launched at the end of October 2020 (outside the contract period) and the material viewed 4,000 times within the first month, with supplemental resources available in English, Spanish and Mandarin (http://www.catransitionalliance.org/docs/49-English_Let'sWorkNetworkingGuide_1122020113942.pdf).

Expected Outcomes Achieved	
11. Expected Outcomes	12. Outcomes Achieved
SA/FA/others will have information/training about ITPs, employment, post-secondary education, disability awareness & self-advocacy	Yes
Council-related collaborative partners will be available to address transition-	Yes

related issues throughout the state; and the Council will engage with new people through outreach events	
People will have electronic &/or hard-copy (as requested) information about transition & other topics related to education throughout the lifespan	Yes
People will have access to TA, as requested	Yes

13. Progress towards achieving outcomes for overall objective:

Because this goal (and its 3 objectives) are designed to provide ongoing capacity-building in families, youth and young adults, its activities are always in demand. Although the Council exceeded its total number of projected activities, there were fewer trainings and class sizes were smaller than expected, leaving a shortfall in the total number of people reached (through those trainings). As with the other two (2) objectives in this goal area, transition activities are part of a lifetime continuum of needs for families and people living with I/DD and/or cross-disabilities within California's diverse communities. In recognition of these ongoing needs, this objective, too, will be continued throughout the duration of the current 5-year State Plan period.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community).

SCDD was approached by professionals in two community-based agencies and the non-English-speaking parents of a child with I/DD, requesting a training to improve their capacity to advocate for the youth, who had been placed (by the district, against the parents' expressed wishes) in an out-of-state, educational institution/setting (Due to cultural issues, fear of reprisal, and a lack of understanding of the special education process, the parents unwillingly bent to the district's pressure to transfer their son/student out of state). Following the Council's small group training (in Vietnamese), staff provided the parents with sample letters to request an IEP and appropriate district services. A meeting was held and an IEP and transition plan was developed, along with plans to move the youth home to receive public school (or, possibly, non-public school) services. Due to COVID restrictions, the parents decided to wait until the end of the next school year (June 2021), with a 2021-22 schedule for the youth's return to school. The parents - through assistance from the Boys & Girls Club - plan to circle back for more information and technical assistance from the Council to re-establish RC eligibility (which lapsed when the youth was sent out of state) and ensure that there will be fully adequate assistance at home. A parent reported that she had attended a Council training three years ago and applied the techniques provided in the presentation, stating that she is much more successful during IEP and IPP meetings. While providing TA to family advocates (this was their first time attending a Council event), they expressed relief at finding SCDD and receiving their resource materials. They had never attended a training with so much information or one that gave them a better understanding. They emphasized that because the presentation was held in Spanish

(and in plain-language), they felt like they were actually able to understand and learn. They said they benefited the most from learning about the 'complicated terms' and that they never knew what to say during IEPs because they didn't understand the terminology - even when an interpreter would say them in Spanish. They said, "We often felt very lost and intimidated." Both parents expressed relief with the new information and were very motivated to continue attending (future) Council events. As a direct outcome of this assistance, UC Davis Mind Institute staff requested the Council's participation at a conference at the UCD UCEDD about Transition. A family advocate stopped at the Council's resource table to say that she had received TA about employment the previous year from SCDD staff. She stated that the TA provided was so helpful in requesting and arranging vocational support services - enabling her young adult son to find and maintain a job working as the mailroom clerk in an attorney's office. Oh, this is great! I love these tools and will share them! I have a phone appointment with my service coordinator today, so I'll be asking about supported employment (SE) and about hiring someone to work on independent living skills (ILS) and also about getting PPP funded. The North Coastal Consortium for Special Education referred a family to the Council for information and TA about their young adult daughter with ASD and bipolar disorder. The family needed to know about post-graduation and adult service options, as their daughter was being considered for a restrictive, out-of-state placement, largely due to behavioral/elopement issues in both the family home and residential facilities. Council staff provided information about regional center eligibility and services, as well as an upcoming conference about I/DD and mental health issues. Family was also given referral information for Disability Rights California (DRC) and encouraged to call back for further Council in the case of eligibility denial.

Section IV: B

Individual & Family Advocacy Performance Measures

Race and Ethnicity

Race/Ethnicity	#	%
White alone	13	21.67%
Black or African American alone	5	8.33%
American Indian and Alaska Native alone	0	0%
Hispanic/Latino	30	50.00%
Asian alone	5	0%
Native Hawaiian & Other Pacific Islander alone	0	0%
Two or more races and Race unknown	7	11.67%
Gender	#	%
Male	49	7.21%
Female	631	92.79%
Other	0	0%
Category	#	%
Individual with DD	5	0.45%
Family Member	1112	99.55%
Geographical	#	%
Urban	197	77.56%
Rural	57	22.44%

I. Output Measures

Objective	Performance Measure: IFA 1.1 People with DD who participated in activities	Performance Measure: IFA 1.2 Family members
The Council and its federal partners will increase knowledge and awareness of developmental milestones and intervention services for families of young children and professionals.	4155	16573
The Council, in consultation with its federal partners and other stakeholders, will increase awareness and knowledge for families and self-advocates about the availability of and access to services which support inclusive education.	30676	86487
The Council, in consultation with its federal partners and in collaboration with educators and stakeholders, will increase information and technical assistance to prepare and empower students, families and professionals in developing individualized transition plans that lead to employment, post-secondary education &/or independent living options & opportunities.	3408	13933
Total # of Output Respondents	33	1648

II. Outcome Measures

Performance Measures	Percent (%)
IFA 2.1 Percent of people with DD	60
IFA 2.2 Percent of family members who increased advocacy	82

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

Projects	# People with Developmental Disabilities	# Family Members
The Council and its federal partners will increase knowledge and awareness of developmental milestones and intervention services for families of young children and professionals.	4	317
The Council, in consultation with its federal partners and other stakeholders, will increase awareness and knowledge for families and self-advocates about the availability of and access to services which support inclusive education.	3	605
The Council, in consultation with its federal partners and in collaboration with educators and stakeholders, will increase information and technical assistance to prepare and	22	147

empower students, families and professionals in developing individualized transition plans that lead to employment, post-secondary education &/or independent living options & opportunities.		
Total # of Sub-Outcome Respondents	29	1069
IFA 2.3 Percent of people better able to say what they need	87.88%	64.87%

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

Projects	# People with Developmental Disabilities	# Family Members
The Council and its federal partners will increase knowledge and awareness of developmental milestones and intervention services for families of young children and professionals.	0	117
The Council, in consultation with its federal partners and other stakeholders, will increase awareness and knowledge for families and self-advocates about the availability of and access to services which support inclusive education.	5	304
The Council, in consultation with its federal partners and in collaboration with educators and stakeholders, will increase information and technical assistance to prepare and empower students, families and professionals in developing individualized transition plans that lead to employment, post-secondary education &/or independent living options & opportunities.	16	66
Total # of Sub-Outcome Respondents	21	487
IFA 2.4 Percent of people participating in advocacy activities	63.64%	29.55%

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

Projects	# People with Developmental Disabilities	# Family Members
The Council and its federal partners will increase knowledge and awareness of developmental milestones and intervention services for families of young children and professionals.	0	84
The Council, in consultation with its federal partners and other stakeholders, will increase awareness and knowledge for families and self-advocates about the availability of and access to services which support inclusive education.	4	186
The Council, in consultation with its federal partners and in collaboration with educators and stakeholders, will increase information and technical assistance to prepare and	14	28

empower students, families and professionals in developing individualized transition plans that lead to employment, post-secondary education &/or independent living options & opportunities.		
Total # of Sub-Outcome Respondents	18	298
IFA 2.5 Percent of people on cross disability coalitions	54.55%	18.08%

II. Outcome Measures

Satisfied	Percent (%)
IFA 3 The percent of people satisfied with a project activity	81
IFA 3.1 Percent of people with DD satisfied with activity	60
IFA 3.2 Percent of family members satisfied with activity	81

Section IV: C

Systems Change Performance Measures

SC 1: Output Measures

Objective	
The Council and its federal partners will increase knowledge and awareness of developmental milestones and intervention services for families of young children and professionals.	
SC 1.1 Number of policy/procedures created/changed	0
SC 1.2 Number of statutes/regulations created/changed	0
SC 1.3.1 Number of promising practices created	0
SC 1.3.2 Number of promising practices supported	0
SC 1.3.3 Number of best practices created	0
SC 1.3.4 Number of best practices supported through Council activities	0
SC 1.3 Number of promising and/or best practices created and/or supported	0
SC 1.4 Number of people trained/educated	13610
SC 1.5 Number of Systems Change activities with other organizations	68

Objective	
The Council, in consultation with its federal partners and other stakeholders, will increase awareness and knowledge for families and self-advocates about the availability of and access to services which support inclusive education.	
SC 1.1 Number of policy/procedures created/changed	0
SC 1.2 Number of statutes/regulations created/changed	0
SC 1.3.1 Number of promising practices created	0
SC 1.3.2 Number of promising practices supported	0
SC 1.3.3 Number of best practices created	0
SC 1.3.4 Number of best practices supported through Council activities	0
SC 1.3 Number of promising and/or best practices created and/or supported	0

SC 1.4 Number of people trained/educated	49222
SC 1.5 Number of Systems Change activities with other organizations	150

Objective	
The Council, in consultation with its federal partners and in collaboration with educators and stakeholders, will increase information and technical assistance to prepare and empower students, families and professionals in developing individualized transition plans that lead to employment, post-secondary education &/or independent living options & opportunities.	
SC 1.1 Number of policy/procedures created/changed	0
SC 1.2 Number of statutes/regulations created/changed	0
SC 1.3.1 Number of promising practices created	0
SC 1.3.2 Number of promising practices supported	0
SC 1.3.3 Number of best practices created	0
SC 1.3.4 Number of best practices supported through Council activities	0
SC 1.3 Number of promising and/or best practices created and/or supported	0
SC 1.4 Number of people trained/educated	10598
SC 1.5 Number of Systems Change activities with other organizations	98

Systems Change SC 2: Outcome Measures

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

III. Sub-Outcome Measures

Objective	Number (#)
The Council and its federal partners will increase knowledge and awareness of developmental milestones and intervention services for families of young children and professionals.	
SC 2.1.1 Policy, procedure, statute, regulation improvements	0
SC 2.1.2 Policy, procedure, statute, regulation implemented	0
SC 2.1.3 Number of improved promising or best practices	0
SC 2.1.4 Number of implemented promising or best practices	0

Objective	Number (#)
The Council, in consultation with its federal partners and other stakeholders, will increase awareness and knowledge for families and self-advocates about the availability of and access to services which support inclusive education.	
SC 2.1.1 Policy, procedure, statute, regulation improvements	0
SC 2.1.2 Policy, procedure, statute, regulation implemented	0
SC 2.1.3 Number of improved promising or best practices	0
SC 2.1.4 Number of implemented promising or best practices	0

Objective	Number (#)
The Council, in consultation with its federal partners and in collaboration with educators and stakeholders, will increase information and technical assistance to prepare and empower students, families and professionals in developing individualized transition plans that lead to employment, post-secondary education &/or independent living options & opportunities.	
SC 2.1.1 Policy, procedure, statute, regulation improvements	0
SC 2.1.2 Policy, procedure, statute, regulation implemented	0
SC 2.1.3 Number of improved promising or best practices	0
SC 2.1.4 Number of implemented promising or best practices	0

Goal 6: Formal & Informal Community Supports

Section IV: A

Area of Emphasis	Planned for this Goal	Areas Addressed
Quality Assurance	Yes	Yes
Child Care	Yes	Yes
Transportation	Yes	Yes
Recreation	Yes	Yes
Formal and Informal Community Supports	Yes	Yes

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

Intermediaries and Collaborators	Planned for this Goal	Actual
State Protection and Advocacy System	Yes	Yes
University Center(s)	Yes	Yes
State DD Agency	Yes	Yes
Other Collaborators	Yes	Yes

Goal Narrative

In addressing formal and informal community supports, the Council and its regional staff collaborated with more than 712 community, regional and state-level agency partners to provide outreach, training, technical assistance and other services to family/self-advocates and others. These activities involved quality assurance, childcare, transportation, recreation, RC services, and formal/informal community supports. The Council's activities included new and/or innovative approaches to services and supports, with two grant projects associated with the goal. All other strategies (e.g. barrier elimination, coalition development and citizen participation, etc.) were used with the Council's activities. The work of this goal also addressed capacity-building, collaboration with the Council's federal network/partners, advocacy efforts, system change, and activities designed to address targeted disparities.

