Independent and Supported Living Services

DDS Service Standards Survey 2011

SurveyMonkey

1. I am a:

	Response Percent	Response Count
Consumer	6.5%	81
Family Member or Friend of a Consumer	**48.2%**	**598**
Service Provider Employee or Board Member	21.1%	262
Regional Center Employee or Board Member	12.3%	153
Decline to state	5.1%	63
Other (Specify Below)	6.7%	83
	Please Specify if Other	133
	answered question	**1,240**
	skipped question	**0**

2. Suggested service standards about who should receive these services:

	Response Count
	1,168
answered question	**1,168**
skipped question	**72**

3. Suggested service standards about how often a specific service should be provided:	
	Response Count
	957
answered question	957
skipped question	283

4. Suggested service standards about how to make sure the services provided are useful and effective:	
	Response Count
	900
answered question	900
skipped question	340

5. Suggested service standards about the qualifications and performance of the person or organization that provides these services:	
	Response Count
	829
answered question	829
skipped question	411

6. Suggested service standards about the payment for these services:	
	Response Count
	810
answered question	810
skipped question	430

7. Suggested service standards about the responsibilities of parents and consumers for these services, e.g., co-payment, time commitment, etc:	
	Response Count
	790
answered question	790
skipped question	450

8. Suggested service standards about self-directed or self-determination options for these services:	
	Response Count
	605
answered question	605
skipped question	635

1. I am a:

	Please Specify if Other	
1	Direct caregiver with all responsibilities and no rights!	Jan 28, 2011 3:27 AM
2	multiple	Jan 28, 2011 5:13 AM
3	Vendor	Jan 28, 2011 1:07 PM
4	Family member and a service provider.	Jan 28, 2011 4:57 PM
5	also work for RC	Jan 28, 2011 5:31 PM
6	Parent of a child with a disability	Jan 28, 2011 5:46 PM
7	State employee - Not DDS	Jan 28, 2011 5:53 PM
8	I am also a caregiver.	Jan 28, 2011 6:06 PM
9	Advocate for three clients	Jan 28, 2011 6:08 PM
10	Concerned Community Member	Jan 28, 2011 6:36 PM
11	i am also a sls primary caregiver	Jan 28, 2011 6:41 PM
12	Vendor	Jan 28, 2011 6:59 PM
13	Also a regional center employee (full disclosure)	Jan 28, 2011 7:30 PM
14	I was diagnosed with Asperger Syndrome January 6, 2011 at the M.I.N.D. Institute of UC Davis. In addition, I worked in your estimates section with about 5 or 6 years ago. In addition, I have an 8-year old son with Autism.	Jan 28, 2011 8:42 PM
15	Professor of Communicative Disorders	Jan 28, 2011 8:42 PM
16	Parent and IHSS Provider for our daughter who is brain damaged and quadreplegic.	Jan 28, 2011 8:54 PM

Independent and Supported Living Services

1. I am a:

	Please Specify if Other	
17	Teacher	Jan 28, 2011 10:53 PM
18	Parent of child with Asperger's, relative of deaf person	Jan 28, 2011 11:00 PM
19	I am also a provider of residential and day program services	Jan 28, 2011 11:10 PM
20	Also Parent Vendor & Service Provider Employee	Jan 29, 2011 12:02 AM
21	Mother of a beautiful 9 yr. old daughter born with Down Syndrome and autistic characteristics.	Jan 29, 2011 4:17 AM
22	I am a Mother and the client's conservator.	Jan 29, 2011 5:02 AM
23	Attorney for the disabled.	Jan 29, 2011 7:36 AM
24	I represent a Private Foundation that assists in grants to agencies that assist the disable.	Jan 29, 2011 7:29 PM
25	Father/conservator of consumer.	Jan 29, 2011 8:51 PM
26	RESPITE CRE PROVIDER MSW LCSW	Jan 29, 2011 11:27 PM
27	Owner/Administrator of ARF	Jan 30, 2011 4:44 AM
28	I am both the parent of a consumer and an advocate with clients who are RC consumers	Jan 30, 2011 4:53 PM
29	Director of Supported Living Services agency, specializing in moving people with extreme behavioral and medical challenges into the comm. from State institutions.	Jan 30, 2011 8:46 PM
30	I am also a retired regional center employee and working part time as a staff trainer for an SLS provider.	Jan 30, 2011 11:48 PM
31	Both a family member and a service provider	Jan 31, 2011 3:46 PM
32	Regiolan center employee and friend of a consumer	Jan 31, 2011 4:55 PM
33	Community Support Facilitator-independent living &supported services	Jan 31, 2011 9:14 PM
34	"Purchase of Service Limits" is more appropriate than "standards"	Jan 31, 2011 9:49 PM
35	Social Service Worker	Jan 31, 2011 11:32 PM
36	Consultant	Feb 1, 2011 5:07 PM
37	spouse of a service provider	Feb 1, 2011 5:49 PM
38	Mother	Feb 1, 2011 11:08 PM
39	Mother of a client and also a community worker.	Feb 2, 2011 1:38 AM
40	A foster parent with two consumers and now I am their legal guardian.	Feb 2, 2011 1:51 AM
41	Child with high-functioning spectrum diagnosis who did not qualify for regional center -- we use the same services, but pay out of pocket	Feb 2, 2011 5:26 AM
42	friend of a parent who has an adult with developmental disability	Feb 2, 2011 1:44 PM
43	Retired Regional Center Employee	Feb 2, 2011 5:18 PM
44	Conservator	Feb 2, 2011 5:44 PM
45	Friend, Advocate, Cousin, Coach, Program Coordinator	Feb 2, 2011 6:15 PM
46	My daughter received services until she passed away.	Feb 2, 2011 6:40 PM
47	I've been in the system for more than 20 years	Feb 2, 2011 7:41 PM
48	Area Board staff	Feb 2, 2011 8:51 PM
49	For my Daughter age 5	Feb 2, 2011 9:28 PM
50	Two of my three children are Regional Center Clients	Feb 2, 2011 9:54 PM
51	Both a family member and a service provider employee	Feb 3, 2011 12:11 AM
52	Parent of 2 children with Autism	Feb 3, 2011 6:27 AM
53	Housing Provider for consumers in Orange County.	Feb 3, 2011 4:51 PM
54	Behavior Tutor at Capitol Autism Services	Feb 3, 2011 5:25 PM

Independent and Supported Living Services

1. I am a:

	Please Specify if Other	
55	Parent	Feb 3, 2011 6:02 PM
56	Care Provider	Feb 3, 2011 6:51 PM
57	My child has cerebral palsy and we are assisted by Golden Gate Regional Center.	Feb 3, 2011 7:14 PM
58	Parent of consumer	Feb 3, 2011 7:15 PM
59	Dad	Feb 3, 2011 7:55 PM
60	Work in a Day Program	Feb 3, 2011 8:24 PM
61	My son needs developmental services that are proposed to be cut.	Feb 3, 2011 8:25 PM
62	day program service provider.22 years exrerence working in ACRC funded programs.	Feb 3, 2011 8:30 PM
63	sister/conservator of Developmentally disabled adult sister	Feb 3, 2011 8:47 PM
64	parent of two consumers with autism	Feb 4, 2011 1:47 AM
65	Licensed Clinical Social Worker	Feb 4, 2011 2:00 AM
66	Our 2 year old grandson would be without the help he needs for his speech therapy and development.	Feb 4, 2011 4:02 PM
67	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 4, 2011 7:39 PM
68	I am category one, two, and three	Feb 4, 2011 9:15 PM
69	Husband of [redacted] (Consumer) and Father of [redacted] Consumer)	Feb 4, 2011 9:21 PM
70	mother of two sons with autism	Feb 4, 2011 9:45 PM
71	Gen Ed Teacher, parent of four, the youngest has down syndrome; and Advocate for those who have a developmental disability.	Feb 5, 2011 12:50 AM
72	Those individuals whose individual program plan team has indenitifed a need for these services as described in The Lanterman Act Section 4646 (a-d).	Feb 5, 2011 7:15 PM
73	Previously a consumer. After 3 years we were told that because our daughter didn't have autism or CP, we didn't qualify any more. She has PDD-NOS and scads of other problems that will make it quite impossible for her to live without supervision or at least good monitoring. We (her parents) are in our 60's and won't be around to do that. She is 15 and we are very worried that without the Regional Center safety net, she will be in great danger and perhaps might pose a danger to society because of her obsessive and impulsive behavior and inability to be responsible for her medical help.	Feb 5, 2011 8:16 PM
74	Conservator	Feb 6, 2011 7:32 PM
75	Special Educator	Feb 7, 2011 5:57 PM
76	and Parent Vendor	Feb 8, 2011 12:50 AM
77	Life-long Californian	Feb 8, 2011 3:45 AM
78	Mother of a consumer, service provider of home health agency and former Vendor Advisory Committee Member.	Feb 8, 2011 5:53 AM
79	My niece has a two year old son diagnosed with autism	Feb 8, 2011 6:05 AM
80	REgional Center	Feb 8, 2011 9:36 PM
81	I am a sibling of a consumer.	Feb 9, 2011 1:13 AM
82	Disability Rights California, non-profit advocacy organization.	Feb 9, 2011 5:23 PM
83	Also have many friends who use these services	Feb 9, 2011 7:45 PM
84	Mother and Conservator of Disabled Adult Child	Feb 9, 2011 8:46 PM
85	Also Board Member	Feb 9, 2011 10:19 PM
86	Parent of adult child with developmental disabilities. Additionally, my child is non-ambulatory which complicates his services.	Feb 9, 2011 11:12 PM

1. I am a:

	Please Specify if Other	
87	A concerned Citizen Taxpayer. There needs to be a 9th category related to due process. The current list of proposals, though helpful, will only impact the budget if attention is paid to the hearing process and Aid-Paid-Pending.	Feb 10, 2011 12:03 AM
88	Retired R.C. Employee	Feb 10, 2011 12:12 AM
89	care home owner	Feb 11, 2011 12:40 AM
90	Program Director Adult Day Services	Feb 11, 2011 1:43 AM
91	Parent of two consumers who are disabled and a advocate for regional center consumers	Feb 11, 2011 2:37 AM
92	service provider-group home	Feb 11, 2011 5:03 PM
93	I am an employee of the Regional Center, and have been for 14 years.	Feb 11, 2011 6:46 PM
94	Both a Family member and a Board Member	Feb 11, 2011 7:01 PM
95	advocate	Feb 11, 2011 7:07 PM
96	SLS provider	Feb 11, 2011 7:13 PM
97	Public health professional	Feb 11, 2011 9:27 PM
98	the parent of a child with autism	Feb 11, 2011 9:58 PM
99	Vendor	Feb 11, 2011 11:44 PM
100	service provider owner	Feb 12, 2011 2:43 AM
101	Family member and Director of a local autism education & support non-profit.	Feb 12, 2011 3:05 AM
102	I am a Mother of a teen ager who was diagnosed with autism when he was 7 but fought for two years in order to get a dianosed due to the lack of funds in clinics,hospitals, and schools.	Feb 12, 2011 5:21 AM
103	I am a parent of a child with Autism and I am a Vocational Specialist.	Feb 12, 2011 6:28 AM
104	Yes my son is apecial needs	Feb 12, 2011 3:03 PM
105	Mom of 18 yr old adopted child with Fetal Alcohol Spectrum Disorder	Feb 12, 2011 3:07 PM
106	And a family member of a boy with autism	Feb 12, 2011 5:27 PM
107	and a special ed teacher	Feb 12, 2011 5:38 PM
108	Parent of a teenager who is on the Autism Spectrum.	Feb 12, 2011 8:10 PM
109	Our disabled son is part of the Regional Center of Orange County	Feb 12, 2011 8:32 PM
110	I am the parent of a consumer as well as a service provider	Feb 13, 2011 6:00 AM
111	I am also a family member.	Feb 14, 2011 12:22 AM
112	conservator and family member of regional center client	Feb 14, 2011 1:12 AM
113	Psychologist for the Developmentally Disabled.	Feb 14, 2011 12:45 PM
114	vendor owner for independent living skills and supportive livings	Feb 14, 2011 4:47 PM
115	service provider employee and family member of a consumer	Feb 14, 2011 5:16 PM
116	Adult Residential Facility Administrator/Licensee	Feb 14, 2011 8:19 PM
117	RSP,ARF3	Feb 14, 2011 8:20 PM
118	I am a family member and have worked as a service provider.	Feb 14, 2011 10:04 PM
119	Community College Instructor who works with Developmentally disabled students	Feb 14, 2011 10:29 PM
120	care provider	Feb 14, 2011 10:34 PM
121	disablitity advocate	Feb 14, 2011 11:01 PM
122	friend advocate	Feb 14, 2011 11:24 PM
123	parent vendor for my son with special needs	Feb 15, 2011 1:10 AM
124	Father of 2 consumers	Feb 15, 2011 5:35 AM
125	Mother of 20 month old daughter	Feb 15, 2011 6:32 AM

Independent and Supported Living Services

1. I am a:

	Please Specify if Other	
126	I am also the vendor for my daughter's supported living program.	Feb 15, 2011 4:46 PM
127	Instructor working with developmentally disabled.	Feb 15, 2011 6:00 PM
128	Parent	Feb 15, 2011 6:09 PM
129	pediatric nurse practitioner and prescriber of services	Feb 15, 2011 6:50 PM
130	Special Education Community Liaison for the Hacienda La Puente Unified School District. I provide resources for professions and parents of students from birth to age 22. Our district collaborates with Regional Center to provide services for our parents. E.g., a Regional Center representative attends our Parent Events, such as Information Fairs, Evening Topical Presentations, etc. I attend their LICA meetings and presentations they offer, e.g., upcoming Fair on Autism on Feb. 24th.	Feb 15, 2011 8:07 PM
131	I am a RN Pediatric Nurse Specialist with a degree in Social Work. For the past 7 years, I have been a caregiver, casemanager, and IP Team Member for my brother. He is a 54 year old man with Autism, who was profoundly emotionally ill. Now with the Integrative Plan which includes his Day Program, Residential Care Home amongst skilled and compassionate people who encourage his independence, and Preventive Medical Care, he is a happy, calm, mentally stable and healthy. He creates amazing art, which he sells through Creativity Explored, he now has a housemate and he is living his dream of independence. For 6 years, he received supportive services from independent living instructors. He no longer rides the van service, but rather uses muni to get to and from his Day Program. Without his impeccable instructors, I know he would be in an institution.	Feb 15, 2011 11:00 PM
132	Parent and Conservator of client	Feb 16, 2011 12:24 AM
133	Special Education Teacher Visually Impaired/Blind Birth to three years.	Feb 16, 2011 12:33 AM

