NOTICE/AGENDA

STATE COUNCIL ON DEVELOPMENTAL DISABILITIES
COUNCIL MEETING

This meeting is being held in person. Members of the public may participate in person, or by telephone. Accessible formats of all agenda and materials can be found online at www.scdd.ca.gov.

MEETING DETAILS:

PHYSICAL LOCATION: DoubleTree by Hilton, 2001 Point West Way, Sacramento CA 95815

TELECONFERENCE (CALL IN NUMBER): (888)-475-4499 or (877)-853-5257

MEETING ID: 872 6607 0164   **PASSCODE:** 312507

DATE: May 21, 2024

INFORMAL SOCIALIZING: 9:30 AM – 10:30 AM

MEETING TIME: 10:30 AM – 3:30 PM

COUNCIL CHAIR: Wesley Witherspoon

Item 1. CALL TO ORDER

Item 2. ESTABLISH QUORUM

Item 3. WELCOME AND INTRODUCTIONS

The next Council meeting will be on July 16, 2024.

Accessibility:

Pursuant to Government Code Sections 11123.1 and 11125(f), individuals with disabilities who require accessible alternative formats of the agenda and related meeting materials and/or auxiliary aids/services to participate in this meeting should contact Yaritza Sanchez at (916)-207-2856 or yaritza.sanchez@scdd.ca.gov. Please provide at least 3 business days prior to the meeting to allow adequate time to respond to all requests.

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

MAY 21, 2024

AGENDA ITEM 4.
INFORMATION ITEM

STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

Public Comments

This item is for members of the public to provide comments and/or present information to this body on matters not listed on the agenda. There will be up to 20 minutes allocated to hear from the public with each person allotted up to 3 minutes to comment.

Additionally, there will be up to 10 minutes allocated to hear from the public on each Council agenda item, with each person allotted up to 1 minute to comment.

MAY 21, 2024

AGENDA ITEM 5.
ACTION ITEM

STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

Approval of March 2024 Minutes

The draft minutes from the March 19, 2024, Council meeting have been included in the packet for review. Councilmembers will vote on whether to approve the minutes.

Attachment
March Council Meeting Minutes

Action Recommended
Approve the March 2024 Council meeting minutes.

**DRAFT
Council Meeting Minutes
March 19, 2024**

Members Attending
Alex Reyes (S.A.)
Andy Imparato (DRC)
Aubyn Stahmer (UCEDD)
Brian Winfield (DDS)
Cathay Liu (F.A.)
Debra Cooper (CHHS)
Eric Ybarra (S.A.)
Harold Ashe (F.A.)
Harold Fujita (F.A.)
Jessica Brown (F.A.)
Joseph Billingsley (DHCS)
Joyce McNair (F.A.)
Julie Gaona (S.A.)
Julie Neward (F.A)
Julio Garnica (S.A.)
Kara Ponton (S.A.)
Larry Yin (UCEDD)
Lee Bycel (F.A.)
Mark Beckley (CDA)
Michael Ellis (F.A.)
Nestor Nieves (S.A.)
Nicole Adler (S.A.)
Rosanna Ryan (S.A.)
Sonia Jones (S.A.)
Viviana Barnwell (F.A.)
Nick Wavrin
Wesley Witherspoon (S.A.)
Yasamin Bolourian (UCEDD)

Members Absent
(DOR) Delegate

Others Attending
Aaron Carruthers
Beth Hurn
Brian Weisel
Bridget Kolakosky
Cathy Hickinbotham
Christine C. Tolbert
Charles Nguyen
Cri Campbell Schine
David Grady
Dena Hernandez
Holly Bins
Ibrahim Muttaqi
Jadolphus Fraser
Julie Eby-McKenzie
Kalyn Farris
Kecia Weller
Ken DaRosa
Kevin Mintz
Kristie Allensworth
Lisa Hooks
Lori Walker
Lynn Villoria
Maria Arredondo
Mary Ellen Stives
Maureen Fitzgerald

Others Attending (cont.)
Michelle Cave
Patricia Herrera
Priscilla Klassen
Renee Bauer
Riana Hardin
Richard Dier
Robbin Puccio
Robin Maitino-Erben
Rihana Ahmad
Scarlett VonThenen
SCDD LA Office
Sheraden Nicholau
Sidney Jackson
Sofia Cervantes
Trina Ta
Veronica Bravo
Yaritza Sanchez
Yolanda Cruz

Legend:
SA = Self-Advocate
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N/A = not available
DNP = Did Not Participate

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1. **CALL TO ORDER**
   Chair Wesley Witherspoon called the meeting to order at 10:35 A.M.

2. **ESTABLISH QUORUM**
   A quorum was established.

3. **WELCOME/INTRODUCTIONS**
   Members and others in attendance introduced themselves and disclosed if there were others in the room with them.

4. **PUBLIC COMMENTS**
   Lori Walker, Chair of her local self-determination advisory committee, provided a public comment regarding two key issues. First, she advocated for the involvement of the local committees (LVACs) in the SCDD appointment process for LVACs, highlighting the benefits of their participation in recruitment and selection. Ms. Walker shared positive outcomes at North LA where the LVAC's involvement led to smoother transitions for new appointees. Second, she raised concerns about the timeliness of these appointments, referencing a DDS directive that sought to address delays, but had not yet resolved the issue. Executive Director Carruthers responded by offering to arrange a meeting with Ms. Walker to address the concerns more thoroughly.

5. **APPROVAL OF JANUARY 2024 MINUTES**
   <u>Action 1</u>
   <u>It was moved/seconded (Ybarra [S.A]/ Reyes [S.A.]) and carried to approve the January 2024 meeting minutes.</u> (See last page for a voting record of members present)

6. **CHAIR REPORT AND COMMITTEE REPORTS**
   Chair Witherspoon provided an update on several key issues and initiatives. He detailed the Council's response to AT&T's proposal to phase out landlines, emphasizing the potential impact on individuals with disabilities. A letter was sent to the California Public Utilities Commission (PUC) urging them to maintain landlines or ensure that cell phone infrastructure is upgraded for reliability, especially during emergencies. He also highlighted the Council's focus on the Master Plan for Developmental Services, which seeks to make developmental services more accessible and interconnected with other essential health and social services. Councilmember McNair was appointed to represent SCDD on the Stakeholder Committee formed by the California Health and Human

Services Secretary. Additionally, Chair Witherspoon reported on policy changes approved by the Executive Committee during their February meeting, including increased maximum sponsorships for community events from $1,500 to $2,500, and higher pay rates for staff hired by Councilmembers to $21.67 an hour for facilitators and $20.72 an hour for attendants. They also voted to expand the "Unprofessional Conduct Policy" to include Local Self-Determination Advisory Committee members, aligning with professional standards for Council and RAC members. Concluding his report, he highlighted the Council's efforts to celebrate March's Developmental Disabilities Awareness Month, such as contributions to the Storytellers Blog, promotion of self-advocate artwork on SCDD's social media, and hosting a virtual event called "Looking Back and Moving Forward Together" on March 27. Lastly, the National Association of Councils incorporated SCDD's materials in their National Resource Guide, including the 1st SB 639 Annual Report, "There Should Be a Law Report," and the Storytellers Blog page.

SCDD committee reports were provided in the meeting packet. Chair Witherspoon asked that members read through these reports when they are able. The committee reports can be accessed online at https://scdd.ca.gov/councilmeetings/.

7. **EXECUTIVE DIRECTOR REPORT AND STAFF REPORTS**
Executive Director Carruthers explained the budget process, beginning with the Governor's proposed budget release in January, followed by internal preparations by Chief Deputy Director DaRosa and Budget Officer Villoria, and subsequent reviews by the Administration Committee, then the Executive Committee, before being presented to the full Council in March for review, and then a final vote in May. He also provided a brief overview of budget terms and timelines, clarifying the three fiscal calendars: the calendar year (January 1st to December 31st), state fiscal year (July 1st to June 30th), and federal fiscal year (October 1st to September 30th). The Council's four main funding sources were identified as the Basic State Grant (Federal Funds), Quality Assessment (State Contract), Clients' Rights Advocates/Volunteer Advocacy Services (State Contract) and Supported Decision-making Technical Assistance (Limited-term Funding).

Furthermore, he presented a detailed review of SCDD's 2024-2025 draft budget, focusing on the Basic State Grant. The proposed budget was prepared by the Administration Committee, reviewed by the Executive

Committee, and incorporates these committee's recommendations. The proposed budget included an increase in personal services by $131,000, for a total of $6,378,000, to reflect labor agreement outcomes, merit increases, and the impact of vacant positions. To offset this increase, a $91,000 reduction in Operating Expenses and Equipment (OE&E) was suggested, with specific cuts in areas such as general expenses, printing, communications, postage, and travel, among others. Facilities Operations, Utilities, Interdepartmental Services, and External Contract Services were recommended to maintain their current funding levels, while Information Technology saw a proposed reduction. The Statewide Cost Allocation Plan (SWCAP) fee remained fixed at $25,000, and they proposed a $5,000 allocation for miscellaneous expenses. The Executive Director reported that the draft budget was designed to be balanced, with noted increases in staff salaries and benefits being offset by targeted reductions in other budget areas. It carefully considered adjustments to ensure essential services and operations would be fully unfunded.

Last fiscal year 2023-24, the Community Program Development Grants received a one-time $40,000 increase from $260,000 to $300,000. The draft 2024-25 budget reflected the Administrative and Executive Committees' recommendations to maintain the total of $300,000 for Cycle grants by transferring the unspent $40,000 in SFY 2023-24 from the Estimated Unexpended Funds Available reserve. The Executive Director also mentioned the Council's prudent reserve, which was set at $1,750,000 to safeguard against federal budget uncertainties. Moreover, he reported $355,000 of estimated unexpended funds.

The proposed budget for the Basic State Grant was set for $8,102,000, the Quality Assessment State Contract set for $3,784,000, CRA/VAS State Contract set for $1,694,000, and the Supported Decision-making Technical Assistance Program was set for $416,000, leading to an overall Council budget of $13,997,000 for 2024-2025.

8. **STATEWIDE SELF-ADVOCACY NETWORK (SSAN) REPORT**
SCDD SSAN representative Alex Reyes provided Councilmembers with an update from SSAN's meeting on February 28th and 29th, 2024. The next SSAN meeting will be in June 2024. It will be a hybrid meeting and held in Sacramento and over Zoom.

Legend:
SA = Self-Advocate
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9. **CYCLE 47 PROGRAM DEVELOPMENT GRANTS**
State Plan Chair Ellis and State Plan Manager Ahmad detailed the allocation of $300,000 in program development grants for the upcoming fiscal year to build new and innovative programs and make necessary changes in services for individuals with IDD. These grants are part of the Council's State Plan strategy to meet federal and state mandates, support community-based organizations, and enhance the quality of life for Californians with intellectual and developmental disabilities and their families. The proposed Cycle 47 grants will focus on three main areas: self-advocacy (plain language), self-advocacy (loneliness and isolation), and health and safety (tribal health).

The first RFP targets the creation of plain language materials in both hardcopy and electronic formats to aid individuals with intellectual and developmental disabilities (IDD). The project aims to increase public and private sector awareness of plain language's value, teach individuals with IDD and their families how to convert materials into plain language, and explore plain language skills as employment or micro-business opportunities. The expected outcomes include a variety of marketing tools, a conversion guide for industry-specific terms, and a pilot group business model. The second RFP focuses on reducing loneliness and isolation among people with IDD. It seeks to establish a sustainable model to foster meaningful social interactions and activities. The project will develop training, tools, and community-based activities that are culturally appropriate and match individual preferences. State Plan Manager Ahmad noted that members of the Self-Advocates Advisory Committee (SAAC) requested that language be added to the RFP description to include homebound individuals with IDD. Expected deliverables include a toolkit, resources, and curriculum to help people with IDD identify their personal interests, explore community-based opportunities, and/or develop new options for meaningful activities and social interactions. Training and technical assistance will also be provided for people with IDD to build capacity for decreasing loneliness and social isolation. The third RFP focuses on health and safety within tribal communities, aiming to deliver culturally sensitive plain language materials, outreach, training, and to connect Native Americans with critical resources and information about developmental milestones, disabilities, early diagnosis and intervention, and health related supports and services. This project builds on previous outreach efforts to enhance health-related support for people with IDD. Expected outcomes include key trusted partnerships with tribal, public, and private entities, and the

development of culturally appropriate materials and training related to developmental disabilities and health services. Each project is expected to deliver comprehensive reports detailing successes, best practices, and recommendations for future initiatives.