Through all 4 objectives of Goal 6, the Council provided a total of 222 trainings, reaching 8,110 people. While engaging in its activities, SCDD leveraged \$119,994 in funding and provided technical assistance 946 times, reaching 6,399 people (addressing more than 70 different kinds of issues). Regional and HQ staff engaged in 772 meetings and/or collaborative efforts, partnering with and/or reaching 21,042 people. In 1,043 electronic/social media postings, the Council reached 882,315 additional people with issues and information about formal/informal community supports.

Regional staff continues to report back to the Council and its Regional Advisory Committees (RACs) on the closure process of California's developmental centers and the relocation of residents with I/DD into communities of their choice along with supports and services from regional centers (RCs) and local vendors. This includes a strong set of recommendations for ongoing monitoring and advocacy efforts on behalf of both current and relocated residents, to ensure that all RC clients are receiving appropriate services, regardless of residential status or place of origin. Technical assistance provided by Council staff helped families find appropriate community placements for loved ones with I/DD. Regional staff has concentrated training efforts on information about personal/civil/Constitutional, residential rights (under California's Lanterman Developmental Disabilities Services Act), voter rights in English and Spanish, self-advocacy skills, and residential options, and participation in the 2020 Census.

SCDD continued to provide trainings on community-based services (e.g. Person-Centered Planning, Transportation, IHHS services and supports, regional center vouchers, ride hailing, recreation, etc.) utilizing web-based platforms like Zoom when stay-at-home and quarantine restrictions prevented in-person gathering. The Council made its technology and communication accounts available to self-advocate groups, regional centers and CBO's to facilitate the exchange of resources and up-to-date information. In order to ensure safer access to these community-based services, SCDD distributed PPE (masks, latex and nitrile gloves, face shields, etc.) to agencies that provide services to people with I/DD (e.g. Paratransit, schools, clinics, etc.), as well as providing them directly to individuals and families who were desperate for hard-to-find safety supplies.

The Council's policy work for this goal extended to revising its legislative platform and taking positions on 15 bills. The Council submitted 44 letters regarding the bills it advocated for and provided testimony on those bills 7 times. The Council provides legislative updates to SAAC, SSAN, and RAC members, so that they can provide peer-to-peer updates within their own communities and local/regional self-advocacy groups. The Council provided training and support to self-advocates and family members about how to share their own stories with legislators and other policymakers in concise, powerful ways. In regions throughout the state, staff provided local, regional and state policymakers opportunities to learn about PwD and their needs and strengths and opinions by

facilitating meetings with Councilmembers and other types of presentations, in addition to providing social media releases and hard copies of informational materials. SCDD has been working collaboratively with a broad swath of service providers, first responders, family and self-advocates, RCs, and governmental entities in addressing coexisting mental health and safety needs of PwI/DD. Regional staff has integrated the service/support needs of those with low-incidence and/or cross-disabilities into its advocacy efforts, recognizing the joint concerns of all persons with disabilities in service, community, residential and personal advocacy environments.

The Council issued 2 grants for this goal. The first was issued to Tarjan Center at UCLA for the development and implementation of capacity-building curricula and webinars designed to empower CBOs and SA/FA interested in applying for SCDD grant funding. These training modules were made available on the Tarjan Center website and this material will be revised and updated for future use. The second grant was issued to the California Supported Living Network (CSLN) for the development of an assessment matrix to measure the efficacy and cost-effectiveness of vendored services for people with I/DD, in contrast to data provided by NCI tools. This project developed measurement tools to justify and/or re-set fair and reasonable service provider/vendor rates based on real-life outcomes for families and people with I/DD. SCDD supports a pilot demonstration of the tool and the grantee is working to expand the project through legislation.

The project undertaken by the Council's federal partners on behalf of underserved populations is moving forward, with full translations of three documents (the Spanish Lexicon of Terms from English-to-Spanish, for those systems serving families/individuals with I/DD, the Introduction to the Regional Center Purchase-of-Service Descriptions and the Regional Center Purchase-of-Service Matrix, with descriptions, codes and age breakdowns) completed in Spanish, Chinese (Mandarin) and Vietnamese. Due to unforeseen delays, SCDD moved forward to expand the number of language translations completed at this stage, in anticipation of building an accessible web platform and uploading materials in the three most common of California's threshold languages. As the collaborative partnership works toward completing the website, the Council will continue to pursue translations of these documents into additional languages.

As with every goal area during this FFY cycle, data collection toward documentation of the federal performance measures was accomplished through activity reports that are submitted monthly, with survey (FPM) results of administered surveys (following trainings), narrative descriptions of each activity, information about collaborative partners, and emerging issues/technical assistance events. For events such as resource fairs, panel presentations, conferences, collaborative events that were not appropriate venues for surveys, staff collected anecdotal data from participants and others, and included them in the monthly activity reports submitted by all regional offices and HQ. Additionally, the Council maintains yearly technical assistance, eBlasts, and collaborative partner logs for each objective, providing overall numbers for the year. Staff also maintains copies of attendance logs, surveys, curriculum, sign-in sheets, and photos taken during events, by way of documentation.

4 Year Overview: A description of how the Council will use and build from knowledge gained and progress made to move forward in the next state plan cycle.

Goal 6 of the Council's 5-year state plan addresses: 1) work on behalf of underserved populations (along with SCDD's federal partners); 2) advocacy on behalf of residents transitioning from institutions to community-based residential settings and associated supports/services; 3) formal and

informal community supports; and, 4) policy work at regional and state levels. While the 5-year plan originally included policy work in each of its topical goal areas, SCDD realized that - for reporting purposes - it would be more expedient to engage in and report its policy work in a single objective and moved it into an objective within Goal 6. This has proven to be a more effective way of tracking and reporting all policy work and is being carefully considered by the State Plan Committee as a way of better capturing systems change activities in the next 5-year state plan. In fact, the Council is taking a long look at the current ways in which it engages in and reports all of its work, as a result of its past four years, with a strong eye on consolidating activities by the types of work rather than by topic area.

While the federal partners/underserved population project has progressed to encompass regional center system purchase-of-service (POS) translations in three of California's threshold languages (Spanish, Mandarin/Chinese and Vietnamese), the Council is still working to identify an effective, accessible platform to provide that information to families and people with I/DD statewide whose primary language is not primarily English. There have been some delays in the project due to personnel changes and the nuances in dialects and translations that required review/feedback from multiple staff and collaboratives. The project will be continued through to completion, even if it is carried over into the next 5-year cycle.

Another valuable lesson from the past four years has been the process of supporting and advocating for residents of California's institutions who are moving into community-based settings. While this was its own objective, the work may have been better assigned as a project within a larger objective, as it involved self-advocacy, systems change and capacity-building activities. That work has been substantially completed, as all but a few residents remain and the facilities still in operation will be used as acute crisis and/or stabilization and treatment facilities, prior to community transfers. This work was deeply successful and has established a high standard for preparing and supporting individuals with I/DD in transition from highly restrictive to far more inclusive settings, in collaboration with state, regional and local entities. The Council will continue to monitor the progress of all final transfers and advocate for the civil and service rights of those who are now new members of inclusive communities of choice.

SCDD's formal and informal supports objective has been a 'catch-all' for efforts around recreation, childcare, transportation, civil rights, and issues not otherwise addressed within the rest of the topic-driven state plan. In some cases, staff dropped activity reports into this objective when unsure where to report work elsewhere - regardless of applicability. This issue has reinforced the Council's commitment to revise the way that it organizes the work of the next state plan, so as to capture the focus of effective efforts by the type of activity, rather than the topic of that activity (e.g. self-advocacy, systems change and/or capacity-building). Activities associated with this objective (among others) involved training, collaborative meetings, engaging in larger projects, outreach activities and events, and providing resources and technical assistance. And, while the Council reaches large numbers of people (which are easily captured) and provides numerous activities (also easily captured), it has struggled to identify and report larger outcomes (e.g. ways in which the lives of families/people with I/DD have been improved, the systems that have been changed, the practices/policies that have been created/improved, etc.) in any meaningful way.

In fact, given the sheer amount of work performed through headquarter and regional staff efforts, it has been an overwhelming 'ask' to request that staff identify the larger changes produced as a direct or indirect result of SCDD's work. While the Council 'knows' that it affects people's lives and systems

in meaningful ways, it has not been able to objectively report that information in quantifiable, transparent or effective ways. Obtaining information on concrete changes in the lives of the hundreds of thousands of people reached appears to be a nearly insurmountable obstacle. Likewise, the systems throughout the state of California are many, diverse and complex - with no one individual identified to report on the collaborative changes that have accrued, in large part, through Council efforts. With this in mind, it may be that the only way in which to separate out and identify outcomes is to organize the work of the Council into the categories of its driving mission - that of self-advocacy, capacity-building and systems change (policy work).

The Council, which engages in its policy work through the Legislation and Public Policy and Employment First committees, has had an active role in public policy and advocacy over the last four years at all levels of government, working to address issues that require a public policy and advocacy response across all of its goals and objectives. While the state plan includes general topics (e.g. employment, housing, education, health and safety, formal and informal community supports, etc.), Council committees use a priority-setting process to determine specific issues on which to focus during the legislative session and how to address those issues. For example, in the area of health and safety, SCDD focused on access to healthcare, emergency preparedness and response during wildfires, safety during public-safety power shuts and maintaining healthy and safety during the COVID-19 pandemic. Over the past four years, SCDD has successfully had legislation signed into law that it sponsored and expanded its partnerships with other organizations across the state. The next state plan will replicate this strategy, ensuring that the Council will be actively responsive to ongoing and emerging issues. As SCDD sets policy priorities each year, it will continue to look for opportunities to sponsor legislation and respond to that of other organizations, as it has done for the last four years (and will in 2021).