1. Suggested service standards about who should receive these services:

	Response Text	
1	Those who are higher functioning should remain in a group home or live with family. Help with advocacy and perhaps earning a small salary	Jan 28, 2011 12:43 AM
2	Transition afe to adult that can use help with being independent in whatever their home setting.	Jan 28, 2011 12:57 AM
3	Those with developmental disabilities who request these services.	Jan 28, 2011 1:06 AM
4	This service my son with Cerebral Palsy will need in 6 years. So I think that those with physical disablities should have access to this. Independence is so important.	Jan 28, 2011 1:10 AM
5	People who can direct staff themselves.	Jan 28, 2011 1:10 AM
6	all people should be eligible for these services; this service should be the first service in a residential model then all other group services are a step down from this model of service.	Jan 28, 2011 1:13 AM
7	Anyone living outside of a family home will receive Supported Living Services. Anyone that just graduated high school will automatically receive 12-16 hours per month of Independent Living Services. Anyone living at home should be given the option and encouraged to move out. A service coordinator is obligated to inform the individual about Independent and supported living options.	Jan 28, 2011 1:13 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
8	start these services well before 6months prior to consumer leaving parents home- this should be an ongoing process so that when the consumer is old enough, they can smoothly transition to a more independent living or supported living services environment, would cost less in the long run	Jan 28, 2011 1:16 AM
9	Any Client who is working toward or has achieved independence in their living situation should be given ILand SL support servcies based upon individual need as determined by IPP.	Jan 28, 2011 1:19 AM
10	INDIVIDUAL CHOICE BUDGET	Jan 28, 2011 1:26 AM
11	who ever is able to maintain quality of life while receiving such services	Jan 28, 2011 1:37 AM
12	Anyone wanting to live independently with services	Jan 28, 2011 1:41 AM
13	ICB	Jan 28, 2011 1:51 AM
14	A consumer should have full legal decision making rights. Those consumers who are under conservatoship should not have access as they are dependent and will not be able to enjoy full participation and decision making in these services. Consumer should have the cognitive abilities to make choices and have full participation in their household decsions.	Jan 28, 2011 1:55 AM
15	18 years old and up who has developmental disabilities	Jan 28, 2011 2:05 AM
16	Individuals how have strong self care skills	Jan 28, 2011 2:10 AM
17	model after WAPADH. We are not connected to them in any way, but wish we had this available to us in our area. Whittier Area Parents' Association for the Developmentally Handicapped (WAPADH) is a private, non-profit organization that supports individuals with a variety of lifelong disabilities including Cerebral Palsy, Autism, Down's syndrome and related medical and/or behavioral disorders. Our history of achievements is the result of strong community and family support and an organizational culture that continually seeks to remove barriers and change the limiting cultural stereotypes long associated with this population. WAPADH currently serves people in the Southeast Los Angeles, San Gabriel Valley and North Orange County areas.	Jan 28, 2011 2:13 AM
18	Clients are constantly discouraged from requesting Supported Living by case managers using the trailer bill language like " least costly alternative" to clients and parents. There are so many hoops to jump through just to get the request for SLS taken seriously and scare tactics are tolerated such as group home providers saying " you might burn the house down" if the client is allowed into a SLS situation. Any client should be considered for SLS (meaning the request should be written into IPP and followed up on) if that is what they want, without scaring the clients or parents. It does not seem appropriate for case managers to be sharing all that information about trailer bills and cost effectiveness with clients and their families. Instead the every person should be considered for the least restrictive environment and roadblocks such as cost effectiveness should be dealt with internally-between the regional center and vendors.	Jan 28, 2011 2:18 AM
19	Any adult that desires to live in their own home or shared with a partner. Severity of disability should not disqualify and individual.	Jan 28, 2011 2:20 AM
20	Those individuals whoare seeking supported employment type services. Through a PASS plan they can pay for half of services and state can pay other half	Jan 28, 2011 2:37 AM
21	lowest cost for the tax payer.	Jan 28, 2011 2:37 AM
22	Every person who has the desire! even if they do not yet know everything it entails. They can learn.	Jan 28, 2011 2:39 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
23	Those adults, especially those who cannot live with their familes any longer due to circumstances with the family, who would otherwise be instutionalized because they cannot live alone or with minimal supervision.	Jan 28, 2011 3:01 AM
24	everyone who so chooses to live independently or with support if needed	Jan 28, 2011 3:12 AM
25	Specific criteria for this type of service should be evaluated so that a client who requires full-time help of many services would be counseled to accept another form of service such as residential care. We would want to help those who can become more independent to acquire the necessary skills so that they do not fail and end up on the street.	Jan 28, 2011 3:15 AM
26	developmentally disabled	Jan 28, 2011 3:17 AM
27	We hope our son with autism will one day be able to avail himself of independent living and supported living services. He is not there yet so again we have no comment on this section.	Jan 28, 2011 3:24 AM
28	Adults with a disability	Jan 28, 2011 3:33 AM
29	Anyone who requires support to live successfully in the community in a home of their own regardless of their disability.	Jan 28, 2011 3:35 AM
30	Lanterman Act. Needs of the consumer as written in the IPP	Jan 28, 2011 3:45 AM
31	ANYONE who is not able to live independently	Jan 28, 2011 3:47 AM
32	DD population.	Jan 28, 2011 4:05 AM
33	Anyone who needs the assistance of a paid staff, such as a cook, house cleaning, personal hygiene, or other 24 hour assistance, should NOT be considered for supported living or independent living but should be placed in a community care facility receiving the needed services for less the cost. Independent Living and Supported Living Services for consumers who need constant care and assistance cause an undue financial stress to the system.	Jan 28, 2011 4:14 AM
34	All who desire to live in supported living should have the opportunity to do so. There is a reason that these services are growing so fast, it is obviously the preferred choice of living options that consumers and their families want. By putting a blanket cap on everyone will eliminate these services to all non ambulatory, medically fragile and behaviorally challenged persons.	Jan 28, 2011 4:27 AM
35	clients who wish to live in their own environment without someone policing them 24/7 days a week and have the cognitive level to live independently.	Jan 28, 2011 4:30 AM
36	I believe that the consumer's mentality and competency and capabilities need to be screened and reviewed and double checked before they are made eligible for independent living and or supported living services. They should NOT be considered solely based on their parent's financial means to purchase a home for their child. I believe we have so many clients that are living in a supported living situation where the tax payer via the Regional Center is paying for 24 hour monitoring and additional services that the consumer would receive for a lot less in a residential facility for their disability level.	Jan 28, 2011 4:40 AM
37	Anyone who requires them. There should be no exclusion.	Jan 28, 2011 4:42 AM
38	According to the Lanterman Act, any developmentally disabled adult who would like these services, unless he/she is too medically impaired to live in these settings, should receive services.	Jan 28, 2011 4:52 AM
39	This should be determined based on the IPP	Jan 28, 2011 5:00 AM
40	Because an adult consumer has a parent conservator, this ought not to prevent them from receiving these services.	Jan 28, 2011 5:03 AM
41	any one who honestly benefit and is able to direct service staff	Jan 28, 2011 5:19 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
42	The regulations for supported living need to be maintained -- there is no prerequisite for people to be given the opportunity to live in their own home in their own community -- the least restrictive environment as called for in the Olmstead Decision. Independent living, that focuses on skill building toward increasing independence, needs to also include maintenance supports long term to allow people to remain in the community with minimal supports -- this option allows choice and self-direction rather than forcing someone to be in a more restricted environment.	Jan 28, 2011 5:30 AM
43	Both independent and supportive living should be eliminated.	Jan 28, 2011 5:32 AM
44	Any consumer who cannot reliably and safely perform, without reminders or assistance, all the normal requirements of living independently should receive services in those areas of need.	Jan 28, 2011 5:33 AM
45	1) Clients should need ILS or SLS due to medical reasons (including psychological reasons) to live as independently a their potential allows. 2) Clients' financial situation should not be a factor in making services available.	Jan 28, 2011 5:45 AM
46	Supported Living must be made available to any individual whose family, RC and support team agree would benefit from living in their own home/apt/etc., with the support they need. Some individuals are not able to use traditional communication to indicate their preference for individualized support (vs. group home, etc.), thus it makes sense for the family and/or support team & RC to be able to support the preference of SLS for these individuals, especially when other services haven't worked out (and oftentimes those services become very intensive and costly as more behavioral services, medications, therapies, etc., are prescribed in an attempt to make the residential situation work out).	Jan 28, 2011 6:03 AM
47	1) Adults who express a desire to live independently, and whose safety may be reasonably assured in the selected setting. 2) Those who receive ILS or SLS to live independently must be able to communicate their needs and preferences to support staff, and be capable of reporting any abuse, neglect, or violation of their rights to others. 3) Support services purchased by the regional center must be related to that person's developmental disability and need for assistance.	Jan 28, 2011 6:12 AM
48	As is already in place.	Jan 28, 2011 6:15 AM
49	All who can live outside the institutional or group home setting - IF - adequate support is provided.	Jan 28, 2011 6:23 AM
50	Adults who want to live independently in a home of their chosing.	Jan 28, 2011 6:29 AM
51	Everyone should have the opportunity to succeed in Supported Living Services. Without these opportunities for true choice about their experiences, and their choices are honored, they shall never expand their social circles, find love and potentially a life companion. My daughter went to high school with many of the same students she went to elementary school with, then onto the day programs with the same group. The social circles are so small that they rarely have the opportunity to expand their social networks. Independent and SLS affords them the same opportunities as you and I have to grow, explore their worlds, and escape the "group" mentality. It affords the person centered life that is rarely achieved in other more restrictive settings.	Jan 28, 2011 6:43 AM
52	The disabled who have enough independent living skills	Jan 28, 2011 6:44 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
53	No one should be excluded from Supported Living services because of the severity of their disability. Everyone should have the right to live in their own home, in the community. No one should be required to demonstrate an ability to live "independently" in order to receive Supported Living services. No one should be "placed" in a state institution. All state institutions for people with developmental disabilities should be closed.	Jan 28, 2011 6:44 AM
54	Perhaps a requirement for qualifying for SLS should be that Consumer is able to independently function without supervision in the home environment for at least 4 hours at a time without health or safety concerns. Perhaps ILS services should be limited only to those Consumers who are living independently and in need of ILS support to attend to some basic life functions. Perhaps ILS for Consumers living with families may be considered for things like community travel training or getting enrolled and familiar with a college program. But Consumers living at home with family should not be eligible for ILS training on skills that can realistically be taught by family members.	Jan 28, 2011 7:07 AM
55	CDER results along with independently obtained testing should be the basis to qualify persons for ILS services.	Jan 28, 2011 7:10 AM
56	Individuals who are able to meet the definition of developmental disability in California. Individuals who with support can benefit from living in their own apartments, condos or houses. This service can and should be available to all who can benefit when the costs are equal or less than the costs of more traditional supports.	Jan 28, 2011 7:17 AM
57	Each verified person should have an advocate to help them get the services they need.	Jan 28, 2011 7:23 AM
58	These services should be available to any consumer who chooses to and is able to be in independent living programs. Supported living should be available to any consumer who chooses to leave a group home or a state DC and live as independently as they can in the community.	Jan 28, 2011 7:54 AM
59	RC should not pay for undocumented consumers. Their families should support them.	Jan 28, 2011 8:22 AM
60	Just like their non-disabled peers, people with disabilities should be able to live in their own homes regardless of type of disability. The most vulnerable of our citizens, who cannot speak up for themselves, are the ones mostly in need of living in their own homes. My own son would have to be heavily drugged if he were to live in a group home or any other residential facility and would be very unhappy with poor quality of life and have little or no choice in most areas.	Jan 28, 2011 9:07 AM
61	Individuals who really need the support and assistance.	Jan 28, 2011 1:15 PM
62	I know that this is expensive, but it does provide the most self-determination. I believe that any consumer desiring to live in independent or supported living should be able to do so, as long as it is safe for them.	Jan 28, 2011 2:31 PM
63	Supported living services should only be for clients who are independent enough to live on their own with little support.	Jan 28, 2011 3:02 PM
64	Whomever needs services in order to live somewhat independently should be able to get enough help. However, in our area I remember hearing that consumers were scattered around so that there was not an enclave of disabled, and I disagree. Seniors like living close to other seniors. I see kids who were pretty mainstreamed having very unrealistic expectations of having the cheerleaders in high school continue to be their friend, now having difficulty inthe adult real world. I think that services could be provided cheaper and comsumers could support each other if they were living closer to each other and could share care providers.	Jan 28, 2011 3:20 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
65	These services shall be provided to anyone who demonstrates the capacity and potential to eventually live fully independently. These services will be determined by personal eligibility of the consumer, not by residential location.	Jan 28, 2011 4:35 PM
66	If there is an entrance criteria/there has to be an exit criteria. At this time it is not cost effective.	Jan 28, 2011 4:36 PM
67	Supported Living Services should NOT be available to consumers who function in the Moderate to Profound range of intellectual disability.	Jan 28, 2011 4:37 PM
68	Any adult with a developmental disability that chooses that he/she wants to live in his/her own home. Why should people with developmental disabilities have to live in group homes or institutions. They were not raised in a group home. As typical people-we dont' grow up and live in group homes. We have our own home, our own friends that we choose, why should this be different for people with developmental disabilities???? My son deserves his own place like anyone else.	Jan 28, 2011 4:55 PM
69	All individuals who have a need.	Jan 28, 2011 4:56 PM
70	Adult consumers who wish to live independently or in a small group environment but do not require constant monitoring or assistance.	Jan 28, 2011 4:57 PM
71	You need to reinstate socialization hours so that a child can get prepared to enter into this type of living situation.	Jan 28, 2011 5:02 PM
72	Anyone with developmental disabilities who identifies this as an appropriate service through the IPP process	Jan 28, 2011 5:13 PM
73	People should be able to display an informed want of the service.	Jan 28, 2011 5:17 PM
74	The elderly and the mentally challenged	Jan 28, 2011 5:18 PM
75	These Client's are not independent when they have paid staff with them 24 hours a day. If they need to be supervised daily then they should be in a Group Home.	Jan 28, 2011 5:21 PM
76	No one. If they are able to live on their own then they should be able to help themselves. They should know how to shop, cook and clean if not then they should live in a board and care home.	Jan 28, 2011 5:24 PM
77	All consumers who are determined capable of independent living as part of their Individual Performance Plan.	Jan 28, 2011 5:25 PM
78	only people who have a clear plan to move out should receive these services. right now, there are people who have no desire to ever move out who are receiving ILS services to receive transportaiton to and from work, to go out to eat with ILS instructors, etc.	Jan 28, 2011 5:28 PM
79	Consumers who can reasonably maintain an independent/supported living arrangement should be able to receive this service. There are many consumers who want this but then do not cooperate or comply with the support provided to insure their own health and safety, management of finances, and adequate upkeep of living quarters. Consumers should have demonstrated ability to maintain health and cleanliness standards. We have far too many ILS/SLS consumers whose lives are worse off because our system has allowed too much independence for individuals who cannot manage it. Inspite of providers who are already in place to assist these consumers a provider is not able to be with them 24/7 to monitor every situation. There should be more shared living situations monitored more closely by service providers so that consumers have a better quality of life with less crises to address due to cumulative neglect by consumers.	Jan 28, 2011 5:31 PM
80	All interested adults. People have the right to live their life in the least restricted environment.	Jan 28, 2011 5:31 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
81	The definition for individuals to receive SLS services need to be better define. SLS services should be provided to individuals who can be safe living independently but need additional support to complete tasks. They need to have some basic skills in order for SLS services to be provided - like being able to be left alone for a length of time, have basic ADL skills. Individuals receiving services should be able to take their own medications or clearly be able to communicate the medications they are taking and when they are to take the medications. ILS services should be provided to consumers who will utilize the service appropriately - meaning that they will participate in the activities and our showing progress towards the goals. If a consumer does not participate in the service the regional center should not continue to provide the service. Consumers need to take an active role in their services and if they are not then services need to end until they are ready to be active participant.	Jan 28, 2011 5:31 PM
82	Transitioning young adults to be self sustaining is in the best interest of everyone.	Jan 28, 2011 5:48 PM
83	That should be dependent on the case but a hard cap for people who live at home might be warrented.	Jan 28, 2011 5:50 PM
84	this is critical for individuals who have vulnerable conditions	Jan 28, 2011 5:51 PM
85	Have a cap of how many can receives SCS. Have waiting list for.	Jan 28, 2011 5:55 PM
86	Supported living is a highly expensive service which has alot of problems. It is appropriate for folks who do not need 24 hour supervison (IE no overnight staff at 12 an hour) or people who can't be handled behaviorally or medically in a RCH. The RC pays 8,000 to 13,000 monthly for cases which used to be referred and managed in B&Cs..... many of the consumers do not care - it is the parents who want this. In fact many day program type consumers get lonely in SLS and the medical needs are no as well met.	Jan 28, 2011 6:02 PM
87	Consumers who have been deemed ready and able to live on their own should be given the opportunity to be as independent as possible.	Jan 28, 2011 6:10 PM
88	Everyone who demonstrates a desire to want to live independently should be encouraged to do so. This should be a goal for all. This is less costly for the community in the long run and promotes greater self esteem and desire to contribute back to the community.	Jan 28, 2011 6:16 PM
89	in our area there are a lot of services provided that could be done for less but this is not treated like other sevices.when you have someone with a nurse to care for them just so they can say I live on my own.	Jan 28, 2011 6:17 PM
90	Individuals who choose to live independently and who are able to with some assistance.	Jan 28, 2011 6:21 PM
91	Keep at the current rates and amounts.	Jan 28, 2011 6:21 PM
92	Develop criteria for who is eligible for supported living. There should be consideration of cost-effectiveness. (See 5, below.)	Jan 28, 2011 6:23 PM
93	IF this program should exist, it should be for those who are MOST likely to succeed with the least amount of help. If a person needs 24/7 care, they are probably are not good candidates. This should be for the higher functioning people (relatively higher IQs, abulatory, verbal, etc.) who just need that extra little boost. The program should NOT mean that CA is supporting 5,000 miniature care homes.	Jan 28, 2011 6:27 PM
94	anyone wanting to live in their own own should qualify for this service.	Jan 28, 2011 6:37 PM
95	CONSUMER/CLIENT	Jan 28, 2011 6:42 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
96	Any person who is able to coctribute to the household either able to care for themselves able to clean, cook , manage own money, able to identify activities they want to participate in . Some one who is mentaly independant who is not able to be promptedd to give the ansewers they think some one else wants to hear.	Jan 28, 2011 6:45 PM
97	Clients who might live in their own home with support but would otherwise be at risk for placement, homelessness or solitude should have these supports available to them.	Jan 28, 2011 6:47 PM
98	developmentally disabled peoples who wish to live as independently as possible	Jan 28, 2011 6:49 PM
99	Any consumers who request them	Jan 28, 2011 6:51 PM
100	I believe that anybody with a disability should be able to receive these services. It improves their quality of life helps integrate them more into society.	Jan 28, 2011 6:51 PM
101	The developmentally disabled. Not their fault they have a problem Most stay with parents until they are out of high school or a few after. When Parentsdie they will need help for the rest foot their lives.	Jan 28, 2011 6:53 PM
102	Every individual who wants to live independently should receive services Service homes should be purchased for individuals by the state or state agency then sold when no longer required, sale proceeds to be returned to the state. Maintainance of homes will be serviced by property management companies and paid for by rents received.	Jan 28, 2011 6:55 PM
103	most adults with disabilites should not live with their parents... independence is extremely important	Jan 28, 2011 7:02 PM
104	The legislation clearly set out standards for who should receive Supported Living Services when they established this service code. These standards should not be altered.	Jan 28, 2011 7:07 PM
105	Individuals that have a strong determination for independence but require that extra help. They should always be working towards full independence be having goals to show so.	Jan 28, 2011 7:09 PM
106	-Everyone with a diagnosis of developmental disability before the age of 18. -Should not be limited to a disability. (including but not limited to cerebral palsy, "challenging behaviors', "severe" or 'intense"medical or personal care needs....etc.) -Should not be limited to any ability to communicate on their own. There should be no limits to a representative of or advocating voice. -No one should be limited to services based on disability or "readiness". -SL orientations should be an optional attendance. -Services should not be prolonged process for outside agency assessments. Consumers should have choice in who does their assessment.	Jan 28, 2011 7:10 PM
107	Anyone with diagnosis of a developmental disabilty, over the age of 18, is eligible. Including people who are medically fragile, need intense personal care, have a label of behavioral challenge. All people deserve the right to live in a home of their own with appropriate supports. An orientation from the regional center shall be optional and accommodating. Once SLS or ILS is represented in the IPP then this service should be available to the person. A waiting period of a year is unacceptable.	Jan 28, 2011 7:10 PM
108	Anyone with developmental disabilities who has this identified as a need in their IPP	Jan 28, 2011 7:10 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
109	*Anyone with a diagnosis of a developmental disability, over the age of 18, is eligible. *Including people who are medically fragile, need intense personal care, have a label of "severe" and/or "challenging" behaviors etc. *Everyone should, and have the right to, live in their own homes. This does not preclude people who do not have the ability to communicate traditionally, who do not have an advocate, or any of the aforementioned "labels". *No one should be excluded based on disability or readiness. *Supported Living Orientations, via the Regional Centers, should be optional and any necessary adaptations should be made available to individuals in this regard. *Individuals should have a choice in the provider who completes the community assessment. Once an assessment is completed, and an agency has been identified to carry out SLS/ILS, services should begin in a timely manner.	Jan 28, 2011 7:11 PM
110	People over the age of 18. Standards should not exclude people who are unable to verbalize their wishes and who do not have a conservator or advocate. Least restrictive environment should be considered when determining placement of people who are not able to advocate for themselves. No one should be excluded based on disability or readiness. Supported Living Orientation should be optional and not mandatory and should allow for accommodations for people who do not have transportation and should never be used as a barrier to acquiring services. Once Supported Living Services have been identified by the planning team and documented in the IPP, services should be provided in a timely manner. Consumers should have choice of providers who complete the Community Living Assessment and assessments should be completed by a provider who is familiar with community services to include Supported Living.	Jan 28, 2011 7:13 PM
111	I firmly believe that no services should be provided to any individual that is not a legal resident/citizen of this country.	Jan 28, 2011 7:21 PM
112	All eligible persons should recived these services as currently determined by SARC. Eligibility should not be changed or made more difficult. These services are vital to this population and enable them to be active and productive members of society. Reducing access will only increase the number of adults that end up homeless.	Jan 28, 2011 7:28 PM
113	People who have social security numbers and who have proof of residency.	Jan 28, 2011 7:30 PM
114	Adult consumers living independently.	Jan 28, 2011 7:30 PM
115	Some of my friends are drinking too much and have had trouble with the cops because they have too much time doing nothing	Jan 28, 2011 7:32 PM
116	Individuals with Developmental Disabilities as identified in their IPP	Jan 28, 2011 7:33 PM
117	Anyone who wants them, group homes are terrible!	Jan 28, 2011 7:35 PM
118	Any adult who wants to live in their own home or apartment with any disability label. Supported Living is one of the best alternatives for individuals with severe disability labels where living in group situations creates behavior problems. Our experience is that the ultimate level of services and thus cost averages out for these individuals over the spectum of disabilities.	Jan 28, 2011 7:36 PM
119	all adults with the assessed ability to live independently after training	Jan 28, 2011 7:42 PM
120	For both ILS and SLS state wide definition of eligibility needs to be established. There is way too much confusion over "support" vs. "supervison. Anyone requiring supervision should not be eligible for either ILS or SLS. 24/7 level of support should require health care plan.	Jan 28, 2011 7:43 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
121	Any client of the Regional Center or person who cannot adequately sustain themselves independently should receive services.	Jan 28, 2011 8:02 PM
122	Parent should get the money for Respite and they have to hire their own respite.	Jan 28, 2011 8:07 PM
123	HIGH FUNCTIONING PERSONS ONLY. no person to get ILS unless they have moved to an apartment or GH situation. NO person to get ILS if living at home with parents. No SLS for persons who need 1:1 personal behavior attendents. No SLS for persons with behavior problems that keep them from access the community.	Jan 28, 2011 8:11 PM
124	The whole system needs to be geared toward fostering Independent and Supported Living Services. No sentient, intelligent being, even if hampered by communication and emotional disabilities as in autism, should be institutionalized. It took me a year to find a wonderful supported living situation for my adult, autistic brother. I tried a group home and he was miserable. He is now relatively happy living in his own apartment with round the clock care. The state should look into acquiring apartment complexes, as in Senior Assisted Living, for the disabled, where each can have their own apartment, yet share in a community for additional resources.	Jan 28, 2011 8:18 PM
125	Services should be provided to those who need these services to prevent them from having to move to a more supported environment like a group home or assisted living facility.	Jan 28, 2011 8:25 PM
126	yes	Jan 28, 2011 8:35 PM
127	any consumer that would truly benefit and who really feels strongly about it NOT the parents who want a break..once again it is not the state's fault that persons are born with disabilities (unless of course it was ie contamination of soil or water) Persons who are able to remain safe with minimal intervention. Persons without other means of support either family or trust money	Jan 28, 2011 8:39 PM
128	Adults who express a desire to live independently, and who can maintain an independent living arrangement without jepardizing their health or safety.	Jan 28, 2011 8:45 PM
129	As long as your department focuses on buying houses for long-term care living arangements for people coming out of the Regional Center Facilities, in say, the Bay Area, then nothing else can be addressed because you spent all the money on a few privilaed individuals, losing site of your responsibility to reach the most with what we have collectively.	Jan 28, 2011 8:47 PM
130	All individuals who qualify.	Jan 28, 2011 8:48 PM
131	individuals that can afford to live on their own should receive supporting living or independent living. individuals that can't afford it should not be given the ticket to live independently. there are other service models that are cost effective, if supported living is not the best one for them	Jan 28, 2011 8:49 PM
132	Anyone with developmental disabilities who has this identified as a need in their IPP	Jan 28, 2011 8:50 PM
133	Allowing living and supported living services for adults who want to continue living with their families. This will go a long way in preserving California money and encourage families in keeping family values at the forefront.	Jan 28, 2011 8:54 PM
134	I think this would be very important because having a consumer independent or with some support would be a lot cheaper in the long run than having them fully dependent on the system.	Jan 28, 2011 8:54 PM
135	Service standard should achieve the promise that people with intellectual and developmental disabilities will have an individualized program plan and access to the services and supports best suited to them throughout their lifetime, to enable them to live an independent, self-directed, and typical life.	Jan 28, 2011 8:56 PM
136	Should be open to all adults with developmental disabilities	Jan 28, 2011 9:09 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
137	Am just entering this phase with my high functioning Autistic son. Am still in the process of learning, so I do not feel qualified to answer.	Jan 28, 2011 9:22 PM
138	This is the most important subject. For a client remain in their home, with family who love them and feel responsible in every way for them. It is also much more economically feasable for the client to be in their home and healthy. There are no distractions or fear of a stranger among us at home.	Jan 28, 2011 9:23 PM
139	All who need and dream of independence. Individuals with disabilities who are cared for solely by family members will one day find this resource gone.	Jan 28, 2011 9:29 PM
140	Any one who is over the age of 18 years old and is interested in ILS or SLS supports should have access to this option.	Jan 28, 2011 9:45 PM
141	Anyone with a disability interested in living in an apartment/house in the community. Sustained and communicated interest, not physical/cogntivie ability, is the qualifier for the service.	Jan 28, 2011 9:52 PM
142	I would love to see ILS and SLS be available, somehow, for individuals continuing to live within the family home, as this can be a cost effective way to live.	Jan 28, 2011 9:54 PM
143	Anyone on Medi-Cal *(due to institutional deeming) should ge tthe services, including minors and adults. Probablyminors benefit from it more than adults since they have so many more needs in addition to those special needs.	Jan 28, 2011 10:00 PM
144	This is the best model for both high functioning consumers and behaviorally difficult consumers. It offers the most flexability. The staff in the behavioral homes needs special training to deal with the behaviors.	Jan 28, 2011 10:03 PM
145	People who are making honest efforts to work hard and be independent deserve any services that we can provide. People who are lazy, don't work and pop out baby after baby should not receive extra help.	Jan 28, 2011 10:08 PM
146	Adults over the age of 18 living outside of the parental home.	Jan 28, 2011 10:11 PM
147	no suggestions	Jan 28, 2011 10:20 PM
148	Anyone who is unable to live on their own. If they aren't taught what needs to be done they will be homeless and require more money and services later on.	Jan 28, 2011 10:24 PM
149	Any disabled person who would be able to live independently after learning the necessary living skills should receive these services.	Jan 28, 2011 10:26 PM
150	ILP/SLS: Individuals who are eligible under the Lanterman Act, who are age 18 or older and who live independently. However, exception may be given if the purpose of the service is to transition the individual within 3 months from their family home.	Jan 28, 2011 10:36 PM
151	Contract with providers who are licensed or qualified by the State. Establish safeguards and reviews at not longer than quarterly periods that investigate the services provided to ensure they are appropriate. Some of these providers obtain licenses from the State then simply "warehouse" the consumers and collect fees from the State while providing no/few useful services to the consumers.	Jan 28, 2011 10:39 PM
152	consumer	Jan 28, 2011 10:44 PM
153	This services should be giving to consumers that are ready to move out in their own. Cosumers at age 18 are not raedy to move in their own because they are not mature. If they are put to live in their own is very risky.	Jan 28, 2011 10:45 PM
154	Anyone who would benefit from the service.	Jan 28, 2011 11:05 PM
155	RC decision final no appeal rights.	Jan 28, 2011 11:06 PM
156	Anyone who has a desire to live in the community: alone, w/roomates or with a person who will provide on-going support.	Jan 28, 2011 11:07 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
157	client's who are indeoendent enough to live on their own should receive ILS services for a temporary amount of time. Those clients who have been on their own and who have received ILS services for more than 5 years should be assessed to determine if ILS services are still required. At the very least, ILS service hours should be reduced after 5 years. If a client who lives on their own is still unable to continue their living arrangements without full time ILS, then an assessment should be made on whether or not, indpendent living is suitable.	Jan 28, 2011 11:10 PM
158	Those who have been dependent on support such as special education through 22 years of age (qualifying with Moderate/Severe Disabilities), even if they have parents whom they could live with. Those who wish to live independently should have the opportunity to do so with appropriate support and services.	Jan 28, 2011 11:18 PM
159	based on recommenations of a qualfied agency	Jan 28, 2011 11:19 PM
160	Must be 18 years and older and voice a desire to live on your own. Clients who cannot vocie a desire to leive on thier own or whose safety is jeopardized, should not live independently. There are some clients who receive SLS and are getting 24 hours care, but still rely on everyone for assistance, and the care they receive is not at the same level as if the client were receiivng residential care. The assistance they recieve is not the best and because it is personal care in the client's home, it is too difficult for the regional center to monitor closely. If a person needs 24 care and supervison, they should be in residential care. If a client needs overnight staffing -- they should be in residential care.	Jan 28, 2011 11:21 PM
161	SLS is too expensive an option if a person cannot ever be left alone in their own home.	Jan 28, 2011 11:22 PM
162	1) every adult with a disability should first and foremost think living in your own place - removal from this should be done only on the needs of the person - this is a similar concept to LRE in the schools. though badly implemented, the concept is a good one 2) How much someone receives must be discussed up front and determined individually 3) everyone should be encouraged to use generic services also - such as ihss, section 8, etc.	Jan 28, 2011 11:22 PM
163	Any client living independently and outside of the family home.	Jan 28, 2011 11:47 PM
164	Individualized needs and level system for those who can move through and effective support system. My number one goal: do NOT put handicapped people in living situations that put them at HIGH RISK FOR ABUSE. Non-verbal females who can not "report" or protect themselves and too vulnerable to be in "supported living" situations where they are at the mercy of their caregiver (or her boyfriend). I support smaller living situations only for those individuals who have been TAUGHT to protect themselves and can report when someone is taking advantage of them.	Jan 28, 2011 11:47 PM
165	ILS - people who can demonstrate readiness to move into the community in 6 months or less SLS - anyone who can live successfully in the community with support staff	Jan 28, 2011 11:57 PM
166	It sounds like this will be expensive. I don't think any one should receive this. If they already went through your day programs and work programs and all the other training programs, or chose not to, and are not able to live on their own, maybe they shouldn't live on their own. You can't support people for their whole life. There comes a time when they must be own their own and independant. So, if anything set a time limit for these services and a limit to the services.	Jan 29, 2011 12:00 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
167	All qualifying consumers should be given the option of receiving these services, however, not all consumers are able to utilize these services in a safe responsible manner. This is a tricky area. High functioning consumers, although they may be able to request these services may not always be appropriate for these services. ID team members, the consumer and possibly the courts might decide who should receive these services. A new level of guardianship needs to be considered to protect our consumers who can articulate nicely but function poorly.	Jan 29, 2011 12:06 AM
168	Individuals living with family members would also benefit from the types of services described here. People often choose to live together for economic reasons but still want as independent an existence as possible.	Jan 29, 2011 12:20 AM
169	All who qualify.	Jan 29, 2011 12:29 AM
170	Adults with developmental disabilities that do not discriminate based upon the level of need or support necessary for them to be safe and well.	Jan 29, 2011 12:43 AM
171	Anyone capable of standing up to their families that rob them of SSI and other moneys. Anyone capable of understanding that they are living independently.	Jan 29, 2011 12:45 AM
172	anyone that has a disability that wants to live or whose family wants the individual to live outside of the family home should be provided Supported or Independent Living services. Facilities have no place in our communities today we know better how to support anyone regardless of the severity of the disability to live in the community in our neighborhoods.	Jan 29, 2011 1:04 AM
173	Many of my students are homeless after the age of 18 due to not qualifying for independent or supported living services after they turn 18. This is language from 2007, but my students that meet these guidelines still don't qualify because they aren't "severe enough." The students of mine that are most likely to be homeless have mental health issues or significant learning disabilities (the low LH population) who are too high for SH services, but are functionally illiterate. Article 1: Definitions Section 54001 - Substantial Handicap Disability (a) “Substantial handicap disability” means: (1) a A condition which results in major impairment of cognitive and/or social functioning, . Moreover, a substantial handicap represents a condition of representing sufficient impairment to require interdisciplinary planning and coordination of special or generic services to assist the individual in achieving maximum potential; and (2) The existence of significant functional limitations, as determined by the regional center, in three or more of the following areas of major life activity, as appropriate to the person’s age: (A) Communication skills; (B) Learning; (C) Self-care; (D) Mobility; (E) Self-direction; (F) Capacity for independent living; (G) Economic self-sufficiency. (	Jan 29, 2011 1:34 AM