Action 2

It was moved/seconded (Ryan [S.A]/ Fujita [F.A.]) and carried to approve the Cycle 47 RFP project descriptions. (See last page for a voting record of members present)

10. **2024 LEGISLATIVE UPDATES & RECOMMENDATIONS**
Deputy Director of Legislative and Public Policy Bridget Kolakosky provided an overview of the bills discussed at the Legislative and Public Policy Committee's meeting on March 14th. She noted the Council's continued focus on issues identified in recent years, specifically under the themes of health, home, and work.

She highlighted four key bills supported by the Council in 2023 that were still progressing: SB 37 (Caballero), which was co-sponsored by the Council, introduces a rental assistance program for older adults and adults with disabilities; SB 483 (Cortese), aims to protect students with disabilities from dangerous restraints; AB 1147 (Addis), requires enhanced data collection related to disabilities; and AB 222 (Arambula), intended to form a workgroup for enhancing civil rights protections, though it did not pass. She also noted bills reintroduced this year, such as SB 1384 (Dodd), which advocates for wheelchair users' right to self-repair by ensuring access to necessary tools/parts, and SB 1443 (Jones), which would add the State Council to the California Interagency Council on Homelessness. She also referenced the success of AB 447 (Arambula), which the Council co-sponsored, and led to the allocation of $2 million for Technical Assistance Centers to support students with disabilities transitioning to college.

Deputy Director Kolakosky presented several new bills introduced in January 2024 or later, which the Legislative and Public Policy Committee (LPPC) reviewed and recommended for support. She began with SB 1001 (Skinner), which protects prisoners with intellectual disabilities from the death penalty by allowing new evidence for diagnosis not previously identified during their childhood. AB 1977 (Ta) addresses the need for stable healthcare coverage for individuals with permanent developmental disabilities or autism by eliminating the requirement for periodic re-

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evaluations, which pose significant logistical and financial burdens. AB 2510 (Arambula) will require the Department of Developmental Disabilities (DDS) to create a new regional center program to improve dental care for people with developmental and intellectual disabilities. The program will also reduce the need for sedation and anesthesia during dental treatments, promoting safer dental practices. AB 2753 (Ortega) mandates health plans to cover durable medical equipment and services, which is essential for daily living, but costly without insurance. AB 1885 (Addis) aims to make Cal Grant assistance more equitable for students in Disabled Student Programs and Services (DSPS) by reducing the required units to nine. AB 1876 (Jackson) will allow remote meetings for Individual Program Plans (IPP) and Individualized Family Service Plans (IFSP) and is co-sponsored by Disability Rights California (DRC). AB 1281 (Menjivar) aims to standardize processes in the Self Determination Program Act by 2026, ensuring consistency and equity across regional centers.

Lastly, an update was presented on HR 6405, titled the Marriage Equality for Disabled Adults Act, introduced by Rep. Panetta. The bill addresses the issue of marriage equality for individuals with disabilities by increasing the federal asset limit from $2,000 to $10,000 for individuals and to $20,000 for couples. The current $2,000 limit poses a disincentive for couples to marry, as exceeding this threshold jeopardizes their eligibility for Social Security income (SSI). The National Association supports the resolution, which was under review in a subcommittee on Health at the federal level.

Action 3
It was moved/seconded (Adler [S.A]/ Ybarra [S.A.]) and carried to adopt the Legislative and Public Policy Committee's (LPPC) recommendations on legislative positions. (See last page for a voting record of members present)

11. **MASTER PLAN DISCUSSION**
Councilmember Joyce McNair provided an overview on the progress and framework for California's Master Plan for Developmental Services. She noted that the plan will be developed by a dedicated stakeholder committee, consisting of a diverse group of 36 members. In addition to Councilmember McNair, Councilmember and Director of the USC UCEDD Larry Yin, was also appointed to the stakeholder committee. Councilmember and Assistant Secretary for California's Health and

Human Services Agency, Debra Cooper, was named as the Stakeholder Committee's primary contact person. The Stakeholder Committee will meet monthly, with the deadline for the master plan's completion set for March 2025. Public participation was encouraged through regional roundtables and open meetings accessible in-person, by phone, or Zoom. The committee aims to create a person-centered, equity-focused, and data-driven master plan to modernize the developmental service system, aligning with critical systems like education, housing, transportation, and safety. Numerous issues have already been identified through reports from the Little Hoover Commission, the State Council on Developmental Disabilities, and other sources, alongside firsthand accounts from self-advocates, family members, and direct service providers. Demonstrations and media reports have further highlighted significant concerns about service quality.

Councilmember McNair highlighted the importance of the Council's involvement in developing the Master Plan for developmental services. She emphasized participation in subcommittees, regional roundtables, and encouraged providing feedback on system improvements. Councilmembers were urged to consider what aspects of the current system should be continued, improved, or included in the Master Plan. Councilmember Cooper reiterated the importance of these discussions in shaping a system that meets users' needs.

Councilmember Ellis inquired about how Councilmembers could engage in public meetings to foster broader community involvement. Councilmember Gaona expressed satisfaction with her regional center services but noted the need for improvements in the self-determination program. Councilmember Bycel inquired about the project's scope and the historical context, suggesting the use of SCDD's State Plan data. Councilmember Adler shared a personal testament to the positive impact of self-determination and advocated for more compassionate and accountable staff training. Councilmember McNair mentioned the need for a more personalized and humane approach in developmental services, stressing the importance of treating service recipients as individuals rather than numbers. Councilmember Beckley offered to share insights from the California Department of Aging's implementation of their Master Plan to assist in the development process. Lastly, Councilmember Jones detailed how her day program and support services have enabled her to maintain an active and engaged lifestyle.

12. **SIBLING AND NATALIE'S STORY**
Councilmember Julie Neward and President of the California Siblings Network Kalyn Farris discussed issues related to siblings of individuals with disabilities, emphasizing the importance of April both for National Siblings Day and Sexual Assault Awareness Month. Councilmember Neward shared a personal story about her sister Natalie, a survivor of sexual abuse, which motivated her to co-found the California Chapter of the National Sibling Leadership Network and initiate the Natalie Project to support survivors and their families. Kalyn Farris, board president of the California Sibling Leadership Network, described the organization's mission to support and empower siblings of individuals with IDD through various stages of life. They provided insights into California's IDD population statistics and the transition of caregiving responsibilities to siblings as parents age. She detailed the California Sibling Leadership Network's efforts to provide a supportive community for siblings, offering resources for navigating systemic challenges and personal hardships associated with caregiving. They covered the impact of siblings in advocacy and policy reform, stressing the importance of sibling voices in shaping public and health policies that affect their families directly. They also highlighted the need for culturally competent care, financial planning resources, and more inclusive family support mechanisms. Councilmember Neward discussed her advocacy work, including producing a documentary titled "Natalie" to raise awareness about sexual abuse against individuals with disabilities. The documentary aims to shed light on survivors' experiences and the importance of advocacy in addressing such issues. They concluded by showing the trailer for the documentary and invited attendees to view their website at https://www.californiasibs.org/ for more information or to get connected.

Kecia Weller provided a public comment on this item, relaying her support for the important work of both The Natalie Project and CalSibs to prevent sexual violence against people with IDD.

13. **NEXT MEETING DATE AND ADJOURNMENT**
The next Council meeting will be held in person in Sacramento on May 21, 2024. Chair Witherspoon adjourned the meeting at 3:02 P.M.

Name	Action 1	Action 2	Action 3
Adler, Nicole	For	For	For
Ashe, Harold	For	For	For
Barnwell, Viviana	For	For	For
Beckley, Mark	For	For	Abstain
Billingsley, Joseph	For	For	NP
Bolourian, Yasamin	For	For	For
Brown, Jessica	For	For	For
Bycel, Lee	For	For	For
Cooper, Debra	For	For	Abstain
Ellis, Michael	For	For	For
Fujita, Harold	For	For	For
Gaona, Julie	For	For	For
Garnica, Julio	For	For	For
Imparato, Andy	For	NP	NP
Jones, Sonia	For	For	For
Liu, Cathay	For	For	For
McNair, Joyce	For	For	For
Neward, Julie	For	For	For
Nieves, Nestor	For	For	For
Ponton, Kara	For	For	For
Reyes, Alex	For	For	For
Ryan, Rosanna	NP	For	For
Stahmer, Aubyn	For	For	For
Wavrin, Nick	NP	NP	Abstain
Winfield, Brian	For	For	NP
Witherspoon, Wesley	For	For	For
Ybarra, Eric	For	For	For
Yin, Larry	For	NP	For

MAY 21, 2024

AGENDA ITEM 6.
INFORMATION ITEM

STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

Chair Report and Committee Reports

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

SCDD Committee reports have been provided for informational purposes.

Attachments
The Statewide Self-Determination Committee (SSDAC) met on 04/15/24.
The Executive Committee met on 04/16/24.

Handouts
The Employment First Committee will meet on 05/16/24.
The Self-Advocates Advisory Committee (SAAC) will meet on 05/20/24.

AGENDA ITEM 6A.

STATEWIDE SELF-DETERMINATION ADVISORY COMMITTEE (SSDAC) SUMMARY

Date of Meeting
April 15, 2024

Meeting's Focus
The Statewide Self-Determination Advisory Committee (SSDAC) met on April 15th, 2024. The primary purpose of the meeting was to discuss the public recommendations that were outlined in the SSDAC's FMS Townhall Report. Committee members provided feedback about which recommendations they support, and provided input on additional context or recommendations they would like to see included in a follow-up report to the Department of Developmental Services. The thoughts shared during this discussion will be synthesized into a draft report for initial review by the SSDAC Workgroup.

The Committee received updates from Co-Chair Rick Wood that included six new additions to the SSDAC Best Practices Platform, and a brief review of how local SDACs are spending Self-Determination Program Implementation Funding. State Council on Developmental Disabilities (SCDD) Executive Director Aaron Carruthers provided an update on SDP Orientations and informed the Committee of SCDD's support of Senate Bill 1281. The Committee also received updates from DDS and the Office of the Ombudsperson.

Members discussed the upcoming Co-Chair election, which will take place at the next SSDAC meeting. To allow for continuity in leadership, members expressed support for removing the existing limit on the number of terms a Co-Chair may serve. Members also expressed the desire to establish mentorship for those who are interested in assuming a leadership role and asked that the SSDAC Workgroup create a program or resources to accomplish this.

Items Acted Upon
The Committee acted to approve the September 2023 meeting minutes as presented.

Future Meeting Dates
To be determined.

AGENDA ITEM 6B.

EXECUTIVE COMMITTEE SUMMARY

Date of Meeting
April 16, 2024

Meeting's Focus
The Executive Committee met on April 16, 2024. The meeting's focus centered on three sponsorship requests, an SCDD budget update, and the Executive Director's report.