Through policy efforts, the Council sponsored legislation to address poor employment outcomes for PwD in California. In 2018, SCDD sponsored SB 1274 (McGuire) to improve data-sharing between the Departments of Social Services and Developmental Services. In 2019, the Council sponsored AB 1019 (Frazier) to ensure the Interagency Advisory Committee on Apprenticeships improves apprenticeship opportunities for people with disabilities. In 2020, the Council sponsored SB 1264 (Hurtado) to ensure an internship option that provides an additional pathway to enter state service did not expire during the pandemic. All three bills were signed into law and SCDD is working to ensure effective implementation of each. The Council's Executive Director serves on and chairs the Disability subgroup of the Diversity Taskforce created by the Governor to make recommendations to improve state service and work to make California a model employer for people with disabilities.

SCDD has worked to address issues of abuse and neglect of people with disabilities and ensure safety at home, in school and within the community, working closely with the California legislature improve emergency preparedness and response for people with disabilities during emergencies. SCDD supported a Councilmember who lost his home in the Paradise Fire in testifying in support of AB 477 (Cervantes), about the importance of including PwI/DD when cities and counties update local and regional emergency response plans. SCDD also testified in support of AB 1172 (Frazier) in response to the death of a student by restraints; this law will now improve safety of students in school by increasing oversight and accountability of non-public schools. In 2020, the Council supported AB 2730 (Cervantes) for county partnerships in sharing emergency evacuation services. These three bills were signed into law. The Council now works to ensure implementation and support of these laws and will continue its effective policy work through the final year of this 5-year state plan cycle and into the next.

Overall, the varied work of this goal has reinforced the need for SCDD to revise the way in which it plans, organizes, implements, collects and reports the activities, data and associated outputs and outcomes of its future state plan(s), so as to highlight significant outcomes that are the result of its many, many efforts on behalf of California families and individuals with I/DD moving forward.

Objective 1: The Council, in collaboration with our federal DD partners, will reduce service access barriers and decrease the disparity in available information, which describes services and supports that may be purchased throughout California's Regional Center system, by translating and providing that information in Spanish and tracking statewide POS disparity data for Spanish speaking self-advocates and families.

3. This objective is:	System Change
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4. This objective is:	Ongoing
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5. This objective is:	
Fulfilling a Self-Advocacy DD Requirement	No
Targeted disparity	Yes
DD Network Collaboration	Yes

A demonstration project of New Approaches to Services and Supports	No
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A demonstration of projects or activities	No
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6. Stage of Implementation:	Implementation
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7. Provide an overall description of this effort:	Although the Council has monitored, for some time, the disparity in services purchased for and provided to linguistically/culturally diverse Californians with I/DD and/or cross-disabilities (as compared to those received by primarily English-speaking Californians), it determined to address these disparities more directly. The primary focus of this objective involves reaching out to the underserved, Spanish-speaking family/self-advocate population of California, in collaboration with the Council's four (4) federal partners consisting of: California's protection and advocacy agency and three University Centers for Excellence in Developmental Disabilities (UCEDDs); Disability Rights California (DRC), the Tarjan Center at the University of California Los Angeles (UCLA); the University
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	of Southern California (USC) Children's Hospital Los Angeles (CHLA); and the University of California Davis (UCD) MIND Institute. With complete and culturally/linguistically competent translations of material, initially in Spanish, the Council intends to provide extensive training to family/self-advocates, regional center staff, service providers and others, thereby decreasing disparities in the information, services and supports requested of and provided through the regional center system.
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Outputs Achieved	
8. Expected Outputs	9. Outputs Achieved
1 list of stakeholders or Spanish/Asian language-proficient collaborators; 4 meetings with federal/other partners/collaborators	Yes
1 list of POS (services) available (in Spanish); 1 list of POS (services) available (in Chinese &/or Vietnamese)	Yes
Hard-copy resource distributions (as requested); electronic resource distributions (as needed)	Yes
10 people reached with TA, as requested	Yes

10. The report should include the following:	<p>(a) A narrative progress that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenged to achieving the objective and unexpected benefits.</p> <p>(b) For system change activities, include a description of the stage of implementation (Planning, initiation, implementation, outcome/fully integrated) of the system change initiative.</p> <p>(c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.</p> <p>(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report)</p>
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Through the work of this objective, the Council noted that one of the primary complaints from Spanish-speaking families is that they do not know what to request from regional centers. Additionally, professional (paid) translators are not typically familiar with common issues or needs associated with families/individuals with I/DD or the systems of supports and services to which they may have access, including the regional center (RC) system. When Spanish-speaking parents make specific requests that are interpreted at all, terms and concepts are typically translated (by paid

professionals) into a more formal version of the (given) native language, rather than that typically used in common or easily understood language phrases and terms. SCDD joined with its federal partners, in collaboration with the Integrated Community Collaborative (ICC), to discuss diverse views on how regional center services should be described and create a user-friendly, plain language (draft) description of RC services, thereby reducing language barriers associated with obtaining those services. The last meeting was held in Spanish, using interpreters. Suggestions from this collaboration have since been incorporated into the service description document. In addition to input from ICC, the Council accessed one additional Spanish-speaking community group (La Familia), two Chinese-speaking community groups (Chinese Parents Association for the Disabled and Helping Hands East Bay) and two Vietnamese-speaking community groups (Vietnamese Parents of Disabled Children Association and, again, Helping Hands East Bay) for input on terminology and plain language translations. The Council and three of its federal partners (DRC and UCD and USC UCEDDs) met eight times to review and revise 1) the Spanish Lexicon of Terms from English-to-Spanish, for those systems serving families/individuals with I/DD, 2) the Introduction to the Regional Center Purchase-of-Service Descriptions, and 3) the Regional Center Purchase-of-Service Matrix, with descriptions, codes and age breakdowns. These meetings were done via conference call/zoom virtual platform and were hosted by SCDD and by DRC. The partners' coalition then sent its plain language drafts to the Council's Self-Advocates Advisory Committee (SAAC), as well as other stakeholders (including UCEDDs), for further review. SAAC made some suggestions regarding plain language terminology. ARCA made suggestions about separating 0-3 services provided by Early Start from those provided/purchased through the Lanterman Act (and the RC system). ARCA also suggested refinements in describing some behavioral services and offered several statements about funding (which were eventually rejected as these documents do not address funding of specific service[s]). Once input had been considered by the coalition and the initial drafts were finalized, all three documents were sent to a professional contract agency for translation into Spanish, Chinese (Mandarin) and Vietnamese. The Council and a variety of stakeholders began meeting to consider options for providing the lexicon, introduction and matrix in a publicly accessible format. Council staff met with an entrepreneur with I/DD who is proficient in the creation of a wide variety of online applications. After receiving input and advice from this self-advocate, it was obvious that individually developed specialty applications would not be appropriate information dissemination vehicles as they would be prohibitively expensive to build, not readily accessible and most likely not user-friendly in the end. The federal partners again met to review options for public release. In the Council's July 2020 meeting, members approved the assignment of excess monies to fund a user-friendly web platform for the translated, accessible materials. The combined work of this objective throughout the year involved fifteen (15) self-advocates, (19) nineteen family advocates and fifteen (15) others, in addition to the translation contractors and Council staff. After receiving a partial translation in August, the final translations (in Spanish, Mandarin and Vietnamese) were finally completed and received by the Council in late September. There have been a few hurdles throughout this process. The leadership responsibilities for the project itself shifted between staff, as personnel changes occurred, which created some confusion and delays. The process of translation presented additional delays due to the subtleties and differences in dialects, which required input from several collaborative entities in order to ensure the use of appropriate and accurate terminology. While the project is moving forward, it has been complex and has required adjustments in both scheduling and expectations.

Expected Outcomes Achieved	
11. Expected Outcomes	12. Outcomes Achieved

The Council, in collaboration with its federal, state, regional & local DD partners, will make POS-related terminology more accessible (in Spanish &/or an Asian-based language)	Yes
A culturally relevant list of available services (funded through the RC system) will be fully translated into Spanish, and Chinese &/or Vietnamese	Yes
People will have electronic &/or hard-copy (as requested) information about POS services &/or POS disparities	Yes
People will have access to TA, as requested	Yes

13. Progress towards achieving outcomes for overall objective:	
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<p>The Council has completed more than the first third of the tasks associated with this project. Translations of the materials necessary to provide people who speak and/or read Spanish, Chinese and/or Vietnamese with accessible information about POS services available through the RC system have been completed and are ready to be uploaded into an accessible format. The Council's next task is to determine what that platform/accessible format should be and develop it. Once a publicly accessible platform has been developed and materials uploaded, the system will have to be piloted. During that time, the Council will be able to develop and begin providing training to communities throughout the state about the translated, accessible materials, which should improve service outcomes for linguistically underserved families/individuals with I/DD who are eligible to access and receive RC supports and services.</p>

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community).	
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N/A

Objective 2: The Council will increase the knowledge and skills of people with I/DD to move from institutional to community settings and to increase their ability to self-advocate.

3. This objective is:	System Change
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4. This objective is:	Ongoing
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5. This objective is:	
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Fulfilling a Self-Advocacy DD Requirement	No
Targeted disparity	No
DD Network Collaboration	No

A demonstration project of New Approaches to Services and Supports	No
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A demonstration of projects or activities	No
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6. Stage of Implementation:	Implementation
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7. Provide an overall description of this effort:	California has been fully engaged in the process of de-institutionalizing residents of its remaining developmental centers, decentralizing the care and housing of residents with I/DD, developing community-integrated residential/care options, and transitioning Developmental Center (DC) residents into inclusive communities of their and/or their family members' choice. As California and its State Council on Developmental Disabilities (Council or SCDD) are fully committed to the concept of person-centered planning, self-determination, and self-governance, the Council has committed to outreach and training efforts to ensure that 'movers' from DCs and their family advocates receive sufficient information, knowledge and skills to be (self-) directing partners in this process.
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Outputs Achieved	
8. Expected Outputs	9. Outputs Achieved
6 informational sessions, reaching 36 people	NO
3 informational sessions, reaching 24 people	Yes
Hard-copy resource distributions (as requested); electronic resource distributions (as needed)	Yes
3 people reached with TA, as requested	Yes