174	People between the ages of 17 and on. Independent Living Skills is not just about living in your apartment in the community. But it is about having the skills to be independent while do so. It is about being able to maintain your own home, go to work, and be involved int the community or with family without have supports with you everyday telling you how to live your life. Regional Center should start preparing all consumer's for this since the age of 17. This may be more work but the outcome is that we will have more increased independence and less aging adults who haven't acquired the necessary skills.	Jan 29, 2011 1:38 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
175	People who want to stay at home and not be forced to go into a nursing home.	Jan 29, 2011 1:39 AM
176	any adult consumer who shows a desire to live "independently" should be given that opportunity. A group home setting may be of more benefit to multiple-handicapped, really severely involved or limited persons. But all consumers' have parents who will age and it is best to transition a person to an "independent" (referring to both ILS and SLS) at the age that a typical young person would "move out in their own".	Jan 29, 2011 2:04 AM
177	These services should retain the current standards of requirements since they provide a crucial social support. This benefits all Californians, providing work for providers who are screened by the state to avoid abuse of elders and children with disabilities whilst saving the tax payers the cost of institutional care and emergency hospital care.	Jan 29, 2011 2:37 AM
178	Everyone with a disability needs this option.	Jan 29, 2011 2:41 AM
179	1. Current regulation allows way too many people to access SLS services. Need to narrow eligibility. 2. Need to make it an exception for someone to live alone in SLS setting. Finding roommates can be difficult but would be great way to control costs.	Jan 29, 2011 2:58 AM
180	Any disabled person who would like this service.	Jan 29, 2011 3:05 AM
181	Those individuals who can not live on their own, and those who are most vulnerable to prey are the individuals who should receive these services	Jan 29, 2011 3:05 AM
182	consumer choice	Jan 29, 2011 3:09 AM
183	Far Northern Regional Center does a very poor job in communicating to parents of consumers about what options their children would have in these areas once they are 18. Lets get the info out in the open. They act like if the education the consumers they will actually have to pay for them to use the services.	Jan 29, 2011 3:34 AM
184	All regional center consumers	Jan 29, 2011 3:44 AM
185	any regional center customer with needs	Jan 29, 2011 3:51 AM
186	Anyone desiring to live in the community.	Jan 29, 2011 4:30 AM
187	Anyone should be eligible, but cost efficiency standards should remain in place where a person's SLS monthly costs should not exceed the comparable cost of a Group Home.	Jan 29, 2011 4:42 AM
188	anyone who needs them	Jan 29, 2011 4:42 AM
189	Only those who are really capable to be independent and mentally stable. Have financial management capability	Jan 29, 2011 4:55 AM
190	developmentally disabled and autistic people	Jan 29, 2011 5:00 AM
191	regional center clients.	Jan 29, 2011 5:06 AM
192	No one should be cut	Jan 29, 2011 5:09 AM
193	those who can benefit from these services must receive them.	Jan 29, 2011 6:11 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
194	Who receives services needs to be expanded. There is an OCD kid here who could benefit immensely from ILS services, and job support, because he is struggling, but could make it with a minimum of support. There is a Down's kid here who is practically self-sufficient, but needs ILS. My kid can still learn, and if I want him to leave here, which I do, he will need SLS. He has CP, is visually impaired, has developed epilepsy from careless caregivers from too many falls in his electric wheelchair because they weren't watching. I am one of the Big Wave Project supporters, and was hoping my kid could become a part of that. We have spent 10 years planning this project- all the parents are involved, and committed copious amounts of time volunteering to plan the EIR. Still- the lovely no-growthers in Half Moon Bay have blocked any progress until recently. The planning commission approved the process. Now it has to go through the appeals process, and then the Coastal Commission. This project could have housed 50 to 60 developmentally delayed adults in their own condos/apts. and the kids want it! They want to live there. So- if DDS wants to save money, I would suggest you get behind really innovative projects like Big Wave Project.org, and make it happen. This is a project where jobs are a given because of the office park; the kids will get ILS and SLS support, plus on-site counselors; the organic farm will provide food and more jobs; there is easy access to town (Half Moon Bay). Our kids are so good at speaking up for themselves, they have personally advocated for this project in front of the SM County Board of Supervisors at least 10 times in the last 10 years. When Barry Benda was at GGRC. he fully supported our concept.	Jan 29, 2011 6:36 AM
195	Any consumer who wishes to live in the community (per the Lanterman Act)	Jan 29, 2011 6:42 AM
196	Anyone who has a disability and wants to live in a supported living situation should be allowed to do so.	Jan 29, 2011 7:45 AM
197	People (with disabilities) report to an independent outside source that services are good. People are provided training via DVD that describes self advocacy and what good services look and feel like.	Jan 29, 2011 7:45 AM
198	Disability people	Jan 29, 2011 7:46 AM
199	The age limit for ILS should change to 15. No one waits until they're 18 years old to learn how to live independently! Most CHILDREN are sent off for college at age 17 and parents send them hoping that what they taught them previously is embedded in their minds so they are able to live independently! Little girls need to learn before age 18, the importance of hygeine. I know the parents should be responsible for this rearing, however, as stated before, some of the parents of the consumers are DD themselves and are in need of services.	Jan 29, 2011 7:59 AM
200	Service standards, This should be very clear. To keep client out of a institution. This service enables clients to live at home saving the State thousands of dollars monthly. The standard should be the same as the care facility. All of the clients needs need to be meet. Safe, secure interviroment & all medical conditions cared for. Standard of needs to be set by doctor and physiologist.	Jan 29, 2011 4:04 PM
201	Those adults who because of their developmental disability would not be able to live independently without these services.	Jan 29, 2011 4:33 PM
202	Consumers that qualify for such services should receive them. The hours each receives should be individual as it depends on the need. This encourages consumers to keep their independence and teaches the consumer to live a good quality life in the community and among their peers.	Jan 29, 2011 6:04 PM
203	Any individual with disabilities who has a desire to live independently in their community should be given an opportunity to do so. Many families are happy to have their children with disabilities continue to live at home as adults but they may need support to do that. There needs to be a range of flexible and creative options for all individuals with disabilities to have some say in their adult lives.	Jan 29, 2011 6:36 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
204	Supported Living Services should generally cost approximately what it would cost for a person to reside in a small group home that is a homelike setting, however there is often a quality of life issue associated with the comparison of living arrangements. SLS generally allows for more freedoms, more choices, less congregate-style living etc. In recognizing quality and consumer choice, perhaps there should be an arbitrary percentage in the formula that allows for say, a 10%-15% SLS expenditure above and beyond the cost of board and care style living. Rent should be allowed in the SLS equation. The system pays rent for board and care living. Have an overall standard that relates back to the cost of living in an apartment including rent; a person should not be disqualified from SLS because they can't afford the rent. So long as the entire cost is no more than board and care living, rent should be allowable. For instance, a roommate situation with shared staffing and shared rent may be more cost effective than similar board and care living.	Jan 29, 2011 7:01 PM
205	If the consumer needs this service to have maximum independence to live in their community, the regional center should be able to provide the service so the consumer can achieve this goal. Referral should be responded to within 30 days by the Regional Center; consumer should have their Regional Center evaluation within the next 30 days; any assessment tools that clearly allow their participation in planning their goal of living independently in the community of their choice; Regional Centers should be able to provide all available service provider choices that will help them achieve their community independence goals.	Jan 29, 2011 7:28 PM
206	A well trained staff, that is able to support the consumer with instructions in any area that they are not able to handle themselves. Advocating in a big area when consumers are trying to deal with large companies such as banks, credit situations, medical care and legal problems. A good instructor should be able to evaluate and instruct the consumer in dealing with these issues to be safe as well as educated living independently	Jan 29, 2011 7:38 PM
207	Individuals that have the capability to live in a community environment or on their own need training on how to live independently. Some education on safety and cleanliness are many times needed. A person with disablities many times need training on how to live safely and cleanly on their own. Many times living in a community environment can teach a person how to live later on their own	Jan 29, 2011 7:47 PM
208	All adults who would benefit from these services and have no family to help them.	Jan 29, 2011 8:32 PM
209	There are a wide variety of services listed and not all people will need all the services. I believe that a team should identify what the needs are. This team should consist of the person requiring services, their regional center worker, their advocate if they have one, their guardian or parent, and the team should consider any recommendations from their doctor or other medical caregivers/providers regarding their needs. A tailored plan should be made based on the reasonable needs of the person. Services for choosing personal attendants should be given anytime a new personal attendant is needed.	Jan 29, 2011 9:24 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
210	Independent living should be considered only for those consumers for whom it will not be a detriment, taking into consideration the effect of such living arrangement on the consumer's health (physical and psychological), safety, proximity to work/programs and general quality of life. Consumers should not be encouraged to desire such a situation where it is clear no amount of training/preparation will qualify them for it (e.g. Downs syndrome). Supported living services should be provided where the consumer is unable to perform necessary daily living functions themselves and there is no family member or friend able to assist them. "Participation in community life" should be limited in relation to the consumers' disabilities. (Not everyone gets to do everything they desire.)	Jan 29, 2011 10:15 PM
211	Anyone who wants to receive these services.	Jan 29, 2011 10:21 PM
212	THOSE WHO ARE READY FOR ND CAPABLE OF THIS SERVICE AS DETERMINED BY A TEAM ASSESSMENT WITH CLIENT AND CLIENT FAMILY	Jan 29, 2011 11:50 PM
213	If a person can live independently but needs additional help with balancing a checkbook, cooking meals, or grocery shopping, it should be provided.	Jan 30, 2011 12:32 AM
214	these programs richly enhance quality of life and self-esteem for consumers Hands on staff need to be closely monitored to make sure the aboveservices are being correctly delivered Consumers have greater freedom of choice andlife style These programs are a wonderful alternative to traditional group home	Jan 30, 2011 12:42 AM
215	I see a real waste of funds going out for initial services when the consumer is clearly not ready to move out on their own. I feel that consumers should have the financial funds available to them to pay their rent and bills before they are approved for services. Services should be available to any consumer who wishes to live independently.	Jan 30, 2011 1:48 AM
216	THESE SERVICES ARE FOR CONSUMERS WHO ARE CAPABLE/ABLE TO LIVE ON THEIR OWN. GIVE CONSUMERS A CHOICE HAVE THEM DECIDE. IF LIVING ON THIER OWN IS A GOOD ROUTE FOR THEM. INDEPENDENT LIVING AND SUPPORTED LIVING SHOULD BE ENCOURAGED. THIS ROUTE IS PROBABLY CHEAPER THAN CONSUMER LIVING IN A CAREHOME...COMPARE. TWO ADULTS SHARING AN APARTMENT(GOVERNMENT SUBSIDIZED APTS) COST $800/MONTH. TWO ADULTS IN A LVL 3 CAREHOME WILL COST THE STATE $2500 EACH. $5000 FOR TWO ADULTS LIVING IN A CAREHOME.	Jan 30, 2011 3:59 AM
217	Over paid program for Supportive Living. This one it should be strict on who should be receiving these services. Regional center paid too much into these program.	Jan 30, 2011 4:50 AM
218	The Medi-Cal Disabled should receive these services so that we can live in our own home in dignity without being placed in a nursing home.	Jan 30, 2011 7:09 AM
219	Everyone should be screened (even my typical child!) and provided with what they need! Do fail here is terrible - I have people I know who have signed contracts, bought things, and especially gotten into legal trouble. Again, stay in good contact and plan regular catching up on these things so you stay on top of problems so that you aren't playing catch up ball. It will save so much hurt and money over time.	Jan 30, 2011 4:59 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
220	preserve the IPP process for determining the needs and choices for these services. do not supplant SLS/ILS with untrained and unsupervised IHSS workers	Jan 30, 2011 5:21 PM
221	Priority must be given to those consumers who, due to physical and/or cognitive issues, would be unable to live independently without IL or SLS services. Those who can qualify for IHSS should be required to apply. Those unable to qualify need to provide a written denial.	Jan 30, 2011 6:10 PM
222	There needs to be a thorough evaluation of need.	Jan 30, 2011 7:38 PM
223	From an ethical perspective, everyone should have the opportunity to live independently, and it is in keeping with the Lanterman act that we continue this approach. The use of self-directed services could do a lot to mitigate costs for these services, and it is important to remember that even the most expensive of Supported Living Services can save the State hundreds of thousands of dollars per year, if they can successfully serve people, who on average cost the State $300 K per year in State institutions. The services my agency provides are very expensive; however, we exclusively serve those who have histories of being discharged from all other types of services that are available, save those provided by developmental centers. As mentioned above, services provided by DC's average about $300 per year. The folks we serve average more in the range of $180 - $200 K per year, and the services are both more comprehensive and create better qualities of life for these very challenging folks (e.g. those with severe mental health issues, those who pediphiles, those who are deemed to be dangers to themselves or others (6500 status), etc.) Given that, the cost savings compared to the cost of serving people in institutions more than justifies the expenses that are necessary to maintain my clients.	Jan 30, 2011 9:10 PM
224	all in need especially autism and aspergers	Jan 30, 2011 9:12 PM
225	Any person that is able and wants to live as independently as they are safely able to.	Jan 30, 2011 10:42 PM
226	I approve of the standards now in place and do not want any reduction of services This is the area in which all of the adults with developmental disabilities need the most help. And helps the consumers be accepted and happy in their communities	Jan 30, 2011 10:43 PM
227	Because of the cost of living, it appears only those persons requiring level four or ICF/DD levels of service are going into SLS. Persons who require Level Three services do not fall into a rate structure that allows them to get an effective, and more cost effective rate of service. I wonder if there are individuals who have been assessed at Level Four rates simply to get them into the services?	Jan 31, 2011 12:15 AM
228	ILS is getting more and more restrictive. Loosen up the regs so people who are planning to stay in their family home indefinitely can still receive these skill development options	Jan 31, 2011 4:30 AM
229	Clients should be screened and assessed closely for independent skills to determine the safety factors. Not all clients are capabale of being independent even though they present as such. COgnitive thinking and safety issues are not always present.	Jan 31, 2011 4:32 AM
230	Individuals who need support up to 75% of a 24 huor period.	Jan 31, 2011 2:51 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
231	If an individual chooses to live independently, that person should have the ability to live independently. Currently, many live on thier own and much money is spent to continue this service, Many times the person can not handle their money responsibly, refuse to work, and, expect for the family or the Regional Center to bail them out. Again, a useful tool of measurement should be provided for whether a person with a disability can actually live independently. If they can not, they a safe, enjoyable mode of living should be provided according to the level of need that person requires whether it be physical health or mental health.	Jan 31, 2011 3:45 PM
232	People who can "realistically" live on their own. They should be their own payee for Social Security funds and have some knowledge of money management. The people who abuse the system and use ILS or SLS like their personal attendent or taxi, are the same who don't take it seriously and should not be considered. A client who wants ILS, SLS, or any adult service should be attending some sort of vocational program as a prerequisite. A "normal" adult is not able to live independently without having some sort of job bringing income. How can we teach independence without that responsibility.	Jan 31, 2011 4:19 PM
233	This service is a must because each individual will most likely out live caregivers. I do support living in communities vs. facilities when every possible. This is an area that DDS should be providing support so that disabilied individuals maintain their dignity and a standard of living.	Jan 31, 2011 4:28 PM
234	Supported Living has gotten out of hand - there are too many people in supported living who 'cannot direct their own services.' While the model may work for them, they are usually funded at a much higher level that was originally intented for the service.	Jan 31, 2011 4:37 PM
235	any consumer who has the desire to live independently should be given an opportunity to do so.	Jan 31, 2011 4:45 PM
236	SLS guidelines should be reassess as it's only appropriate for limitted consumers. There also should be a cap to the amount pay for these services. If a consumer requires so much SLS then he/she shouldn't be in SLS, he she should be in a RCF.	Jan 31, 2011 5:14 PM
237	ILS services should be expanded and used to lower the high costs of Supported Living. SLS services are out of control!!	Jan 31, 2011 5:30 PM
238	Any client who lives independently and has a specific need for training in an area of independence.	Jan 31, 2011 5:47 PM
239	SLS should NOT be provided to persons who require 24/7 supervision with one or more support persons in the home at all times. People whose behaviors require that they be accompanied by more than one support person when out in the community, or who are unaware of their surroundings and are bedridden or otherwise unable to go into the community should not receive SLS. SLS in these situations simply becomes a mini institution. People who require more moderate levels of supervision and support with ADLs, e.g. learning & using shopping and cooking skills, financial management, medication management, homemaking, and physical assistance are appropriately served in SLS.	Jan 31, 2011 5:50 PM
240	Only those who show some readiness to live independently should receive these services.	Jan 31, 2011 5:52 PM
241	Any dd individual who needs assistance to stay independent is entitled to this service. They can not advocate for themselves. The money spent on assisted living saves the tax payer in the long run. They do not have to live in a residential home or hospital.	Jan 31, 2011 6:02 PM
242	All adults over the age of 18.	Jan 31, 2011 6:09 PM
243	All consumers who are appropriate for these services should receive them. With the exception of those student's whose behavioral issues prevent employment.	Jan 31, 2011 6:15 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
244	anyone who qualifies for regional center services and is in need of these services as identified by the planning team	Jan 31, 2011 6:19 PM
245	Given the current economic situation and all of the budget cuts we have had to accept I would like to suggest that we end Supported Living services for individuals as it is currently set up and offer them the option of Board and Care as an alternative. It's more cost effective and would hopefully allow us to provide needed services for a much larger group of people.	Jan 31, 2011 6:25 PM
246	Any adult with a disability is eligible for these services under the Lanterman Act. It is not limited to consumers who are higher functioning or lower functioning. That should NOT change. All consumers deserve to live a full, productive life. These services provide for that. If the number of hours is reduced, many consumers receiving these services would be in danger and could end up institutionalized again.	Jan 31, 2011 6:36 PM
247	The people that should receive these services should be people that are currently served by the regional center. If the person expresses a desire to live on their own with the support if indepedent living, then a assessment should be made as to how these services will be proveded.	Jan 31, 2011 6:39 PM
248	people with disabilities who live alone or with families who are too old or have no ability to take care of them, and elders.	Jan 31, 2011 6:39 PM
249	For SLS anyone 18 and over that meets the affordability criteria For ILS, if consumer is planning to move from family's home within the next 6-12 months or if family members are out of the home the majority of the time or if parents are elderly	Jan 31, 2011 6:41 PM
250	Any client who has the desire to live independently. Some criteria should be set as to who is capable and what skills need to be learned before being able to move out.	Jan 31, 2011 6:57 PM
251	Any California resident who has a diagnosis of physical, developmental, emotional, or psychiatric disability.	Jan 31, 2011 7:03 PM
252	Individuals with a developmental disability.	Jan 31, 2011 7:20 PM
253	Eliminate ILS. Only provide SLS to people moving to own place in next 3 months or already living in own place. Standardize # of hours available statewide to eliminate existing discrepencies.	Jan 31, 2011 7:26 PM
254	It would be great if we could get some sore of respite care....even a few hours twice a month to get some time to get errands done and recharge our batteries as parents after all of the doctors, hospital visits, and therapies. I know many other states do provide these services.	Jan 31, 2011 7:31 PM
255	Any consumer who desires to live independently or with supports	Jan 31, 2011 7:36 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
256	Anyone with a diagnosis of a developmental disability, over the age of 18, is eligible. * Including people who are medically fragile, need intense personal care, have a label of "severe" and/or "challenging" behaviors etc. * Everyone should have the right to, live in their own homes. This does not preclude people who do not have the ability to communicate traditionally, who do not have an advocate, or any of the aforementioned "labels". * No one should be excluded based on disability or readiness. * Supported Living Orientations, via the Regional Centers, should be optional and any necessary adaptations should be made available to individuals in this regard. * Individuals should have a choice in the provider who completes the community assessment. Once an assessment is completed, and an agency has been identified to carry out SLS/ILS, services should begin in a timely manner.	Jan 31, 2011 8:14 PM
257	developmentally disabled persons who want to live independently and are over 22 years old and require some training and assistance as determined in their IPP	Jan 31, 2011 8:23 PM
258	Any individual with a developmental disability who is a candidate for these services	Jan 31, 2011 8:48 PM
259	developmentaly & phyiscally disabled	Jan 31, 2011 9:03 PM
260	I believe that it is very important to enhance the quality of living for individuals with special needs. Setting up this type of living support assist them in integrating into society.	Jan 31, 2011 9:15 PM
261	Anyone living independently who requests the service	Jan 31, 2011 9:15 PM
262	A consumer should be motivated to live on their own and willing to receive help in doing so in order to receive independent or supported living.	Jan 31, 2011 9:17 PM
263	I am a strong advocate of people to live as independently as possible and with absolute concern for safety issues. To be integrated within the community encourages a positive sense of self and value. Independent Living is appropriate for some consumers; however, having a vendor agency as a provider on a periodic basis is absolutely required and very important. I applaud the ability for some consumers to live with a roommate as long as a vendor agency is aware of the conditions and mental state of the consumer.	Jan 31, 2011 9:22 PM
264	There should be a specific standard maximum cap on the hours purchased for such services.	Jan 31, 2011 9:24 PM
265	Anyone with developmental disabilities who has this identified in as a ned in their IPP	Jan 31, 2011 9:30 PM
266	people who need assistance in order to live independently	Jan 31, 2011 9:32 PM
267	Adult people with DD who are striving to live as normalized a life as possible and who have the cognitive function to live at least a semi-independent life. For people with very, very severe disabilities (probably as little as 5% of the population), it is necessary to keep AT LEAST two developmental centers open to accommodate their needs.	Jan 31, 2011 9:41 PM
268	All adults with developmental disabilities that want to be more independent.	Jan 31, 2011 9:52 PM
269	I suggest keeping the current standards for SLS that anyone is eligible who is over the age of 18 and wishes to live in this type of setting.	Jan 31, 2011 9:54 PM
270	disabled persons that can function safely on the community	Jan 31, 2011 9:56 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
271	"Limits" is more appropriate than :Standards"	Jan 31, 2011 9:58 PM
272	We want individuals to live in the community. The big push was to get them out of institutions. We must provide a set amount of hours per month.	Jan 31, 2011 10:16 PM
273	Those who need the services or require the service in order to continue.	Jan 31, 2011 10:22 PM
274	All client's coming out of high school should be able to receive ILS services. Clients who are currently living at home with their parents/caregivers or own their own.	Jan 31, 2011 10:25 PM
275	We have many many individuals in State Ops and ICF's that could be moved to less restrictive and less expensive environments. Choice has to be limited -- a $200K plus SODC should NOT be an option. Those providers that do not move individuals to less restrictive envirnoments so that they keep their beds full should be closed donw!	Jan 31, 2011 10:26 PM
276	According to IPP as entitled in Lanterman Legislation	Jan 31, 2011 10:30 PM
277	Consumers who are capable of living independently.	Jan 31, 2011 10:31 PM
278	Clients who live "on their own" should be classified as SLS not ILS	Jan 31, 2011 10:40 PM
279	Consumers who are able to indicate their desire to live in a supported living environment rather than a residential care home. Sometimes parents want their children to have their own apartment, but do not think about the isolating impact of that decision.	Jan 31, 2011 10:47 PM
280	Anyone who wants this service should be entitled to it. The freedom to live in one's own home is fundamental to human rights.	Jan 31, 2011 10:54 PM
281	All independent living and supported living services should be provided up but not to exceed the cost to place a consumer in a developmental center.	Jan 31, 2011 11:23 PM
282	Anyone who would like them	Jan 31, 2011 11:27 PM
283	Any developmentally delayed person who can perform a baseline of tasks necessary for them to attempt independent living	Jan 31, 2011 11:41 PM
284	Person that do not require medical support.	Feb 1, 2011 12:22 AM
285	Any disabled person functioning highly enough to manage living without pervasive supervision	Feb 1, 2011 1:15 AM
286	All developmentally disabled adults.	Feb 1, 2011 1:20 AM
287	Individuals capable of directing their day to day activities. No one requiring 24/7 care (baseline for CCL living arrangements)	Feb 1, 2011 1:21 AM
288	SLS should be the standard and the old group home should take the way of the dinosaur. Parent SLS vendors should be sought out and rewarded for their efforts. Parent Vendors should be elevated to the point that they are not audited and kill by state regulations because Regional Centers don't like parents. All regional centers not doing SLS promoting and parent vending should be DEFUNDED!	Feb 1, 2011 1:43 AM
289	Consumers who are able to adapt with the support they need to be successful.	Feb 1, 2011 3:15 AM
290	Individuals who are deemed safe, who can work and work and pay their rent, and who can integrate effectively into their community.	Feb 1, 2011 4:46 AM
291	all those who need it, assess the consumers and make the decision	Feb 1, 2011 4:51 AM
292	all regional center consumers, aged 18 or older, who are appropriate for and interested in receiving such services.	Feb 1, 2011 4:52 AM
293	All who need them	Feb 1, 2011 5:18 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
294	independant living skills are helpful and should be continued as long as there is a need. Supported living services need to be held to the same standards as residential care homes, providers should have to not only provide the care but also take on the responsibilitys that residential providers do, such as staff trainings, consultant hours, staffing ratios etc.	Feb 1, 2011 5:19 AM
295	N/a	Feb 1, 2011 5:24 AM
296	Anyone who can benefit from these services.	Feb 1, 2011 5:26 AM
297	any individual with a disability who shows they can reach these goals with the help of these services.	Feb 1, 2011 5:59 AM
298	Families need to provide living services for their own family members. Families within our nation have become so spread out and distant, that the family-unit no longer feels the responsibility to care for their own family members. The people of the USA now have the mentality that it is the government's responsibility to financially support and take care of their family members. Our society is crumbling due to the disintegration of the family. If the government stops supporting the every need of individuals it will necessitate families taking responsibility for themselves. It will restore individual responsibility, bring families back together, eliminate the "welfare mentality" and restore the economy of state & nation due to the eliminatinon of the excessive and out-of-control spending of entitlement programs.	Feb 1, 2011 6:51 AM
299	All developmentally disabled adults who desire to be independent.	Feb 1, 2011 7:11 AM
300	The consumer, not the State, should decide their living situation. Statewide standards are not appropriate.	Feb 1, 2011 7:15 AM
301	anyone who desires to live independently but cannot manage self care independently.	Feb 1, 2011 8:55 AM
302	Cnsumers living out of residential care	Feb 1, 2011 9:46 AM
303	DDS should have a category of SLS/ILS or different service that pays for roommate matching services on a time-limited basis, that would include things like personality profiles as well as specific activities like social mixers for consumers to meet and match ----- this is necessary if the Governor's proposal on cutting SSP off is approved because the basic federal SSI amount is not enough for just one person to live on, so roommates will be about the only way for people to retain their homes or move out independently. This vendor category and service standard would have to be carefully and sharply crafted to avoid abuse e.g. can only be used if all other ways of finding a roommate (like day program, social activities, friends, etc.) are exhausted. This shouldn't be an extra that everyone uses, but something consumers with limited social outlets or in rural areas would need.	Feb 1, 2011 10:46 AM
304	All special needs adults that are in need.	Feb 1, 2011 4:08 PM
305	Those individuals who are living with families and/or indepemndently should recieve these services if they are needed.	Feb 1, 2011 4:28 PM
306	Active regional center consumers who keep in regular contact with the regional center SC.	Feb 1, 2011 4:52 PM
307	Services needed to maintain community placement should be provided. The alternative is residential care or institutionalization. Bothe much more expensive alternatives.	Feb 1, 2011 4:55 PM
308	Further cuts in theis area will endanger the health and safety of adults with disabilities who are living in the community	Feb 1, 2011 5:02 PM
309	Children and adults with special needs.	Feb 1, 2011 5:25 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
310	There are many individuals with disabilities that frequently fall in between categories of services. Independent Living Services provides support for those that have the potential to be successful in their communities and not be left to depend upon more expensive, less integrated housing arrangements. This would include individuals with high functioning disabilities such as Autism, PDD, and Aspergers.	Feb 1, 2011 5:41 PM
311	Independent Living Services should be available for those individuals who have the desire to live on their own, but need limited support in order to be independent and functioning members of society.	Feb 1, 2011 5:48 PM
312	Should be based on whether the individual wants to live in their own place (or with a roommate). Done properly, this is one of the least costly ways for people to live. And even if it wasn't, it's the way most people without disabilities choose to live. That same choice should be available to everyone able to make it.	Feb 1, 2011 6:06 PM
313	Clients who have the ability to learn independent living skills vs clients who don't have the cognitive or physical abilities due to a severe or profound diagnosis and serious medical conditions. Clients who have a diagnosis such as Borderline Level of Intellectual Functioning, Mild-Moderate Intellectual functioning and mildly impacted by cerebral palsy, epilepsy, autism.	Feb 1, 2011 6:07 PM
314	Anyone who has the potenial should recieve these services for independent living or supported living services.	Feb 1, 2011 6:18 PM
315	make supported living services available to all disabled consumers. Harbor Regional Center restricts this despite their website stating it is available to all.	Feb 1, 2011 6:22 PM
316	adults	Feb 1, 2011 6:38 PM
317	Residents that undersstand their right s and responsibilites to make choices and are able to do so as law abiding citizens with minimal care. The care received shlud not exceed the rates paid by RSP to furnther misuse this delicate system that only works well with honest ard wroking providers.	Feb 1, 2011 6:44 PM
318	Those individuals that really qualify for the services you just described. In our small community alone we have SLS services that are set up as group homes, they just don't have to answer to licensing regulations. These people are not living independently, they are just living in a group and calling it supported living. SLS services are becoming day programs, the "hanging out" type. The original SLS services was truly someone living on their own with supports and it worked for those that truly were capable. Some got more hours then others, but they still could manage and had a seperate day life from the SLS service, which provided a good balance.	Feb 1, 2011 6:48 PM
319	ILS should be available to consumers as young as 15 years of age instead of 18. Most children learn to live independently or are trained to live independently at home much earlier than 18 years of age. Early training equals better production in the end.	Feb 1, 2011 6:51 PM
320	SLS should not cost more than licensed alternatives to the RC	Feb 1, 2011 6:54 PM
321	Any adult age who wants to live in their own residence should be eligible.	Feb 1, 2011 7:12 PM
322	Any consumer who would benefit from living on their own in the community.	Feb 1, 2011 7:19 PM
323	These people may ahve some minimal means for selfsupport and could posibly suffer a reduction in funding of max. 15% or 20% without being impacted to severely.	Feb 1, 2011 7:25 PM
324	persons over the age of 18	Feb 1, 2011 7:36 PM
325	Developmentally disabled	Feb 1, 2011 7:44 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
326	1) "Purchase of Service Limits" is a more appropriate name than "standards." 2) We oppose statewide purchase of service "standards." 3) There is no "one size fits all" solution. Purchase of service standards for each individual are defined by the IPP. 4) "Up to but not to exceed the cost to house one individual in a Developmental Center."	Feb 1, 2011 7:56 PM
327	For ILS individuals who have an interest and show through assessment the ability to obtain the skills should qualify. ILS may not always need to be an individual service, classes for small groups in a home setting may assist many in learning basic skills and then an individualized component could be used to help each individual to transfer skills into real world situations. SLS needs to be evaluated closely, it is not realistic for anyone (not just people with disabilities) to task the system with the expense of supporting them in the life they choose; we are all limited by finances in terms of what life choices we get.	Feb 1, 2011 8:31 PM
328	developmentally disabled	Feb 1, 2011 8:42 PM
329	Consumers who have lived in a group home for at least a year and who have demonstrated responsible behaviors and habits should be offered the opportunity to receive Supported Living Services.	Feb 1, 2011 8:54 PM
330	1) "Purchase of Service Limits" is a more appropriate name than "standards." 2) We oppose statewide purchase of service "standards." 3) There is no "one size fits all" solution. Purchase of service standards for each individual are defined by the IPP. 4) For questions 3 & 4: These standards already exist. 5) "Up to but not to exceed the cost to house one individual in a Developmental Center."	Feb 1, 2011 9:15 PM
331	Current standards are appropriate.	Feb 1, 2011 9:27 PM
332	EVERY PERSON SHOULD BE ABLE TO AT LEAST TRY TO LIVE IN THE MOST LEAST RESTRICTIVE ENVIRONMENT POSSIBLE. ANY CLIENT WHO SEEMS READY SHOULD BE ABLE TO AT LEAST TRY TO LIVE OUTSIDE THE HOME AND BE AS INDEPENDENT AS POSSIBLE.	Feb 1, 2011 9:40 PM
333	anyone who needs such service, should be able to live independently, with support.	Feb 1, 2011 9:40 PM
334	More definition on eligibility for Supported Living. In many cases we are paying significant amounts to develop placements for individuals that could effectively be served in board and care/FHA placement at a fraction of the cost.	Feb 1, 2011 9:49 PM
335	persons with disabilities who require less than 8 hours per day of care	Feb 1, 2011 9:58 PM
336	All consumers who desire to live in their own home with support needed.	Feb 1, 2011 10:02 PM
337	This is a self determination issue and a basic right. The client and their team shall be supported in all ways to support the clients who desire it to live in their own home	Feb 1, 2011 10:13 PM
338	My brother in law has Independent Living services and with out there help he could not do it on his own, He could live at home but he chooses to live as anyone of us would want to live, Under His Own Roof.	Feb 1, 2011 10:43 PM
339	No services should be provided to illegal immigrants.	Feb 1, 2011 10:49 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
340	All applicants who qualify should continue to receive services under the current standards.	Feb 1, 2011 11:20 PM
341	All people with disabilities that are capable of living on their own.	Feb 1, 2011 11:23 PM
342	Just about every client that is ready or want to live independant or a group living arrangement.	Feb 1, 2011 11:25 PM
343	My experience in dealing with ILS for Consumers has been awful. Our Regional Center isn't well versed on their own processes and many caseworkser aren't clear on the difference between Independent Living and Supportive Living and are discouraged from asking for services when they don't meet the minimal guideline.	Feb 1, 2011 11:37 PM
344	Again, the Regional Center fail with a child that had autism here and I would not trust them.	Feb 1, 2011 11:41 PM
345	These services should not be provided to persons who live with a family member,	Feb 1, 2011 11:42 PM
346	These services should be offered to all disabled individuals in need. These are American rights to life, liberty and the pursuit of happiness. All individuals should be assisted to be as functioning and participative in our social and economical society as possible.	Feb 1, 2011 11:43 PM
347	Among the identified population of consumers, any who demonstrate ability and/or desire to "go it on their own" should be helped to investigate and to act upon such desire.	Feb 1, 2011 11:54 PM
348	These services can easily be abused, if certain guidelines are not in place. These services are to encourage INDEPENDENT LIVING not codependency. There have been situations where this has occured. There needs to be a clear understanding as to the purpose for these types of service and if they are expected to be ongoing indefinitely.	Feb 2, 2011 12:27 AM
349	ILS and SLS are critical. We have closed the institutions, fine, but now must not take away the remaining housing programs for the developmentally disabled. They have nowhere else to go!	Feb 2, 2011 12:35 AM
350	Being a person who developed a disability before the age of 18, I was able to qualify for these services.I think everyone who has services with San Andreas Regional Center should receive services.	Feb 2, 2011 12:53 AM