Executive Director Carruthers provided members with a report sharing updates on Council supported bills. Additionally, he shared updates on the Master Plan for Developmental Services' first meeting of the Stakeholder Committee, comments by Secretary Mark Ghaly and Department of Developmental Services Director Nancy Bargmann, and next steps. He also relayed details on a recent LA Times article on the Self-Determination Program. Moreover, he shared poll results from Councilmembers that identified being an effective change agent as the Council's highest priority for training sessions. Lastly, he shared details on the Federal Government's budget for October 2023-September 2024, welcomed Personnel Officer Thuy, said goodbye to Counsel Brian Weisel, updates on recruitment, and relayed updates on the May in-person Council meeting.

Items Acted Upon
- Approval of the February 2024 meeting minutes.
- Approval of sponsorship requests from El Arc of California, San Diego State University Research Foundation, and the Exceptional Family Resource Center.

Future Meeting Date
June 18, 2024

MAY 21, 2024

AGENDA ITEM 7.
INFORMATION ITEM

STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

Executive Director Report and Staff Reports

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

Attachments
Chief Deputy Director Report
Deputy Director of Policy and Public Affairs Report
Deputy Director of Regional Office Operations Report
C.R.A./V.A.S. Update Report
QA Project Update Report

Handout
Executive Director Report

Chief Deputy Director's Report: May 2024

The Chief Deputy Director (CDD) continues overseeing operational matters, in concert with staff, and identifying organizational tools to assist the team. Time also has been spent meeting with staff, management, and external partners on various programs, program policy, and implementation, including the Supported Decision-Making Technical Assistance Program (SDM TAP).

Other projects include collaborative conversations with DDS partners regarding the CRA/VAS and QA programs, and other opportunities/project ideas regarding employment and quality assessment surveys. Conversations address funding and contracting matters as well as program efficiencies such as digital surveying strategies.

The Chief Deputy Director continues to facilitate and oversee SCDD's administrative functions such as budget management, contracts, and day-to-day operations.

- o Continued planning, organizing, and implementation steps with the Supported Decision-making Technical Assistance Program team and external partners. Ongoing efforts included external engagement with partners and other interested entities (e.g., the Judicial Council), finalizing contract scopes of work, deliverables, and communication strategies.

- o Assisted in the review and evaluation of contract applications for technical assistance and support and worked with the team engaging universities as potential contractors to support project evaluation and a resource library.

- o Supported the SDM-TAP team in finalizing grant objectives and scope. The content has been informed by, and responsive to, community conversations –a series of stakeholder discussions regarding individual and family experience with supported decision making and what was successful and/or challenging for those pursuing or interested in supported decision making.

o Participated in grant Request for Proposal reviews and scoring and identified several awardees. A public announcement is anticipated on May 10. Awardees will begin their projects on July 1, 2024.

o Reviewed program and administrative contracts for approval.

o Reviewed and approved numerous invoices for program, administrative, and operational services.

o Worked with the budget manager on numerous fiscal matters and reporting (e.g., accounting and expenditure tracking) and drills from control agencies such as the Department of Finance.

o Concluded contract discussions, with partner agency DDS, on the Self-determination Program Orientation and Quality Assurance Project contracts. Each of these is a multi-year agreement.

o Welcomed our new Personnel Office on April 8, 2024. Thuy Le joins us from the California Office of Emergency Services and brings a wealth of experience and expertise in personnel and human resources.

o Coordinated several key recruitments including staff counsel and the Deputy Director for Policy and Public Affairs. Interviews are planned for May.

MAY 2024 REPORT POLICY, AND PUBLIC AFFAIRS

POLICY UPDATE

- ✓ **2024 Bills:** SCDD continues to monitor all bills that could affect the I/DD community and continues to review all bill alerts daily, as well as review bill inquiries. This year's list of bills we support continues to move through the legislation process, with most of the bills now in the Appropriations Committee.

- ✓ **SB 37:** relating to a housing subsidy for aging individuals and people with disabilities age 50 and over continues to move through the legislative process. SCDD is a co-sponsor in a powerful coalition of diverse membership. Due to the current and growing budget deficit, the bill was amended to reduce its cost from $500,000 to $25,000 and made it a pilot program to encourage more work on this important policy in the future. The bill has passed the Senate and is now in the Assembly awaiting to be assigned to a policy committee. We continue to meet to discuss ways to advocate for the bill in the budget.

- ✓ **Employment First Coalition**: In 2023 this diverse coalition championed the creation of the Employment First Office at HHS. We continue to meet on a weekly basis, compiling recommendations, and expertise that we will share with HHS. It is our hope that they will use our recommendations in implementing the new office come July 2024. The coalition has also decided to focus their efforts on creating recommendations for the **Master Plan on Developmental Disabilities**.

- ✓ Colaboración Latina now ***Colaboración Latina California*** (via UC Davis Health-MIND Institute): Collaboration group is comprised of different Spanish speaking agency staff. These meetings are a forum for discussing issues affecting the Latino I/DD community. The group recently added "California" to its title with the purpose of connecting as many professionals as possible from different agencies throughout the state. Under this new name, the first meeting titled *History, Impact and Practical Use of Laws for Persons with I/DD* will review current laws, cultural barriers experienced by immigrants/Spanish speakers and discussion on how to reduce the barriers to accessing services. The meeting is set for September 5th.

- ✓ **Inclusive College Opportunities Coalition** passed bill AB 447 last year in 2023 but it did not have funding. This year, the coalition has been working daily with the Governor's staff to ensure $2million recurring funding in this year's state budget for the CA Center for Inclusive College, that will connect agencies (DOR, Regional Centers) to college opportunities for students with I/DD. With the May Revise deadline approaching in May, we meet daily seeking support from

different agencies and advocating for funds in the budget. Additionally, the coalition was instrumental in the Governor proclaiming **May 1ˢᵗ as Inclusive Post-Secondary Education Day**.

✓ **Deaf Steering Committee:** reviewed several events and trainings that are encouraging deaf awareness in the state and locally, such as the state training on *Neurological Conditions in Persons that are Deaf/Hard of Hearing.* DDS discussed the program Early Start LEAD that provides hearing screenings for newborns and hopes to build more solid partnerships and increase training with LEAD. DDS will meet with LEAD to identify areas to strengthen. The committee also discussed building service providers capacity. One of the recommendations is to have more deaf culture built into the best practices. It is important for providers to have background on Deaf culture. What about direct service providers that are deaf? If we want to serve the deaf community, they should have leadership roles in changes. Include the deaf in creating for the deaf. Also, there are challenges in providers understanding the vendorization process—it is a different process in each regional center (work is underway for standardization already.) Qualifications for Communication Assessors was discussed – what are the criteria being used, the standards for qualifications of Assessors, what are we looking for in Assessors? Perhaps Speech Pathologists should be used for some assessments that are difficult. Meet with other states on how to re-do training on communication assessments.

COMMUNICATIONS UPDATE

OUTREACH

✓ Statewide Self-Advocacy Network (SSAN) Developmental Disabilities Awareness Month (DDAM) March 27 Webinar: Created a flyer and email blast to promote a special SSAN webinar limited to 500 participants, for self-advocates and their family members, nationwide. Messaging was disseminated to over 12,000 unique email addresses, including the CA Legislature via Constant Contact, and shared via the Council's primary social media pages.

✓ April News and Events email blast: Featured messaging about HQ career opportunities, SDM-TAP grants and contracts, Cycle 47 Program Development Grants, and SCDD meetings. Messaging was disseminated to over 11,000 unique email addresses, including the CA Legislature via Constant Contact, and shared via the Council's primary social media pages.

- ✓ SCDD HR Recruitment: To aid in SCDD staff recruitment efforts, Comms created a flyers to promote the following positions: Staff Services Manager: [\\cdss39pfps1\scd\users\mcave\Comms Request Creative 2022-24\SCDD HR\2024\Completed\Posted\SSM I_HQ final filing date March 29_State Plan Vacancy.png](), Associate Governmental Program Analyst (AGPA): [\\cdss39pfps1\scd\users\mcave\Comms Request Creative 2022-24\SCDD HR\2024\Completed\Posted\FINAL - ReAdvert - SBRO final filing date April 8 - AGPA Job Vacancy.png](), Deputy Director of Policy & Public Affairs (DDPPA): [\\cdss39pfps1\scd\users\mcave\Comms Request Creative 2022-24\SCDD HR\2024\Completed\ReAdvert of DDPPA_HQ final filing date May 5_OPPA Vacancy.png](), and In-House Legal Counsel: [\\cdss39pfps1\scd\users\mcave\Comms Request Creative 2022-24\SCDD HR\2024\Completed\Final_AttorneyIII_HQ Vacancy final filing date May 1.png.]() The AGPA and DDPPA positions were included in the April News & Events Blast. All positions were advertised via SCDD social media platforms: Facebook, X (formerly Twitter), Instagram, and LinkedIn, with the exception of In-House Legal Counsel (LinkedIn only) to a collective social media audience of nearly 9,000 followers.

- ✓ May News & Events email blast: Included messaging that highlighted messaging Cycle 47 Program Development Grants, and SCDD meetings. The blast also introduced a subscription option to the Storytellers Blog Page. Messaging was disseminated to over 11,000 unique email addresses, including the CA Legislature via Constant Contact, and shared via the Council's primary social media pages.

- ✓ Edited and published blog stories for the Storytellers blog page.

- ✓ Participated in legislative outreach planning and coalition meetings.

- ✓ Assisted regional offices, Council committees, and partners with brainstorming, and disseminating information about existing and upcoming initiatives (including webinars and live in-person events) via statewide email or social media.

BRANDING

- ✓ Completed: Landing page and email template creative for Storytellers Blog Page subscription
- ✓ Completed: Creative for use on social media to support and promote the SDM-TAP grants and contracts. Published on all SCDD social media platforms. [\\cdss39pfps1\scd\users\mcave\Comms Request Creative 2022-24\SDM-TAP\Comms Request Form\2024\FINAL $3M FOR SDM-TAP PROJECTS!.png]()

✓ Completed: Developed creative for use on social media to support and promote the Cycle 47 project development grants. Published on all SCDD social media platforms. \\cdss39pfps1\scd\users\mcave\Comms Request Creative 2022-24\State Plan Team\FINAL $300K Cycle 45 Gramts.png

REPORT FROM: TANIA MORAWIEC DEPUTY DIRECTOR, PLANNING & REGIONAL OFFICE OPERATIONS REPORT RANGE 3/6/24-5/7/24

Activity & Impact

SCDD staff have been focused on technical assistance, community events, and training this reporting period.

- SCDD staff conducted 62 trainings.
- Provided 98 Self Advocate technical assistance services.
- Provided 197 Family Advocate technical assistance services.
- Provided 105 technical assistance services to "other" individuals like professional service providers or educators.

Legislative breakfast held in Central Coast.

Staff members David Grady and Jennifer Lucas made sure to advocate for SCDD priorities and showcase their work in the community.

Co- Mc Evan Barnwell and his mom, Councilwoman Viviana Barnwell contributed to the success of this event. Evan did an amazing job introducing Honored Guest Speakers.

Every year San Andreas Regional Center hosts an informative luncheon to bring the legislative and developmental disability community together to hear from each other. Elected leaders who spoke at the luncheon affirmed their support of the developmental disability community while expressing the need make their voices heard. San Andreas Regional Center is fortunate to have legislators such as Senator Dave Cortese, Assembly Member Ash Kalra, City of San Jose Vice Mayor Rosemary Kamei, Santa Clara County Supervisor Joe Simitian, and City of Soledad Mayor Anna Velasquez supporting our community.

SCDD staff prepare impact sheets to share with local legislators, so they are better informed about our advocacy, systems change and capacity building work.

Highlights of San Jose SCDD work include over 90 capacity-building & systems change activities and projects:

•Training self-advocates, family advocates and professionals (law enforcement, Court Appointed Special Advocates, Community Care Licensing analysts, IDD service providers, etc.) on topics including but not limited to special education, IDD and behavioral health, disaster preparedness, supported decision making, employment and the Lanterman Act & disability rights.