10. The report should include the following:	(a) A narrative progress that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenged to achieving the objective and unexpected benefits. (b) For system change activities, include a description of the
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	<p>stage of implementation (Planning, initiation, implementation, outcome/fully integrated) of the system change initiative.</p> <p>(c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.</p> <p>(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report)</p>
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As the work of this objective has progressed and residents of California's institutions (Developmental Centers [DC]) have transitioned out into community settings of their choice, the number of Council activities related to this objective has dwindled significantly. In FFY 2020, regional staff engaged in 12 activities, reaching 465 people (71 self-advocates, 80 family advocates and 314 others [15 of whom were new]) from 9 different counties in California. Staff provided 2 trainings about inclusive community options and resources, reaching 21 people, and 4 trainings about civil rights, reaching 91 people. Technical assistance was provided 5 times, reaching 7 people, and a newsletter was sent out, reaching 345 people with resources and information. California's extensive system of Developmental Centers has been largely dismantled, with residents transitioned into communities throughout the state. Rather than the former institutional model, California has transitioned to a graduated 'continuum-of-care' system that acknowledges the need for more than one level of care for people with co-occurring (comorbid) conditions (e.g. intellectual/developmental, psychiatric/behavioral, substance abuse disorders, etc.). The state has developed northern and southern CAST (Crisis Assessment Stabilization Teams) mobile crisis services, to respond to emergent behavioral crises. There is an ongoing need for residential and behavioral crisis response and treatment, however, for individuals with I/DD who are experiencing acute behavioral/mental health crises in their residential settings - whether in a family or assistive/care home environment - and must be moved to a more restrictive setting. As the need for 'step-down' and transitional care options have been recognized, new residential service models have been developed and are now available for residents to (re-) enter a lesser restrictive, community-based care system. These service models have been designed to ensure that the new residential support system takes into account the overriding need for person-centered, trauma-informed and culturally and linguistically competent care, promoting the use of best practices in treatment options. In order to provide acute behavioral support and treatment, a smaller area of the Porterville Developmental Center is still in use. The southern STAR (Stabilization Training Assistance Reintegration) is an acute crisis center at Fairview Developmental Center, serving as a short-term stabilization facility, where individuals are taken for court-ordered treatment prior to transfer to a less restrictive environment. Additional acute (behavioral health) residential care is provided at the Canyon Springs Community Facility. The northern STAR provides time-limited crisis stabilization services for up to 13 months, in staging for an individual's transition into a less restrictive placement. Step-down residential options (with enhanced supports, staffing and supervision) are available for both children and adults with I/DD and significant behavioral and/or mental health needs. IMD (Institutions for Mental Disease) step-down homes have 4 (or less) beds, serving adults (18 years of age and older) and are used for individuals who are transitioning out of an institutional setting or who are at risk of placement inside a restrictive institutional setting. Community Crisis Homes (CCH) provide a 24-hour residential care option for children and adults who are in immediate

need of a more restrictive behavioral/mental health behavioral environment, due to a behavioral/mental health crisis or residential displacement because of adverse behaviors. Enhanced Behavioral Support Homes (EBSH) provide supportive behavioral and other services within a long-term residential environment. California has begun providing START (Systemic, Therapeutic, Assessment, Resources and Treatment) services in 6 regional centers within the state (Alta California Regional Center [ACRC], Regional Center of East Bay [RCEB], San Andreas Regional Center [SARC], San Diego Regional Center [SDRC], South Central Los Angeles Regional Center (SCLARC) and Westside Regional Center [WRC]). The START program is designed to reduce the risk of out-of-home placements, due to adverse behaviors and/or mental health crises. Technical assistance provided by Council staff helped family members find appropriate community placements for loved ones with I/DD, and helped self-advocates interested in participating in the 2020 Census. Through the Council's work, volunteer advocates participated in 1,075 community transition, IPP and housing-related meetings for DC residents and 86 vocational, day or educational service meetings. Regional staff, when not constrained by quarantine guidelines, were able to provide trainings on civil, voting and service support rights, self-advocacy, and the 2020 Census. Self-advocates at the Canyon Springs Community Facility also received training about developing and staying within budgets, money management, and the consequences of over-spending. Residents in the DC's were provided emergency contact cards, with information about disaster preparedness. The Council facilitated a self-advocacy group at Canyon Springs, providing monthly training opportunities to increase residents' capacity to understand and engage in personal/self-advocacy efforts. Although the residents are not (typically) conversant with technology, they appreciate and benefit from multi-modal, hands-on instruction, using modified, icon-based games to teach and reinforce complex concepts (e.g. voting, the 2020 Census, civil rights, self-advocacy, etc.). For decades, the Council has been a leader in advocating for the rights and freedoms of residents in institutional, Developmental Center settings, encouraging transition into less restrictive community settings. After two (2) decades of focused work, the population of California's DC's has now been reduced from 5,000 PwI/DD to approximately 400 residents - those still in need of the most restrictive levels of care. As former DC residents find themselves navigating the complexities of community living, transportation, employment, and life outside of an institution, the Council will continue to follow with supports and information designed to build their self-advocacy skills and capacity to thrive in less-restrictive environments and circumstances. Resources Andrade, T. & Libero, L. (2020). Department of Developmental Services (DDS): New DDS Programs for People with Developmental Disabilities. 19th Annual Developmental Disabilities: An Update for Health Professionals, (Mar. 5-6, 2020)1-9. University of California San Francisco Office of Continuing Medical Education. Retrieved on 3.31.21:1522 from https://www.ucsfcmec.com/2020/MOC20001/SLIDES/01_ANDRADE_LIBERO_New_DDS_Programs.pdf. California Department of Developmental Services (2021). Crisis & Safety Net Services: Institutions for Mental Disease Step-Down Homes. Retrieved on 3.30.21:1315 from <https://www.dds.ca.gov/services/crisis-safety-net-services/institutions-for-mental-disease-step-down-homes/>. DDS (2021). DDS Crisis & Safety Net Services: Start Program. Retrieved on 3.31.21:1145 from <https://www.dds.ca.gov/services/crisis-safety-net-services/start-program/>. DDS (2021). Regional Center Eligibility & Services: Enhanced Behavioral Supports Homes. Retrieved on 3.30.21:1130 from <https://www.dds.ca.gov/general/eligibility/enhanced-behavioral-supports-homes/>. University of New Hampshire Institute on Disability/UCED Center for START Services (2021). The Start Model. Retrieved on 3.30.21:1430 from <https://centerforstartservices.org/>.

Expected Outcomes Achieved	
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11. Expected Outcomes	12. Outcomes Achieved
DC residents/movers will be informed and knowledgeable about the availability of inclusive options or resources within their communities of (residential) choice	Yes
DC residents will be informed and knowledgeable about their own (& others') civil rights	Yes
People will receive hard-copy (as requested) &/or electronic resource (as needed) information about community settings, resources & formal/informal supports/services	Yes
People will have access to TA, as requested	Yes

13. Progress towards achieving outcomes for overall objective:

The Council has been fully committed to monitoring the DC closure process and, simultaneously, the satisfaction, welfare and safety of those residents who are transitioning out into communities throughout California. The Council will continue to provide information and training to family/self-advocates, preparatory to - and as an ongoing part of - the active transition and post-transition process. Additionally, the Council will continue to provide information and training to those agencies and personnel that provide services to transitioned family/self-advocates who may be unfamiliar with generic and/or RC and community-based support systems.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community).

Your impact on these individuals' lives, on the communities that benefit from their inclusion, and on the state overall is just incredible. Life changing and systems changing work for 20 years, with the results rippling out for decades and decades into the future. No small feat and something that made a meaningful impact on so many people's lives! A quick hop in the way-back machine takes me to my first experience (as a regional center service coordinator) with a DC closure - Stockton. That, unfortunately, involved moving people en masse to other DC's, and when I attended IPPs for people at Sonoma DC (circa 1996). I would feel successful if I could just get the IPP team to agree to a goal of 'exploring' community living options. No easy task since many team members informed me that "people die in the community" and that the DC was much safer. Fast forward several years to my time at Agnews DC during that closure - the first closure done with some real consideration for where and how people might want to live. Thanks to the Council, many, many more men and women who had been placed at the different DCs, often decades earlier, with no say, were finally able to have a say, and choose where they want to live in the community!! Way to go!! An individual moving into

the community needed more time to get to know their new staff. The Council requested additional time for the individual to work with their new staff. The individual was given more visits with new staff. A person was living in a home that was having problems keeping staff, which placed the person at risk for becoming ill. The Council brought this issue to the attention of the regional center service coordinator. As a result, the person was moved to another home and is doing well. A young adult that was living at a crisis home was not going to school. The Council requested that the crisis home staff work with the local school district. After further advocacy, the resident is going to school. A self-advocate reported wanting a job. With the help of the Council, the person found a job and is now making money. Residents at a Developmental Center weren't allowed to have some of their property. The Council filed a violation of rights complaint with DDS on the residents' behalf. A resident's doctor wanted to surgically insert a g-tube to prevent further illness. Council staff recommended that the residential staff receive training on how to assist during meals to prevent choking. The residential staff received additional training and the resident was spared unnecessary and highly invasive surgery. Due to the hospital's COVID-19 restrictions, a resident was unable to have familiar staff. Council staff contacted the hospital's social worker requesting familiar staff be provided in the hospital setting; the hospital agreed. The patient didn't require more medicine to stay calm and improved. An individual was unhappy because he could not have visits with his family due to COVID-19 visitor restrictions. Staff arranged for Zoom visits with the individual's family. ...staff helped an individual to get his P&I money that was delayed. The resident was able to buy a lounge chair he wanted. Comments from residents: I want a job to be a security or park guard Good to have guests. I'd like to take care of children. This was fun!

Objective 3: The Council will increase outreach, training, and technical assistance to improve the quality of and access to services, including (but not limited to) Regional Centers, education, transportation, public benefits, child care, and recreation for people with I/DD and their families.

3. This objective is:	System Change
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4. This objective is:	Ongoing
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5. This objective is:	
Fulfilling a Self-Advocacy DD Requirement	No
Targeted disparity	No
DD Network Collaboration	No

A demonstration project of New Approaches to Services and Supports	Yes
Project Name	
Original Start Date	

A demonstration of projects or activities	Yes
Project Name	
Original Start Date	

6. Stage of Implementation:	Implementation
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7. Provide an overall description of this effort:	In response to the Council's State Plan survey, 34.9% of respondents (family/self-advocates, professionals, and others) stated that they wanted more information, resources, and/or technical assistance in the area of formal and informal supports, including information in Spanish. Specifically, respondent's desired more information regarding Regional Center (RC) services. This is especially telling given the purchase-of-service disparities identified in RCs throughout the state. Specifically, disparities exist in the offer and/or provision of services equally to diverse populations. While Objective 6.1 addresses the need for: 1) POS guidelines to be translated into threshold languages and; 2) training to provide language-accessible training throughout the state, Objective 6.3 is designed to include RC services and also address those services/supports that fall outside of the direct purchasing authority of regional centers (e.g. transportation, public entitlements, extended child care, etc.). The Council's training, technical assistance efforts and resource provision in Objective 6.3 are designed to address those community-based needs and services, which is inclusive of providing RCs with training and/or technical assistance, as well.
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Outputs Achieved	
8. Expected Outputs	9. Outputs Achieved
15 curricula; 100 trainings (e.g. IPP strategies, PCP, HCBS, CalABLE, transportation, recreation, grant-writing, etc.), reaching 2,500 people	Yes
60 meetings, reaching 600 people; 40 events, reaching 5,000 people	Yes
Hard-copy resource distributions (as requested); 60 electronic resource distributions, reaching 48,800 people	Yes
425 people reached with TA, as requested	Yes