351	I recieve services from the San Andreas Regional Center because I have a disability which started before I turned 18 years. I think everyone who needs services to live independently because of a disability should recieve services.	Feb 2, 2011 1:00 AM
352	1. Those who live independtly not with family or spouse unless spouse is consumer.	Feb 2, 2011 1:22 AM
353	People who are living independently or who plan to do so in the next couple of months. They should have areas of need for training and/or assistance with independent living tasks. Some people living independently should be given time to participate in social activities in addition to the training. Elderly people especially need more assistance than training and also need help to go into the community so they may have a better quality of life.	Feb 2, 2011 2:00 AM
354	CARF-Accredited organizations should be providing these services.	Feb 2, 2011 2:36 AM
355	Adult devopmentally handicapped people who qualify. This is a great program & helps the person to feel self worth & independance. They can live a happy & successful life. This program is important to these people & they should not be left behind but be able to achieve what every one of us do, be independent & live our lives as fully as we can.	Feb 2, 2011 2:47 AM
356	Definitive guidelines are needed.	Feb 2, 2011 3:07 AM
357	It should not be left up entirely to the service coordinator, or recgional centers. It should be based on the required level of care needed to meet the needs of the consumers.	Feb 2, 2011 3:26 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
358	Safe clean environment	Feb 2, 2011 3:32 AM
359	People with Asperger's, moderate autism, or other developmental disability, who otherwise could not live on his or her own.	Feb 2, 2011 3:44 AM
360	this should be expanded. this is the best most humane and cheapest game in town. IL and SL services are wonderful. do the numbers here.	Feb 2, 2011 4:16 AM
361	For developmentally disabled people that can live on their own. Most of our consumers have to continuely move due to their behavior.	Feb 2, 2011 4:48 AM
362	Consumers who have the potential for independent or semi-independent living skills, and who will be able to achieve this with the support of ILS and SLS.	Feb 2, 2011 5:03 AM
363	These services should be for people in their own homes. Only buy ILS when someone actually moves out. Don't allow the 'readiness' model of getting ILS for months while still in the family home. SLS should not be for 24/7 care. The system cannot afford this. The person needs to have the ability to be left alone for some portion of time, typically for sleeping.	Feb 2, 2011 5:15 AM
364	Any elderly persons where their ability to make choices is impaired.	Feb 2, 2011 5:21 AM
365	Anyone that needs this service so they can live as independent as possible. I have provided these services & it is REMARKABLE what a difference in quality of life it provides.	Feb 2, 2011 5:33 AM
366	Vendored agencies pad the hours needed. And it is usually the bigger agencies. I know this because agencies have changed with a particular consumer and the hours decreased and the service improves. This is becuase I have developed professional relationships with agencies that actually do what they say, and charge for what they do. There is a lot of milking by the larger agencies because they can get away with it. Supported Living is way over priced and again the ISP or service is minimally therapeutic. The providers are not trained to deal with the mental health issues our consumers in SL have. Agencies make a lot of money doing SL and the services can last for years and years. Everything about SL is costly, from SSI, to pay for roommates, to custom "day programs", managing beahviors, etc. Parents should have more responsibility in providing care and taking responsibility for not teaching their children how to be more independent. Behaviors at the age of 30 simply have not been dealt with appropriately and they are very costly.	Feb 2, 2011 5:46 AM
367	Foster Children 16 yo and up.	Feb 2, 2011 5:48 AM
368	Individuals who are unable to live with other individuals. Our son has Autism and it is difficult for him to tolerate behaviors of other clients in a group home setting. SInce the group homes are rated he would have to live with others that are for example a level 4. These individuals often set him off. He is difficult to live with due to extreme behaviors. I also believe that individuals that just don't want to have lots of room mates should be given this option.	Feb 2, 2011 6:00 AM
369	all persons with developmental disabilities as they approach adulthood.	Feb 2, 2011 6:35 AM
370	Stop letting parents block efforts to have RC clients move to less restricitive environments when they can, there are many who can move out of group homes and into these settings but NOT the sexual offenders who are RC clients	Feb 2, 2011 1:56 PM
371	Consumers should ONLY receive Independent Living if they have a date to move out of their parents home or the facility where they are living. Otherwise, it is a JOKE. Hundreds of hours are approved so the ILS instructor can take the consumers shopping at the mall.	Feb 2, 2011 2:01 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
372	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 2, 2011 3:35 PM
373	consumers 18 years or older and up to 62 or whenever they receive IHSS services.	Feb 2, 2011 3:40 PM
374	Individuals with Autism and Aspergers.	Feb 2, 2011 4:40 PM
375	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 2, 2011 4:55 PM
376	Mildly retarded or physically challenged individuals.	Feb 2, 2011 5:24 PM
377	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 2, 2011 5:51 PM
378	Any developmentally disabled or physically disabled consumer that would benefit from these services. They get to be a part of the community and learn how to live away from their family and feel good about themselves and not feel so different from everyone else. It gives them self esteem and teaches them how to act and grow and make a difference in their lifes and the lifes of others.	Feb 2, 2011 6:14 PM
379	All who want to move out of the family home and be as independent as possible!	Feb 2, 2011 6:23 PM
380	persons who are nearly able to live independently should be given the opportunity to do so. Many DD individuals are able to manage most of their own upkeep, with the exception of budgeting, finance, and advocacy that requires reading and comprehension. Such persons would be encouraged to live independently. Supported Living needs to be re-evaluated for cost-effectiveness.	Feb 2, 2011 6:29 PM
381	a	Feb 2, 2011 6:51 PM
382	Those able to live in the community with help.	Feb 2, 2011 7:02 PM
383	Anyone requiring assistance to live safely in the community	Feb 2, 2011 7:18 PM
384	Any person who would otherwise be institutionalized due to cognitive, physical, and/or behavioral deficits should receive these Independent or Supported Living Services.	Feb 2, 2011 7:29 PM
385	Adults living independently in the community	Feb 2, 2011 7:30 PM
386	ILS- may be used for those consumer who need support to live safely in the community- this should be avaliable to any consumer who wants to and has the ability to live in theis own home with limited supports. SLS- this should be avaliable to all consumers who want to live in the community but need more intensive supports than ILS can offer. However, at this time, due to cost effective rate structure, most of the consumers that are served in this type of situation, require intensive staffing which is costly. It would be great if an SLS plan could be developed for those consumers with less intensive needs which would eventually with training lead them into a life with only minimal ILS supports. Using SLS as a stepping stone to greater community independence.	Feb 2, 2011 7:41 PM
387	Individuals with Prader-Willi Syndrome require these services.	Feb 2, 2011 7:47 PM
388	Adults over the age of 22 - must be living in their own home, alone or with roommates. Persons who live with family members or in group homes or ICFs should not receive any SLS or ILS services.	Feb 2, 2011 8:27 PM
389	Any one who utilizes these services must understand that they are living independently, be able to request the service, direct the service and be able to tell the RC if they are being abuse, be that physically, mentally or sexually. They need to be able to accept the responsiblities that comes with living independent and want behave in a manner that allows that life style to continue. I don't believe advocates should be allowed to request the service as they are not living in the home and can not control what happens in the home. If a consumer needs supervison they need to be in a licensed facility that can be monitored. SLS is not a one person care home.	Feb 2, 2011 8:59 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
390	Those clients who recieve these services should meet a list of requirements, i.e. being able to read at a certain level, knowing numbers, being able to sign their name and write and take their own medications correctly. They should also be able to keep their living enviroment clean and picked up. If they have certain medical conditions then living independenlty should not be an option, i.e. seizures. In my experience most clients who live independently do not know how to do any of the things listed above. They also can not tell someone, such as a policman or other persons their address, phone number. They are taught to carry a card with this info and show it when they need this information, but in my experience most do not have the card or they can not find it in their wallet when asked for it. Some clients who live independently have severs speech issues and are very difficult to understand and this can become a safety issue. Also if the client works in an Work Acitivity program should not live independently. If it has been decided that the least restricted enviroment is a Work Activity program then they obviously do not have the skills to live independently.	Feb 2, 2011 9:19 PM
391	I think trying to standardize a population that is considered non-typical by all standards would gravely impact any possibility of each client to explore options that would improve their lives. My daughter has Angelman's Syndrome, about 1,000 in the world. She, 27, is unique even within that group. Her functional development improves with new techniques, and I search for challenging experiences that can be adjusted to her needs. I work with many groups in an attempt to allow her to realize her fullest potential. The thought of Service Standards being applied to my daughter would be cruel and injurious to any potential improvement she might enjoy. I work hard to be my daughter's advocate and share those benefits with those that she encounters. We all overlap on some level. My life is not standard and I constantly look for ways to improve the way I work and live. I believe improving life is something we all deserve.	Feb 2, 2011 9:27 PM
392	Independent living, means exactly that. Currently many people living independently require a staff around the clock to maintain them in their own apartment at a cost far greater than if they lived in a low level board and care with private rooms and minimal supervision. There needs to be a threshold for what constitutes independent living. In addition, state funds should not be used to purchase homes for people.	Feb 2, 2011 9:31 PM
393	Keep exisitng standards. If DDS has reason to believe a regional center is violating Lanterman or its regulations, they have autthority to impose stricter or adopt better standards. Assuming cost containment is the real issue, give Regional Centers a fair/standardized allocation and assure they don't over spend. Providers/Service availablity and in some cases even conusmer needs are different through out the regions CA. Regional Center's must have flexibility. They have Board of Directors, an appeal process and DDS oversite. If we use the system correctly, that is enough. Again there are more than enough exisitng standards....what works in LA won't work in Far Northern.	Feb 2, 2011 9:34 PM
394	Only qualified Regional Center Clients	Feb 2, 2011 9:35 PM
395	Those individuals who IPP team has identied a need for these services, as described in the Lanterman Act Section 4646 (a)-(d)	Feb 2, 2011 9:38 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
396	I've seen far too many 'higher functioning' clients crash and burn when put into independent living w/o intensive oversight, ie.- on site living coordinator/house parents. I believe that the honest desire to let folks have self determination must be very, very carefully evaluated first. Too many disabled adults are victimized and left to their own devices by programs that 'say' they are providing supportive services, but it's all window dressing or not adequately monitored. Only clients who have a well rounded understanding/training about the pitfalls of being victimized, appropriate sexual behaviors (ie.-what is molestation/rape vs. loving/respectful sexual behaviors), how to communicate effectively if they are being coerced or being taken advantage of...only then should clients be allowed to live in a least restrictive independent environment. To do less is cruel and unacceptable.	Feb 2, 2011 9:40 PM
397	EXTREMELY CRITICAL -- those with disabilities must have this support to live in the community with the dignity and respect they deserve. No less, & no more, than those without disabilities. If these are not provided, the # of disabled homeless will multiply, causing the need for finances to be spent in other ways (policing, litter removal, hygiene, etc)	Feb 2, 2011 9:41 PM
398	A person that is not able to live independently on their own because of health or mental conditions	Feb 2, 2011 9:42 PM
399	ALLL PERSONS WHO HAS A DISABILITY NEED TO HAVE A FOUNADATION TO MAKE A WAY FOR THEM TO LIVE INDENPEDNTLY	Feb 2, 2011 9:43 PM
400	autistic and other impact person if needed	Feb 2, 2011 9:47 PM
401	Why should people with disabilities live on the streets or in horrible conditions. As a nation how can we live with ourselves if we throw them away the way we did our mentally challenged Americans that we put out on the streets because someone decided we could not afford to keep them safe and provide a decent environment.	Feb 2, 2011 10:05 PM
402	Any adult individual who is in need of assistance who cannot live on their own.	Feb 2, 2011 10:05 PM
403	*An individual who is not able to live on their own without any support	Feb 2, 2011 10:07 PM
404	Need should be determined by family, client, and IPP team not an arbitrary standard that would fail to provide individualized attention/programs.	Feb 2, 2011 10:11 PM
405	Do not implement a $750 million cut to the Department of Developmental Services (DDS) budget. It is too drastic! We need these services for our kids on the spectrum!	Feb 2, 2011 10:12 PM
406	Any client of the Regional Center should have the right to live independently from their parents. Parents will eventually die and these IL and SLS programs prepare an individual to live to their best potential with the support that is necessary to live a full and rich life just like a sibling or other human being.	Feb 2, 2011 10:15 PM
407	Any individual that has a diagnosed disability that does not have any outside sources of support. (family members, etc.)	Feb 2, 2011 10:19 PM
408	Developmentally disabled who Regional Center determine will benefit from them.	Feb 2, 2011 10:32 PM
409	IPP team decision, guided by and choice. If people would need to leave their communities because there are no options, then this should be part of the consideration.	Feb 2, 2011 11:04 PM
410	Those who can live independently with minimal to moderate support.	Feb 2, 2011 11:16 PM
411	I am concerned about the future of supported living. My suggestion for eligibility criteria is that it does not change. Adults who want the service should have access to it. I fear we are moving away from this model and headed back toward group homes for everyone because they are less expensive to fund.	Feb 3, 2011 12:02 AM
412	Any teen or adult Regional Center client (or his/her parents) who needs or requests them.	Feb 3, 2011 12:06 AM
413	Only those deemed capable of participating in a Supported Living Arrangement.	Feb 3, 2011 12:19 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
414	All that are being served now, and they should be more open minded about those who are "boarderline" in need.	Feb 3, 2011 12:25 AM
415	this is very important for kids that have the potential to live independently. It will take a lot of support initially but then it sould be successful for these consumers.	Feb 3, 2011 12:26 AM
416	people that have been diagnosed with a disability or disease and want to live on their own with help	Feb 3, 2011 12:40 AM
417	All people with disabilities.	Feb 3, 2011 12:42 AM
418	Same answers as previous pages	Feb 3, 2011 12:45 AM
419	Cleints that can not take care of themselves	Feb 3, 2011 12:51 AM
420	Clients over the age of 18 who are either preparing to live outside the family home or currently do live on their own in the community.	Feb 3, 2011 12:53 AM
421	Services should only be provided when the consumer is moving out of their family's home, group home, or other residential setting that is providing support. Consumers who do not have a job or can not financially support themselves through other resources should not receive ILS. If SLS services exceed that of a group home, they should not be funded. Regional Center should not fund any living expenses, including rent, food, utilities, and more.	Feb 3, 2011 12:55 AM
422	Anyone who needs them! There is no way that the state would benefit by having to place persons back in board and care facilities because there are no support services! These services are saving the state enormous amounts of funds. There can be NO comparision because one ILS worker being paid to help a certain number of people, and the cost it would take to place the same number of people back into homes which require 24/7 staffing!	Feb 3, 2011 12:57 AM
423	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 3, 2011 1:00 AM
424	ILS...MAKE IT SIMPLE... Make it SIMPLE... Go to a capitation for God's sake... Don't argue over individual hours except in extreme cases... The PROGRAM gets 30 hours per month per client or whatever...let them use those hours for the clients MOST NEEDY during that period... I proposed this model 20 years ago and go ignored...but it works... Client has 30 hours...you are gonna be pressed to use them whether you need it or not. But if Joe is fine this month...see him a couple of times and Maria is going through hell with all kinds of family and medical and relationship and hospital stuff...landlords etc and she needs 60 this month...Please THINK about this idea.. The program knows what there budget is...and can better predict their budget and no need to lie and deceive for hours!!!!!!!! But who listens to me? I only make sense and tell the truth. :)	Feb 3, 2011 1:12 AM
425	Developed detailed cost reporting mechanism/requirements and audit all programs against it.	Feb 3, 2011 1:15 AM
426	Adults with Autism.	Feb 3, 2011 1:24 AM
427	anyone who has a disability and needs these services	Feb 3, 2011 1:31 AM
428	Guidelines made but need should dictate	Feb 3, 2011 1:40 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
429	ILP Service providers should not dictate available hours based on their needs but those needs of the Individual they are providing the service for. I work with one individual who constantly comments that she is being pulled from work or activities by ILP during program hours. She has also complained about ILP service person cancelling frequently and rescheduling . This Individual has set aside the time and should be accommodated at that time unless it is a real emergency and the reasons I have heard are not valid reasons. She has often been afraid to discuss with her service person. I have on at least two occasions encouraged her to take it up with her CPC .	Feb 3, 2011 1:43 AM
430	Any individual who qualifies as a regional center consumer.	Feb 3, 2011 1:49 AM
431	Any person with a demonstrated need for service should be eligible to receive services of this kind.	Feb 3, 2011 1:51 AM
432	I have none, because my experience does not lend itself to advice.	Feb 3, 2011 1:56 AM
433	those who request and have a need	Feb 3, 2011 1:58 AM
434	The clients who benefit from the services.	Feb 3, 2011 1:58 AM
435	Anyone that is developmentally disabled who would benefit from these services.	Feb 3, 2011 2:04 AM
436	Because of how a lot of the communities seem to be today...there should be more care to make sure that those with special needs are kept safe.	Feb 3, 2011 2:13 AM
437	Should be based on need and not budget cuts!	Feb 3, 2011 2:24 AM
438	Persons for whom the service is truly cost-effective and who will benefit from supported living and truly need the 24/7 support available. By 24/7 I mean that someone would be available in an emergency situation, but not necessarily on the premises. Should not be used for consumers who not able to take advantage of the opportunities offered by Supported Living. Independent Living skills training should only be used for real training, not for maintenance. A new category should be established for maintenance at a lower rate.	Feb 3, 2011 2:24 AM
439	It is absolutely absurd to allow someone who is moderately mentally challenged to live in their own home with assistants to help them. When my sister was forced out of the State Hospital and into the community so that she could live as "independently as possible", we were offered the option of her living on her own with an assistant. Despite the overly-generous ideas stated in the Lanterman Act, many mentally challenged individuals should not be candidates for living on their own with an assistant(s). A group home is a better option, as it offers companionship, many different caregivers, a homelike atmosphere,etc., which is perfect for these individuals who are not, and never will be, responsible adults. I also don't feel that people who are totally helpless and confined to beds should have their own places. It is ridiculous to me to think that the state should pay an inordinate amount of money for round-the-clock care so that this person, who cannot use any of the facilities in his home, can live "alone". People come to the state of Calif. because we provide this service. Just absurd and unrealistic.	Feb 3, 2011 2:51 AM
440	Servies should be easier to recieve. I know everyone who asks for them can't recieve them, but the level of delay the child has gone up so much making it difficult for parents who can't afford the services out of pocket or whos insurance won't cover these services often fall through the cracks. That child might not get help until he enters school. If he could have recieved serveses soon that help might not have been needed.	Feb 3, 2011 3:43 AM
441	supported living services to all individuals who want it and qualify	Feb 3, 2011 4:32 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
442	This is the goal of every parent and should be the goal of society to give these kids/adults a chance at a productive independent life. We should be thankful if we're not a disabled person. Those who do not have disabilities have no excuse for not making a better life for themselves. Should not blame environment or circumstances. They can choose. Disabled adults and children have no choice and must live each day with the handicap. As long as medical science foresees potential improvement, the service should be provided to each and every child/adult until improvement or willingness to participate ceases.	Feb 3, 2011 4:34 AM
443	all disabled young adults especially teh ones that are not supprted financially and emotionally by their families	Feb 3, 2011 4:38 AM
444	disabled or mentaly impaired	Feb 3, 2011 5:04 AM
445	Individuals must clearly direct their services. Individuals who can direct their services must be able to live with significant time with out supervision, or where support provided is only related to personal care.	Feb 3, 2011 5:10 AM
446	all of those that qualify in the DD community from the age of 22 until death	Feb 3, 2011 5:12 AM
447	DEtermine if the individual genuinely want to live on his/her own.	Feb 3, 2011 5:32 AM
448	Those who need them.	Feb 3, 2011 6:25 AM
449	all who needs.	Feb 3, 2011 6:48 AM
450	Same standards as Valley Mountain Regional Center.	Feb 3, 2011 6:50 AM
451	No Comment	Feb 3, 2011 6:52 AM
452	any individual who is mentally handicap, autistic or severely developmentally delayed	Feb 3, 2011 6:57 AM
453	The Regional Center social worker help and facilitate making sure the consumer is in the best environment.	Feb 3, 2011 7:16 AM
454	Any RC client who needs them...where will they live after parents are gone?	Feb 3, 2011 7:23 AM
455	Any consumer who is age 18 and over and who would be safe in this type of environment.	Feb 3, 2011 3:36 PM
456	Budgets for Supported Living Services should not exceed $10,000 a month, and all persons receiving Supported Living Services should have a roommate and should attend a day program. Anything more than $10,000 a month for a Supported Living Services budget is too much. By having another roommate receiving Supported Living Services would drastically reduce a budget and would drop most people receiving Supported Living Services under $10,000 a month. The highest group home, 4i, costs around $5,000 a month. The reason for Supported Living Services is to allow an individual to live in the community as a non-disabled person would. But, non-disabled people have to occupy their time with a job in order to survive just like those receiving Supported Living Services should be in a day program to occupy their time. Additionally, most non-disabled adults have to have roommates in order to pay rent.	Feb 3, 2011 3:45 PM
457	Individuals with the need for medical attention, rehabilitation and other health care services.	Feb 3, 2011 4:10 PM
458	Individuals who are 18 and can grow and develop relationships with others and the community.	Feb 3, 2011 4:18 PM
459	As many services as it takes to keep the client independent! Your alternative is an institution, and that is expensive!	Feb 3, 2011 4:32 PM
460	Autism.	Feb 3, 2011 4:46 PM
461	People with developmental disabilities who would benefit from living in their own home rather than in a group setting.	Feb 3, 2011 4:53 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
462	Consumers capable of living in a less restrictive environment	Feb 3, 2011 5:17 PM
463	Should be available to all RC consumers	Feb 3, 2011 5:22 PM
464	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 3, 2011 5:23 PM
465	Any child that has a disability. All should be able to transition into adult life!	Feb 3, 2011 5:36 PM
466	clients whop can realistically live independently. Additionally, if there is no other option lets say based on criminal activity has engaged in in the past.	Feb 3, 2011 5:42 PM
467	No Comment	Feb 3, 2011 5:44 PM
468	Disabled people usually can't find work to support themselves and need all the help we can give unless they have enough income from their family.	Feb 3, 2011 5:45 PM
469	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 3, 2011 5:46 PM
470	Eliminate Reg Ctr eligibility for 5th catagory	Feb 3, 2011 5:50 PM
471	I think any adult with developmental disability should be eligible.	Feb 3, 2011 6:25 PM
472	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 3, 2011 6:29 PM
473	Case by case and per individual needs. Should not be provided to anyone under the age of 18 nor anyone who is NOT living independently. If family supports are available these should be utilized first. Second review other "generic resources" such as IHSS etc.	Feb 3, 2011 6:36 PM
474	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) – (d).	Feb 3, 2011 6:39 PM
475	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 3, 2011 6:50 PM
476	developmentally challenged consumers have to have the continued help to remain with family and in homes.	Feb 3, 2011 6:55 PM
477	Everyone who is a Regional Center client	Feb 3, 2011 7:14 PM
478	Those who are unable to function on their own.	Feb 3, 2011 7:21 PM
479	Those individuals whose Individual Program Plan (IPP) team has identfied a need for these services as described in the Lanterman Act Section 4646 (a)-(d).	Feb 3, 2011 7:23 PM
480	Is this really a service that is cost effective, and how safe are these individuals. I personally think if there was say a complex with say a set of 2 staff people that monitored 24-7 for a reasonable amount of pay this should suffice. I personally don't feel there are very many of people with dd/mi that have any business out there alone in this big cruel world unsupervised.	Feb 3, 2011 7:46 PM
481	Any able functioning person that is also deemed disabled.	Feb 3, 2011 7:46 PM
482	Again, as assessed and stated in the IPP - Very important to give the DD a opportunity to live as independent as possible	Feb 3, 2011 7:49 PM
483	Any disabled person who is not capable of self-sufficiency should qualify for these services.	Feb 3, 2011 7:54 PM
484	This is the NUMBER ONE area that needs to be closely audited. Anyone who wants to attempt independent living should be able to try BUT it must be strictly connected to certain abilities. If a person can not live independently without daily supports or prompts he/she is in the wrong setting. They are set up for failure. ILS should have more flexibility as to number of hours and how they are used for each individual. If someone is not able to live independently cease the service and offer the appropriate one.	Feb 3, 2011 7:55 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
485	Individuals with disabilities who can function more independently, but need some assistance. Particularly, people with autism.	Feb 3, 2011 8:02 PM
486	Everyone should be eligible.	Feb 3, 2011 8:05 PM
487	Those that have to have supervision for their safety and health. It is less expensive to provide support rather than to insitutionalize a vulnerable part of our population.	Feb 3, 2011 8:09 PM
488	Regional Center clients	Feb 3, 2011 8:10 PM
489	Those that are capable and have the desire to live independant	Feb 3, 2011 8:17 PM
490	Those persons who are ready to enter the world of independence should be privy to these services. However, these services can be abused. I'm not quite sure how this could be monitored.	Feb 3, 2011 8:38 PM
491	Adult clients who are currently living independently at their own home/apt or in boarding house. Clients between ages 18 to 22 that are willing to transition into independent living from family home. Adult clients living with elderly parents that require having temporary supports in the event of emergency (medical attention) or ready to move out.	Feb 3, 2011 8:49 PM
492	A service standard would be to not cut the service to the consumer. Cutting people low on the food chain is Darwinistic and wrong. People reply on services to help them. Take from the Capitalist. This Government is not working for the people but only for Capitalism. Anyone who is in need of the service should and must receive them, all of them.	Feb 3, 2011 8:51 PM
493	those that can actually manage to be independent many can not	Feb 3, 2011 8:54 PM
494	The standards should be like everyone else. Safety, health, growth, likes and dislikes, should all be taken into consideration.	Feb 3, 2011 8:55 PM
495	Anyone with developmental disabilities who lives independently or is planning to do so.	Feb 3, 2011 9:02 PM
496	Adults who can care for the majority of their own needs. Adults who can pay for the majority of their own cost.	Feb 3, 2011 9:10 PM
497	For all adults with a diagnosis.	Feb 3, 2011 9:17 PM
498	There should be more flexibility in allowing cost effective solutions to service models even when the adult consumer lives a parent that is able to furnish housing that would be acceptable as a rental, especially when the parent does not have the physical capacity or training to provide the needed service component.	Feb 3, 2011 9:17 PM
499	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 3, 2011 9:20 PM
500	This is challenging since how can you decide if a person is able to live on their own (w/ support) without giving them the chance to do so? It seems that this would be very possible for many of the disabled clientele if the proper support were in place and there was a good network in the community for doing so. I do think it could be cost-prohibitive for some clients and in these circumstances, if a service benefit package were offered, then it would be the choice of the parents/caregivers to make up the difference beyond what the maximum that could be funded by the DDS or RC. Some type of range would have to be established for this to be implemented. However, the alternative cannot be so SUBSTANDARD that it would leave the individual with no real choice at all.	Feb 3, 2011 9:38 PM
501	Elderly, children, disabled. See how the Danish help their seniors stay independent!	Feb 3, 2011 9:38 PM
502	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 3, 2011 9:44 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
503	n/a	Feb 3, 2011 9:53 PM
504	Clients who are demonstrate a desire/willingness to receive this service. Hours funded by RC should be appropriate to the hours truly needed to support a client.	Feb 3, 2011 10:15 PM
505	Thosse that can benefit from them and not those that have to be waited on because they cannot do anything themselves.	Feb 3, 2011 10:18 PM
506	living cordinator	Feb 3, 2011 10:19 PM
507	People who have lived in group homes, if they have done well and shown that they can live more independently should have that option. They should not be prevented due to cost-effectiveness. With all of these services, there should be an expectation for reduced services over time. Maybe 3-5 years at a higher amount, then a reduction of 1/3 for 2 years, then another reduction of 1/3 for 2 years. The reduction should occur until some standard amount was reached, which was considered economically viable. In this situation, any client would be eligible to receive services (there could be a total yearly or monthly cost cap). However, they would have to make progress in becoming more independent. If they failed to do so (as determined by the team) they would have to go into a less expensive living situation (e.g. group home). Or they could simply take the 1/3 cut and continue to live in supported/ind living - this would be a risk at times, but many individuals might surprise us with their ability to survive.	Feb 3, 2011 10:37 PM
508	Those individuals whose IPP team has identified a need for these services, as described in the Lanterman ct Section 4646 (a)-(d).	Feb 3, 2011 10:45 PM
509	those people whose IPP team has identified a need for these services, as described in The Lanterman Act, Section 4646 a-d	Feb 3, 2011 10:47 PM
510	High functioning clients with Down Syndrome.	Feb 3, 2011 10:54 PM
511	All current consumers and all who need in the future.	Feb 3, 2011 11:12 PM
512	All cients should have the choice for supported living services. This should be determined by the clients' team.	Feb 3, 2011 11:13 PM
513	Anyone who is disabled and can show they need help to live independently. It's important that they be given the opportunity to live and contribute in their communities.	Feb 3, 2011 11:18 PM
514	I don't know a lot about this but, I am sure it is important to disabled people. We have evolved these services over the decades for a reason. Any less than is a regression as a society	Feb 3, 2011 11:29 PM
515	Those disabled people that want a life but need assistance in getting there goals	Feb 3, 2011 11:32 PM
516	Those who are in need of these services should receive it.	Feb 3, 2011 11:34 PM
517	All adult consumers who, via the interdisciplinary team process express that they want to live in a home of their own without any significant risk to endangerment or health and safety. All consumers wanting this living option should be able to have the financial resources to move into a home of their own. Continued justification for ongoing services should be partly based on the consumer and their SLS agencie's ability to expand generic resources and natural supports.	Feb 3, 2011 11:42 PM
518	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 3, 2011 11:44 PM
519	This is an area that should not be discontinued.	Feb 4, 2011 12:06 AM
520	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d	Feb 4, 2011 12:06 AM
521	Anyone w/a need	Feb 4, 2011 12:11 AM
522	Persons living independently and have limited supports.	Feb 4, 2011 12:19 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
523	Citizens of the United States. People who are not in California legally should not receive funding for these services.	Feb 4, 2011 12:48 AM
524	Individuals who are turning 18 years old and ready for an adult kind of living	Feb 4, 2011 12:50 AM
525	Unsure but I know as a parent of a child with special needs that if, god forbid, something happens to me that I am unable to care for her I would want to know that the state will step in and offer services so that she may be cared for in an empathetic and safe manner.	Feb 4, 2011 12:53 AM
526	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 4, 2011 1:06 AM
527	Those consumers who are of the level of functioning that make independent or semi-independent living feasible should be offered this service. The consumer should express this desire clearly and be given information regarding all options.	Feb 4, 2011 1:08 AM
528	Anyone who has a need for services as determined by an IPP	Feb 4, 2011 1:22 AM
529	This is a wonderful option. We need to treat people with developmental disabilities as anyone else. A "normal" adult is not living at home but living in their own apartment, etc. These services are necessary for most with developmental disabilities so that they can become as independent as possible.	Feb 4, 2011 1:30 AM
530	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 4, 2011 1:52 AM
531	Individuals with disablities should be fully supported in this area. The cost of having an adult in a developmental center or group home is extremly high on DDS and the state while the cost of support and training to remain independent in the community is very small in comparison. All adults with disabilites should be extended this service even if they currently live with family members. Each person learns at a diffent pace and some individuals can take longer to learn a skill than others. No time frames should be established in this area but rather the standard should be the completion of each goal towards independence. If an adult with disabilities is not provided with a program that encourages skill building and self-reliance, the state of California will eventually face the complete care of an aging indivuals with no skills to cope with life and many behavioral and medical issues in the future.	Feb 4, 2011 2:02 AM
532	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 4, 2011 2:07 AM
533	this is a very important area, all disabled persons who want to participate and receive these services should be given them.	Feb 4, 2011 2:09 AM
534	Individuals that are able to hold a job and afford to pay their own rent.	Feb 4, 2011 2:22 AM
535	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 4, 2011 2:49 AM
536	Preferably it should be in home environment.	Feb 4, 2011 3:11 AM
537	My son currently lives in our home, but he will probably out live us. Considering his current functioning level he will not be able to live independently. He might be able to live in a supported living situation. If not, he will probably live in a group home. His individual needs should be addressed by his IPP team. He is non-verbal, and shakes his head at everything, so its unclear how much input he will be able to give the team.	Feb 4, 2011 3:41 AM
538	Those who have requested for this both families and clients	Feb 4, 2011 3:52 AM
539	Developmentally delayed individuals	Feb 4, 2011 4:00 AM
540	all individuals who have been tested and evaluated extensively	Feb 4, 2011 4:13 AM
541	Children with autism who will have a life long disability	Feb 4, 2011 4:39 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
542	These services a key to MANY people. Think about how important YOUR independence is to YOUR identity and self-worth. It is crucial! Independence for a developmental disabled individual is probably even MORE important to them than you can imagine. They deeply desire to be able to make their own decisions. It is normalizing and brings great dignity. PLEASE do not be stingy in deciding who is able to be in these programs and in devoting resources to this effort.	Feb 4, 2011 4:42 AM
543	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 4, 2011 4:57 AM
544	This is very important! Anyone who is able and wishes these services.	Feb 4, 2011 4:58 AM
545	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 4, 2011 5:08 AM
546	The laws currently states any consumer can choose to live alone despite disability. There are some many clients living on their own, that should not be. Potential consumers should at least fall into the low average category of the WAIS IV IQ test. Many clients in SLS programs end up hospitialized and in crisis situtations. This creates more work for service coordinators and other employees.	Feb 4, 2011 5:12 AM
547	We have been saving and plan to help provide for our son if he chooses to live on his own or with other people that share his needs. We also are helping him, through his therapy, to be able to attend school as far as he is able and to be able to hold employment. My son walked a week before his 2nd birthday, this was ONE year earlier then expected. He also is able to communicate by using sign language and now speaking. Most of this is due to his therapy. Don't take away this opportunity for other children and parents that wish for their children to succeed to the best of their abilities.	Feb 4, 2011 5:14 AM
548	Consumer that is independent with activities of daily living and personal hygiene, able to take medication, does not need 24 hour care and supervision. Why does service coordinator place a consumer in a supported living status that cost the department 3 times more than a residential rate=because the consumer needs 24 hour supervision, needs help with medication, personal hygiene and activities of daily living. Supported living provided does not have to operate with Title 22 regulation dispensing prescribed medication to consumer that are unable to self medicate. Department should review this cases. Recommend this home operator to get a license from community care licensing.	Feb 4, 2011 5:27 AM
549	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) – (d).	Feb 4, 2011 6:42 AM
550	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 4, 2011 7:36 AM
551	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 4, 2011 3:17 PM
552	It is distressing to me to calmly answer any of these questions in this section. My adult son would not be able to live independently without these services. How can you ask about setting standards when client needs are SO obvious? The current IPP system is critical to enable a team familiar with our adult son to monitor and evaluate his needs and services. This is clearly provided for obvious reasons in provisions of the Lanterman Act.	Feb 4, 2011 3:54 PM
553	I feel people who have seniors, mental disabilities, alcholics, drug addicts would benefit from this service	Feb 4, 2011 4:14 PM