•Participating in local and county committees (voting accessibility, self-determination, employment, etc.) and outreach activities (resource fairs and events)

•Distributing over 100 emergency preparedness go-bags to under-served communities.

•Over 500 Technical Assistance cases addressed across seven counties and beyond (77 self-advocates, 328 family advocates and 130 professionals).

Autism and Public Safety training with the Golden State Warriors

SCDD staff, Sheraden Nicholau, was a SME, special guest and co-trainer for this training event—hosted by the Golden State Warriors and Chase Center and led by an autism-focused foundation with ties to sports venues and media outlets—Joshua's Gift. SCDD has worked with this foundation in the past to further develop their understanding of public safety policy (as they train LEAs and have a voluntary registry program rolling out) and has co-presented with them for several law enforcement regional training center classes over the years.

80-90 people attended the training: Several first responder agencies there, including SFFD, SFPD, Fremont PD, Newark PD, Alameda Co Sheriffs, etc.

Warrior Draymond Green was heavily involved and carved out extra time towards the end of the day to time to spend 1:1 time with family advocates and self-advocates that were involved in the training panels.

Small Business Fair in San Diego

Many people who have disabilities are interested in developing a small business or microenterprise. Some people pursue this as part of customized employment or self determiniation programming. Vendors at this fair included artists, bakers, upsellers, who resell hand selected vintage goods, jewelry makers, and a vocational provider who works with multi media artists in a gallery.

As part of sub minimum wage phase out with SB 639, SCDD staff, support training and increased awareness of competitive integrated employement which can include small business development. SCDD is expanding its success stories in this area and developing a resource archive that includes tools like a plain language small business planning guide.

CRA/VAS

SCDD AT WORK INSIDE CALIFORNIA
DDS STATE-OPERATED FACILITIES

CENSUS As Of May 1, 2024:   215

SCDD commemorates 25 years of interagency collaboration with DDS to serve individuals residing in and transitioning from the DDS California state facilities. SCDD, through the CRA/VAS Program, facilitated the successful closures of the following Developmental Centers - Sonoma, Agnews, Fairview, and Lanterman and Sierra Vista Community Facility. Stockton and Camarillo DC closed prior to 1998. CRA and VAS serves the newly created DDS STAR crisis units. From an institutional population of approximately 5000 individuals in 1998 down to approximately 300 in 2023, SCDD was a key partner in California's deinstitutionalization of individuals with intellectual / developmental disabilities. Thank You current and former CRA and VAS team members. Your work these past 25 years improved thousands of lives.

Program Activity for March and April 2024

Canyon Springs Community Facility and Desert STAR Unit

CRA facilitated virtual meetings between CS clients and their Regional Center service coordinators to increase dialogue about future transition planning. CRA is monitoring impact of SB 639 on vocational services at CS. CRA attended 6 IPP/special meetings, 4 human rights/behavior meetings; conducted 2 staff trainings on rights, and 3 self-advocacy meetings. VAS filed a WIC Section 4731 complaint for violation of least restrictive environment for one individual awaiting transition. VAS attended 48 IPP/specials, 31 transition meetings, and 2 human rights/behavior meetings, attended 4 court hearings, facilitated 1 self advocacy event.

Desert STAR unit will cease accepting new admissions on June 30, 2024. Individuals currently admitted will remain until their commitment expires.

Census
Canyon Springs: 34
Desert STAR: 7

Porterville Developmental Center

CRA advocated for lesser restrictive alternatives to proposed denial of rights plans. CRA attended 15 IPP/special meetings; 3 transition meetings, 21 Human Rights and Behavior committee meetings, 5 denial of rights reviews; and 1 self advocacy event. VAS facilitated increased staff training and blood draws for client with known med toxicity history. VAS advocating for greater supports for person in SLS. VAS program attended 10 IPP/special team meetings; and 35 transition planning meetings, 2 denial of rights, facilitated 1 self-advocacy event.

Census
Porterville DC:
174

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Quality Assessment Project (QAP) Report
May 2024

Eligibility for Family Surveys

Family Surveys collect demographic information on both the individual receiving services ('family member') as well as the person who fills out the survey (the 'respondent') and information on services and supports received.

Child Family Survey (CFS): Mailed to families who have a child family member (ages 17 and under) who lives with the respondent and receives at least one regional center funded service in addition to case management.

Adult Family Surveys (AFS): Mailed to families who have an adult family member (ages 18+) who lives with the respondent and receives at least one regional center funded service in addition to case management.

Family Guardian Survey (FGS): Mailed to families who have an adult family member (ages 18+) who lives in the community (outside the family home) and receives at least one regional center funded service in addition to case management.

Family Survey Cycle

The NCI Family Survey Cycle collection continues with **14,897** completed survey received in the mail and an additional **5,381** surveys directly entered online by family members.

The online data entry system is available to English speaking family members only, but DDS plans on making the system available in the future in multiple languages. Currently, the print version of each survey is available in 18 different languages. SCDD mails each survey in the language identified by the Regional Center.

The breakdown of these completed surveys by regional center and survey type, as well as by ethnoracial categories can be found in the following pages. Those ethnoracial categories identified in the Population Plan competed by UC Davis include Asian, Black/African American, Hispanic, Other and White.
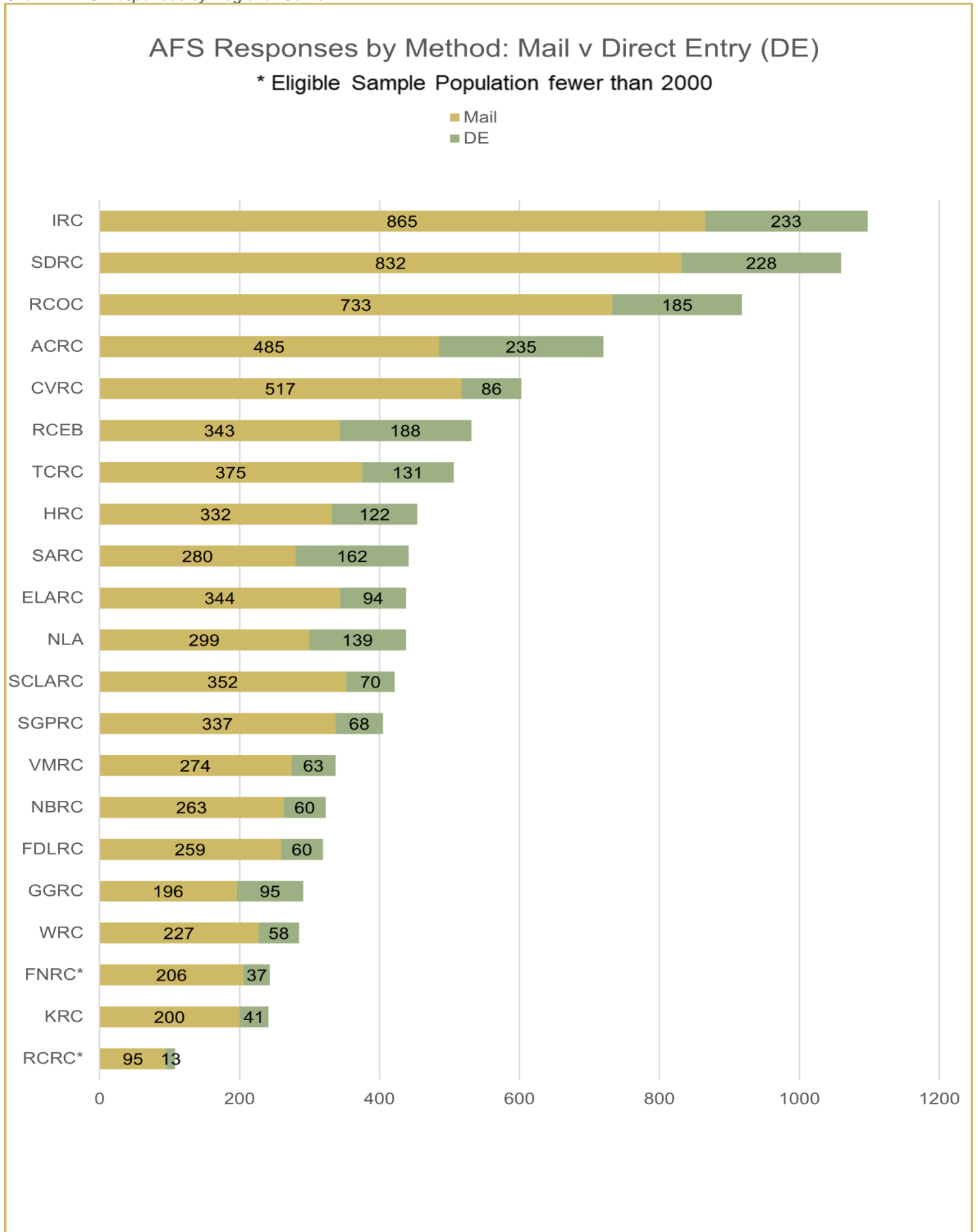
AFS Responses by Method: Mail v Direct Entry (DE)

* Eligible Sample Population fewer than 2000

■ Mail
■ DE

Regional Center	Mail	DE
IRC	865	233
SDRC	832	228
RCOC	733	185
ACRC	485	235
CVRC	517	86
RCEB	343	188
TCRC	375	131
HRC	332	122
SARC	280	162
ELARC	344	94
NLA	299	139
SCLARC	352	70
SGPRC	337	68
VMRC	274	63
NBRC	263	60
FDLRC	259	60
GGRC	196	95
WRC	227	58
FNRC*	206	37
KRC	200	41
RCRC*	95	13

CFS Responses by Method: Mail v Direct Entry (DE)
Eligible Population fewer than 2000

Legend: ■ Mail ■ DE

Regional Center	Mail	DE
SDRC	372	250
ACRC	366	192
IRC	303	191
NLA	311	160
TCRC	265	94
CVRC	229	100
RCOC	180	133
HRC	210	96
RCEB	164	131
SARC	183	106
VMRC	199	71
ELARC	150	91
SCLARC	169	72
FDLRC	130	95
KRC	157	50
SGPRC	124	74
NBRC	141	46
WRC	107	54
GGRC*	82	47
FNRC	93	33
RCRC*	66	12

FGS Responses by Method: Mail v Direct Entry (DE)
Eligible population fewer than 2000

■ Mail   ■ DE

Regional Center	Mail	DE
SDRC	352	99
ACRC	316	67
RCEB	254	104
SARC	243	102
TCRC*	229	59
NLA	200	60
RCOC	187	70
GGRC*	178	61
IRC	176	43
NBRC*	134	39
VMRC*	129	27
SGPRC	124	28
CVRC	109	38
FNRC*	110	20
WRC*	74	21
KRC*	64	16
ELARC*	59	16
FDLRC*	52	15
RCRC*	42	9
HRC*	35	12
SCLARC*	15	9

Figure 1: AFS Completed by Race Ethnicity

AFS Completed by Race/Ethnicity

** Regional Centers where the eligible population (N) is less than 2000

	Goal	Complete	% Goal
Alta California	400	717	
Asian	45	64	142%
Black	49	58	118%
Hispanic	78	85	109%
Other	33	96	291%
White	195	414	212%
Central Valley	400	600	
Asian	30	30	100%
Black	23	33	143%
Hispanic	241	283	117%
Other	13	38	292%
White	93	216	232%
East Bay	400	530	
Asian	92	90	98%
Black	77	71	92%
Hispanic	96	107	111%
Other	26	63	242%
White	109	199	183%
Eastern LA	400	438	
Asian	59	69	117%
Black	4	6	150%
Hispanic	294	301	102%
Other	10	14	140%
White	33	48	145%
Far Northern**	400	240	N = 1712
Asian	13	3	23%
Black	9	5	56%
Hispanic	63	22	35%
Other	19	21	111%
White	296	189	64%
Frank D. Lanterman	400	321	
Asian	55	47	85%
Black	29	23	79%
Hispanic	199	159	80%
Other	9	7	78%
White	108	85	79%
Golden Gate	400	287	
Asian	148	96	65%
Black	27	17	63%
Hispanic	100	35	35%
Other	27	33	122%
White	98	106	108%