10. The report should include the following:	(a) A narrative progress that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenged to achieving the objective and unexpected benefits. (b) For system change activities, include a description of the stage of implementation (Planning, initiation,
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	<p>implementation, outcome/fully integrated) of the system change initiative.</p> <p>(c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.</p> <p>(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report)</p>
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SCDD held a strong role with federal partners, state and local agencies, and other community-based organizations (CBOs) in agreements and plans to provide SA/FA and others with up-to-date, web-based training and updates during the COVID-19 epidemic. The Council's work in this objective reached the lives of 152,919 SA, 374,552 FA and 334,090 others. SCDD staff adjusted to stringent stay-at-home and quarantine restrictions and began using web-based platforms (e.g. Zoom, etc.) to re-establish and maintain communication/training opportunities. SCDD made its tech/comms accounts available to SA groups, RC's, and CBOs to maintain contact with PwI/DD for up-to-date information, training and resources. SCDD provided 214 trainings, increasing capacity of 7,849 people in Person-Centered Planning, the HCBS rule, IHSS services and supports, the CalABLE Act and financial planning. Trainings were held on community-based services, such as transportation, regional center (RC) vouchers, ride-hailing, recreation, and other generic supports and services. The Council provided TA 904 times, helping 6,155 people with information, referrals and resources. In meetings with RCs and other agencies in the state (and 710 collaborations with community partners), SCDD gave guidance about the inclusion of emergency preparedness on IPPs and IEPs, emergency care plans for dependent adults in the event that primary caregiver(s) became sick and/or died, and planning to address adverse behaviors of people whose typical routines were interrupted. SCDD worked with in-home care providers to spread information about RC vendorization and service availability to families in California, which increased services for 200 SA/FA in southern California. SCDD personnel have also become board members of agencies (e.g. transportation, representative/disability, and recreation-related agencies, etc.) that provide community-based services to PwI/DD and others. SCDD worked on outreach events, resource fairs and conferences. At the San Diego People First conference, SCDD held a 'voter experience' exhibition, promoting access and opportunity for PwI/DD to vote in upcoming elections. SCDD provided support for the inclusive Community Winter Formal, in which 38 of the 400 participants were non-disabled peers. SCDD helped plan the FERIA conference (designed for parents who are Spanish-speaking and have a child with a disability - Knowledge is Power: Continuous Learning Builds Parent Leadership, reaching 275 registrants) and participated in its resource fair. SCDD hosted a resource booth for the Family Resource Navigators' Celebration of Diversity and Tradition event, translating material for Spanish-speaking attendees. The most exciting of the Council's community events was the Fairview Developmental Center (FDC) 60th Anniversary and Closure/Farewell at the FDC campus in Costa Mesa, with 450 former residents, family and foster grandparents, advocates, current/former DDS/FDC staff and others attending. SCDD distributed information and PPE for PwI/DD, families, special education programs, RCs, IHSS clients, etc., through California's Office of Emergency Services (CalOES). SCDD provided PPE to agencies providing services for PwI/DD (e.g. Paratransit, clinics, schools, etc.) and face shields for PwI/DD who could not - for sensory reasons - tolerate face masks. SCDD also provided latex and nitrile gloves, hand sanitizer, protective gowns, disposable masks, N95 masks, and go-bags for community distribution to those

most at-risk. Families were desperate for hard-to-find safety supplies and unable to gather with loved ones, due to fears of COVID-19 and its risk of death for those with fragile immune systems and/or medical conditions. PPE also gave people safer access to generic services, such as health clinics/hospitals, transportation, childcare, grocery shopping, limited recreational opportunities, etc. (documented in Goal 4). SCDD staff reported that insufficient access to and/or use of technology has been a barrier in providing timely information to low-income families and/or those in deeply rural (e.g. federal/Native American) areas/lands, but that SCDD's distribution efforts reached entire populations of underserved people, even without critical technology. Social issues surfaced in the course of the pandemic and SCDD rose to meet each need, addressing problems as they emerged or were reported. The Council determined that social distancing did not need to equate to social isolation for PwD and families. SCDD made hundreds of calls to PwI/DD, families, RCs and agencies throughout the state, checking on emerging issues, isolation, medical/PPE needs, etc. SCDD began planning monthly chats (to begin in October 2020), using Zoom. Because of demand from other groups of people, SCDD may expand chats to additional groups, such as FA, providers, etc. As access to services, jobs, and adequate housing were lost during the pandemic, opportunistic scams very quickly surfaced, with criminal perpetrators targeting vulnerable, isolated, and already frightened people. People with I/DD and their families were (falsely) threatened with a cutoff in Medi-Cal benefits and that they would lose custody of their children if they failed to get tested for COVID-19 (<https://conta.cc/2UDveRf>; COVID Vaccine Information and Avoiding Scams - <https://conta.cc/38Rybn6>). Many scams were phishing attempts to obtain personal information from elders, PwI/DD, and people in LatinX communities. There was also an increase in the number of false kidnap/ransom demand calls and shopping voucher scams through WhatsApp and cloned smartphone/computer apps. The Council issued public safety/service advisories and held trainings about scams and how to protect SA, FA and others from aggressive attempts to obtain personal information, money, or other valuable assets. SCDD attended Board/committee meetings for 21 regional centers (RC), ensuring that concerns affecting PwI/DD were addressed. SCDD staff learned that RCs throughout the state were failing to disburse emergency/pandemic family services in an equitable manner and underserved (BIPOC and Spanish-speaking) communities were experiencing disparities in access to RC services. A founding member of a Spanish-speaking parent support group (Programa Educativo para Padres de Bellflower) spoke to the disparate treatment of the Latinx population, repeating comments made (to Spanish-speaking parents) by RC staff, such as: - Your children are your responsibility and you must take care of them. - I have children at home too and I just have to deal with it; you do too. At some point you have to take responsibility for them. SCDD supported SA/FA and worked with Disability Rights California (DRC) to ensure service equity for PwI/DD in diverse communities, providing training and strategizing to obtain RC services. SCDD also collaborated with DRC to 'frame' complaint(s), obtain specific data sets, work on solutions, and engage RCs in implementing equitable resource distribution. Informal options were exhausted with at least one RC; formal responses may include the filing of a class action suit. SCDD partnered with activists and RC staff in a community of practice (COP), strengthening person-centered thinking (PCT) and planning (PCP) practices in the CA Bay Area. If this effort proves successful, it may serve as an effective template for improving practices in other RCs. SCDD issued 2 grants for this objective. The first (issued to Tarjan Center at UCLA - a UCEDD) was the development of curricula and implementation of capacity-building webinars designed to empower CBOs and SA/FA interested in applying for SCDD grant funding. UCEDD staff held 2 webinars, reaching 133 people. 40 survey respondents were satisfied. The training was made available on the Tarjan Center website, where 20 training components of the 5 full modules (giving information about how to apply for SCDD grants) were viewed 1,005 times. After training, 33 applicants submitted proposals to the Council for statewide FFY 2020 grant funding, a marked decrease from the 76 proposals received in FFY 2018 and

the 40 received for FFY 2019, with no discernable improvement in the quality of submissions, based on the applications received (12 of the 33 proposals failed basic submission requirements). Some organizations (that would typically have submitted proposals and did not) were asked about reasons for not applying, responding that they were reluctant to apply for grants without knowing if programs would continue operating (during the pandemic) and did not want to risk failure in completion of grant-funded projects. SCDD staff will revise and update the material for future use. The 2nd grant project was the result of a 'high concept' proposal to develop an assessment matrix to measure the efficacy and cost-effectiveness of vendored services for PwI/DD, in contrast to data provided by NCI tools. This project developed/provided concrete measurement tools to justify and/or re-set fair and reasonable service provider/vendor rates, based on tangible, real-life outcomes for families and people with I/DD. In developing its matrix, the vendor engaged 32 SA and 40 FA in focus groups. While SCDD supports a pilot demonstration of the matrix, it lacks the regulatory powers necessary to approve it for statewide implementation, so the grantee (California Supported Living Network) is working to expand the project legislatively. This tool is well-suited for a state/federal agency with the funding and regulatory power to design/implement vendor training and a pilot, allowing SCDD to collaborate and (through a working/focus group to) look at overall outcomes and applied real-world value for state and fed. funders, vendors and PwI/DD and their families (supporting FPM #1.1, 1.3.1-4, 2.1, 2.2 and 2.1.3). Although CSLN has completed the bulk of its activities, it has been granted an extension for the final PAVE report, to be submitted in FFY 2021.

Expected Outcomes Achieved	
11. Expected Outcomes	12. Outcomes Achieved
People will have training/information about the range of formal/informal community supports available (e.g. IPPs, PCP, HCBS, IHSS, CalABLE, transportation, etc.); people will have training about grant-writing (e.g. skills, requirements, opportunities, etc.) to improve systems serving PwD	Yes
Local/regional collaborative entities will partner with SCDD to address inclusive formal/informal supports/services for PwD and others (e.g. transportation, recreation, etc.); and the Council will engage with new people through outreach events	Yes
People will have electronic &/or hard-copy (as requested) information about formal/informal, inclusive community-based supports/services	Yes
People will have access to TA, as requested	NO

13. Progress towards achieving outcomes for overall objective:	
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This objective represents a large part of the Council's mission in outreach and training efforts on behalf of family/self-advocates and others. While the Council fully met and/or exceeded its targeted activities for this objective, there may be increased demand for training as full inclusion requirements draw near(er) through impending HCBS deadlines. Family/self-advocates, professionals, and others frequently question and weigh what services are the (current) responsibilities of the regional center system and what services must be obtained outside of that system. Once the RC POS definitions have been fully translated into Spanish and the curriculum is developed, it is expected that language-accessible POS information will also become a significant training expansion in the work provided through this objective. Information about community-based formal/informal supports and services is, technically, the basis of what could become yearly family/self-advocates' 'perishable skills' training, as available services and community needs emerge and evolve. The work of this objective will continue throughout the course of the Council's five-year State Plan cycle.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community).