1. Suggested service standards about who should receive these services:

	Response Text	
554	Only those that can benefit from the service and not those that have to be waited on because they cannot do anything for themselves.	Feb 4, 2011 4:22 PM
555	Those that need some assistance to help them be in the least restivive environment, so that they can keep as much independence as they can.	Feb 4, 2011 4:47 PM
556	Those not living with family	Feb 4, 2011 4:49 PM
557	Same as previous section	Feb 4, 2011 4:55 PM
558	N/ A	Feb 4, 2011 5:01 PM
559	Individuals whose IPP team has identified as having a need for services as decribed in the Lanterman Act	Feb 4, 2011 5:12 PM
560	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 4, 2011 5:16 PM
561	Any consumer deemed high functioning enough to be eligible and who expresses a desire to be independent when ready.	Feb 4, 2011 5:21 PM
562	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 4, 2011 5:44 PM
563	People like our daughter, who cannot live independently on her own, but is getting tired of having us tell her what to do. Conflicts may develop soon. She's 23.	Feb 4, 2011 5:46 PM
564	All people wanting IL or SLS should be eligible to receive them. Standardized assessments should be completed to determine the level of care the person needs and the number of hours of service associated with that level of care. People able to afford to live alone should be allowed to do so. People who cannot afford to live alone should have options to choose their house mate(s).	Feb 4, 2011 6:08 PM
565	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 4, 2011 6:12 PM
566	People who should receive these services are adults who are determined to be "higher-functioning" in that they can stay overnight by themselves. They should be able to safely use a microwave to heat foods, be able to use a telephone, bathe, lock and unlock doors, and have enough common sense to know what to do in an emergency even if has not been taught to them. For example, if a glass falls to the floor and shatters, would the client know enough to call someone for assistance or to sweep it up with a brush/pan or vacuum, or would the client attempt to pick up the pieces unaware that severve injury could occur? Having common sense, I think, is the single most important determining factor in whether or not a client can live on his/her own or with support.	Feb 4, 2011 6:18 PM
567	Physically and mentally disabled American citizens.	Feb 4, 2011 6:28 PM
568	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 4, 2011 6:37 PM
569	Most clients need some support when living independently. The needs of the client should dictate what services are provided.	Feb 4, 2011 6:46 PM
570	Those individual whose Individual Program Plan (IPP) team has identified a need for these services as described in The Lanterman Act section 4646 (a) (d).	Feb 4, 2011 7:09 PM
571	These services should be available to all consumers who are capable of living independently.	Feb 4, 2011 7:17 PM
572	The same as previous #1.	Feb 4, 2011 7:19 PM
573	Anyone who needs it or wants it	Feb 4, 2011 7:33 PM
574	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 4, 2011 7:50 PM
575	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 4, 2011 8:15 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
576	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) – (d).	Feb 4, 2011 8:39 PM
577	Those individuals who are entered into The IPP	Feb 4, 2011 8:52 PM
578	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 4, 2011 8:56 PM
579	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 4, 2011 9:19 PM
580	[redacted] needs help with her money; getting around in her community; staying healthy; speaking up for herself; taking care of a new home; acquiring household furnishings; performing daily living activities, responding to emergencies; and participating in community life.	Feb 4, 2011 9:36 PM
581	All those persons living "independently." that is, without the direct support of a non-disablled person who is able to help with their financial management, medical and dental needs, nutritional support, and psycho-social needs. Those living alone are in definite need of this support, and those living in the group home situation need ILS support as well.	Feb 4, 2011 9:43 PM
582	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services as described in The Lanterman Act section 4646 (a) (d).	Feb 4, 2011 9:55 PM
583	1. Persons requiring 24 hour/around the clock supervision and support should not be enrolled in a SLS program. 2. Rate for SLS should not be a negotiated rate at all.	Feb 4, 2011 10:02 PM
584	ILS is probably the single most cost effective service in this system. Rather than the state paying to have someone live in a group home, or pay $300k a year to have them live in a Developmental Center, the state pays a few grand a month to have someone support the person in living independently. If anything, more people should be living independently with ILS. SLS could be more cost effective if people living with SLS were in group homes.	Feb 4, 2011 10:06 PM
585	Everyone that wants the service shold be intitled toit. However, in order to save the money that the state needs to save; let's consider the appriate question. Let's look at the cost of the infrastructure. What if we had the staff at all the regional centers telcommute from home and get rid of all the excess Real Estate. The selling of the adminnistration buildings and some parts of develpomental centers would save millions of dollars in the long run.	Feb 4, 2011 10:07 PM
586	Everyone in need of these services and WITHOUT PARTIALITY. This should not be an issue.	Feb 4, 2011 10:08 PM
587	ALL individuals who need these services should receive them! This is vital to the well-being of our country. What is the alternative? Group homes? Institutionalization? NO! Keep these individuals living as independently as possible with support.	Feb 4, 2011 10:11 PM
588	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act.	Feb 4, 2011 10:22 PM
589	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 4, 2011 10:38 PM
590	: The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 4, 2011 10:45 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
591	Only those who need "minimal supervision" need to qualify. It is absurd to provide independent living the person needs 24 care. All those in these situations need to consider the extent of the cost and burdern to taxpayers monies. These folks in independent of Supported living need to be able to do their part such as "part time work" etc. Families need to be part of the equation. Not even our elderly parents have it so good. Limits have to be put to cap and or end this service.	Feb 4, 2011 10:54 PM
592	Require that recommendations for hours of ILS services be made by a team that includes the Regional Center.	Feb 4, 2011 10:55 PM
593	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 4, 2011 10:56 PM
594	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 4, 2011 11:15 PM
595	If a client desires to live independently then purchase of ILP or SLS services is warrented for a relatively short period of time. There should be a plan to decrease the amount of hours received as the client becomes more independent. What usually happens is the client becomes more "dependent" on the ILP/SLS provider and complete independence never happens. After years and years of purchasing the service the only result is a client who is more dependent than when they started the program----can you say "job security" for the ILP/SLS worker!!! If the client is unable to live independently or live with minimal supervision then they should go into a "special" home, ie: Mentor home where they can live semi-independently and still have companionship/socialization opportunities that they crave.	Feb 4, 2011 11:20 PM
596	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 4, 2011 11:21 PM
597	Only those that can truly operate on their own should have their own apartments. Otherwise, they should be in group homes. We should not be spending tons of money to support individual living situations when they are not capable. Let's not put square pegs in round holes. It is costly and detrimental to all involved. If a person needs to be in a home or board and care facility, then let's do that.	Feb 4, 2011 11:23 PM
598	All regional center consumers who are of age, who want to do this should be allowed the opportunity to seek independent and/or supported living services. If they are unable to do this after trying it they should be allowed to return to a group setting.	Feb 4, 2011 11:34 PM
599	Any developmentally disabled adult who wants them	Feb 4, 2011 11:41 PM
600	Everyone should be able to live in their own home.	Feb 5, 2011 12:15 AM
601	Those individual whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646(a) - (d).	Feb 5, 2011 12:22 AM
602	The IPP team determines based on assessments, etc. what services are appropriate. Lanterman Act 4646	Feb 5, 2011 12:23 AM
603	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 5, 2011 12:32 AM
604	Those who are capable of directing their own services; Those who do not need 24/7 paid supports; All public costs are less than the cost of CCL/ICF care (at appropriate level); Those who can pay all of their own rent, living expenses; RCs would only be allowed to provide for costs of direct care staff. Those who are able to make responsible decisions, ie, maintain health and safety of self and others.	Feb 5, 2011 12:41 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
605	As much independence as is reasonable and compassionate whould be lobbied for.Clients do have likes and dislikes and they should be respoected. clients may have to have vaying types of ways to communicate and need to be enabled and listen too. again compassion, creativity a good sense of humor and positive are exptremely important for enabling those who have developmental disabilities and for bein fair to them.	Feb 5, 2011 1:28 AM
606	My son is appropriately place in supported living. If this option wasn't avialble he would require a more expense residential placement.	Feb 5, 2011 1:30 AM
607	These services should be provided to individuals who have the capacity to live with a reasonable degree of safety in the community with some support. Individuals requiring constant supervision or a high level of care should not be considered as appropriate candidates for this particular type of service.	Feb 5, 2011 2:04 AM
608	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 5, 2011 2:19 AM
609	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 5, 2011 3:57 AM
610	People who cannot function on their own	Feb 5, 2011 4:07 AM
611	disabled or older people who don't have the money to pay for this kind of help	Feb 5, 2011 4:10 AM
612	Clients unable to afford independent living and who desire independence and show they can handle the responsibilities.	Feb 5, 2011 4:29 AM
613	Consumers who have the ability to live independently but require some support.	Feb 5, 2011 4:48 AM
614	persons who live independently; planning to live independently within a 3 year time frame; persons who need help within a more structured daily life program (such as Supported Living) to acquire important life skills training / support; persons who may be living w/ their families for an extended period to time (longer than 3 year transition period) due to health / financial / cultural issues (reviewed case by case) persons who are served may have developmental conditions such as autism, cerebral palsy, intellectual challenges (such as mental retardation)...often as well, there may be a secondary diagnosis (mental health concerns)	Feb 5, 2011 6:11 AM
615	Persons eligible for inclusion as Regional Center clients, per the Lanterman Act.	Feb 5, 2011 6:49 AM
616	Any adult whose disabilities prevent them from living independently without assistance.	Feb 5, 2011 6:51 AM
617	People whose IP Team has identified a need for these services. See Lanterman Act.	Feb 5, 2011 2:47 PM
618	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 5, 2011 5:27 PM
619	All children who have the disability of autism and special needs.	Feb 5, 2011 5:38 PM
620	Those with developmental disabilities that can not function independently in society.	Feb 5, 2011 6:28 PM
621	All applicants who qualify should continue to receive services under the current standards.	Feb 5, 2011 6:30 PM
622	same as first set	Feb 5, 2011 6:40 PM
623	All consumers over 18 should receive this service if appropriate	Feb 5, 2011 8:06 PM
624	Signifcant help needed to train individual to live productive lives....in the long run it would be much less costly.	Feb 5, 2011 8:14 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
625	I oppose POS standards. Please refer to the Lanterman Act Section 4646 (a) - (d).	Feb 5, 2011 8:54 PM
626	People who have problem afford their rent or living place should be qualified to receive this service.	Feb 5, 2011 10:06 PM
627	Assessment of the consumer	Feb 5, 2011 10:13 PM
628	Answer: Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 5, 2011 10:55 PM
629	no one	Feb 5, 2011 11:28 PM
630	All consumers must have access to supported living services	Feb 6, 2011 2:20 AM
631	Services should be given to all those over 18 years recieving services through the Regional Center.	Feb 6, 2011 4:08 AM
632	Regardless of any suggested standards, the consumer, the consumer's parents and/or caregivers and consumer's teachers and other school service providers where applicable the consumer's parents and/or caregivers must still have input regarding independent living and supported living services, and the entire IPP team, including the above, must retain the ability to determine the services and supports needed by the consumer.	Feb 6, 2011 5:45 AM
633	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 6, 2011 5:55 AM
634	Anyone who is open to independent living assistance who may benefit.	Feb 6, 2011 6:11 AM
635	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 6, 2011 4:35 PM
636	Those who are at the age of 18 or older.	Feb 6, 2011 5:08 PM
637	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act	Feb 6, 2011 6:45 PM
638	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 6, 2011 6:47 PM
639	Any clients of the Regional center with medical, psychological, or psychiatric needs.	Feb 6, 2011 8:11 PM
640	Anyone who wants these services should have the ability to receive them unless they have a life threatening medical condition that requires specialized monitoring equipment that could not be in a home.	Feb 6, 2011 8:46 PM
641	A comsumer whonot only desires the services, but shows they would be a good canidate to be sucessful on their own.	Feb 7, 2011 12:40 AM
642	Anyone who is not a danger to his community.	Feb 7, 2011 2:18 AM
643	any one with a hadicapping condition with families that are unable to meet the requierd demands of the daily living for them	Feb 7, 2011 2:26 AM
644	Individuals needing this specific service.	Feb 7, 2011 2:50 AM
645	Any Adult who are capable of understanding the needs to live alone with a follow up of someone to help them understand the life in the community and help to assist to complete this task of life.	Feb 7, 2011 3:42 AM
646	parents should be given the information as to specifics on this program so they have a better understanding of it. many parents of older clients may want to leave their child in the family home & get the needed services for them to live there in familiar surroundings possibly rent free since they have minimal income to rent a place. with support services this would be possible & another client may even be able to live with the person & share supports.	Feb 7, 2011 3:56 AM
647	There should be a full range of services available to assist disabled individuals to live and function independently.	Feb 7, 2011 4:25 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
648	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 7, 2011 5:13 AM
649	Anybody who has a disability and is unable to care for themselves should receive these services. For many families it is a choice between staying home and unemployed to care for their disabled family member and as a result collecting welfare or going to work and having skilled service providers take care of the family member.	Feb 7, 2011 5:21 AM
650	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 7, 2011 6:40 AM
651	I am not sure, but I would say anyone who qualifies as needing help, qualification should include, those with medical need and those who are having difficulties in home life, school or work with behavior problems that impede day to day function on a regular basis.	Feb 7, 2011 6:46 AM
652	People whose Individual Planning (IP) Team has identified a need for these services. See Lanterman Act.	Feb 7, 2011 2:46 PM
653	An individual with an IPP that has identified a need for these services, per The Lanterman Act.	Feb 7, 2011 3:25 PM
654	Clients that agree to training and actually participate.	Feb 7, 2011 4:28 PM
655	Whoever needs them.	Feb 7, 2011 5:16 PM
656	People whose Individual Planning (IP) Team has identified a need for these services. See Lanterman Act.	Feb 7, 2011 5:45 PM
657	Individuals with Individual Program Plans, whose IPP team has identified a need for these services, as described in the Lanterman Act, section 4646 (a) - (d).	Feb 7, 2011 6:21 PM
658	People who exhibit dangerous behavior, need 24 hour supports, who are unemployed, who refuse to work should NOT be authorized to use these services.	Feb 7, 2011 6:55 PM
659	As determined by individual's IPP team.	Feb 7, 2011 7:50 PM
660	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 7, 2011 7:53 PM
661	Though costly for some people who need more support. This still cost less per year than keeping them in a developmental center.	Feb 7, 2011 9:11 PM
662	Any individual who is not capable of living entirely on their own. Group homes, by their nature, are more costly and pose certain risks to the individual. As a parent of a disable child, my greatest fear (when I no longer can care for her or have died) is the safety of my disabled daughter. The statistics of molestation and abuse are staggering. I hope that she will be able to live independently or with another family member for the rest of her life.	Feb 7, 2011 9:23 PM
663	No comment	Feb 7, 2011 9:31 PM
664	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 7, 2011 10:06 PM
665	adults who can direct staff and actively participate in their services. consumer needs to be able to indicate that they desire to live in their own home by communicating this desire in some manner consistantly.	Feb 7, 2011 10:37 PM
666	Allow RC's to set the standards in their own communities.	Feb 7, 2011 10:45 PM
667	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 7, 2011 11:12 PM
668	Let the Regional Centers make the decisions regarding program services	Feb 7, 2011 11:13 PM
669	This should be an IPP team decision and determined according to individual need. Every consumer should receive appropriate independent or supported living services according to their abilities and needs as documented in the IPP, as described in the Lanterman Act Section 4646 (a)-(d).	Feb 7, 2011 11:15 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
670	Adults interested in living in the community. SLS may need to agree to have roommates in order to make it feasible if 24 hour care is needed.	Feb 7, 2011 11:25 PM
671	Regional Center clients who, for whatever reason, cannot function independently in society without assistance, and who have some realistic potential for taking care of themselves.	Feb 7, 2011 11:56 PM
672	Any consumer who desires to live ILS/SLS and is able to contribute at least some toward the security deposit [showing some financial responsibility].	Feb 8, 2011 12:13 AM
673	Any adult regional center client who has need.	Feb 8, 2011 1:00 AM
674	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 8, 2011 1:10 AM
675	Cognitively, physically disabled. Either or both.	Feb 8, 2011 1:24 AM
676	Adults with disabilities that are unable to pay for themselves (including family support)	Feb 8, 2011 3:55 AM
677	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 8, 2011 4:06 AM
678	ALL Regional Center clients should be given the opportunity to live in the least restrictive environment - supported living - even if it require 24/7 care.	Feb 8, 2011 4:26 AM
679	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) – (d).	Feb 8, 2011 5:32 AM
680	Again as previously stated.	Feb 8, 2011 6:08 AM
681	Perhaps a link could be added here for the listing of current standards.	Feb 8, 2011 6:10 AM
682	I believe that there are people who are not 100 percent able to function day to day. These individuals cannot live alone, but need to be in a group environment where there is some who can oversee their activities. These individuals are physically mature but not emotionally.	Feb 8, 2011 6:37 AM
683	All consumers should receive training an guidance on these topics not just who wants these services. All consumers are entitled to learn how to be independent.	Feb 8, 2011 7:02 AM
684	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 8, 2011 3:40 PM
685	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 8, 2011 4:26 PM
686	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 8, 2011 4:27 PM
687	Only those who can truly benefit from them. Not those who require 24/7 supported living as that SHOULD indicate they need a higher level of care.	Feb 8, 2011 4:30 PM
688	Individuals who need Independent Living and Supported Living Services should be entitled to receive them. The IPP process helps identify those who would benefits from these services. These services are essential - they support individuals in living a life of independence.	Feb 8, 2011 5:22 PM
689	Any individual that can communicate (whether verbal or otherwise) and is evaluated to be able to live in a community with some assistance.	Feb 8, 2011 5:33 PM
690	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 8, 2011 5:51 PM
691	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 8, 2011 6:03 PM
692	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 8, 2011 6:10 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
693	ACRC clients, low IQ clients of any age. Those without homes.	Feb 8, 2011 7:47 PM
694	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) – (d).	Feb 8, 2011 7:55 PM
695	All individuals who cant care for themselves and need that extra helping hand to provide a better living situation for themselves so they are able to live a normal life	Feb 8, 2011 8:00 PM
696	Those who clearly demonstrated cognitivity for self hygiene and environmental awareness.	Feb 8, 2011 8:40 PM
697	Base choices on individual's functionality and ability to live independently and thrive in the community notwithstanding the individual's disability.	Feb 8, 2011 8:52 PM
698	Anyone who wants to become more independent in their daily life (including those living with family or wanting to live independently in the future)	Feb 8, 2011 9:19 PM
699	anyone who is with DDD or Regional Center as a client	Feb 8, 2011 9:24 PM
700	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d)	Feb 8, 2011 9:31 PM
701	People who need assistance who are unable to live alone without support should receive these services.	Feb 8, 2011 9:43 PM
702	see previous page	Feb 8, 2011 9:44 PM
703	Any individual who is diagnosed as being Developmentally Disabled and receives services through their local Regional Center and in which will help consumers be more independent, self-advocate and benefit their quality of life should be able to participate in a living program that would help benefit their independent quality of life. Work, training, education and Living in the community is what all individuals strive to achieve. Those with a disability should receive no less of a participation within their community.	Feb 8, 2011 10:23 PM
704	This should be the goal of most of the clients of regional centers--the ability to live semi-independently, away from parents and have a life. Families of special needs young adults should work with the social worker to find adequate housing where the young adult will be safe and yet have whatever degree of autonomy they can attain.	Feb 8, 2011 10:35 PM
705	All persons with developmental disabilities who receive services through their regional centers should be able to advocate and participate in a living program that would help benefit their independent quality of life. Work, training, education and LIVING in the community is what all individuals strive to participate in. Those with disabilities should receive no less of a participation in their community.	Feb 8, 2011 11:20 PM
706	Those individuals whose IPP team has identified a need for these services, as described in the Lanterman Act Section 4646(a)-(d).	Feb 8, 2011 11:48 PM
707	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 8, 2011 11:54 PM
708	I believe people who have sever disabilties should be allowed access to all service. As far as skills relating to IL and SLS, those whom become diasabled before the age of 18 should be entitled to these programs.	Feb 9, 2011 12:25 AM
709	I think everyone who has a developmental disability before age 18 should be able to get ILS services. I have recieved ILS services for a number of years and recieve ILS services through the San Andreas Regional Center. .	Feb 9, 2011 12:55 AM
710	Adults living in their own homes who need such supports to live independently. Services should be separated into personal support needed for daily living (a less expensive basic service) and training or educational services (more complex and expensive service) reduced over time as the person becomes more independent .	Feb 9, 2011 12:59 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
711	Alta Regional Center clients that are and are able be responsible for themselves with assistance	Feb 9, 2011 1:06 AM
712	those who qualify for the need.	Feb 9, 2011 1:24 AM
713	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 9, 2011 1:25 AM
714	Answer: Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 9, 2011 1:28 AM
715	Persons with mild-moderate ID who can cooperate with providers, who do not engage in illegal behaviors,	Feb 9, 2011 1:33 AM
716	same	Feb 9, 2011 2:28 AM
717	All people with developmental disabilities.	Feb 9, 2011 3:22 AM
718	I think that any consumer of any state regional center should be able receive ILS Services. I think that all individuals with a developmental disability which begins before age 18 should receive services from local regional center and ILS services.	Feb 9, 2011 3:36 AM
719	This area is muddled --- RCs pay local vendors who manage the IHSS hours. It is a tricky area to review. One issue is to qwuestion ILS and SLS in the first place. There are many success stories, but there are many situations where the person would have been less isolated in a facility with other people around besides one IHSS worker. There is a philosophy that ILS SLS is the gold standard which leaves some people isolated and dependent on one or two workers, rather than in a communal setting with others around.	Feb 9, 2011 4:25 AM
720	A very small percentage of consumers should be eligible to receive these services for a limited amount of time.	Feb 9, 2011 5:39 AM
721	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 9, 2011 5:42 AM
722	Clients who are in the right age range/situation to receive these services.	Feb 9, 2011 6:53 AM
723	Only those who have little to no family support. All Others should have to share some cost and/or volunteer time.	Feb 9, 2011 8:46 AM
724	The planning team during the IPP process should determine if there is a need and is reasonable.	Feb 9, 2011 5:19 PM
725	Supported living services (SLS) should be available for all adults who want to live in their own home with supports and should not be limited by the nature or severity of the individual's disability. Thus, for example, individuals who require 24-hour (or other extensive supports) or who need assistance to direct their care, should not be barred from receiving SLS, as these are not restrictions imposed on any other type of living arrangement. While regional center consumers should access generic services to the extent possible, the number of hours of SLS available to a consumer should not be limited based on an assumption of how many hours of IHSS the person will receive. To do otherwise poses barriers to individuals who need more intensive SLS but do not qualify for the greatest amount of IHSS. Independent Living Services (ILS) should be available for individuals who need and desire such services to lead as independent and normal a life possible, not excluding individuals who live with relatives or other roommates. ILS should also be available to individuals who are transitioning from a congregate living arrangement to their own home.	Feb 9, 2011 5:34 PM
726	those individuals who are living independently or soon to be independent	Feb 9, 2011 6:14 PM
727	Adults not residing in a CCF or family home. Find this service has been set-up to assist providers (CCF's) or families and even as a day program for some served by RC's.	Feb 9, 2011 6:35 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
728	anyone capable of caring for themselves per an assessmsnet. Anyone who wants to live in their own apt and can afford it and meets the NBRC criteria	Feb 9, 2011 6:55 PM
729	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 9, 2011 7:57 PM
730	people whose IPP team has identified a need for these services, per Lanterman Act section 4646 (a) - (d)	Feb 9, 2011 8:11 PM
731	Independent Living should be provided to those who wish to live independently, not those who wish to remain in the homes of their parents. Supported Living Services is really invalid since we have IHSS services available to clients.	Feb 9, 2011 8:16 PM
732	Results of IPP plan. Usefulness and effectiveness of services should be determined by the IPP Team at each IPP meeting as described in the Lanterman Act Sec. 4648A.	Feb 9, 2011 9:06 PM
733	Individuals should be encouraged to achieve the highest level of independence in their living or residential arrangement. Individuals who have the desire to live independently or for whom group placement would be inappropriate should be given the option of independent or supportive livings.	Feb 9, 2011 9:15 PM
734	Regional Center clients who desire to live independently and not in group homes.	Feb 9, 2011 9:20 PM
735	Those individuals whose Individual Program Plan (IPP) team has identified a need for these service, as described by the Lanterman Act Section 4646 (a) - (d).	Feb 9, 2011 9:48 PM
736	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 9, 2011 10:04 PM
737	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 9, 2011 10:34 PM
738	A consumer who wants to live independently in the community should have asses to these type of services.	Feb 9, 2011 10:37 PM
739	All consumers who need them. Especially developmental disabilities consumers.	Feb 9, 2011 10:42 PM
740	In most cases, these individuals are higher functioning and need support to avoid the traps that lead to negative impacts; physically, financially, psychologically. These services are needed. Plain and simple.	Feb 9, 2011 11:32 PM
741	Those who are appropriate. SLS should not be provided for an individual who does not go to a work program. This is a money consumer for our state. A person has received SLS due to behaviors in a care home or with family, they need a care home. We should not authorize a service because of a client blowing through all appropriate services due to behaviors.	Feb 9, 2011 11:33 PM
742	Reference previous comments under Day Programs. California MUST establish standards for all services provided under the Lanterman Act based upon some form of residential taxpayer eligibility. For those who meet the criteria for service under the Lanterman Act, any consumer who requests community based services should be considered as an option. There is a huge gap between ILS and SLS and requirements within each that make it difficult for placement. Both services are based upon individual support needs but requirements of each place restrictions on servicel. Cost effectiveness would be better achieved by combining and addressing support needs of the individuals rather than focusing on the "program.	Feb 9, 2011 11:33 PM
743	All developmentally disabled people who are able to live independently with supported living services should be able to do so.	Feb 9, 2011 11:35 PM
744	Two questions to be answered: one, is the person capable; two, does the person want it.	Feb 9, 2011 11:50 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
745	Anyone with developmental disabilities who has this identified in as a need in their IPP	Feb 9, 2011 11:58 PM
746	The consumers should have a level of skills/abilities and a learning rate that would make living independently with coaching reasonable. They should be able to learn to function with minimal support after a more intensive period of coaching. Intensive, long term support with little chance of being reduced should not be provided unless it is more cost effective than a group living situation. The safety of the consumer should be maintained in any living situation.	Feb 10, 2011 12:44 AM
747	Services should be provided to everyone who has a clinical or medical need fo rservices. There is too many baby boomer adults who were denied services who need these the most and have not had the intervention necessary to become socially emotionally confident to advocate for themelve and manage their own health care.	Feb 10, 2011 3:15 AM
748	people without any other place to go. this is a crucial service	Feb 10, 2011 7:54 PM
749	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 10, 2011 8:02 PM
750	IPP team should determine level of need. However, I think the regional center needs to be more choosy about whom they accept to ILS/SLS programs. I see many clients who do not need the level of service they receive or do not take advantage of it because they are not placed correctly. If a person is not willing to accept services, the state should not be wasting its money paying for them to do nothing.	Feb 10, 2011 8:08 PM
751	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 10, 2011 9:32 PM
752	Yes , clear guidelines.	Feb 10, 2011 9:45 PM
753	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 10, 2011 9:59 PM
754	People with disabilities of all types especially those in wheelchairs. People who can't drive. People who need help with living and home care.	Feb 10, 2011 10:14 PM
755	Those living in their own homes ,that have accessed all generic services,such as IHSS and as per assessment, require additional services to remain safely in their own home.	Feb 10, 2011 10:20 PM
756	Any client who has had this option stated in his/her IPP should receive these service, according to The Lanterman Act.	Feb 10, 2011 10:28 PM
757	Anyone individual who is over the age of 19 and cannot live by themselves	Feb 10, 2011 11:34 PM
758	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 10, 2011 11:42 PM
759	All developmentally disabled persons	Feb 10, 2011 11:47 PM
760	Any client who wants to be an individual should be permitted ILS or SLS.	Feb 11, 2011 12:02 AM
761	Independent living services and supported living servicesd are for consumers.	Feb 11, 2011 12:15 AM
762	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 11, 2011 12:22 AM
763	hose individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 11, 2011 12:50 AM
764	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 11, 2011 12:55 AM
765	High functioning consumers, not necessary those that can not get alone with other people in care homes	Feb 11, 2011 1:05 AM
766	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 11, 2011 1:10 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
767	Everyone disabled person that is in need.	Feb 11, 2011 1:32 AM
768	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 11, 2011 1:49 AM
769	Supports should remain the same or increase.	Feb 11, 2011 1:49 AM
770	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 11, 2011 2:19 AM
771	These services should be determine by a standardized formula with a maximum $ cap. The funds should be provided to individuals who should for only a certain list of supports and should not be used to furnish homes or build permanent fixtures that cannot move with the individual.	Feb 11, 2011 2:30 AM
772	This should also be a IPP determination	Feb 11, 2011 2:47 AM
773	individual with disability	Feb 11, 2011 2:57 AM
774	All regional center clients that have the potential to live independently or semi-independently should begin receiving services that work toward independent living by age 16 years.	Feb 11, 2011 3:07 AM
775	Those individuals whose Individual Program Pln team has identified a need for these services as described in the Lanterman Act Section 4646 (a)-(d), therefore, if the IPP had identified these services as one of the services to be given to that particular individal, he or she should get it. This is the ultimate goal of each individual to be able to be as independent as they could be.	Feb 11, 2011 3:20 AM
776	AGAIN, ALL PEOPLE WITH DEVELOPMENTAL DISABILITIES!!!!!!!	Feb 11, 2011 3:29 AM
777	Clients who have the demonstrated ability to benefit from these services.	Feb 11, 2011 3:44 AM
778	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 11, 2011 4:10 AM
779	Persons who want this service should received an assessment to determine what is needed to support them in the living situation of their choice.	Feb 11, 2011 4:46 AM
780	No idea, Not in that shoe yet.	Feb 11, 2011 5:06 AM
781	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 11, 2011 5:08 AM
782	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) – (d).	Feb 11, 2011 5:44 AM
783	those unable to independently seek employment or shelter	Feb 11, 2011 6:10 AM
784	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 11, 2011 6:15 AM
785	Individuals who can demonstrate the ability and necessary skills to do so, should be given the opportunity to live independently or as mentioned above, regardless of the "specific" disability.	Feb 11, 2011 6:22 AM
786	Agreed upon by IPS or IPP teams. Lanterman Act.	Feb 11, 2011 6:40 AM
787	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 11, 2011 6:46 AM
788	Individuals who need assistance in order to live as independently as possible. Any person with a developmental disability should be eligible.	Feb 11, 2011 8:01 AM
789	Any person who has indicated a desire and for whom living in a different situation would be a more restrictive setting as determined in their IPP.	Feb 11, 2011 2:25 PM
790	Consumers should be provided services that allow them to live as independently as possible in the least restrictive environment.	Feb 11, 2011 4:24 PM
791	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646	Feb 11, 2011 4:34 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
792	Only clients who actually have the capacity to someday live independently should receive this service. There should never be 24-hour SLS. Clients who receive SLS 24 hours/day should not be considered capable of living independently. This is a very expensive service that is sometimes used to justify moving clients out of the Developmental Center to a "less restrictive" environment; however, I don't feel 24-hour SLS is less restrictive than living in a group home facility.	Feb 11, 2011 5:39 PM
793	I don't think any of these services should be cut back.	Feb 11, 2011 5:53 PM
794	A consumer should not be in SLS if they require 24 hour staff and supports. If it is more cost effective to be placed in a facility or FHA. Regional centers should not augment / subsidize any portion of living expenses (rent lease food) regardless of IPP.	Feb 11, 2011 6:16 PM
795	I think people who are identified and included in the Lanterman act should receive these services.	Feb 11, 2011 6:35 PM
796	High functioning consumers only. These consumers have the capability to live a simple life independently. In order to live independently, a consumer MUST be first trainind in ADL by the group home, day prog etc so that transition to living alone is possible. A check list is to be provided to group home, ILS and day programs to determine areas of accomplishment or areas that needs strengthening. eg, cooking, laundry, shopping, money management, transport etc.with time period for accomplishment. All consumers who intend living alone must obtain training through group home or day program before they can qualify to live alone. Traning to be ongoing for a period on 3-6 months consistently.	Feb 11, 2011 6:39 PM
797	People that have expresssed a need these services according to the Lanterman Act.	Feb 11, 2011 6:44 PM
798	IF THERE ARE MANY MORE CUTS, SOME OF THE PROGRAMS SUCH AS INDEPENDENT LIVING AND SUPORT LIVING SERVICES MAY DISOLVE! MY SON IS A CLIENTS OF ALTA REGIONAL AND UTILIZES ALOT OF THEIR PROGRAMS THAT HELP HIM IN HIS DAILY LIVING NEEDS. I WISH THESE GOVERNMENT OFFICIALS WOULD CONSIDER HOW OUR FOLKS REQUIRE THESE SUPPORTS IN THEIR LIVES TO LIVE SAFELY AND HEALTHY IN OUR COMMUNITY. IHSS IS AT RISK TOO, THIS IS A VERY WORTH WHILE PROGRAM AND UTILIZED BY MANY CLIENTS.	Feb 11, 2011 6:47 PM
799	Have health insurance companies provide these services. If government provides, require a co-pay.	Feb 11, 2011 6:48 PM
800	all who are eligible	Feb 11, 2011 6:57 PM
801	People whose Individual Planning Team have identified a need for these services as defined in the Lanterman Act.	Feb 11, 2011 7:03 PM
802	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 11, 2011 7:03 PM
803	All individuals should be accessed for the level of independance they can atain. Community options should be apprpreate for the individual in all areas of theri lives.	Feb 11, 2011 7:13 PM
804	individuals ages 17+ who are planning to or currently live in their own homes	Feb 11, 2011 7:19 PM
805	There are many people that have developmental issues that were not diagnosed before they were 18 and still should be able to recieve services.	Feb 11, 2011 7:22 PM
806	Autism spectrum adults	Feb 11, 2011 7:23 PM
807	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 11, 2011 7:24 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
808	if a doctor thinks blind c.p. visual impaired autism	Feb 11, 2011 7:24 PM