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Harbor	400	454	
Asian	61	66	108%
Black	44	31	70%
Hispanic	178	137	77%
Other	37	68	184%
White	80	152	190%
Inland	400	1091	
Asian	19	50	263%
Black	50	123	246%
Hispanic	211	450	213%
Other	20	69	345%
White	100	399	399%
Kern	400	245	
Asian	14	16	114%
Black	35	21	60%
Hispanic	217	87	40%
Other	19	11	58%
White	115	110	96%
North Bay	400	323	
Asian	35	22	63%
Black	42	26	62%
Hispanic	118	65	55%
Other	35	35	100%
White	170	175	103%
North LA County	400	437	
Asian	30	42	140%
Black	42	33	79%
Hispanic	195	165	85%
Other	11	28	255%
White	122	169	139%
Orange County	400	917	
Asian	78	136	174%
Black	7	16	229%
Hispanic	145	254	175%
Other	44	97	220%
White	126	414	329%
Redwood Coast**	400	107	N= 954
Asian	7	4	57%
Black	12	0	0%
Hispanic	67	10	15%
Other	26	8	31%
White	288	85	30%

Figure 3: AFS Completed by Race/Ethnicity (Continued)

	Goal	Complete	% Goal
San Andreas	400	443	
Asian	108	86	80%
Black	9	5	56%
Hispanic	160	155	97%
Other	27	42	156%
White	96	155	161%
San Diego	400	1056	
Asian	38	97	255%
Black	27	50	185%
Hispanic	185	360	195%
Other	28	106	379%
White	122	443	363%
San Gabriel/Pomona	400	405	
Asian	60	50	83%
Black	21	18	86%
Hispanic	244	215	88%
Other	21	26	124%
White	54	96	178%
South Central LA	400	422	
Asian	4	3	75%
Black	90	112	124%
Hispanic	292	288	99%
Other	8	6	75%
White	6	13	217%
Tri-Counties	400	510	
Asian	19	41	216%
Black	7	8	114%
Hispanic	185	118	64%
Other	16	37	231%
White	173	306	177%
Valley Mountain	400	337	
Asian	42	35	83%
Black	35	27	77%
Hispanic	167	85	51%
Other	22	28	127%
White	134	162	121%
Westside	400	285	
Asian	20	15	75%
Black	107	68	64%
Hispanic	155	99	64%
Other	33	22	67%
White	85	81	95%
	Goal	**Complete**	**% Goal**
Report Totals	8400	10165	121%
Asian	977	1062	109%
Black	746	751	101%
Hispanic	3590	3480	97%
Other	484	855	177%
White	2603	4017	154%

Figure 4: CFS Completed by Race/Ethnicity

CFS Completed by Race/Ethnicity

** Regional Centers where the eligible population (N) is less than 2000

	Goal	Complete	% Goal
Alta California	400	555	
Asian	53	74	140%
Black	42	32	76%
Hispanic	92	106	115%
Other	69	110	159%
White	144	233	162%
Central Valley	400	326	
Asian	23	24	104%
Black	15	9	60%
Hispanic	253	192	76%
Other	49	43	88%
White	60	58	97%
East Bay	400	283	
Asian	99	47	47%
Black	50	17	34%
Hispanic	137	78	57%
Other	44	80	182%
White	70	61	87%
Eastern LA	400	241	
Asian	52	31	60%
Black	5	1	20%
Hispanic	296	164	55%
Other	25	26	104%
White	22	19	86%
Far Northern	400	126	
Asian	9	1	11%
Black	7	1	14%
Hispanic	81	30	37%
Other	28	11	39%
White	275	83	30%
Frank D. Lanterman	400	224	
Asian	52	37	71%
Black	24	9	38%
Hispanic	210	95	45%
Other	8	9	113%
White	106	74	70%
Golden Gate	400	129	
Asian	117	48	41%
Black	17	5	29%
Hispanic	143	29	20%
Other	49	12	24%
White	74	35	47%

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Harbor	400	306	
Asian	49	41	84%
Black	36	19	53%
Hispanic	203	154	76%
Other	69	51	74%
White	43	41	95%
Inland	400	487	
Asian	18	32	178%
Black	32	36	113%
Hispanic	181	176	97%
Other	103	129	125%
White	66	114	173%
Kern	400	205	
Asian	16	4	25%
Black	30	10	33%
Hispanic	244	120	49%
Other	25	17	68%
White	85	54	64%
North Bay	400	187	
Asian	26	9	35%
Black	28	14	50%
Hispanic	165	65	39%
Other	74	36	49%
White	107	63	59%
North LA County	400	471	
Asian	28	42	150%
Black	39	25	64%
Hispanic	224	246	110%
Other	17	42	247%
White	92	116	126%
Orange County	400	312	
Asian	85	74	87%
Black	7	3	43%
Hispanic	144	83	58%
Other	83	70	84%
White	81	82	101%
Redwood Coast**	400	78	N= 1088
Asian	7	1	14%
Black	7	0	0%
Hispanic	100	16	16%
Other	48	10	21%
White	238	51	21%
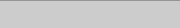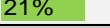
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	Goal	Complete	% Goal
San Andreas	400	301	
Asian	103	75	73%
Black	4	2	50%
Hispanic	187	135	72%
Other	54	38	70%
White	52	51	98%
San Diego	400	620	
Asian	35	74	211%
Black	16	25	156%
Hispanic	186	223	120%
Other	83	148	178%
White	80	150	188%
San Gabriel/Pomona	400	199	
Asian	71	38	54%
Black	14	3	21%
Hispanic	269	102	38%
Other	16	35	219%
White	30	21	70%
South Central LA	400	240	
Asian	2	2	100%
Black	57	40	70%
Hispanic	317	189	60%
Other	20	7	35%
White	4	2	50%
Tri-Counties	400	359	
Asian	12	15	125%
Black	4	3	75%
Hispanic	225	183	81%
Other	32	32	100%
White	127	126	99%
Valley Mountain	400	273	
Asian	45	37	82%
Black	31	14	45%
Hispanic	202	122	60%
Other	42	37	88%
White	80	63	79%
Westside	400	160	
Asian	17	10	59%
Black	94	38	40%
Hispanic	169	56	33%
Other	45	27	60%
White	75	29	39%
	Goal	**Complete**	**% Goal**
Report Totals	8400	6082	72%
Asian	919	716	78%
Black	559	306	55%
Hispanic	4028	2564	64%
Other	983	970	99%
White	1911	1526	80%

Figure 7: FGS Completed by Race/Ethnicity

FGS Completed by Race/Ethnicity

** Regional Centers where the eligible population (N) is less than 2000

	Goal	Complete	% Goal
Alta California	400	381	
Asian	18	18	100%
Black	55	23	42%
Hispanic	34	16	47%
Other	20	25	125%
White	273	299	110%
Central Valley	400	145	
Asian	14	3	21%
Black	37	8	22%
Hispanic	129	32	25%
Other	11	5	45%
White	209	97	46%
East Bay	400	357	
Asian	44	32	73%
Black	82	32	39%
Hispanic	38	21	55%
Other	14	26	186%
White	222	246	111%
Eastern LA**	400	74	N= 797
Asian	49	8	16%
Black	14	2	14%
Hispanic	194	23	12%
Other	6	3	50%
White	137	38	28%
Far Northern**	400	130	N=1665
Asian	4	3	75%
Black	10	3	30%
Hispanic	18	7	39%
Other	18	5	28%
White	350	112	32%
Frank D. Lanterman**	400	67	N=721
Asian	60	9	15%
Black	41	5	12%
Hispanic	86	8	9%
Other	7	2	29%
White	206	43	21%
Golden Gate**	400	236	N=1683
Asian	54	22	41%
Black	46	10	22%
Hispanic	36	11	31%
Other	18	15	83%
White	246	178	72%

Figure 8: FGS Completed by Race/Ethnicity (continued)

Harbor**	**400**	**47**	**N=997**
Asian	48	4	8%
Black	64	5	8%
Hispanic	83	6	7%
Other	21	5	24%
White	184	27	15%
Inland	400	216	
Asian	10	9	90%
Black	51	13	25%
Hispanic	93	34	37%
Other	13	5	38%
White	233	155	67%
Kern**	**400**	**80**	**N=1115**
Asian	12	5	42%
Black	46	2	4%
Hispanic	96	9	9%
Other	15	5	33%
White	231	59	26%
North Bay**	**400**	**173**	**N= 1675**
Asian	14	3	21%
Black	41	10	24%
Hispanic	32	6	19%
Other	16	3	19%
White	297	151	51%
North LA County	400	258	
Asian	20	13	65%
Black	44	7	16%
Hispanic	73	27	37%
Other	6	7	117%
White	257	204	79%
Orange County	400	251	
Asian	40	31	78%
Black	11	5	45%
Hispanic	56	21	38%
Other	30	20	67%
White	263	174	66%
Redwood Coast**	**400**	**50**	**N=653**
Asian	4	0	0%
Black	6	0	0%
Hispanic	15	0	0%
Other	24	2	8%
White	351	48	14%

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Figure 9: FGS Completed by Race/Ethnicity (continued)

	Goal	Complete	% Goal
San Andreas	400	346	
Asian	40	25	63%
Black	18	6	33%
Hispanic	80	35	44%
Other	18	19	106%
White	244	261	107%
San Diego	400	451	
Asian	18	10	56%
Black	35	17	49%
Hispanic	78	43	55%
Other	15	28	187%
White	254	353	139%
San Gabriel/Pomona	400	151	
Asian	32	15	47%
Black	40	12	30%
Hispanic	122	19	16%
Other	16	7	44%
White	190	98	52%
South Central LA**	400	24	N=549
Asian	11	0	0%
Black	200	11	6%
Hispanic	124	5	4%
Other	15	2	13%
White	50	6	12%
Tri-Counties**	400	287	N=1939
Asian	13	9	69%
Black	12	7	58%
Hispanic	74	18	24%
Other	12	17	142%
White	289	236	82%
Valley Mountain**	400	158	N= 1649
Asian	20	9	45%
Black	42	4	10%
Hispanic	62	17	27%
Other	14	6	43%
White	262	122	47%
Westside**	400	94	N=848
Asian	19	6	32%
Black	100	17	17%
Hispanic	68	7	10%
Other	22	5	23%
White	191	59	31%
	Goal	**Complete**	**% Goal**
Report Totals	8400	3976	47%
Asian	544	234	43%
Black	995	199	20%
Hispanic	1591	365	23%
Other	331	212	64%
White	4939	2966	60%

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About National Core Indicators

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

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

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

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

To view the DDS NCI Dashboard go to:

https://www.dds.ca.gov/rc/nci/

For more information about the NCI go to:

https://www.nationalcoreindicators.org/

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

QAC Regional Center Assignments

QAC: Vacant
Support Staff: Sarah Wirrig
Far Northern
North Bay
Redwood Coast

Ron Usac
Support Staff: Valerie Buell
East Bay
San Andreas

George Lewis
Support Staff: Vacant
Alta California
Central Valley
Valley Mountain

Lia Cervantes-Lerma ▪ Brianna Reynoso ▪ Jenny Villanueva
Support Staff: Austin Murphy and Marina Bchtikian
East Los Angeles
Frank D. Lanterman
Harbor
North Los Angeles
San Gabriel Pomona
South Central Los Angeles
Westside

Angel Wiley
Priscilla Huang, SSA
SSA: Vacant
Staff Support: Vacant
Golden Gate
Orange County
San Diego

Matoya Terrell
Support Staff: Jose Valle
Inland
Kern
Tri-Counties

MAY 21, 2024

AGENDA ITEM 8.
ACTION ITEM

STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

SCDD 2024-2025 Budget

Councilmember Brian Winfield (DDS) was invited to present updates regarding the Governor's May Budget Revise for Fiscal Year (FY) 2024-2025.