SCDD worked with 3 RCs in promoting pay for SA who are moving the Self-Determination Program (SDP) forward in training peers. If adopted, this change in practice will vastly elevate the importance, visibility and capacity of PwI/DD in implementing the SDP and showcase their talents and abilities in employment and self-governance. Thanks so much for the great training. Especially about Medicaid waivers. As a parent this has been difficult to understand and I appreciate your simple explanation. I hope I could share this training with my family, because my family is going to have doubts about this also because I'm blind, because they're going to think that I need to be in a restricted environment even in the community. And this is because I'm blind. A family advocate in South Lake Tahoe stated that there were few resources to help her 29-year-old son move out of the home. During the training, SCDD staff entered her zip code (as a demonstration) and the subject of "assisted living for residential supports" and several agencies that were new to her popped up. She was excited to follow up with these resources: "I am thrilled and in disbelief that this resource has not made its way to at least the RC before now. For 29 years I have beat my head against the wall wasting hundreds of hours working to find resources and programs for my son. Living in a rural community makes finding things so much harder, but with Aunt Bertha, the playing field can be leveled for those of us who live outside the larger cities that have easy access to what they need. Many thanks for your hearts that drove the development of such a resource. That has been my vision and dream for many years but didn't have the technical background upon which to depend and build it. I am a MOM!!!! Also a problem solver, but without skill, one cannot develop such a platform. Thank you for applying yourself here! You will bless many lives through this and save parents of disabled kids, countless hours of frustration." (Submitted by a parent in South Lake Tahoe, after the Council hosted an Auntbertha.com training.) Staff was contacted by an agitated self-advocate (who lives independently) whose SSI payments were going to be stopped due to overpayment as the result of a failure to report employment wages. This caused great frustration because the individual lives independently and was unsure as to how monthly bills would be met. Attempts to contact the regional center service coordinator had been unsuccessful. Supportive Living Services (SLS) staff recommended contacting the Council. SCDD staff advised that an Emergency IPP be scheduled, with assistance from the RC's Revenue Unit, to appeal the decision by social security, request that the overpayment to be forgiven or declared a hardship, requesting that the minimum repayment amount be deducted from monthly

social security checks. The caller was very appreciative for the information, assistance and guidance. Staff also provided TA with information about appeal rights for entitlements and formal supports and services. Council staff advised a family and self-advocate about SSI rules and regulations and how to maximize benefits and avoid overpayments and disqualification. Previous technical support provided to this family enabled them to begin receiving SSI benefits after 10 years of being inaccurately determined as 'ineligible.' The Council assisted an Adult Protective Services social worker, whose client had languished in a hospital for a month, due to the failure of the County Conservator to act in a timely, effective manner. Due to the Council's work the client was able to be successfully moved from the jurisdiction of one regional center into that of another, which was in the client's best interests, safety and well-being. As the result of the Council's technical assistance, an individual with I/DD was able to navigate the civil justice system independently, in order to obtain a divorce. The Council successfully resourced community-based emergency services to facilitate a required quarantine period for a self-advocate who was refused re-entry into residential placement, following a hospital discharge. The family was unable to provide care, due to their own full-time employment responsibilities. The Council's assistance resulted in the necessary quarantine with supports and services in the family's home and subsequent safe transfer back into the self-advocate's previous living arrangement. The Council worked with the Governor's Office and DDS to develop/implement proposed emergency regulations for Alternative Service Delivery models, to be administered through the RC system, in response to the devastating loss of traditional services for PwI/DD and their families during the pandemic. An RC Board of Directors requested SCDD training, in response to (non-compliance-related) special contract language imposed by the state's Department of Developmental Services (DDS). SCDD provided both training and input about the Directors' strategies, which resulted in positive strategic changes in the Board's proposed plan. SCDD provided DRC with information, TA, and strategies regarding complaints about the RC system from family/self-advocates, with a focus on those people with dual diagnoses (e.g. I/DD and substance abuse, mental illness, etc.), the ongoing, inequitable distribution of services, RC policies/practices, etc. Staff also educated DRC attorneys about the culture of Spanish-speaking communities and strategies for working with those and other underserved populations. In response to complaints received by the office of CA Assemblymember Anthony Rendon, SCDD provided him with TA, materials for distribution to callers and resources in preparation for his townhall meeting for PwI/DD and families. Council staff joined the Assemblyman's 5-agency expert panel to give information about the Lanterman Act, recent DDS directives, advocacy strategies to obtain RC services, etc. The Council's participation in the townhall meeting resulted in 15 requests for TA by the attending constituents, 10 of which were from Spanish-speaking family/self-advocates. An RC Board has been out of compliance with state diversity requirements, claiming an 'oversight' in the aftermath of staffing changes. SCDD ensured that the Board will now engage a more diverse group of members. An RC Executive Director failed to provide members with access to appropriate ADA modifications and accommodations (e.g. paid facilitation, etc.), to ensure full participation in Board and/or committee meetings. SA felt abused and ignored - as though their input (as members) meant nothing. The Council provided facilitation and TA regarding reasonable accommodations, as requested by members, who have expressed great appreciation for the Council's assistance and expertise. The Council intervened on behalf of an RC's Service Provider Advisory Committee (SPAC), which had complained of adverse impacts, secondary to the Board's noncompliance with its own bylaws. SCDD provided TA, encouraged the ED to attend a SPAC meeting, and the issues were successfully resolved, following the Board's assurances (to the Council and to the SPAC) that it would adhere to the bylaws in making future decisions.

Objective 4: The Council, in consultation with its federal partners, will increase identification, advocacy and/or sponsorship of legislative, regulatory, policy, procedure and/or practice changes to increase access to quality and inclusive community-based services for people with I/DD and their families - including competitive, integrated employment, housing, health and public safety, and education throughout the lifespan.

3. This objective is:	System Change
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4. This objective is:	Ongoing
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5. This objective is:	
Fulfilling a Self-Advocacy DD Requirement	No
Targeted disparity	No
DD Network Collaboration	No

A demonstration project of New Approaches to Services and Supports	No
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A demonstration of projects or activities	No
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6. Stage of Implementation:	Implementation
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7. Provide an overall description of this effort:	In the Council's 2016 State Plan survey, 34.9% of the respondents ranked 'Formal and Informal Community Supports' as the top area of need for people with I/DD in the state, approximately twice as many as the second-ranked area of identified need. For this reason, the Council's legislative focus was primarily on those supports and services not addressed specifically in other goal areas. The systemic (federal, state, regional, local and agency-specific) advocacy activities that are a part of every objective are also supported by statutory and regulatory language that identifies and protects the service and civil rights of people with I/DD. Californians with I/DD rely on the Council to come alongside of them and to help represent their interests with legislators and other policymakers.
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Outputs Achieved	
8. Expected Outputs	9. Outputs Achieved

3 EFC meetings, reaching 18 people; 1 EFC report, distributed to 200 people	Yes
4 LPPC meetings, reaching 36 people; review of &/or recommendations made on 15 CA & 5 federal policy proposals	Yes
30 policy-related activities (e.g. CBO outreach, meetings with state/federal legislators/staff, review/analyze &/or make recommendations about state/federal policy proposals; prepare SA/FA for policy-related activities & engaging in CA Council Capitol Day activities, etc.), reaching 300 people; review, analysis &/or recommendations submitted on 10 CA &/or federal policy proposals; 2 SA/FA prep sessions, reaching 2 people	Yes
5 prep sessions with SA/FA, reaching 50 people; 10 contacts with Congressional members, state legislators, &/or local officials, reaching 25 people; 5 outreach efforts with local policy/legislative coalitions, reaching 35 people	Yes
Arrangements for 2 Congressional &/or state legislative members to attend Council/community events	Yes
6 voter engagement events, reaching 48 people; 6 voter trainings, reaching 48 people	Yes
Hard-copy resource distributions (as requested); 12 electronic resource distributions, reaching 9,800 people	Yes
15 people reached with TA, as requested	Yes

10. The report should include the following:	<p>(a) A narrative progress that cohesively describes the activities that were implemented toward achieving the objective, including how the identified strategy was used, how the activity was implemented, challenged to achieving the objective and unexpected benefits.</p> <p>(b) For system change activities, include a description of the stage of implementation (Planning, initiation, implementation, outcome/fully integrated) of the system change initiative.</p> <p>(c) All narratives must describe what numbers make up the performance measures number for the activities being reported in the narrative.</p> <p>(d) A summary of evaluation activities to monitor progress and impact of council supported activities for the objective; data collected during the year, data sources, and data collection methods; (logic model and evaluation plan may be attached to the report)</p>
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SCDD's Legislative and Public Policy Committee (LPPC) met 4 times with 45 meeting participants, revising a legislative platform and taking positions on 15 bills. SCDD submitted 44 letters and

provided testimony 7 times. The Employment First Committee (EFC) met 6 times with 191 participants. EFC issued a yearly report on the Employment First Policy status. The platform is used as the values of the Council in specific areas and the language is used to educate and inform policymakers about the impact of proposals. SCDD sponsored four bills: SB 1062, SB 1063, SB 1118, and SB 1264. Of the 15 bills the Council took positions on, the Council submitted 44 position letters and provided testimony seven times. Council worked closely with Assemblymember Cervantes and her staff on AB 2730, which passed on consent. The Council worked to coordinate policy activities in partnership with organizations and coalitions (e.g. the Path Forward Collaborative, Lanterman Housing Alliance, the Arc, Statewide Independent Living Council, ARCA, California Committee for the Employment of People with Disabilities [CCEPD] and Disability Rights California [DRC]). SCDD also serves on state workgroups (e.g. Department of Developmental Services' DS Taskforce and the HCBS Stakeholder Workgroup, Department of Education's Part C to B Workgroup, Interagency Advisory Committee on Apprenticeships [IACA] and the CCEPD's Subcommittees on Employment and Training and State Coordination). While the Council planned a Capitol Day, due to the COVID-19 Pandemic, it was cancelled, although SCDD continued to educate policymakers. SCDD emailed all 120 members of the California legislature and 56 California members of Congress with information regarding plain language resources on COVID-19 (created by SCDD), receiving 42 follow up emails from recipient offices. Council sent the 2019 EFC Report and an update on SCDD's plain language resources on COVID-19 to all 56 California members of Congress, receiving 12 follow up emails. Council sent the Statewide Self-Determination Advisory Committee's report titled "A Statewide Self-Determination Advisory Committee Report on the Barriers to Implementing the Self-Determination Program" to all 120 members of the California legislature and received 6 follow-up emails. Council sent emails to Members representing areas impacted by wildfires and received 7 responses to SCDD's offer to provide PPE to fire disaster victims. Employment During 2020, the EFC created 2 workgroups - one focused on identifying useful and relevant data in determining CIE barriers and one on developing relationships with the Labor and Workforce Development Agency and discussing opportunities for CIE of PwD. The Data Workgroup redesigned the Data Dashboard to be more effective for stakeholders, which will be launched in 2021. The Labor and Workforce Development Workgroup developed recommendations for how the Labor and Workforce Development Agency can increase employment of PwD. The Labor Workgroup has provided input as the state considers merging departments with employment responsibilities. In response to COVID, the EFC sent a letter to the Governor's Taskforce on Business and Economic Recovery with recommendations regarding the employment of PwD for the Taskforce to consider as they develop the State's plan for economic recovery from the pandemic. SCDD drafted and shared the EFC report with all Congressional/State Legislative offices. The Council also held a screening of the documentary "Let's Work" for all Congressional/State Legislative offices/personnel (reaching 27 people). The Council sent letters to the Governor's Office requesting the creation of a statewide strategic plan on the employment of PwD. The Governor's Office responded with the creation of a new state initiative through DOR and DDS to improve employment (SC 1.2). In response to SCDD's request, the Council is now the designated chair on the Disability subgroup of the Governor's Diversity Taskforce, which worked to create recommendations to improve state services for PwD (submitted to the administration). SCDD also worked to implement AB 1019 (sponsored in 2019) to ensure apprenticeship opportunities include people with disabilities through service on the IACA (SC 2.1.2 & 1.3.4). Lastly, SCDD sponsored a bill to ensure the Limited Examination and Appointment Program's (LEAP) internship program option - which allows an alternative pathway into state service - did not expire during the pandemic. The Governor signed the bill with a long-term extension and program improvements to be considered during 2021 (SC 1.2). SCDD created documents, videos and other resources, available on the Council's homepage, including 31 handouts and videos about the COVID vaccine and related information (e.g. How to Stay Healthy,