809	Client's should receive these services when they have the ability to live independently with minimal supports. Often SLS is used as a method of parenting children of adults with developmental disabilities. I dont think this is an appropriate usage of funds. SLS staff are also utilized for doing tasks associated with living independently such as: grocery shopping, and driving. Was the original idea of this service to help client's to learn these functions, or to pay someone to do it for them?	Feb 11, 2011 7:52 PM
810	Any disabled person who needs them.	Feb 11, 2011 8:42 PM
811	See comment under Behavioral Services	Feb 11, 2011 8:49 PM
812	Those who, because of their disability, are not able to live on their own safely.	Feb 11, 2011 8:52 PM
813	There are many Level 2 clients who should be encouraged to move to more independent living, and who surely could make the adjustment successfully.	Feb 11, 2011 8:53 PM
814	These services are essential to the consumer and should be available to all consumbers. This would be the service my child will need as he transitions to adulthood and is essential to those with autism.	Feb 11, 2011 9:27 PM
815	Young people ages 18 and up who may suffer from mental illness, injury or accident results, chronic conditions but who wish to be as self reliant as possible.	Feb 11, 2011 9:36 PM
816	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 11, 2011 9:43 PM
817	Independent living support services may be provided if: The consumer has completed independent skills training and support services are needed on a maintenance basis. Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. Generic resources, e.g., IHSS, have been applied for and denied. Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. RCOC may purchase services, which cannot be provided by generic or private resources. Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. Use of natural, community and family supports shall be maximized.	Feb 11, 2011 9:46 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
818	Independent living support services may be provided if: The consumer has completed independent skills training and support services are needed on a maintenance basis. Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. Generic resources, e.g., IHSS, have been applied for and denied. Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. RCOC may purchase services, which cannot be provided by generic or private resources. Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. Use of natural, community and family supports shall be maximized.	Feb 11, 2011 9:47 PM
819	Everyone should be assisted to overcome challenges and live independently, but also the idea of living independently within a collectivistic setting should be taken into account. For example: immigrant families usually come from a collectivistic way of life vs. natives who come from an individualistic way of life.	Feb 11, 2011 9:48 PM
820	adult consumers and their caregivers	Feb 11, 2011 9:48 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
821	Independent living support services may be provided if: • The consumer has completed independent skills training and support services are needed on a maintenance basis. • Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. • Generic resources, e.g., IHSS, have been applied for and denied. • Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. • RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. • A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. • The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. • RCOC may purchase services, which cannot be provided by generic or private resources. • Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. • Use of natural, community and family supports shall be maximized.	Feb 11, 2011 9:49 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
822	Independent living support services may be provided if: • The consumer has completed independent skills training and support services are needed on a maintenance basis. • Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. • Generic resources, e.g., IHSS, have been applied for and denied. • Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. • RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. • A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. • The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. • RCOC may purchase services, which cannot be provided by generic or private resources. • Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. • Use of natural, community and family supports shall be maximized.	Feb 11, 2011 9:51 PM
823	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 11, 2011 9:51 PM
824	ILS or SLS services should be limited to persons who have demostrated a potential to live either independently or supported as a result of delivery of these services.	Feb 11, 2011 9:53 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
825	Independent living support services may be provided if: The consumer has completed independent skills training and support services are needed on a maintenance basis. Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. Generic resources, e.g., IHSS, have been applied for and denied. Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. RCOC may purchase services, which cannot be provided by generic or private resources. Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. Use of natural, community and family supports shall be maximized.	Feb 11, 2011 9:53 PM
826	As the current Autistic teenagers start aging, they'll need places to live and support to succeed! High income families can take care of themselves. The middle class and low income families are struggling!!	Feb 11, 2011 9:54 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
827	Independent living support services may be provided if: • The consumer has completed independent skills training and support services are needed on a maintenance basis. • Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. • Generic resources, e.g., IHSS, have been applied for and denied. • Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. • RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. • A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. • The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. • RCOC may purchase services, which cannot be provided by generic or private resources. • Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. • Use of natural, community and family supports shall be maximized.	Feb 11, 2011 9:55 PM
828	I have found this to be a very gray area for most people and regional centers. Everyone has their own definition and how they use different services. Independent living services should be a time limited, 2 year max (maybe 3), whose sole purpose it is to work with an individual who wants to move out of their family home into their own home independently. This services might entail training on how to access transportation, but it is not to just take the individual in the workers car to appts. Supported Living Services are for people who are living independently, outside of the family home and not with another non-disabled family member, to allow them to live as independently as possible as it is currently set up to do. There is one other level of services that I have seen repeated need for and that is some type of supported living service for adults who live with a family member, but the family member works and cannot get them to Dr. appts, or out into the community otherwise. Day programs or supported employment programs are great but it leaves a gap especially for medical appts.	Feb 11, 2011 10:00 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
829	Independent living support services may be provided if: • The consumer has completed independent skills training and support services are needed on a maintenance basis. • Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. • Generic resources, e.g., IHSS, have been applied for and denied. • Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. • RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. • A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. • The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. • RCOC may purchase services, which cannot be provided by generic or private resources. • Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. • Use of natural, community and family supports shall be maximized.	Feb 11, 2011 10:01 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
830	Independent living support services may be provided if: The consumer has completed independent skills training and support services are needed on a maintenance basis. Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. Generic resources, e.g., IHSS, have been applied for and denied. Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. RCOC may purchase services, which cannot be provided by generic or private resources. Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. Use of natural, community and family supports shall be maximized.	Feb 11, 2011 10:02 PM
831	My child needs help with learning to live independantly. He is unable to do so himself and refuses to take instructions from us.	Feb 11, 2011 10:05 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
832	Independent living support services may be provided if: • The consumer has completed independent skills training and support services are needed on a maintenance basis. • Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. • Generic resources, e.g., IHSS, have been applied for and denied. • Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. • RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. • A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. • The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. • RCOC may purchase services, which cannot be provided by generic or private resources. • Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. • Use of natural, community and family supports shall be maximized.	Feb 11, 2011 10:07 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
833	Independent living support services may be provided if: • The consumer has completed independent skills training and support services are needed on a maintenance basis. • Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. • Generic resources, e.g., IHSS, have been applied for and denied. • Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. • RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. • A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. • The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. • RCOC may purchase services, which cannot be provided by generic or private resources. • Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. • Use of natural, community and family supports shall be maximized.	Feb 11, 2011 10:14 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
834	Independent living support services may be provided if: • The consumer has completed independent skills training and support services are needed on a maintenance basis. • Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. • Generic resources, e.g., IHSS, have been applied for and denied. • Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. • RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. • A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. • The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. • RCOC may purchase services, which cannot be provided by generic or private resources. • Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. • Use of natural, community and family supports shall be maximized.	Feb 11, 2011 10:32 PM
835	RC funding for services should only be granted to those clients who have an "eligible" Regional Center diagnosis: Borderline MR, Mild MR, Moderate MR, etc., CP, Epilepsy, and Autism related diagnosis. The service funded for must relate to the "eligible" diagnosis. Even if the vendor is a parent of the particular client. No favoritism! It's not fair to other parents/clients.	Feb 11, 2011 10:33 PM
836	As needed and determined by health care provider and case coordinator for people with developmental disabilities.	Feb 11, 2011 10:35 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
837	Independent living support services may be provided if: • The consumer has completed independent skills training and support services are needed on a maintenance basis. • Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. • Generic resources, e.g., IHSS, have been applied for and denied. • Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. • RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. • A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. • The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. • RCOC may purchase services, which cannot be provided by generic or private resources. • Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. • Use of natural, community and family supports shall be maximized.	Feb 11, 2011 10:37 PM
838	RC funding for services should only be granted to those clients who have an "eligible" Regional Center diagnosis: Borderline MR, Mild MR, Moderate MR, etc., CP, Epilepsy, and Autism related diagnosis. The service funded for must relate to the "eligible" diagnosis. Even if the vendor is a parent of the particular client. No favoritism! It's not fair to other parents/clients. Its not fair when a vendor (who happens to be a RC parent) get's special treatment because his/her child is a client; especially when the son/daughter doesn't have an eligible diagnosis for the service that is being paid for.	Feb 11, 2011 10:38 PM
839	People whose Individual Planning (IP) Team has identified a need for these services. See Lanterman Act.	Feb 11, 2011 10:43 PM
840	Individuals that are at that point where they can be semi independant without causing harm to others or themselves.	Feb 11, 2011 10:49 PM
841	Adults that want to live on their own.	Feb 11, 2011 10:52 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
842	Independent living support services may be provided if: • The consumer has completed independent skills training and support services are needed on a maintenance basis. • Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. • Generic resources, e.g., IHSS, have been applied for and denied. • Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. • RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. • A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. • The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. • RCOC may purchase services, which cannot be provided by generic or private resources. • Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. • Use of natural, community and family supports shall be maximized.	Feb 11, 2011 10:56 PM
843	Clients who have shown they can safely live in this setting.	Feb 11, 2011 10:57 PM
844	Developmentally delayed who can work but are unable to handle paying their bills etc. Elderly who need support	Feb 11, 2011 11:08 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
845	Independent living support services may be provided if: •The consumer has completed independent skills training and support services are needed on a maintenance basis. •Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. •Generic resources, e.g., IHSS, have been applied for and denied. •Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. •RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. •A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. •The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. •RCOC may purchase services, which cannot be provided by generic or private resources. •Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. •Use of natural, community and family supports shall be maximized.	Feb 11, 2011 11:27 PM
846	For supportive living, the cost of the service can never exceed that of institutional care.	Feb 11, 2011 11:31 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
847	· The consumer is at least 18 years of age. (It is recommended that consumers wait until they are out of high school prior to entering a SL or IL setting.) · The proposed SL / IL service meets the needs of the consumer as identified by the consumer's ID team. Services are specifically linked to Medicaid Waiver deficits. · The consumer has no behavior challenges that would jeopardize his or her health or safety or the health or the safety of others if he or she lived with supports in the community. If such challenges exist, the consumer's planning team develops a strategy to ameliorate these challenges prior to the consumer's move into SL. · The consumer has no medical problem that would create a threat to his or her health if he or she lived with supports in the community. · The consumer is able to communicate to the extent that he or she can exercise informed choice to control his or her own environment and is able to participate in the grievance procedure of the support agency. · The consumer has with full knowledge of the inherent risks, chosen SL as the appropriate and desired living option. SL is stated as the preferred living option in the consumer's individual program plan. · The consumer and his or her family, if applicable, give explicit consent for the regional center to take all necessary steps to protect the health and safety of the consumer up to and including assisting the consumer to transition into another living option. · The consumer has adequate financial resources to pay for living expenses. These expensed include but are not limited to: rent, utilities, food, and other expenses typically incurred by people living independently. · The proposed SL service incorporates every feasible generic and natural resource. · The likelihood exists, given the individual's life circumstances and identified potential resources, that sufficient natural supports can be developed to decrease the need for regional center funded support over time. The consumer and SL provider must be willing to participate in the development of a circle of natural support. · Relatives of the consumer can not provide regional center funded SL support. For the purposes of this document, "relative" means spouse, parent, stepparent, son, daughter, brother, sister, stepbrother, stepsister, half-brother, half-sister, uncle, aunt, niece, nephew, first cousin, or any such person denoted by the prefix "grand" or "great" or the spouse of any of the persons specified in this definition. · SL services are provided in a home controlled by the consumer. Neither the supported living provider (nor relative), nor paid SL staff (nor relative) can own the home or have any financial interest in the home where SL services are proposed. · A consumer living with a family can not be funded as a supported living arrangement. This type of arrangement may be accomplished through an Adult Family Home Agency (AFHA) placement, but not through a SL service. · The regional center has approved a SL service that is cost effective. SL services will be deemed cost effective as defined by the cost of supporting consumers with similar needs in community settings such as CCF, ICF, and existing supported living arrangements as per Title 17 California Code of Regulations 58617. Title 17 should be ammended to state that people can be excluded from SLS or ILS due to the cost of services. · As per Title 17 California Code of Regulations 58601 (a) (3), a SL service cannot be provided to people living in the home of their parents. This should be amended to reflect that SLS cannot be provided in the home of any relative, using the definition of relative provided above.	Feb 11, 2011 11:50 PM
848	People who do not require a lot of supports. If they need 24 hour support, they should live in a home that provides it. It get's too costly if a consumer needs more than the amount that is funded for a group home or ICF.	Feb 11, 2011 11:56 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
849	Independent living support services may be provided if: The consumer has completed independent skills training and support services are needed on a maintenance basis. Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. Generic resources, e.g., IHSS, have been applied for and denied. Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. RCOC may purchase services, which cannot be provided by generic or private resources. Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. Use of natural, community and family supports shall be maximized.	Feb 11, 2011 11:58 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
850	Independent living support services may be provided if: The consumer has completed independent skills training and support services are needed on a maintenance basis. Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. Generic resources, e.g., IHSS, have been applied for and denied. Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. RCOC may purchase services, which cannot be provided by generic or private resources. Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. Use of natural, community and family supports shall be maximized.	Feb 12, 2011 12:10 AM
851	Only the highest functioning DD consumers should be groomed for "Independent living" support service. Supported Living Services should be abolished. This service concept is flawed. A myriad of support agencies providing specialized support far exceeds the paid support of living in a residential licensed home. With service agencies providing continued support, where is the growth and autonomy of the consumer. Again, only the service agencies prosper. It is like living in a different home, but having all aspects of your life handled by support personnel. There is little intrinsic reward or growth.	Feb 12, 2011 12:25 AM
852	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 12, 2011 1:17 AM
853	people who have disabilities, over the age 18, who are capable of making their own decisions, handle living on their own mentally, physically and emotionally. Someone capable of learning how to be independent through guidance and minimal oversight.	Feb 12, 2011 1:23 AM
854	Anyone who has be diagnose with a disability that meets the qualifications.	Feb 12, 2011 1:44 AM
855	Whoever needs these service according to individual IPP plan	Feb 12, 2011 2:35 AM
856	People who are in the process of moving on from their family home and need help to do so	Feb 12, 2011 2:41 AM
857	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 12, 2011 2:45 AM
858	Most of the programs that are out their give direct support with all of this and it should given to every client to or any person that needs these support	Feb 12, 2011 2:47 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
859	Again, please include Aspger's/HFA/autism spectrum adults. They need help learning to live independently.	Feb 12, 2011 3:16 AM
860	Young adults with learning disabled problems to help them learn skills so that they can live independently.	Feb 12, 2011 3:35 AM
861	Very important service. Should be available to all who need it, regardless of diagnosis. Demonstrated need should be by evaluation and observation.	Feb 12, 2011 3:47 AM
862	Any disabled adult who may require these services.	Feb 12, 2011 3:49 AM
863	These services should be received by individuals with clear developmental needs at the post high school level.	Feb 12, 2011 4:55 AM
864	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 12, 2011 5:19 AM
865	everyone who needs to do it.	Feb 12, 2011 5:56 AM
866	mental retardation, down syndrome, autism, asperger's syndrome	Feb 12, 2011 5:59 AM
867	As required by IPP	Feb 12, 2011 6:17 AM
868	See previous answers.	Feb 12, 2011 6:28 AM
869	Only consumers who have the mental and emotional capacity to be in a semi-independent living situation should be granted these type of placements. As a clinical psychologist who sees a lot of RCOC's more challenging consumers, I have seen a few cases in which the consumer has too many serious psychiatric and/or behavioral issues to be living on their own with ILS or SLS. These consumers are often terminated from various other types of CCFs and are given their own place to live because they cannot get along with other consumers/housemates. However, consumers with psychiatric issues need much more structure and supervision than what SLS can provide.	Feb 12, 2011 6:39 AM
870	Anyone with developmental disabilities.	Feb 12, 2011 6:52 AM
871	Consumers who are really capable of living on there own or with some assistance. Based on more than just the consumer stating they want to live on there own.	Feb 12, 2011 6:58 AM
872	All disabled	Feb 12, 2011 7:18 AM
873	High functional disabled adults.	Feb 12, 2011 7:51 AM
874	Those individual who have the mental ability to make decisions with help AND who have family support in terms of time commitment.	Feb 12, 2011 7:57 AM
875	People who are mentally or physically disabled	Feb 12, 2011 9:22 AM
876	I am not sure this is a good option. I feel there are very few who would benefit from this. The cost to pay for one individual is far greater than in a residential home. Most of our clients need to be with other housemates; it would be very lonely for them to live in own apartments.	Feb 12, 2011 12:39 PM
877	children who need supervision in day today skill teaching them to live and work and give back to our society.	Feb 12, 2011 3:11 PM
878	When parents agree to try/receive these services for their children.	Feb 12, 2011 3:34 PM
879	People can handle living on there own but housing department should pay more of it because economy is hard for people live now days with things getting more expensive. The housing people should only take 20 percent or even 15 percent of what a person makes.	Feb 12, 2011 4:16 PM
880	There are many that qualify for this service. My son does not. I think if they wish to try. that should be an option.	Feb 12, 2011 4:20 PM
881	Late teens and adults with disabilities which make them dependent; identified by doctors/clinicians.	Feb 12, 2011 4:25 PM
882	It seems to me that these services may be way more expensive than others and that cheaper alternatives could be required!!!!	Feb 12, 2011 4:26 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
883	Recipients of these services should include those with a severe lack of social skills and interpersonal skills, but who are otherwise able to hold down a job and live independently.	Feb 12, 2011 4:27 PM
884	All of my answers are the same for all of these services. Please reference these.	Feb 12, 2011 4:35 PM
885	All who can learn to live on their own!	Feb 12, 2011 4:36 PM
886	To any individual who feels they are ready to commit to living a successful life in their community	Feb 12, 2011 5:41 PM
887	From a family member's perspective, these services are necessary when young adults grow up with developmental disabilities and need help and/or a structured living environment. Many can be contributing members of society with this support. Aging parents cannot take care of these adults and need to know that they will have a place to live and have the support they need. What will happen to this population without this support?? Please don't cut this funding.	Feb 12, 2011 5:48 PM
888	These service standards should be given to clients who are living independently as well as those who will be able to live independently in the future.	Feb 12, 2011 5:52 PM
889	Clients who need to learn to be independent	Feb 12, 2011 5:55 PM
890	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) – (d).	Feb 12, 2011 6:11 PM
891	All individuals should live in the least restrictive environment. This means that it is our obligation to provide resources to assist the individual to function at the highest possible level. These services are pivitol for individuals self esteem, psychological health.	Feb 12, 2011 6:27 PM
892	Able and willing clients.	Feb 12, 2011 7:14 PM
893	A consumer must request it, or respond yes, if asked.	Feb 12, 2011 7:24 PM
894	As the parent of a child considered to be on the Autism Spectrum, we are unable to receive services through the Inland Regional Center. This needs to be changed! We have no support services.	Feb 12, 2011 8:23 PM
895	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 12, 2011 8:26 PM
896	He is not in this program yet	Feb 12, 2011 8:43 PM
897	All who have the ability to live independatly, We need afforable housing	Feb 12, 2011 8:49 PM
898	consumers	Feb 12, 2011 8:55 PM
899	All disabled individuals have the right to feel as independent as possible.	Feb 12, 2011 9:20 PM
900	my children have severe autism and need intense one on one involvement at all times	Feb 12, 2011 9:24 PM
901	Again, who qualify by law.	Feb 12, 2011 10:07 PM
902	All individuals with developmental disabilites, except those able to stay in the family home. Anyone who cannot get a living wage should be provided with independent and supported living services.	Feb 12, 2011 10:12 PM
903	Anyone who could not function in society without thee services. Where else would they go?	Feb 12, 2011 10:14 PM
904	All disabled people who wish to be independent should qualify for these services.	Feb 12, 2011 11:11 PM
905	Anyone proven by a medical Dr. to need the services.	Feb 12, 2011 11:30 PM
906	Covered in prior sections	Feb 12, 2011 11:43 PM
907	Those individuals whose IPP team has identified a need for these services, as descrived in The Lanterman Act Section 4646 (a)-(d).	Feb 12, 2011 11:56 PM
908	no one	Feb 13, 2011 12:36 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
909	We need help in In-Home-Support Services even though our caregivers are living with us. Why are they going to eliminate our caregiver's hours for helping us with the meal preparation, shopping for our food, etc.??????????We need help in doing these things especially when we do not have the capacity to do all of these things. How are we going to live??? I think they'd rather see us die.	Feb 13, 2011 12:37 AM
910	Any person with a disability who seeks help.	Feb 13, 2011 12:38 AM
911	All members of society deserve fair housing and support as needed. Why would we put them in cages or on the street???	Feb 13, 2011 1:23 AM
912	any adult with a diagnosed developmental disability	Feb 13, 2011 1:31 AM
913	People that should receive these services are people that can not physically go to medical appointments by themselves, people that do not understand what is being said or what it means. People that need help cooking healthy meals, help with budgeting their money or paying their bills. People who need a social life and do not know how to do this; people who do not know what to do when there is an emergency.	Feb 13, 2011 1:52 AM
914	read the previous answer	Feb 13, 2011 2:41 AM
915	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) – (d).	Feb 13, 2011 3:43 AM
916	Quality of independent living and maintaining relationships within the family unit or assisting adults who want to stay home with support to remain in the home.	Feb 13, 2011 4:08 AM
917	Whoever has special need.	Feb 13, 2011 4:22 AM
918	All consumers should have some kind of training, also offer some sort of transition to families way before your child turns 18 hrs old	Feb 13, 2011 5:09 AM
919	People with high functioning.	Feb 13, 2011 5:11 AM
920	Individuals who are high functioning and want to live independently.	Feb 13, 2011 5:15 AM
921	Those family who are really in need and are not capable fo providing a better future for there child	Feb 13, 2011 5:25 AM
922	any one who needs the service, should receive the service.	Feb 13, 2011 5:58 AM
923	Any consumer who would prefer such a living situation in order to maximize their life choices such as individual life style, opportunity to live in the community of their choice, maintain relationships, etc.	Feb 13, 2011 7:52 AM
924	This section is equal in everyway to all previous QR standards.	Feb 13, 2011 7:58 AM
925	These services may not be appropriate living options to those that are a severe risk to themselves or the community, due to behavior challenges.	Feb 13, 2011 8:11 AM
926	Any individual who needs a supported living situation	Feb 13, 2011 1:48 PM
927	yes,.. watch for the hours given,.	Feb 13, 2011 3:41 PM
928	Regional Center Clients	Feb 13, 2011 3:54 PM
929	I think the services provided not work get well	Feb 13, 2011 4:12 PM
930	Our 40 year old son lacks verbal skills in gretting and conversing with family and peers. He lacks an understanding of people's thoughts, feelings and needs. He is learning about himself as well.	Feb 13, 2011 5:51 PM
931	People who want to live on their own.	Feb 13, 2011 5:53 PM
932	We fully expect consumers to live life to the fullest extent possible. But all consumers will need some level of support in the home. The state is trying to cut money by cutting services, but that is a short-sighted goal. If we give consumers proper support they will remain as independent as possible. If we take away supports then we'll see an increase in illness, money troubles, emergency service requests, etc.	Feb 13, 2011 6:05 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
933	Those individuals whose Individual Program Plan team has identified a need for these services, as described in The Lanterman Act Section 4646 (a)-(d).	Feb 13, 2011 6:50 PM
934	Clients whose level of functioning allows them to thrive in an Independent Living setting.	Feb 13, 2011 7:07 PM
935	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 13, 2011 7:14 PM
936	Without Supported Services we would all have to place our children in a State Run instituion which would be horrible for all the children and families of disabled children. There are wonderful independant family group homes that couse 1/2 the cost and also provide love and support for the children and their families.	Feb 13, 2011 8:20 PM
937	I think that this service is very important that are in a wheelchair, who have cerebral palsy and that are able to communicate with other people, but cannot help themselves. Some people with cerebral palsy that have cerebral palsy are able to live in the community with the right help, and the right attendants. I know that I'm repeating myself, because this is very close to my heart, because I see myself in this position in a year or two. Right now I live with my mother.	Feb 13, 2011 8:56 PM
938	any client who is able, with supplemental support, to live in or share an apartment condo or house and beneifits psychologically and practically from that degree of independence. For example, being able to come and go from their own home as they please. Feeling independent and competent	Feb 13, 2011 10:17 PM
939	On a as needed basis as approriate	Feb 13, 2011 10:25 PM
940	As set forth in the Lanterman Act	Feb 13, 2011 10:32 PM
941	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 13, 2011 10:35 PM
942	Those who know how to handle their own medical care. It isn't enough to cook, budget, and clean. I know a couple who drink regularly and skip the blood pressure and psychotropic meds. I've reported this to APS to no avail.	Feb 13, 2011 11:00 PM
943	People who would like to and for people who have family members that they cannot care for in the home.	Feb 13, 2011 11:51 PM
944	like what you have so far	Feb 14, 2011 12:16 AM
945	Any adult who cannot live alone for any reason should be eligible for Independent Living and Supported Living Services.	Feb 14, 2011 1:06 AM
946	Those individuals whose Individual Program Plan (IPP) team has identified a need for thse services, as described in the Lanterman Act Section 4646 (a) - (d).	Feb 14, 2011 1:48 AM
947	Any adult that qualifies for RCOC services should be considered for these services. The goal should be the same as that set by federal guidelines: "The Least Restrictive Environment". Each client has unique abilities and disabilities. Anyone without skills like money management, transportation, advocacy, personal hygiene, behavior control, emergency situations, and medical care assessment would need these services.	Feb 14, 2011 1:52 AM
948	utilize the existing standards	Feb 14, 2011 2:29 AM
949	Essentially the same responses for this topic series of question as previously provided in the last topic.	Feb 14, 2011 2:31 AM
950	My brother recieves these services. He has never been happy until he got these services. He is well kept and loves his people that care for him. I can;t. My house is small and we have 5 living here. [redacted] has always been in pain and he is not so anymore. He is happy and comfortable. Thank you so very much.	Feb 14, 2011 2:50 AM
951	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 14, 2011 3:25 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
952	Those individuals whose IPP teams have identified a need for these services. Service standards are a very scary idea - I fear that many individuals' needs won't be properly served.	Feb 14, 2011 3:40 AM
953	anyone who qualifies should be able to receives services as required in the IPP	Feb 14, 2011 4:11 AM
954	Adults who have the capacity to be independent. They should also be able to be alone for some of the day/evening hours.	Feb 14, 2011 5:03 AM
955	this is extremely important and careful qualifications and certifications should be maintaned as it is maintained by a credentialed doctor.	Feb 14, 2011 5:22 AM
956	Disabled clients who wish to live independenly.	Feb 14, 2011 5:40 AM
957	Any person/client of RC's should have ILS Services if they have the potential for benefiting for such services and are interested in receiving such services. Clients should be given the opportunity to see if they like such an arranagement with a visit to the proposed living situation. They have to have some knowledge in order to make a decision.	Feb 14, 2011 5:45 AM
958	My daughter is 21 and unable to live independently. She will need the option of living in a home away from our home, in the future. These homes need to be safe and well-run. Please continue to offer these services.	Feb 14, 2011 7:07 AM
959	ALL QUALIFIED CONSUMERS WHO CAN DEMONSTRATE THAT THEY ARE ABLE TO MASTER THE SKILLS NEEDED FOR INDEPENDENT LIVING. IF THEY FAIL IN ANY AREA, THEY NEED TO WAIT 1 YEAR TO RE-APPLY FOR THE CLASS RE THE SKILLS THEY NEED TO AQUIRE.	Feb 14, 2011 7:15 AM
960	Only those who want it. Even when capable, many do not want to be on their own and should not. However, with the pressure and enthusiasm that the option is presented, many consumers feel that they SHOULD like it and go with it, only to fail and have to go back to a more restrictive setting.	Feb 14, 2011 1:53 PM
961	individuals with developmental disabilities	Feb 14, 2011 2:35 PM
962	My 17 year old son will be needing these services very soon. These need to remain.	Feb 14, 2011 3:07 PM
963	Allo adults and children with special needs	Feb 14, 2011 3:13 PM
964	Everyone has the right to live in the least restrictive environment. This includes the disabled. It is less expensive on the state and federal support system for individuals to live in group homes than it is for them to live in a developmental center. It is less expensive on the state and federal support system for individuals to live in independent living options than it is to live in group homes.	Feb 14, 2011 3:34 PM
965	THE ONES WHO ARE THE DISABILITY.	Feb 14, 2011 3:51 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
966	Independent living support services may be provided if: -The consumer has completed independent skills training and support services are needed on a maintenance basis. -Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. -Generic resources, e.g., IHSS, have been applied for and denied. -Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. RCOC may purchase services, which cannot be provided by generic or private resources. Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. Use of natural, community and family supports shall be maximized.	Feb 14, 2011 4:03 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
967	Independent living support services may be provided if: The consumer has completed independent skills training and support services are needed on a maintenance basis. Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. Generic resources, e.g., IHSS, have been applied for and denied. Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. RCOC may purchase services, which cannot be provided by generic or private resources. Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. Use of natural, community and family supports shall be maximized.	Feb 14, 2011 4:27 PM
968	Per individual plan.	Feb 14, 2011 4:29 PM
969	clients that are ready to move out.	Feb 14, 2011 4:51 PM
970	Based on the Lanterman Act, I believe anyone who desires these services should have access to them.	Feb 14, 2011 5:01 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
971	Independent living support services may be provided if: The consumer has completed independent skills training and support services are needed on a maintenance basis. Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. Generic resources, e.g., IHSS, have been applied for and denied. Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. RCOC may purchase services, which cannot be provided by generic or private resources. Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. Use of natural, community and family supports shall be maximized.	Feb 14, 2011 5:05 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
972	Independent living support services may be provided if: • The consumer has completed independent skills training and support services are needed on a maintenance basis. • Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. • Generic resources, e.g., IHSS, have been applied for and denied. • Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. • Regional centers should/may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. • A plan of action (program plan) shall be agreed to by the consumer, family/advocate and the regional center, which identifies what services and supports, are to be provided. • The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and the regional center prior to submission of the Purchase of Service authorization to the regional center staff, and shall be cost effective, per current supported living regulations. • Regional centers may purchase services, which cannot be provided by generic or private resources. • Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and the regional center. • Use of natural, community and family supports shall be maximized.	Feb 14, 2011 5:26 PM
973	Any individual who has the need for these services.	Feb 14, 2011 5:27 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