In March 2024, Executive Director Aaron Carruthers presented the draft 2024-2025 budget to the Council. For this item, Executive Director Carruthers will present any changes or updates from the March 2024 presentation. The revised draft SCDD 2024-2025 budget is included in the packet along with supporting materials for member consideration. The 2024-2025 fiscal year begins July 2024 and ends June 2025. Members will vote on whether to approve the 2024-2025 budget.

Attachments
Budget PPT
Budget Cover Page
SCDD FY 2024-25 Budget Display

Handout(s)
May be additional handout(s) day of meeting.

Action Recommended
Adopt the 2024-2025 SCDD Budget.

State Council on Developmental Disabilities

Final Draft Budget

July 1, 2024- June 30, 2025

Key Takeaways

➢The Basic State Grant and CRA/VAS program budgets are unchanged from when the Council saw this in March 2024.

➢The Quality Assessment Project budget increased by $233,000. This adjusted budget, agreed to between DDS and SCDD, includes increased operations costs.

➢The SDM-TAP budget reflects available funds at the start of state Fiscal Year 2024-25.

Quality Assessment Project $4,017,000

➢ SCDD renewed its interagency agreement with the Department of Developmental Services for three years.

➢ The agreement supports staff and operations overseeing in-person survey and family survey projects for clients receiving services in regional centers.

➢ The SFY 24-25 budget increased by $233,000 from the budget presented to the Council in March 2024. This change includes increased OE&E expenses related to the in-person survey cycle next fiscal year, such as paying surveyors.

Supported Decision-Making Technical Assistance Program $1,462,000

➢ SFY 24-25 balance from one-time $5 million reflects expenditures to date and pending grant awards and contract agreements taking effect on July 1.

➢ The funding supports grants, contracts, and operational costs for the program.

TOTAL PRELIMINARY 24-25 COUNCIL BUDGET ALL PROGRAMS

Basic State Grant (BSG) Federal Funds $8,102,000

Quality Assessment (QA) State Contract $4,017,000

Client's Rights Advocates
Volunteer Advocacy(CRA/VAS) State Contract $1,694,000

Supported Decision-making Technical
Assistance Program $1,462,000

Total Council Budget $15,275,000

Questions?

State Council on Developmental Disabilities
State Fiscal Year 2024-25 Budget

Basic State Grant

The Council is asked to approve the State Fiscal Year 2024-25 (SFY 24-25) Basic State Grant Budget (BSG). Staff report there are no changes to the BSG portion of our budget since the Council reviewed it in March 2024. As noted in March:

- The total BSG budget for SFY 24-25 is $8,102,000.

- This balanced budget offset increased salaries and benefits occurring in SFY 24-25 with targeted reductions in other planned expenditures.

- The reductions match actual and trending spending patterns.

- No item will go unfunded because of reduced expenditures.

- Personal Services (Staff Salaries and Benefits) are budgeted at $6,378,000. This amount includes salary changes associated with approved labor agreements, merit salary increases, and an 8 percent salary savings resulting from vacant positions.

- Operating Expenses and Equipment is budgeted at $1,424,000 for the year.

- Community Program Development Grants are budgeted at $300,000 for SFY 24-25.

- This grant amount reflects the February 2024 recommendations from the Administrative and Executive Committees, presented to the Council in March, to maintain increased funding for these grants next fiscal year.

- This funding level is achieved by transferring the unspent $40,000 in SFY 2023-24 from the Estimated Unexpended Funds Available reserve to this line item.

Quality Assessment Project

Staff recently concluded budget and contract negotiations with the Department of Developmental Service (DDS) for the Quality Assessment Project. This three-year agreement will support staff and operations overseeing in-person survey and family survey projects for clients receiving services in regional centers. The average annual budget for this three-year agreement is $4.2 million.

The Quality Assessment project budget for SFY 24-25 ($4,017,000) shows a $233,000 increase from the budget presented to the Council in March 2024. This change covers increased operating expenses related to the in-person survey cycle in SFY 2024-25.

Clients' Rights Advocates/Volunteer Advocacy Program (CRA/VAS)

Funded by an interagency agreement with the DDS, this program supports SCDD staff who, in the case of CRA, ensure the rights of residents at DDS state-operated facilities are guaranteed, protected, and advocated. For VAS, SCDD serves as coordinator to, in part, recruit, train, and supervise volunteers providing advocacy for residents in DDS-operated facilities who do not have involved family or a conservator.

The Clients' Rights Advocates/Volunteer Advocacy Program budget is unchanged from March 2024: $1,694,000.

Supported Decision-making Technical Assistance Program (SDM-TAP)

As the Council is aware, the department received a one-time $5 million appropriation as part of the 2022 Budget Act. The funding supports grants, contracts, and operational costs for a Supported Decision-making Technical Assistance Program.

The SFY 2024-25 SDM-TAP budget ($1,462,000) reflects the balance of funding available because of expenditures to date, and pending grant awards and contract agreements that take effect on July 1.

Interagency Agreements

We also wish to update the Council two other interagency agreements, available for expenditure in the upcoming fiscal year. These include:

- An interagency agreement from DDS for organizing the Statewide Self-determination Advisory Committee. This is a five-year agreement ($215,000 annually), and funds personnel to organize and facilitate meetings as well as prepare reports and other written deliverables.

- A renewed DDS-funded multi-year interagency agreement for Self-determination Program (SDP) trainings/orientations. The self-determination program provides clients and their families with increased flexibility and choice, and greater control over decisions, resources, services, and supports. This agreement supports staff who organize and lead training sessions often with self-advocates. The average annual budget for SDP is $497,000.

State Council on Developmental Disabilities

Fiscal Year 2024-25 Proposed Budget
Revised May 2024

Categories	Council Budget	SCDD Budget - Other Sources			TOTAL
	*Basic State Grant	Quality Assessment	Clients' Rights Advocates/ Volunteer Advocacy	Supported Decisionmaking Technical Assistance Program	
	Federal Grant	State Contract	State Contract	Limited Term Program	
1. Personal Services:					
Net Salaries & Wages	$ 4,397,500	$ 1,523,000	$ 842,540	$ 238,000	$ 7,001,040
Temporary Help / Honorarium	$ 30,000	$ -	$ -	$ -	$ 30,000
Worker's Compensation	$ 45,000	$ 3,000	$ 5,000	$ 2,000	$ 55,000
Staff Benefits	$ 2,259,795	$ 819,858	$ 475,248	$ 136,000	$ 3,690,901
Less 8% Salary Savings From Vacancies	$ (354,000)				$ (354,000)
Total Personal Services	**$ 6,378,000**	**$ 2,346,000**	**$ 1,322,788**	**$ 376,000**	**$ 10,423,000**
2. Operating Expense and Equipment:					
General Expense	$ 38,000	$ 5,700	$ 5,000	$ 6,000	$ 54,700
Printing	$ 20,000	$ 26,000	$ 9,000	$ 3,000	$ 58,000
Communications	$ 45,000	$ 71,000	$ 10,000	$ 6,000	$ 132,000
Postage	$ 7,000	$ 21,000	$ 1,000	$ 3,000	$ 32,000
Travel-in-State :	$ 150,000	$ 60,000	$ 32,000	$ 8,000	$ 250,000
Out-of-State Travel	$ 7,000	$ -	$ -	$ -	$ 7,000
Training (Tuition and Registration)	$ 29,000	$ 10,000	$ 15,000	$ 5,000	$ 59,000
Facilities Operations (Rent)	$ 550,000	$ 225,000	$ 24,000	$ -	$ 799,000
Utilities	$ 8,000	$ 2,000	$ -	$ -	$ 10,000
Interdepartmental Services	$ 250,000	$ 204,000	$ 134,000	$ 3,000	$ 591,000
External Contract Services	$ 100,000	$ 110,000	$ 3,000	$ 615,000	$ 828,000
Information Technology	$ 190,000	$ 75,000	$ 45,000	$ 6,000	$ 316,000
Statewide Cost Allocation Plan (SWCAP)	$ 25,000	$ -	$ -	$ -	$ 25,000
Other Items of Expense	$ 5,000	$ 861,000	$ 93,000	$ 431,000	$ 1,390,000
Total Operating Expense and Equipment	**$ 1,424,000**	**$ 1,670,700**	**$ 371,000**	**$ 1,086,000**	**$ 4,552,000**
3. Community Grants / Other Projects	**$ 300,000**	**$ -**	**$ -**	**$ -**	**$ 300,000**
4. Total SCDD Budget by Source	**$ 8,102,000**	**$ 4,017,000**	**$ 1,694,000**	**$ 1,462,000**	**$ 15,275,000**
5. Total Basic State Grant Award	**$ 8,104,000**				
6. Difference between Total Council Budget and Basic State Grant Award	**$ 2,000**				
*Footnotes					
Cash Reserve	**$ 1,750,000**				
Estimated Unexpended Funds Available	**$ 355,000**				

MAY 21, 2024

AGENDA ITEM 9.
INFORMATION ITEM

STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

Person-Centered Thinking

Self-advocate Evan Barnwell and Councilmember Viviana Barnwell will present on person-centered thinking in planning and services.

In the past 30 years, the support systems for older adults and people with disabilities have changed dramatically. In that time, long-term services and supports have generally moved to embrace person-centered values which are dedicated to the idea that individuals should have the power to define and pursue their own vision for a good life. However, many systems still struggle to put person-centered principles into practice and deliver on these commitments.

People who facilitate person-centered planning play a key-role in ensuring a person-centered system. For the planning process to be truly person-centered, it is critical that staff who facilitate person-centered planning possess the skills to keep the focus on the person, cultivate connections, maximize choice and control, communicate clearly, and make sure the plan is implemented according to the person's wishes.

What is person-centered thinking, planning, and practice?

- **Person-centered thinking** focuses language, values, and actions toward respecting the views of the person and their loved ones. It emphasizes quality of life, well-being, and informed choice.

- **Person-centered planning** is directed by the person with helpers they choose. It is a way to learn about the choices and interests that make up a good life and identify the supports (paid and unpaid) needed to achieve it.

- **Person-centered practices** are present when people have the full benefit of community living and supports are designed to assist people as they work toward their desired life goals.

Source: National Center on Advancing Person- Centered Practices and Systems (NCAPPS) is an initiative from the Administration for Community Living (ACL) and the Centers for Medicare & Medicaid Services (CMS)

Attachments

Person-Centered Planning: Choosing the Approach that Works for the Person
Person-Centered Planning: Five skill areas facilitators should have to best support person-centered planning (Plain Language Version)

Handout(s)

May be additional handout(s) day of meeting.

Person-Centered Planning: Choosing the Approach that Works for the Person

January 2024

By Valerie J. Bradley

Introduction

Despite consensus regarding the content and conduct of person-centered plans (such as the person-centered planning requirements in the [Home and Community-Based Services Final Rule](#)), there has been less promising practice guidance on how to tailor the duration and extent of the planning process to the needs and wishes of the person. To be truly person-centered, the content and extent of the planning process should be tailored to the person's unique life circumstances. The intent of this resource is to reinforce the importance of aligning person-centered planning approaches with the wishes and needs of the person for whom the plan is being developed, rather than adopting a one-size-fits-all approach.