SA/FA Q&A, Safety Tips and Economic Impact Payments [Stimulus Checks], fraud, etc.). Resources were translated into Spanish, Mandarin and Vietnamese. The Council also created background material and a 1-page legislative resource and policy priority handout. Education SCDD partnered with DRC to develop recommendations for CDE to ensure services to students with disabilities were provided during the pandemic. DRC and SCDD met with CDE and sent recommendations to the Governor's Office and State Schools Superintendent. SCDD was also appointed to the Part C-to-Part B workgroup to improve transition services under IDEA (SC 1.3.4). Through SCDD's request, DDS issued a directive pausing the transition of children out of Part C services during the pandemic, issued under emergency authority, as granted by the Governor (affecting 50,175 students currently receiving Part C services) (1.2 & 2.1.2). Housing The Council sponsored SB 1118 to create a dedicated housing fund for PwD. The bill died during the pandemic and will be reconsidered in 2021. SCDD also led a sign-on effort to provide comments to the California Building Standards Commission, which initially proposed to decrease the number of dedicated units. In response to SCDD and other advocates, it increased the number of accessible, affordable, set-aside units in the final regulations (1.2 & 2.1.2). Health and Safety The Council sent a letter to the Governor with a range of recommendations in response to the pandemic. Due to advocacy by SCDD and its partners, the Governor issued guidance regarding healthcare discrimination, the provision of PPE for In-Home Supportive Services (IHSS) and multiple guidance documents related to operations and provision of services by regional centers (SC 1.1, 2.1.2 & 1.5 & 1.3.3). In response to advocacy by SCDD and its partners, new guidance on IHSS and regional centers was released by the Governor. SCDD also shared an open, national sign-on letter urging Governors to adopt hospital and other healthcare provider visitation policies to include reasonable modifications for people with disabilities who need the physical presence of a support person in order to ensure equal access to healthcare, resulting in new guidance by the Department of Public Health (1.1, 1.3.3, 2.1.2 & 2.1.4). SCDD was the primary entity supporting AB 2730, to ensure neighboring counties can work together during emergency evacuations and share emergency services to ensure that services include people with disability access and functional needs (DAFN). The bill passed through the legislature on consent and signed by the Governor (SC 1.2, 2.1.2 & 2.1.4). Formal and Informal Community Supports SCDD sponsored SB 1264, which was signed into law (Lanterman Developmental Disabilities Services Act), to clarify SCDD's process for appointing authorized representatives as an alternative to guardianship and in support of self-governance (SC 1.2, 2.1.2 & 2.1.4). The Council was actively involved in addressing budget deficits created by the pandemic. SCDD reviewed budget proposals, sent multiple letters and testified on impact at budget hearings, with most cuts to supports/services removed from the final 2020-21 state budget (SC 1.1 & 2.1.2). In 2020, California received a federal waiver to allow for online shopping, available through Amazon and Walmart. DSS reached out to SCDD about the change (based on the Council's advocacy) and asked to partner in marketing the system redesign and barrier elimination efforts. SCDD created plain language resources in English and Spanish and urged DSS to create special access for CalFresh shoppers, since purchases resulted in a weeks-long wait for typical online shoppers (reaching 3,040 people). This successfully created a way for CalFresh shoppers to bypass wait lines and receive priority delivery, allowing PwD to reduce exposure and health risks, while getting food and supplies without multiple barriers. SCDD shared the waiver language with other DD Councils that were trying to get the same approval in other states (SC 1.1, 1.2, 1.4, 1.5, 2.1, 2.2, & 2.1.2). This work affected 1.9 million CalFresh recipients. Regional Policy Work SCDD collaborates at the state, regional and local levels on policy-related issues. In the Bay Area, staff participates in the East Bay Legislative Coalition, which hosts Legislative breakfasts for elected officials, staffers, family/self-advocates and professionals to educate them about current needs within the disability and/or generic service systems. SCDD took a leading role in developing content and providing supports. SCDD also collaborated with district offices of members of the Assembly, Senate and House of Representatives

to get obtain PPE for individuals affected by wildfires. Regional offices testified in the state for policy events and provided TA to people/entities identifying policy gaps that required legislation to resolve.

Expected Outcomes Achieved	
11. Expected Outcomes	12. Outcomes Achieved
Through the work of the Council, its EFC & joint reports, stakeholders will be able to monitor and engage in CIE-related policy activities throughout the state	Yes
Stakeholders will be represented regarding state &/or federal policy proposals/recommendations relating to PwD through the work of the Council & LPPC,	Yes
The Council, with input from its constituents, will represent PwD in its review/analysis/recommendations for state &/or federal policy proposals and will be a viable influence on behalf of PwD during Capitol Day activities	Yes
Local policy/legislative coalitions, officials, district Legislative & Congressional staff, & state & federal policymakers will have information about SCDD, its mission/vision/priorities & policy-related activities, and will hear directly from SA/FA about the priorities, needs and perspectives regarding state & federal policy proposals that affect PwD	Yes
State & federal legislators will have information to attend local/regional Council/community events	Yes
PwD will increase voter engagement through the work of the Council	Yes
People will have electronic &/or hard-copy (as requested) information about formal/informal, inclusive community-based supports/services	Yes
People will have access to TA, as requested	Yes

13. Progress towards achieving outcomes for overall objective: |

The Council changed the focus of its workplan after the SPAU was submitted, combining activities for the sake of brevity. This created reporting changes that meant that the Council did not meet and/or exceed all of its yearly targeted activities through this objective, though it did achieve many of its in-house activity projections. It is, nonetheless, an objective through which the Council will continue to be actively engaged for the duration of its five-year State Plan. The Council's Legislative and Public Policy Committee updates its list of supported and/or 'watched' bills on a yearly basis, updating as necessary.

14. Additionally, include stories of culturally diverse people with developmental disabilities whose lives are better because of Council work on this activity (e.g., became better advocates for themselves and others, became more connected to the community).

N/A

Section IV: B

Individual & Family Advocacy Performance Measures

Race and Ethnicity

Race/Ethnicity	#	%
White alone	63	25.51%
Black or African American alone	43	17.41%
American Indian and Alaska Native alone	18	7.29%
Hispanic/Latino	65	26.32%
Asian alone	26	4.45%
Native Hawaiian & Other Pacific Islander alone	11	4.45%
Two or more races and Race unknown	21	8.50%
Gender	#	%
Male	302	26.70%
Female	829	73.30%
Other	0	0%
Category	#	%
Individual with DD	764	68.52%
Family Member	351	31.48%
Geographical	#	%
Urban	440	67.59%
Rural	211	32.41%

I. Output Measures

Objective	Performance Measure: IFA 1.1 People with DD who participated in activities	Performance Measure: IFA 1.2 Family members
The Council, in collaboration with our federal DD partners, will reduce service access barriers and decrease the disparity in available information, which describes services and supports that may be purchased throughout California's Regional Center system, by translating and providing that information in Spanish and tracking statewide POS disparity data for Spanish speaking self-advocates and families.	15	19
The Council will increase the knowledge and skills of people with I/DD to move from institutional to community settings and to increase their ability to self-advocate.	71	80
The Council will increase outreach, training, and technical assistance to improve the quality of and access to services, including (but not limited to) Regional Centers, education, transportation, public benefits, child care, and recreation for people with I/DD and their families.	152918	374548
The Council, in consultation with its federal partners, will increase identification, advocacy and/or sponsorship of legislative, regulatory, policy, procedure and/or practice changes to increase access to quality and inclusive community-based services for people with I/DD and their families - including competitive, integrated employment, housing, health and public safety, and education throughout the lifespan.	16667	35628
Total # of Output Respondents	667	1783

II. Outcome Measures

Performance Measures	Percent (%)
IFA 2.1 Percent of people with DD	100
IFA 2.2 Percent of family members who increased advocacy	66

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

Projects	# People with Developmental Disabilities	# Family Members
The Council, in collaboration with our federal DD partners, will reduce service access barriers and decrease the disparity in available information, which describes services and supports that may be purchased throughout California's Regional Center system, by translating and	0	0

providing that information in Spanish and tracking statewide POS disparity data for Spanish speaking self-advocates and families.		
The Council will increase the knowledge and skills of people with I/DD to move from institutional to community settings and to increase their ability to self-advocate.	33	0
The Council will increase outreach, training, and technical assistance to improve the quality of and access to services, including (but not limited to) Regional Centers, education, transportation, public benefits, child care, and recreation for people with I/DD and their families.	512	1699
The Council, in consultation with its federal partners, will increase identification, advocacy and/or sponsorship of legislative, regulatory, policy, procedure and/or practice changes to increase access to quality and inclusive community-based services for people with I/DD and their families - including competitive, integrated employment, housing, health and public safety, and education throughout the lifespan.	77	0
Total # of Sub-Outcome Respondents	622	1699
IFA 2.3 Percent of people better able to say what they need	93.25%	95.29%

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

Projects	# People with Developmental Disabilities	# Family Members
The Council, in collaboration with our federal DD partners, will reduce service access barriers and decrease the disparity in available information, which describes services and supports that may be purchased throughout California's Regional Center system, by translating and providing that information in Spanish and tracking statewide POS disparity data for Spanish speaking self-advocates and families.	0	0
The Council will increase the knowledge and skills of people with I/DD to move from institutional to community settings and to increase their ability to self-advocate.	29	0
The Council will increase outreach, training, and technical assistance to improve the quality of and access to services, including (but not limited to) Regional Centers, education, transportation, public benefits, child care, and recreation for people with I/DD and their families.	449	847
The Council, in consultation with its federal partners, will increase identification, advocacy and/or sponsorship of legislative, regulatory, policy, procedure and/or practice changes to increase access to quality and inclusive	42	5

community-based services for people with I/DD and their families - including competitive, integrated employment, housing, health and public safety, and education throughout the lifespan.		
Total # of Sub-Outcome Respondents	520	852
IFA 2.4 Percent of people participating in advocacy activities	77.96%	47.78%

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

Projects	# People with Developmental Disabilities	# Family Members
The Council, in collaboration with our federal DD partners, will reduce service access barriers and decrease the disparity in available information, which describes services and supports that may be purchased throughout California's Regional Center system, by translating and providing that information in Spanish and tracking statewide POS disparity data for Spanish speaking self-advocates and families.	0	0
The Council will increase the knowledge and skills of people with I/DD to move from institutional to community settings and to increase their ability to self-advocate.	19	0
The Council will increase outreach, training, and technical assistance to improve the quality of and access to services, including (but not limited to) Regional Centers, education, transportation, public benefits, child care, and recreation for people with I/DD and their families.	237	574
The Council, in consultation with its federal partners, will increase identification, advocacy and/or sponsorship of legislative, regulatory, policy, procedure and/or practice changes to increase access to quality and inclusive community-based services for people with I/DD and their families - including competitive, integrated employment, housing, health and public safety, and education throughout the lifespan.	31	0
Total # of Sub-Outcome Respondents	287	574
IFA 2.5 Percent of people on cross disability coalitions	43.03%	32.19%