974	Independent living support services may be provided if: The consumer has completed independent skills training and support services are needed on a maintenance basis. Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. Generic resources, e.g., IHSS, have been applied for and denied. Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines.Supported living services for adult consumers should be considered on a case-by-case basis and individualized. RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. RCOC may purchase services, which cannot be provided by generic or private resources. Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. Use of natural, community and family supports shall be maximized.	Feb 14, 2011 5:46 PM
975	Independent /Supported living support services should be provided for adult un-conserved consumers in conjuction with available generic resources (IHSS; HUD). Use of natural, community and family supports shall be maximized. Funding for assessments and program plans, which cannot be provided by generic or private resources, shall be funded by regional center. Support services are needed to transition from family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year.	Feb 14, 2011 5:56 PM
976	Follow IPP	Feb 14, 2011 6:08 PM
977	Any appropriate regional center consumer who wants to live on their own. Consumer should be at least 21 years old and have the potential to be independent with support.	Feb 14, 2011 6:09 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
978	Independent living support services may be provided if: The consumer has completed independent skills training and support services are needed on a maintenance basis. Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. Generic resources, e.g., IHSS, have been applied for and denied. Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. RCOC may purchase services, which cannot be provided by generic or private resources. Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. Use of natural, community and family supports shall be maximized.	Feb 14, 2011 6:19 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
979	Independent living support services may be provided if: • The consumer has completed independent skills training and support services are needed on a maintenance basis. • Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. • Generic resources, e.g., IHSS, have been applied for and denied. • Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. • RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. • A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. • The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. • RCOC may purchase services, which cannot be provided by generic or private resources. • Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. • Use of natural, community and family supports shall be maximized.	Feb 14, 2011 6:24 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
980	Independent living support services may be provided if: The consumer has completed independent skills training and support services are needed on a maintenance basis. Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. Generic resources, e.g., IHSS, have been applied for and denied. Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. RCOC may purchase services, which cannot be provided by generic or private resources. Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. Use of natural, community and family supports shall be maximized.	Feb 14, 2011 6:27 PM
981	This should be eliminated. A human being should not, as a function of the disability, demand and receive housing and support. You work, you get money, then you buy what you want. Otherwise, you get what we think is best for you. Beggars cannot be chosers.	Feb 14, 2011 6:29 PM
982	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 14, 2011 6:29 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
983	Independent living support services may be provided if: The consumer has completed independent skills training and support services are needed on a maintenance basis. Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. Generic resources, e.g., IHSS, have been applied for and denied. Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. RCOC may purchase services, which cannot be provided by generic or private resources. Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. Use of natural, community and family supports shall be maximized.	Feb 14, 2011 6:30 PM
984	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 14, 2011 6:30 PM
985	Independent living support services may be provided if: Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. Generic resources, e.g., IHSS, have been applied for and denied. Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements with the expectation that the individual will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. The individual has completed independent skills training and support services are needed on a maintenance basis. The individual resides with elderly or frail family members and requires supports to live in the family home and the family home is the preferred living option for the individual. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and the regional center prior to agreement to commence the supported living arrangment. The selected vendor will assist the individual in accessing all available generic resources and natural supports. Regional Center will only fund services and supports which cannot be provided by generic or private resources.	Feb 14, 2011 6:35 PM
986	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a)-(d).	Feb 14, 2011 6:38 PM
987	All who are assessed to be eligible.	Feb 14, 2011 6:49 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
988	Developmental dissabled	Feb 14, 2011 6:56 PM
989	Those who can function independently with a little support.	Feb 14, 2011 6:56 PM
990	Legal citizens only.	Feb 14, 2011 7:03 PM
991	Independent living support services may be provided if: • The consumer has completed independent skills training and support services are needed on a maintenance basis. • Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. • Generic resources, e.g., IHSS, have been applied for and denied. • Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. • RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. • A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. • The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. • RCOC may purchase services, which cannot be provided by generic or private resources. • Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. • Use of natural, community and family supports shall be maximized.	Feb 14, 2011 7:08 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
992	Independent living support services may be provided if: The consumer has completed independent skills training and support services are needed on a maintenance basis. Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. Generic resources, e.g., IHSS, have been applied for and denied. Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. RCOC may purchase services, which cannot be provided by generic or private resources. Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. Use of natural, community and family supports shall be maximized.	Feb 14, 2011 7:23 PM
993	All individuals whose IPP team has identified a need for these services, as outlined in the Lanterman Act Section 4646(a)-(d)	Feb 14, 2011 7:25 PM
994	Based on the needs of the consumer as determined by the IDT team	Feb 14, 2011 7:31 PM
995	Individuals on Social Security and SSI, but a citizen for 10 years	Feb 14, 2011 7:32 PM
996	It should give to the person that he/she really can do the independent living. minimize the supported living services.	Feb 14, 2011 7:44 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
997	Independent living support services may be provided if: The consumer has completed independent skills training and support services are needed on a maintenance basis. Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. Generic resources, e.g., IHSS, have been applied for and denied. Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. RCOC may purchase services, which cannot be provided by generic or private resources. Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. Use of natural, community and family supports shall be maximized.	Feb 14, 2011 7:47 PM
998	The only change there should be about who may receive SLS is that people who are legally conserved should not be eligible for SLS because that is incompatible with the principles, philosophy, and desired outcomes of SLS. For example, it is the preferences of the individual being supported that are supposed to guide decisions about his or her supports, and the individual is supposed to be supported in making and implementing his or her own life decisions.	Feb 14, 2011 7:57 PM
999	Consumers who are capable and desire of this type of living.	Feb 14, 2011 7:57 PM
1000	adults who are order than 21.	Feb 14, 2011 7:58 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
1001	Independent living support services may be provided if: The consumer has completed independent skills training and support services are needed on a maintenance basis. Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. Generic resources, e.g., IHSS, have been applied for and denied. Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. RCOC may purchase services, which cannot be provided by generic or private resources. Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. Use of natural, community and family supports shall be maximized.	Feb 14, 2011 8:05 PM
1002	Every person that is living in their own apartment.....SHOULD BE TAUGHT HOW TO LOOK AFTER THEMSELVES, KEEP A CLEAN HOUSE, AND COOK... all these things should be checked on at least once a week.	Feb 14, 2011 8:24 PM
1003	Only consumers who have acquired skills to Live Independantly and if the cost for residential care is lower than that of independant living than that is what should be provided.	Feb 14, 2011 8:25 PM
1004	Any client who can demonstrate ability for independent living.	Feb 14, 2011 8:31 PM
1005	Important service and should not be cut. Some unconserved consumers are able to receive their own SSI, and spend it before the rent is due, sometimes from undue influence, causing Regional centers to help financially. In all cases where a consumer pays rent, a 3rd party payee must be in place, to assure payment of rent, and support of the consumer and avoiding undue influences as a condition of receiving ILS or SLS services.	Feb 14, 2011 8:33 PM
1006	All adults with DD that desire such services and are regional center clients.	Feb 14, 2011 8:49 PM
1007	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 14, 2011 9:00 PM
1008	All adult consumers who want to live independently.	Feb 14, 2011 9:20 PM
1009	Regional Center Representatives visit my son in his Independent Living Facility and questions both my son and I about whether or not the meet his needs.	Feb 14, 2011 9:25 PM
1010	People who are/can/will live indpendently should receive these services.	Feb 14, 2011 9:40 PM
1011	Any and all individuals whose IPP team has determined a need for these services.	Feb 14, 2011 9:55 PM
1012	Adults 18 and over	Feb 14, 2011 9:57 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
1013	only the consumers whom have been followed for a length of time and are meeting their objectives	Feb 14, 2011 9:58 PM
1014	Independent living support services may be provided if: The consumer has completed independent skills training and support services are needed on a maintenance basis. Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. Generic resources, e.g., IHSS, have been applied for and denied. Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. RCOC may purchase services, which cannot be provided by generic or private resources. Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. Use of natural, community and family supports shall be maximized.	Feb 14, 2011 10:19 PM
1015	Adults consumer's 18 years old and older. SL services for those who can not also be successfully served in another arrangement. Consumer who can afford their living expenses. This will require creative options for affordable housing in our county. Consumer's who are willing to have a roommate. Again it is not feasible for a single 18 year old with SSI for income to live in his/her own apartment. It is certainly not feasible for most typical 18 year old high school graduates or college students. ILS- Consumer's who have demonstrated that they can work cooperatively with staff and learn skills to be able to show progress towards independence.	Feb 14, 2011 10:36 PM
1016	These services need to be identified by the IPP (Individual Program Plan) team, as described in the Lanterman Act Section 4646 (a)-(d).	Feb 14, 2011 10:38 PM
1017	Those who are developmentally disabled and those who are already currently availing these services.	Feb 14, 2011 10:38 PM
1018	I feel that their are many individuals who qualify for Independent Living or Supportive Living and are stuck still living in board and care homes. It costs so much more to keep higher functioning individuals in group homes instead of paying an hourly wage for them to be more independent and more responsible for their own lives. This would save lots of rcoc funds by transittioning more consumers to independent/supportive living. This is what was invisioned in the whole system was to teach individuals to grow to their full potential.	Feb 14, 2011 10:57 PM
1019	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) – (d).	Feb 14, 2011 11:05 PM
1020	1. Clients that request independent and supportive living skills who are not a danger to themselves. Ex. sexual acting out, Prader Willy Syndrome, really poor grooming and hygiene	Feb 14, 2011 11:33 PM
1021	A consumer in a IPP it is documented is ready to begin Independent Living Services.	Feb 14, 2011 11:42 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
1022	Independent living support services may be provided if: The consumer has completed independent skills training and support services are needed on a maintenance basis. Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. Generic resources, e.g., IHSS, have been applied for and denied. Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. RCOC may purchase services, which cannot be provided by generic or private resources. Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. Use of natural, community and family supports shall be maximized.	Feb 14, 2011 11:50 PM
1023	No comment	Feb 15, 2011 12:03 AM
1024	People who need support for living on their own. This model is the best and most cost effective.	Feb 15, 2011 12:06 AM
1025	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 15, 2011 12:19 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
1026	Independent living support services may be provided if: The consumer has completed independent skills training and support services are needed on a maintenance basis. Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. Generic resources, e.g., IHSS, have been applied for and denied. Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific time lines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. RCOC may purchase services, which cannot be provided by generic or private resources. Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. Use of natural, community and family supports shall be maximized.	Feb 15, 2011 12:21 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
1027	Independent living support services may be provided if: • The consumer has completed independent skills training and support services are needed on a maintenance basis. • Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. • Generic resources, e.g., IHSS, have been applied for and denied. • Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. • RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. • A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. • The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. • RCOC may purchase services, which cannot be provided by generic or private resources. • Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. • Use of natural, community and family supports shall be maximized.	Feb 15, 2011 12:43 AM
1028	Adults (over the age of 18 years of age) who communicate they prefer to live in an apartment or house, indepdendent of any parent, relative or primary caregiver.	Feb 15, 2011 1:03 AM
1029	Once again IPP's set forth those that need such support to live as independently, and one might add cost efffectively as possible.	Feb 15, 2011 1:12 AM
1030	Why dont you cut services to illegal aliens. Make them pay taxes and speak English. Why would you want to cut off services to special need families. Weve paid into the tax system for decades all the way back to great grandparents!!!! I voted for Jerry Brown. Please do the right thing.	Feb 15, 2011 1:16 AM
1031	All consumer who choose to receive service.	Feb 15, 2011 1:28 AM
1032	Those individuals whose IPP team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 15, 2011 1:32 AM
1033	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 15, 2011 1:38 AM
1034	People who can afford to live independently (sharing costs with others as needed). People who are willing to learn how to live on their own (ILS), including housekeeping, shopping, etc. SL - people who can safely reside independently (sharing costs with others as needed) with supports which are fiscally similar to residential care. Both should be "cost effective".	Feb 15, 2011 1:41 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
1035	Every person, no matter what their circumstances, deserves the dignity of living independent lives. With the help of these services, families are helped to make these dreams a reality for the disabled.	Feb 15, 2011 1:49 AM
1036	All individuals who are currently qualified as reg.center services	Feb 15, 2011 1:52 AM
1037	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) – (d).	Feb 15, 2011 1:53 AM
1038	Autistic	Feb 15, 2011 1:53 AM
1039	All those who are determined through an Interdisciplinary Team (IT) decision may benefit from such service(s). The absence of community, generic resources must also be a consideration in selecting such service. The ubiquitous theme in the Lanterman Act is to "level the playing field" for those with disabilities. Providing the opportunity of this basic experience is crucial.	Feb 15, 2011 1:57 AM
1040	I'm not sure haven't reviewed these services.	Feb 15, 2011 1:57 AM
1041	People with disabilities that need it	Feb 15, 2011 2:03 AM
1042	Developmentally disabled people like my brother really need Supported Living services. He is in a group home, overseen by Golden Gate Regional Center, and it has helped him immensely. Otherwise, he'd probably be living on the streets or in jail.	Feb 15, 2011 2:20 AM
1043	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) – (d).	Feb 15, 2011 2:29 AM
1044	Those who are not safe to live independently	Feb 15, 2011 2:45 AM
1045	For ILS, consumers should only receive this for no more than two years. SLS should only be used if they have 2 or more consumers living in the same house and sharing the same staff. This will help people stay out of nursing homes and institutions.	Feb 15, 2011 2:45 AM
1046	Right now I live in a group home. Someday I really hope to live in my own apartment or condo. I always need help with my money, though I have learned to budget a lot better. I've also gotten a lot of help from staff in how to eat healthy. Sometimes I have I.B.S. and staff shows me a better way to eat so I don't have as many problems. I like getting help from staff because sometimes I have trouble making decisions.	Feb 15, 2011 2:46 AM
1047	CAPABLE SPECIAL NEEDS CLIENTS	Feb 15, 2011 2:53 AM
1048	client with motivation client has improvement	Feb 15, 2011 3:08 AM
1049	individuals w/ disabilities who are not able to perform the above mentioned activities of daily living	Feb 15, 2011 3:20 AM
1050	People whose Individual Planning (IP) Team has identified a need for these services. See Lanterman Act.	Feb 15, 2011 3:21 AM
1051	all those individual in need of care for transition to adult services for independent/assisted living	Feb 15, 2011 3:24 AM
1052	Everyone who can benefit	Feb 15, 2011 3:31 AM
1053	My son still young , so he does't get these service yet. But parent can't live longer then children. They are special needs kids. They can't live without support.	Feb 15, 2011 3:37 AM
1054	Any adult person with developmental disabilities who has the capability to live a supported life style.	Feb 15, 2011 3:44 AM
1055	any child with a behavior disorder and any child under 36 months old without a diagnosis for their disorder.	Feb 15, 2011 4:06 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
1056	See the IP and the Lnaterman Act!! Do not dismantle this system because it's impossible to replicate on an individual basis. Even if we leave enough money to care for our son, who will manage his care? When I hear talk of responsibility for care returned to the community, I think of the homeless. Will my son be the next generation of homeless? The next to be in our expensive prison system? The thought makes me sick. This service is critical to my son. He cannot live without supported living. When I die, who will care for him? We have no other children to look out for him. He is doing well in supported living.	Feb 15, 2011 4:08 AM
1057	Any consumer who wants to live independently and who does not have the support and means to accomplish this without input from Regional Centers.	Feb 15, 2011 4:23 AM
1058	People who would not be able to live on their own. People who need 24hr care should not live on their own. This is costing rc too much money.	Feb 15, 2011 4:36 AM
1059	Adults should be given the oportunity to have their own home. If they can prove they can live by themselves. More power to them.	Feb 15, 2011 4:54 AM
1060	Every child in need. The sooner we start to work with our children, the better off they will be.	Feb 15, 2011 5:06 AM
1061	All disabled humans.	Feb 15, 2011 5:11 AM
1062	Anyone who wants to live on their own. The individual must be motivated to live on their own and what service providers want. Sometimes, I see service providers who have such influences on the consumer.	Feb 15, 2011 5:29 AM
1063	see comments on Behavior services	Feb 15, 2011 5:41 AM
1064	I think adults who are still living with their parents should be able to receive independent living skills while still in parents home.	Feb 15, 2011 5:52 AM
1065	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 15, 2011 6:06 AM
1066	Those who are capable and need these services.	Feb 15, 2011 6:29 AM
1067	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 15, 2011 6:32 AM
1068	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 15, 2011 6:36 AM
1069	We do not use these services yet, but if you want to have these people be more independent and contribute to the community, then do not take this away. You will lose money rather than save money. Most people who are disabled, want to work and put in a good days effort. There are jobs out there that they will do with pride that many who are on unemployment won't do. If you really want to cut the budget then have those on unemployment supplement with lower wage jobs. I know a person who has been on unemployment even though he could get a job at Home Depot making $10 an hour because he gets more sitting at home from your pay checks.	Feb 15, 2011 6:52 AM
1070	adults with disabilities	Feb 15, 2011 7:05 AM
1071	Those who are willing to be trained in technology to access: 1. Visual, auditory, or tactile schedules posted mentor outside the home 2. Telemedicine consults 3. Visual or auditory mentoring and check-in via teleconferencing 4. Use credit cards and supervised wire transfers for personal attendants 5. Use grocery and meal delivery services	Feb 15, 2011 7:18 AM
1072	any consumer who wants to	Feb 15, 2011 7:29 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
1073	All clients who desire and have the ability to function at some level of independence should be provided that opportunity. Look at the senior assisted living model for those who can manage. This can be more cost effective and it most certainly allows/creates a wonderful sense of community to those who want their independence, but need supervision.	Feb 15, 2011 7:33 AM
1074	all who can. I believe this is where our consumers would best be served.	Feb 15, 2011 8:24 AM
1075	This service should be made available to consumers who need it per IPP. It should be offered on a sliding scale based on income and family size (i.e. FCPP). ILS nas SLS is porvided at one of the highest rates and therefore it needs to have parental responsibility.	Feb 15, 2011 8:36 AM
1076	People whose Individual Planning Team has identified as needing these services. See Lanterman Act.	Feb 15, 2011 10:36 AM
1077	Children with autism that has behavioral issues.	Feb 15, 2011 12:09 PM
1078	Those individuals whose IPP team has identified need for these services, as described in the Lanterman Act Section 46456 (a)-(d).	Feb 15, 2011 3:45 PM
1079	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 15, 2011 4:06 PM
1080	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) – (d).	Feb 15, 2011 4:23 PM
1081	Those that may be of a safety risk on their own and those who are unable to work due to a mentally impaired state of mind.	Feb 15, 2011 5:04 PM
1082	Everyone that needs it.	Feb 15, 2011 5:09 PM
1083	If a person with disabilities wants to establish a home of their own, and a support system can be put in place to cover all of this person's support needs, and the cost of these needs is commensurate with the cost of living in a more restricted environment, then I cannot see any reason to restrict this person's ability to live on their own with support.	Feb 15, 2011 5:24 PM
1084	Continuation of current standards	Feb 15, 2011 5:57 PM
1085	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 15, 2011 6:01 PM
1086	These services should be provided only to those consumers at a cost that does not exceed the cost of placement. Given the financial condition of California, independence must take a back seat to health, safety and cost-effectiveness. Tax dollars should not be used to create housing options for independent and supported living. Many independent living services can be provided by parents and family members. Such services should be provided only as to those consumers who do not have family members who can provide such.	Feb 15, 2011 6:04 PM
1087	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) – (d).	Feb 15, 2011 6:27 PM
1088	If a disabled person is capable of living on their own, they should be given the opportunity	Feb 15, 2011 6:34 PM
1089	People whose Individual Planning (IP) Team has identified a need for these services. See Lanterman Act.	Feb 15, 2011 6:34 PM
1090	any one who is interested in independent living and has the ability.	Feb 15, 2011 6:56 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
1091	Independent living support services may be provided if: The consumer has completed independent skills training and support services are needed on a maintenance basis. Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. Generic resources, e.g., IHSS, have been applied for and denied. Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. RCOC may purchase services, which cannot be provided by generic or private resources. Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. Use of natural, community and family supports shall be maximized.	Feb 15, 2011 6:58 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
1092	Independent living support services may be provided if: The consumer has completed independent skills training and support services are needed on a maintenance basis. Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. Generic resources, e.g., IHSS, have been applied for and denied. Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. RCOC may purchase services, which cannot be provided by generic or private resources. Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. Use of natural, community and family supports shall be maximized.	Feb 15, 2011 6:59 PM
1093	People with a disorder like autism who have severe deficits in communication and safety awareness.	Feb 15, 2011 7:01 PM
1094	If a client wants to receive these services, they should. Even the most disabled have proven with the right supports to benefit from theses services.	Feb 15, 2011 7:11 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
1095	. Suggested service standards about who should receive these services: Independent living support services may be provided if: • The consumer has completed independent skills training and support services are needed on a maintenance basis. • Natural support systems, i.e., friends, neighbors, family are unable to provide assistance. • Generic resources, e.g., IHSS, have been applied for and denied. • Support services are needed to transition a person from his/her family/parents' home to his/her own living arrangements. A consumer who lives at home with his/her family may be provided ILS training with the expectation that the consumer will be moving into his/her own apartment within the next year. A plan of action needs to be developed with specific timelines. Supported living services for adult consumers should be considered on a case-by-case basis and individualized. • RCOC may fund an initial assessment, which shall be completed by a vendored agency. This will include a person centered plan. • A plan of action (program plan) shall be agreed to by the consumer, family/advocate and RCOC, which identifies what services and supports, are to be provided. • The rate of payment to the provider and a recommended period of service shall be negotiated between the provider of service and RCOC prior to submission of the Purchase of Service authorization to RCOC staff, and shall be cost effective, per current supported living regulations. • RCOC may purchase services, which cannot be provided by generic or private resources. • Any modification to the program plan and the recommended rate of payment shall be agreed to by the consumer, family/advocate and RCOC. • Use of natural, community and family supports shall be maximized.	Feb 15, 2011 7:13 PM
1096	any adult with a developmental diability that makes it impossible for them to live independently. This should include adults who develop their disablilities after the age of 18, for example, as the result of an accident with head trauma	Feb 15, 2011 7:16 PM
1097	Those who cannot function independently and are eligible under the law.	Feb 15, 2011 7:31 PM
1098	persons who have no caregiver or home, or those who require care that is beyond capability of caregiver and/or family.	Feb 15, 2011 7:35 PM
1099	Any and all disabled individuals should qualify for these services	Feb 15, 2011 7:41 PM
1100	Individuals who are determined by a qualified professional as not capable of independent living because of mental or physical disabilities.	Feb 15, 2011 7:46 PM
1101	Consumers who need less than 24 hour care and supervision should receive these services. It makes no sense to move a consumer who is receiving 24-hour care and supervision and support in a licensed facility into their own apartment with 24-hour live-in supported living services. The pay for the SLS is at least triple that being paid to residential facilities.	Feb 15, 2011 7:51 PM
1102	Adults with developmental disabilities.	Feb 15, 2011 7:54 PM
1103	These service should be provide to individuals that their parents have payed into the states system through taxation. The services should be provide as part of follow through system as they were educated through the program.	Feb 15, 2011 7:55 PM
1104	See suggestions for Behavior services and Day programs	Feb 15, 2011 7:56 PM
1105	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) - (d).	Feb 15, 2011 7:56 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
1106	These services should be given to every person who qualifies due to a disability and cannot live independently as it is. They sometimes need extra support to deal with some skills and be able to not to live in an institution.	Feb 15, 2011 8:17 PM
1107	Any Regional Center client who wishes to live independently should be allowed, permitted and supported to so so. If a person wants to move from a Group Home to Independent Living or Supported Living they should receive greater supports to allow them to do this. Otherwise, once someone moves to a group home they will never be able to try a more "independent" arrangment and it limits their choices and opportunities.	Feb 15, 2011 8:19 PM
1108	NO SLS for individuals costing more than a level 4 I home and BMP. No 24/7 SLS provided without another option for day program activities. Keep another provider involved not just the SLS provider. Tighten the rules around SLS provider owning property lived in by individuals served. NO RC rent supplements. Only provide SLS once a section 8 voucher is obtained NO ILS for kids under 16 living at home. NO ILS to teach kids to make beds. Clarify regs regarding Adaptive Skills and how it differs from ILS.	Feb 15, 2011 8:28 PM
1109	Individuals with developmental disabilities who desire greater independence and participation in community life. The opinions of family members, too, will help to determine the degree to which independent living supports are rendered.	Feb 15, 2011 8:48 PM
1110	Individuals who want to live in their own place or are preparing to live in their own place	Feb 15, 2011 9:01 PM
1111	All clients who express the interest and have the abilities to function at a more independent level should be allowed to do so with supports. The regional centers should focus on making more housing opportunities available to all levels of individuals. They must consider the social needs and the safety when they assist in the creation of new housing. In our personal experience, assistance was at first denied, another appeal - more time and money to reach the conclusion of appropriate placement and regional center assistance. The facts showed that if regional center had won the case the services that were needed by my son to live his version of "independence" would have cost them 4x what I was requesting. Which was by the way a 50-50 split and then I provide another $1250.00 per month for his expenses. After the past two years of cost adjustments for their share it has created an increased burden. If more cuts are implemented he and others could lose their homes, their support system and the life that they have successfully created. What happens to them then? If they cannot adjust or be accepted back into the family home they could end up on the streets with the other less fortunate clients and become victims of crime and abuse. It is wrong to kick the an down the road so another agency can deal with it. These are, in most cases, productive human beings with ability to give back and join in society.	Feb 15, 2011 9:02 PM
1112	Anyone who would like to stay in their own home should be given that opportunity which is almost always cheaper than residential care.	Feb 15, 2011 9:18 PM
1113	Currently services are mainly being offered to low functioning individuals in this area. They should be provided to ALL consumers, regardless of how high functioning they may be. The services should be separated for the low/high funtioning consumers based on their needs.	Feb 15, 2011 9:18 PM
1114	As determined by the IPP	Feb 15, 2011 9:22 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
1115	MENTALY AND PHYSICALLY DISABLED ADULTS	Feb 15, 2011 9:36 PM
1116	My child in only six now, is on the autism spectrum and is making significant progress. At this time it's too early to tell if he will need any of these services. However, I strongly believe they are essential, valuable, and help provide stability and confidence to those that utilize the services.	Feb 15, 2011 9:45 PM
1117	I oppose the issuance of service standards, because categorical limits without regard to the needs of the individual consumer violate the entitlement to services, and the consumer rights and consumer choice provisions of the Lanterman Act.	Feb 15, 2011 9:47 PM
1118	Individuals who with their IPP team have identified a need for these services, as described in the Lanterman Act 4646 (a-d).	Feb 15, 2011 9:59 PM
1119	Standard: The Lanterman Act provides that those who should receive independent living services and supported living services are those who are so identified through the IPP process.	Feb 15, 2011 10:06 PM
1120	All who are disabled should be able to get services. Unfortunately, the federal budget mandates that we provide certain services for our special education students, but does not provide the budget to match. We only get 14-22% of the costs, so then general education budget has to be used. I know disabled adults who are turned down for services or disability payments when they certainly qualify, but budget cuts continue to impact those who need it most. It is unethical to treat people that way, especially the vulnerable, elderly and needy. At the Independent Livint Center in Claremont, patients who state they are disabled qualify to be helped. It is a true blessing to qualify without proving the diagnosis when someone has difficult with all daily tasks.	Feb 15, 2011 10:07 PM
1121	People whose Individual Planning (IP) Team has identified a need for these services. See Lanterman Act.	Feb 15, 2011 10:31 PM
1122	Consumers who are able to afford thier own rent and living expenses could be considered for supported living.	Feb 15, 2011 10:50 PM
1123	People whose IP Team has identified a need for these services. See Lanterman Act.	Feb 15, 2011 11:17 PM
1124	For people that qualify, people with disabilities.	Feb 15, 2011 11:21 PM
1125	Only people who have the potential to live at least somewhat independently (i.e. no significant behavioral needs - can be along at least a few hours a day).	Feb 15, 2011 11:21 PM
1126	These services are necessary so that adults with disabilities can function as independently as possible. Without vocational training, and daily living training, the costs for these individuals that would otherwise be more productive in our society will drain the system's money. In other words will cost more long-term to maintain these adults in long-term care facilities which is now competing for money given the aging population; rather than provide some assisted living and have them be more independent.	Feb 15, 2011 11:23 PM
1127	ILS- for those preparing to move into the community- but limited to no more than two years of preparation. SLS- should not be a "wrap around" service- meaning individual should have ability to be alone for part of the day or overnight. Wrap Around is provided in Residential Care.	Feb 15, 2011 11:24 PM
1128	All adults over age 18 who wish to live in their own home in the community.	Feb 15, 2011 11:25 PM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
1129	Eligible consumer who is able to live on their own but needs limited support, or someone who cannot live anywhere else and needs support which is more cost effective than institutionalization. Focus on ILS for people who can live on their own with some training and limit the time of the support. If someone needs 24 hour SLS, try to find a more appropriate setting that offers what is needed.	Feb 15, 2011 11:29 PM
1130	Anyone who needs them. From our current viewpoint these services are available to those who are most severely affected and there is to enough to go around for all clients.	Feb 15, 2011 11:33 PM
1131	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 15, 2011 11:33 PM
1132	Those with a diagnosed disability.	Feb 15, 2011 11:53 PM
1133	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 16, 2011 12:00 AM
1134	no prerequisites as outlined in Title 17. all contracts for sls/ils services should be approved through DDS. Eliminate redundancy of 21 regional center system wherever possible, and consolidate work processes to reduce number of regional center employees who are needed, thus allowing for little to no impact to the direct service needed for vulnerable people needing supports.	Feb 16, 2011 12:01 AM
1135	All those who have the ability to safely live on their own, with or without support.	Feb 16, 2011 12:03 AM
1136	Anyone with a disabliity of needs to be shown independent living/social skills.	Feb 16, 2011 12:14 AM
1137	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 16, 2011 12:19 AM
1138	Individuals who can provide a safe living environment for themselves in their community of choice.	Feb 16, 2011 12:31 AM
1139	those who really need it based on how much help they need that families can't provide those who are committed to following thru	Feb 16, 2011 12:42 AM
1140	Should be THE PRIMARY MODE for all adult DD clients in CA not needing Porterville DC forensics (the only DC component necessary in CA).	Feb 16, 2011 1:14 AM
1141	same aswers as the previous questions, how are you going to measure the effectiveness of this survey. i dont see a real way of measuring families answers	Feb 16, 2011 1:14 AM
1142	Safe, Clean, homes	Feb 16, 2011 1:21 AM
1143	Not my area of expertise.	Feb 16, 2011 1:39 AM
1144	ALL IN NEED	Feb 16, 2011 2:19 AM
1145	Those who could benefit from living independently should be given the opportunity to experience this service if it is beneficial to their quality of life.	Feb 16, 2011 2:28 AM
1146	I think that any one who has a developmental disability before the age of 18 should receive Independent Living Skills Instructor.	Feb 16, 2011 2:41 AM
1147	ONLY THOSE PEOPLE WHO ARE CAPABLE OF MAKING THIS DETERMINATION ON THEIR OWN, WITHOUT ASSISTANCE SHOULD BE IN ALLOWED TO LIVE IN INDEPENDENT LIVING AND SUPPORTED LIVING SITUATIONS. (HIGH FUNCTIONING INDIVIDUALS)	Feb 16, 2011 2:47 AM
1148	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 16, 2011 3:04 AM
1149	All individuals who request this living option regardless of their ability to earn money. These services should be made available to individuals who are totally dependent for all of their ADLs.	Feb 16, 2011 3:14 AM
1150	People who can actually clearly direct their own services	Feb 16, 2011 3:53 AM
1151	Specifically developmentally disabled individuals.	Feb 16, 2011 3:55 AM