History and Background

The concept of person-centered planning was first conceived in the 1980s by a small number of people working in the U.S. and Canada including John O'Brien, Connie Lyle O'Brien, Beth Mount, Jack Pearpoint, Marsha Forest, and Michael Smull. It was initially developed to facilitate the movement of people with disabilities out of remote institutions into lives in the community (Inclusive Solutions, n.d.). From the start, person-centered planning was built on the values of inclusion and choice and tied paid and unpaid supports to goals and aspirations. Person-centered plans were originally designed as an alternative to plans based on the medical model of disability that led to an emphasis on deficits and to service decisions made by an array of clinical professionals. Historically, such deficit-based plans were developed mainly for the convenience of the provider, not to support the person's goals.

Rules developed by the Centers for Medicare and Medicaid Services now require service plans to follow person-centered principles that put each person's goals, preferences and needs at the center of the planning conversation. Although person-centered planning was developed as an alternative by leaders in the disability field, it is increasingly used to organize services and supports for a wide spectrum of people needing support across a range of settings. For instance, Kim and Park (2017) highlighted the power of person-centered planning for people with dementia and Lines et al. (2015) described the positive effect of person-centered planning principles in patient-centered care. When planning puts the person at the center of the conversation, research has shown that costs are reduced and, more importantly, that lives improve (Sanderson, et al., 2006).

What Self-Advocates Say

- Tia Nelis: ". . . the person with a disability is in charge of their plan. Everyone should listen to what the person with the disability wants; they choose who supports them and who comes to the meeting;"

- Liz Weintraub: "A person-centered plan is about what the person (me) wants. . . it's also important to LISTEN to the person when doing a person-centered plan, no matter if that's hard to do;"

- Nicole LeBlanc: "I think it . . . means that having control of your life and (be) empower(ed) to tell what you want in our life;"

- James Meadours: "One that is truly inclusive of Wishes, Hopes, Dreams of people with disabilities . . . staff that think outside the box"

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Person-centered planning is not one defined process, but a range or continuum of processes all underpinned by the same values base and goal – to provide supports necessary to assist people to gain agency in their lives. It should be thought of as an umbrella concept that encompasses different purposes, content, and frequency depending on the needs of the person and regulatory requirements. The overarching aim of planning for any purpose should be to reflect the person's wishes and aspirations.

Operationalizing Person-Centered Planning

Until the Home and Community-Based Services (HCBS) Final Rule in 2014, federal guidance from the Centers for Medicare and Medicaid Services regarding planning for HCBS waiver recipients was limited to specific waiver assurances including ensuring that they address assessed needs and health and welfare risks, include the person's goals and preferences, are updated when needs change, afford choice among services and providers, and include the opportunity to self-direct.

Since the release of the HCBS Final Rule, CMS has required that all people receiving HCBS services and supports must have a person-centered plan that meets criteria including that the plan be written in plain language, include people chosen by the person, is driven by the person, and reflects cultural considerations (see list of requirements in the Appendix).

However, the HCBS Final Rule does not include specific guidance related to the extensiveness of the plan and its alignment with a person's circumstances and need/preferences for support. While it is true that states providing HCBS waiver services are obligated to conduct person-centered plans for people receiving services and supports in ways that align with the process and plan standards set forth in the HCBS Final Rule, there is little guidance regarding how to tailor the wide-ranging aspects and components of person-centered planning to the immediate context of the person for whom the plan is being developed.

In this section, we outline different contexts and approaches to person-centered planning and highlight the importance of specifying the purpose and extensiveness of planning activities based on a person's circumstances and preferences.

Range of Planning Formats

Significant Life Event Planning
Over the past several decades since person-centered planning was first introduced, several formats have been developed to provide tools and a structure for the process such as PATH, MAPS, Personal Futures Planning, Essential Lifestyle Planning, and Charting the LifeCourse. Each of these approaches anticipates the need to respond to a significant life event such as transition from school to adulthood, retirement, movement into employment or supported housing, and other major life changes (see NCAPPS, Person-

Centered Thinking, Planning, and Practice: A National Environmental Scan of Foundational Resources and Approaches). Each entails a comprehensive process that involves the person with a disability and others in their life in a wide-ranging conversation about goals, potential obstacles, community supports, growth milestones and anticipated changes over time.

This form of planning requires supporting people to explore their options, understanding their long-term aspirations, linking paid and non-paid supports to those aspirations, and thinking about the trajectory of their lives. This type of planning does not always get into the details of how services are to be delivered on a day-to-day basis but instead tackles bigger issues like where and with whom to live or work, and how to make the transition happen smoothly. It also can be done by the person or a member of their circle of support, through private facilitators, or public support coordinators.

Ongoing and/or Periodic Person-Centered Service Planning

A more routine form of person-centered planning for people receiving HCBS occurs at least yearly as required by CMS. Some states may require more frequent person-centered plans depending on the population. Periodic person-centered service planning is convened by a case manager or coordinator, or public human services agency to review the allocation of public resources, assess progress, determine whether the service and support mix continues to meet the person's needs, initiate or update a specific service, or respond to a change in the person's life. This service planning process should have continuity with prior services planned and delivered and should, to be person-centered, be driven by the person receiving services, with acknowledgment for service system dynamics and specific provider experiences and availability. Person-centered service planning should reflect the ongoing incorporation of learning by all members of the person's circle. The anticipated duration of existing service plan goals and objectives should also inform the frequency of plan updates.

The format, content, and frequency of this form of planning is usually dictated by regulatory or policy guidance from a public agency (see Croft, et al., 2020). Person-centered service plans cover the provision of paid supports but should also take into consideration the availability of unpaid supports and personal strengths. Yearly person-centered service plans should also provide any specific services and supports linked to a person's long-term goals (e.g., those identified in a plan developed in response to significant life events as described in the section above).

Aligning the Plan with the Individual Circumstances

Because of the comprehensive nature of significant life event planning and the amount of time, attention and introspection required, plans for significant life events by definition should not occur on a set schedule (e.g., every year) but rather at important junctures in the person's life. This form of planning is at one end of a continuum, and routine yearly person-centered service planning is at the other end. To ensure plans are person-centered, the trick is to determine when some of the more in-depth planning elements should be infused into a plan and under what circumstances. People's lives rarely shift on a set schedule determined by a human service agency, necessitating flexibility and fluidity in both the planning and oversight processes to ensure that the system's demands don't undermine the person-centeredness of the planning.

NCAPPS

Determining the point on that continuum should depend on the immediacy of needs, changes in the person's situation and/or aspirations, and the nature of the planning process favored by the person. For instance, if a person is receiving only a few hours of support a week to meet their needs, and if their goals and support needs are unlikely to change over time, their plan should be brief and to the point.

One of the important requirements for the plan is that the person knows how to signal that their needs have changed. If the change is equivalent to a major life transition, the person and their circle of support including the service coordinator may agree that a significant life event planning approach may be necessary. The bottom line is that the content and duration of the planning process should be person-centered in that it takes into account the unique context surrounding the person. The challenge going forward is to ensure that the person-centered plan neither overwhelms nor underserves the beneficiary of the plan.

Other Important Considerations

There are some key additional considerations to ensure that the person-centered planning process results in outcomes that are consistent with the person's goal and needs. The first is monitoring to ensure that the planning process is appropriate to the scope and complexity of needs and that the supports in the plan in fact align with the person's needs. Further, are the supports as envisioned available? Can they be implemented as anticipated? Will they lead to desired results?

Second, regardless of the planning process employed, many people cannot "lead" their plan unless they are supported to lead. This means that the person-centered planning process in many instances should start before the actual plan is discussed to make sure that the person understands their role, the issues they want discussed, any boundaries they want to uphold, and what their hoped-for outcomes are.

Third, aspirations in the person-centered plan should not just be exhortations but should be linked to supports and services that are likely to result in success. Those who support people during the planning process should be wary of making commitments that have very little chance of being honored given the support and service mix proposed.

Promising Practices

The person-centered planning process must include people chosen by the person. Therefore, plans should document exactly who is part of the person's inner circle and the roles they play in the person's life.

In order to "right size" the planning process based on individual needs and preferences, there are some promising practices that case managers and other supporters might consider. The goal would be to allow the person to influence how extensive the process will be. Further, the process should relieve the person from having to "tell their story" over and over.

Some potential approaches include:

- Pre-populating information from the initial assessment into the person-centered plan template in order to avoid going over the same ground during each planning session.

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- Reviewing the current planning and eligibility process to determine those threshold questions that are important to determine eligibility for services, the level of services and supports the person needs, and the content of the Person-Centered Support Plan. These questions may cover a range of domains such as activities of daily living, memory and cognition, and challenging behavior. As part of the foundational questions, people should be offered the opportunity to self-direct and to seek employment.

- If people are interested and willing to provide more personal information, developing a set of questions including such issues as volunteering, training, preferences for support for activities of daily living (e.g., bathing, dressing, eating), interest in becoming a self-advocate, and how to help your caregiver.

- Creating a module for people who choose to share their "personal story."

- Working with the person in anticipation of the planning process in order to ensure that they understand what information will be shared and whether they want to volunteer to share any additional personal information.

This tiered approach should generate the information necessary to create a person-centered plan as well as a framework that allows people to pick and choose the information they choose to share.

Conclusion

There are several steps that public managers, self-advocates, advocates, and others can take to ensure that the plan fits the needs of the person:

- State regulations and guidelines should emphasize the elements that should be part of any plan but also lay out the options for duration, frequency, and content, etc. along the continuum of planning formats.

- Plan facilitator training should provide a discussion of the criteria to be applied in each circumstance prior to arriving at a planning format including consultation with the person.

- Feedback from people who use plans – including and especially people with disabilities and other support needs – should be gathered to understand what is working and what is not working in the planning process and identify areas for improving the relevance and appropriateness of plans.

- Plan review processes should include assurances that plans are in fact tailored to the particular context of the person and that the plan supports realistic expectations and desired outcomes.

- People should be supported to lead their own plans with access to information, assistance, and guidance before the planning event.

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This discussion is premised on the assumption that there is no one-size-fits-all approach to person-centered planning. It is also critical to regard all planning as perpetually moving forward in time and being updated and revised. No new plan should occur in isolation from prior efforts nor should elements of time limit the revising of goals or changing strategies per the person's wishes. Though all plans should be governed by the values of choice, inclusion, and empowerment, they should reflect the specific circumstances of the person. If the plan is no more than a check-in, then the process – and the plan – can be brief. At the other end of the spectrum, if the person has or is about to experience a significant life event (a new stage of life, a traumatic event, a complex health challenge), then the process should be as comprehensive as necessary to address the person's needs and priorities. Further, the extent and content of the plan should reflect the desires of the person. It should consider the person's comfort level with repeated self-disclosures and tolerance with the duration of the planning event.

Appendix

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NCAPPS

About NCAPPS

The National Center on Advancing Person-Centered Practices and Systems (NCAPPS) is an initiative from the Administration for Community Living (ACL) and the Centers for Medicare & Medicaid Services (CMS) to help States, Tribes, and Territories implement person-centered practices. It is administered by the Human Services Research Institute (HSRI).

You can find us at https://ncapps.acl.gov

This blog is the work of Valerie J. Bradley and does not necessarily represent the views of NCAPPS, HSRI, ACL, or CMS.

Recommended Citation

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Person-Centered Planning

Five skill areas facilitators should have to best support person-centered planning

Plain Language Version | January 2021

Person-centered planning is a way to learn about a person's idea of a good life. It focuses on the supports (paid and unpaid) they need. It is directed by the person. They might get support from someone known as a "facilitator." The facilitator could be a **Case Manager**, a **Support Coordinator**, or a **Peer Specialist**. Or it could be **someone else** who can help create the plan.

What Skills Should Facilitators Have?

Facilitators need certain skills and abilities to make person-centered planning work. These skills are also called "competencies." Here, we describe five skill areas that facilitators should have. These skills support a good person-centered planning process.

Who Is This Document For?