II. Outcome Measures

Satisfied	Percent (%)
IFA 3 The percent of people satisfied with a project activity	87
IFA 3.1 Percent of people with DD satisfied with activity	92
IFA 3.2 Percent of family members satisfied with activity	76

Section IV: C

Systems Change Performance Measures

SC 1: Output Measures

Objective	
The Council, in collaboration with our federal DD partners, will reduce service access barriers and decrease the disparity in available information, which describes services and supports that may be purchased throughout California's Regional Center system, by translating and providing that information in Spanish and tracking statewide POS disparity data for Spanish speaking self-advocates and families.	
SC 1.1 Number of policy/procedures created/changed	0
SC 1.2 Number of statutes/regulations created/changed	0
SC 1.3.1 Number of promising practices created	0
SC 1.3.2 Number of promising practices supported	0
SC 1.3.3 Number of best practices created	0
SC 1.3.4 Number of best practices supported through Council activities	0
SC 1.3 Number of promising and/or best practices created and/or supported	0
SC 1.4 Number of people trained/educated	15
SC 1.5 Number of Systems Change activities with other organizations	5

Objective	
The Council will increase the knowledge and skills of people with I/DD to move from institutional to community settings and to increase their ability to self-advocate.	
SC 1.1 Number of policy/procedures created/changed	0
SC 1.2 Number of statutes/regulations created/changed	0
SC 1.3.1 Number of promising practices created	0
SC 1.3.2 Number of promising practices supported	0
SC 1.3.3 Number of best practices created	0
SC 1.3.4 Number of best practices supported through Council activities	0
SC 1.3 Number of promising and/or best practices created and/or supported	0
SC 1.4 Number of people trained/educated	314
SC 1.5 Number of Systems Change activities with other organizations	5

Objective	
The Council will increase outreach, training, and technical assistance to improve the quality of and access to services, including (but not limited to) Regional Centers, education, transportation, public benefits, child care, and recreation for people with I/DD and their families.	
SC 1.1 Number of policy/procedures created/changed	0

SC 1.2 Number of statutes/regulations created/changed	0
SC 1.3.1 Number of promising practices created	1
SC 1.3.2 Number of promising practices supported	1
SC 1.3.3 Number of best practices created	1
SC 1.3.4 Number of best practices supported through Council activities	1
SC 1.3 Number of promising and/or best practices created and/or supported	0
SC 1.4 Number of people trained/educated	334078
SC 1.5 Number of Systems Change activities with other organizations	915

Objective	
The Council, in consultation with its federal partners, will increase identification, advocacy and/or sponsorship of legislative, regulatory, policy, procedure and/or practice changes to increase access to quality and inclusive community-based services for people with I/DD and their families - including competitive, integrated employment, housing, health and public safety, and education throughout the lifespan.	
SC 1.1 Number of policy/procedures created/changed	8
SC 1.2 Number of statutes/regulations created/changed	7
SC 1.3.1 Number of promising practices created	1
SC 1.3.2 Number of promising practices supported	0
SC 1.3.3 Number of best practices created	1
SC 1.3.4 Number of best practices supported through Council activities	2
SC 1.3 Number of promising and/or best practices created and/or supported	0
SC 1.4 Number of people trained/educated	47476
SC 1.5 Number of Systems Change activities with other organizations	80

Systems Change SC 2: Outcome Measures

Outcome Measures	Number (#)
SC 2.1 - Efforts that led to improvements	1
SC 2.2 - Efforts that were implemented	1

III. Sub-Outcome Measures

Objective	Number (#)
The Council, in collaboration with our federal DD partners, will reduce service access barriers and decrease the disparity in available information, which describes services and supports that may be purchased throughout California's Regional Center system, by translating and providing that information in Spanish and tracking statewide POS disparity data for Spanish speaking self-advocates and families.	
SC 2.1.1 Policy, procedure, statute, regulation improvements	0
SC 2.1.2 Policy, procedure, statute, regulation implemented	0
SC 2.1.3 Number of improved promising or best practices	0
SC 2.1.4 Number of implemented promising or best practices	0

Objective	Number (#)
The Council will increase the knowledge and skills of people with I/DD to move from institutional to community settings and to increase their ability to self-advocate.	
SC 2.1.1 Policy, procedure, statute, regulation improvements	0
SC 2.1.2 Policy, procedure, statute, regulation implemented	0
SC 2.1.3 Number of improved promising or best practices	0
SC 2.1.4 Number of implemented promising or best practices	0

Objective	Number (#)
The Council will increase outreach, training, and technical assistance to improve the quality of and access to services, including (but not limited to) Regional Centers, education, transportation, public benefits, child care, and recreation for people with I/DD and their families.	
SC 2.1.1 Policy, procedure, statute, regulation improvements	0
SC 2.1.2 Policy, procedure, statute, regulation implemented	0
SC 2.1.3 Number of improved promising or best practices	1
SC 2.1.4 Number of implemented promising or best practices	0

Objective	Number (#)
The Council, in consultation with its federal partners, will increase identification, advocacy and/or sponsorship of legislative, regulatory, policy, procedure and/or practice changes to increase access to quality and inclusive community-based services for people with I/DD and their families - including competitive, integrated employment, housing, health and public safety, and education throughout the lifespan.	
SC 2.1.1 Policy, procedure, statute, regulation improvements	1
SC 2.1.2 Policy, procedure, statute, regulation implemented	9
SC 2.1.3 Number of improved promising or best practices	0
SC 2.1.4 Number of implemented promising or best practices	3

SECTION V: COUNCIL FINANCIAL INFORMATION

Council is its own DSA?	No
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1. Fiscal Year	2018
2. Reporting Period	10/01/2017 - 9/30/2018
3. Total Federal Fiscal Award for Reporting Year	\$7499029
4. State Funds Contributing to Council State Plan Activities	\$230000
5. Additional Council Funds Used for Other Activities	\$
6. Federal Share of Expenditures	\$7499029

7. Federal Share of Unliquidated Obligations	\$
8. Unliquidated Balance of Federal Funds	\$
9. Match Required	\$230000
10. Match Met	\$230000
11. Match Unmet	\$0

1. Fiscal Year	2019
2. Reporting Period	10/01/2018 - 9/30/2019
3. Total Federal Fiscal Award for Reporting Year	\$7687837
4. State Funds Contributing to Council State Plan Activities	\$230000
5. Additional Council Funds Used for Other Activities	\$
6. Federal Share of Expenditures	\$7687837
7. Federal Share of Unliquidated Obligations	\$
8. Unliquidated Balance of Federal Funds	\$
9. Match Required	\$230000
10. Match Met	\$230000
11. Match Unmet	\$0

1. Fiscal Year	2020
2. Reporting Period	10/01/2019 - 9/30/2020
3. Total Federal Fiscal Award for Reporting Year	\$7891297
4. State Funds Contributing to Council State Plan Activities	\$230000
5. Additional Council Funds Used for Other Activities	\$
6. Federal Share of Expenditures	\$3348202
7. Federal Share of Unliquidated Obligations	\$
8. Unliquidated Balance of Federal Funds	\$
9. Match Required	\$230000
10. Match Met	\$230000
11. Match Unmet	\$0

Dollars leveraged for the reporting year being reported	19000000
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SECTION VI: MEASURES OF COLLABORATION

5. Identify the critical issues or barriers affecting individuals with developmental disabilities and their families in your State that the Council and the PA, the Council and the UCEDD, the Council and other collaborators may have worked on during the reporting period.

Critical issues or barriers affecting PwI/DD and their families that were addressed by the CA DD Council, P&A, and 3 UCEDDs during 2020 include:

- a. Created COVID-19 information and resources (in plain language) about health and civil/legal rights in English and Spanish
- b. Advanced and promoted a 'No discrimination in COVID care' policy statement
- c. Stopped using 'life years' as a criterion for health care rationing, as COVID impacted all available health care resources
- d. Succeeded in promoting the state's issuance of a statement to allow caregivers as visitors during hospitalization, along with family members
- e. Advanced a policy to prioritize PPE for direct care providers
- f. Increased competitive, integrated employment (CIE) opportunities
- g. Increased access to services through plain language descriptions of regional center (RC) purchase-of-service terms
- h. Addressed disparities and equity in services through the Georgetown National Center for Cultural Competence: Community of Practice on Cultural and Linguistic Competence in Developmental Disabilities
- i. Identified two (2) targeted disparity goals at two (2) regional centers (RC) through a grant (funded by the Department of Developmental Services [DDS]) to provide coaching of RC directors and leadership teams on cultural and linguistic competence and support to develop targeted disparity goals

6. Area of Emphasis

Identify the Area of Emphasis collaboratively addressed by the DD Council and Collaborators

Area of Emphasis	Areas Addressed
Quality Assurance	Yes
Education and Early Intervention	Yes
Child Care	Yes
Health	Yes
Employment	Yes
Housing	Yes
Transportation	Yes
Recreation	Yes
Quality of Life	Yes
Cultural Diversity	Yes
Other - Leadership	Yes
Other - Self-Determination	Yes

7. 3. The report should include a narrative progress report that cohesively describes the activities that were implemented by the Council and the P&A, the Council and the UCEDD, the Council and other collaborators DD Network. For at least one of the issues-barriers identified above describe:

During 2020, the federal partners collaborated to advance early progress in California to protect and care for people with I/D and other disabilities as the pandemic emerged (the activities below encompass collaborative efforts and success in Items a through e [above]):

a. Issues and barriers were created by the emerging pandemic and a need for quick access to plain language information and resources, along with the threat that a scarcity of health care and PPE protection posed. People with I/DD are uniquely impacted by COVID-19, as it is a respiratory illness, which are the leading cause of death for people with Down Syndrome and Cerebral Palsy. The collaborative goal was to convince state public health officials to prioritize the needs of people with I/D and other disabilities.

b. The collaborative strategy was for each federal partner to leverage its own role and expertise to achieve a positive outcome. The Council leveraged its role as Governor's appointees with relationships and connections within the Administration, along with the ability to activate large numbers of self-advocates (SA), family advocates (FA), providers and others to advocate for immediate and long-term needs. The P&A (Disability Rights California [DRC]) provided legal analysis and rationale for why each policy or practice change or implementation was necessary. Each of the UCEDDs tracked medical data and research - often happening in real-time - then spoke to state public health officials in relevant medical and epidemiological terms.

c. The Council provided a convening/coordinating function among the federal partners, providing all products and policy recommendations to Councils on a national/territorial level.

d. Emerging problems included tensions created within the Governor's Office, Administration and Department of Public Health as the Council and its partners were unrelenting in advancing advocacy on behalf of PwI/DD and their families, while state decisionmakers had to balance those needs against other equally vocal interests. The outcome was an increased understanding and prioritization of disability needs in larger statewide efforts.

e. Unexpected benefits from the Council's collaborative efforts include a stronger partnership with other disability advocacy and representative organizations, including ILCs and aging advocates. While collaborative partners work together on individual projects, this was the first truly encompassing, unifying effort to bring so many advocates together in one series of efforts.