This document is for people who want to learn about the five skill areas that facilitators should have. This is good information for people who use person-centered planning—and for their families. It will help them know what to expect from their facilitator (the person helping).

1. Strengths-Based, Culturally Informed, Whole Person–Focused

What does this mean? Person-centered planning recognizes that people grow and change. It focuses on helping the person live their idea of a good life. All the planning steps should focus on the person—and not just their diagnosis or disability. The planning should also focus on the person's unique culture and identity.

Facilitators should:

- Be aware of their own culture and identity. Understand that the person's values and culture may differ from the service system's values and culture.

- Learn about the person's culture and language. Respect the person's values and beliefs, customs, and rituals.

- Use helpful tools to find out about the person's goals and their idea of a good life. Use tools that support people to choose their own services.

- Hold high expectations for the person's quality of life in areas that the person values.

- See the person's strengths and interests beyond their disability or diagnosis. Not assume what a person can or cannot do based on their disability.
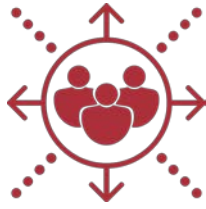
2. Cultivating Connections Inside the System and Out

What does this mean? Planning includes all different kinds of supports. Supports might be from providers or from friends or family. All the planning actions should connect people to community activities and build relationships with people who matter to the person.

Facilitators should:

- Understand the systems and supports a person may choose. They may include things like:
    - health care
    - social services
    - recreation
    - housing and employment supports
    - faith-based organizations and events
    - resources provided by cultural groups
    - food pantries and clothing donations

- Understand the needs of different groups of people. For example, older adults or people with disabilities.

- Help the person connect to community activities. Help the person develop relationships that matter most to them.

- Involve family caregivers and/or other supporters in the planning process.

- Understand that a meaningful life in the community is a human right and not something people have to earn.

3. Rights, Choice, and Control

What does this mean? Planning activities are based on respect. The person is expected and supported to make decisions about their own life. People are supported to find their voice in creating their plan. People learn about their rights.

Facilitators should:

- Understand that all people have the right and ability to participate in the planning process.

- Understand the concepts of "dignity of risk." This means that people have a right to fail. People can learn from their mistakes.

- Tell people about their rights in the service system and in the community. Know about the history and achievements of disability and aging advocacy groups.

- Support people to speak up for themselves during the planning process. Help when things are tense or when providers or supporters are disagreeing with the person.

- Practice supported decision-making. This means helping the person to make and communicate decisions about their life.

- Know how to tell if the person is being abused, neglected, or mistreated. Know how to report this.

4. Partnership, Teamwork, Facilitation, and Coordination

What does this mean? Planning meetings are held in a respectful, professional way. The person can bring in more people and supporters if they want. All people on the person's team are helped to be a part of the planning process.

Facilitators should:

- Respect how the person identifies. Understand the difference between person-first vs. identity-first language.

- Respect the person's input about planning meetings. This includes things like: Who is invited? Where is it held? When it is held? Who leads the meeting?

- Hold the meetings in a respectful, professional manner. This covers things like:

    - start the meeting on time
    - keep down disruptions
    - give the person full attention
    - check with the person to be sure they understand
    - ask the person if they have questions

- Listen to all the team members during the meeting. Make sure the person's voice is a priority.

- Make sure the team gets a copy of the plan and can make changes. Help them make changes as needed.

- Help the team work through differences and conflicts.

- Maintain a focus on the person's life goals and outcomes.

5. Person-Centered Plan Documentation, Implementation, and Monitoring

What does this mean? The person-centered plan is made together and put in writing. The plan is a "living document" that can be updated as needed. There is follow-up and monitoring of the plan.

Facilitators should:

- Include the person's strengths, interests, and talents in their plan. This is also done when carrying out the plan.

- Write the plan using the person's preferred name, language, and identity.

- Use language that is clear and accessible to describe the goals. Use the person's own words when they can.

- Write down the services and supports (paid and unpaid) in the plan.

- Find out from the person and their supporters how the plan is going.

- Make sure that everyone is sticking to the plan. Make sure that services are happening as the person wants them to.

Final Thoughts

It's important that people know what to expect from their services. This resource is meant to explain the skills that facilitators need to help with person-centered planning. But there is no "right" way to do person-centered planning. It needs to be flexible. Every person is different, and every person-centered plan is different.

This document is a plain language version of *Five Competency Domains for Staff Who Facilitate Person-Centered Planning*, available at https://ncapps.acl.gov. All NCAPPS resources are publicly available for use in the administration and improvement of supports for older adults and people with long-term service and support needs. All uses should acknowledge NCAPPS and the developers of this content. Permission is required if the material is to be modified in any way or used in broad distribution.

MAY 21, 2024

AGENDA ITEM 10.
INFORMATION ITEM

STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

Master Plan Discussion

This agenda item will focus on the Master Plan, an initiative to enhance California's developmental services through recent investments. It aims to make services more accessible and equitable, and to connect the developmental services system with other essential health and social services, including education, housing, employment, transportation, and safety. The plan recognizes the changing demographics and needs of service recipients, advocating for improvements that make the system easier to use and more responsive to various cultural backgrounds.

The Stakeholder Committee, consisting of a diverse group of individuals appointed by the CalHHS Secretary, will work with CalHHS and its departments to develop a Master Plan for Developmental Services to be released by March 2025. Councilmember Joyce McNair was appointed to serve on the Stakeholder Committee and represent SCDD. In addition to the Stakeholder Committee, there will be topical subcommittees formed to include subject matter experts, community partners, individuals with intellectual and developmental disabilities, and family members in the discussion.

Councilmembers will provide feedback on the Master Plan.

Attachments
CalHHS Master Plan "Vision for Success"
CalHHS Summary of Initial Priorities in Meeting 1

Handout(s)
May be additional handout(s) day of meeting.

Master Plan "Vision for Success"

Our vision for success is centered in equity and the lived experience of individuals and their families.

This vision applies to all systems that provide services and supports to individuals and their families that are served through the developmental services (DS) system.

1. All Individuals and their families receive high-quality person-centered disability-related services they need and choose.

- Help individuals achieve a well-lived, inclusive life in the community.
- Services are timely.
- Are tied to the outcomes the individual wants to achieve.
- Individuals receive support to access services and navigate systems.

2. Individuals' and their families' basic needs are met so they can live in the community of their choice.

- Affordable and accessible housing
- Transportation
- Food security
- Personal safety
- Employment

3. Service systems have "One Door". They provide the right services at the right time. Services are equitably provided no matter where the individual lives, or who provides or pays for the service.

The one door system:

- Respects individuals and their families. Puts individuals and families in the driver's seat.
- Offers culturally responsive services in the languages spoken by the individuals they serve.
- Focuses on the whole-person across the individual's lifespan.
- Proactively delivers quality person-centered services.
- Is clear to everyone and easy to follow.
- Provides information and training to support service access is available to everyone that needs it.

- Coordinates the services an individual chooses across systems.
- Utilizes technology and innovation to improve information, transparency, and service delivery.
- Rewards performance guided by measures that are easily known and understood.

4. Service systems are transparent, accountable and data driven.

- The system has a consistent interpretation of the Lanterman Act.
- Increases oversight and authority of DDS.
- Uses common service definitions, services, and expectations for service delivery throughout the system.
- Respects privacy, confidentiality and individual rights.
- Uses data and technology to ensure information is available to everyone and shared across systems.

5. The service system has a well-trained, stable workforce with opportunities for career advancement and growth.

- Support a stable, fairly compensated, and well-trained workforce with less turn-over.
- Redefine the role of service coordinators so that they can help individuals' and families' access the services and supports they need.
- Have the knowledge and skills to implement a person-centered approach to provide services and support.
- The system improves its ability to prevent abuse and neglect.
- Offers opportunities for individuals with lived experience to work in the system and support their peers.
- Create a more diverse workforce.

CalHHS

Summary of Initial Priorities Identified in Meeting #1

Based upon the Committee's "Vision for Success" we began to reflect on which aspects of the vision were most important and need to be addressed first. Our priorities will inform our goals and working groups for the plan.

Our priorities are centered in equity and the lived experience of individuals and their families.

1. Create a "One Door" Coordinated System of Care
Where individuals and their families can obtain services and supports they need, Services are provided in a timely and efficient manner. Services are available without regard to where the individual lives or the entity responsible for providing or paying for the services.

2. Workforce. System workforce – including service providers and service coordinators –   have the skills and knowledge to implement a whole-person and person-centered model and can help all individuals in obtaining needed services and supports.

3. Data and Information Technology. Information that is usable, accessible, timely, and understandable. The data allows the systems to measure achievement of outcomes and experiences to inform choices and hold systems and organizations accountable.

4. Reimagine Regional Centers--Cultivating Accountability, Consistency and Quality Services. They are accountable, provide consistent services and experience across the state. Provide and coordinate high quality services which meet the needs and choices of the diverse individuals they serve. They are effectively managed and able to implement needed cultural changes to better meet the needs of the individuals and families served.

5. Housing. Ensure access to affordable units and resources, which may require creating more housing units, building, developing, and setting-aside, through partnerships when advantageous.

Additional Detail: Below we provide additional information and themes that emerged during the discussions of these priority areas.

1. Create a "One Door" Coordinated System of Care where individuals with I/DD can obtain services and supports they need, in a timely and efficient manner, without regard to where they live or the entity responsible for providing the services.

This work would require that we:
- Understand the current experience, (through "journey mapping" and other tools) to identify and resolve the bumps in the road.
- Consider peer navigation, technology and other solutions and services that can better support access to services .
- Break down silos and build relationships across various sectors, departments and agencies.
- Implement strategies to shift the burden of navigating the bureaucracy away from the individual and families.

2. Workforce. The workforce – including service providers and service coordinators – must have the skills and knowledge to implement a whole-person and person-centered model and are equipped to help all individuals in obtaining needed services and supports. This requires:
- Creating environments that help reduce staff turn-over.
- Considering changes to job responsibilities, including what service coordinators currently do vs what they need to do to realize the Master Plan's vision.
- Contracting with direct service professionals who have the skills needed to provide services that people want.
- Establishing processes to incentivize good providers and vendors, and clear steps to report violations, abuse, and as appropriate removal from job placements.
- Compensating the workforce appropriately, providing training and opportunities for advancement and a career ladder.
- Developing and retaining a diverse and inclusive workforce

3. Data and Information technology. Information that is usable, accessible, timely, and understandable are needed to measure achievement of outcomes and experience to inform choices and hold systems and organizations accountable.

More robust information technology infrastructure and data exchange and analytics capabilities are necessary to improve transparency and support more comprehensive outcome and other performance-based measures to ensure that the Master Plan can achieve its vision.

4. Reimagine Regional Centers that are accountable, consistent (in terms of services and experience across all RCs), provide high quality services, with truly representative governance and are prepared for necessary culture change in support of:
- Accountability
- Quality
- Consistency
- Staff turnover
- Representation in governance
- Service providers
- Control and meaningful Choices for individuals and families including:
  - Self determination program
  - Supported decision-making

5. Housing. Ensure access to affordable units and resources, which may require creating more housing units, building, developing, and setting-aside through partnerships wherever doing so is advantageous.

Housing priorities should help identify and remove program barriers and obstacle, create legislative fixes to better protect people; improve equitable access to rent-subsidies, vouches, transitional housing and security deposits for self-advocate and families; facilitate CalAIM housing community supports and home modifications; leverage housing that will be made available through Proposition ; and expand housing navigation supports.

Focus on Equity
A focus on equity emerged as an overarching theme across all initiatives and specific themes within each initiative, guided by experts to help us address inherent inequities and implicit bias.

MAY 21, 2024

AGENDA ITEM 11.
INFORMATION ITEM

STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

Next Meeting Date and Adjournment

The Council's next meeting date is scheduled to be by Zoom on July 16, 2024.