Independent and Supported Living Services

1. Suggested service standards about who should receive these services:

	Response Text	
1152	Individuals who want to live independently but need support and assistance to achieve goal.	Feb 16, 2011 4:29 AM
1153	This is not really a realistic question. People need these services for survival, and there are not any options (as people are out in the community now and not in institutions). Without these services, how would people live??	Feb 16, 2011 4:30 AM
1154	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in the Lanterman Act Section 4646 (a) – (d).	Feb 16, 2011 4:47 AM
1155	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 16, 2011 5:05 AM
1156	Any disabled person who feels able and willing to try to live as independently as possible. This ambition should be encouraged and supported.	Feb 16, 2011 5:17 AM
1157	ANYone who is developmentally disabled	Feb 16, 2011 5:19 AM
1158	individuals with ASD	Feb 16, 2011 5:29 AM
1159	Those individuals whose IPP team has identified a need for these services as described in The LAnterman Act	Feb 16, 2011 5:31 AM
1160	Answer: Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 16, 2011 5:31 AM
1161	Those individuals whose Individual Program Plan (IPP) team has identiied a need for these services, as described in The Lanterman Act Section 4646 (a) -(d).	Feb 16, 2011 5:41 AM
1162	Clients who need supports to enable them to live outside of institutions.	Feb 16, 2011 5:41 AM
1163	All above services are needed - Shown above.	Feb 16, 2011 6:02 AM
1164	Those individuals whose Individual Program Plan (IPP) team has identified a need for these services, as described in The Lanterman Act Section 4646 (a) - (d).	Feb 16, 2011 6:10 AM
1165	individuals who want to live in the community but require some level of supports to do so	Feb 16, 2011 6:11 AM
1166	Any adult Consumer the will not be a danger to the community or themselves. INCREASE CALIFORNIA'S ANNUAL LICENSE FEES BY $7.00 PER EVERY VEHICLE, VESSEL OR AIRCRAFT.	Feb 16, 2011 7:09 AM
1167	All adult clients that have the ability to learn.	Feb 16, 2011 7:38 AM
1168	The IPP process should determine this. The Lanterman Act must be preserved. Lawmakers and RC employees should listed to the testimony of consumers and families from the Feb 3rd and 10th hearings. Keeping the developmentally disabled in their own living situation and/or with their families is optimum to group homes or institutions and saves money and quality of life! Listen to the testimony!	Feb 16, 2011 7:51 AM

2. Suggested service standards about how often a specific service should be

	Response Text	
1	As needed (24/7 for those with severe disabilities, health & welfare issues, etc.	Jan 28, 2011 1:06 AM
2	services should be designed around the person in the intensity, duration and frequency that is needed. the utilization of supports other then people supports should be considered; family involvement where appropriate and other natural support should be included, where-ever possible	Jan 28, 2011 1:13 AM
3	as often as required by the individual- again, no one size fits all	Jan 28, 2011 1:16 AM

2. Suggested service standards about how often a specific service should be

	Response Text	
4	Servoces should be provided based upon individual clients needs as identified in the IPP	Jan 28, 2011 1:19 AM
5	INDIVIDUAL CHOICE BUDGET	Jan 28, 2011 1:26 AM
6	n/a	Jan 28, 2011 1:37 AM
7	as needed	Jan 28, 2011 1:41 AM
8	ICB	Jan 28, 2011 1:51 AM
9	Up to 24 hours per day not to exceed 1:1 staffing.	Jan 28, 2011 1:55 AM
10	it depends on each consumer. From everyday assistance to once a month and between.	Jan 28, 2011 2:05 AM
11	as needed no- 24/7 services in this model	Jan 28, 2011 2:10 AM
12	see WAPADH	Jan 28, 2011 2:13 AM
13	All clients need to be provided with SLS if they want/need that service-especially if it costs the same or less than a group home, but cost effectiveness is now being extended not just to the cost of services but to the clients personal use of SSI for rent etc. When clients ask for SLS they are often told that they cannot afford to live in their own apartments. Recently the persons SSI income has been used in the cost effectiveness argument against SLS. Case managers talk about how much the client can afford for rent and groceries and people with low SSI checks are excluded for consideration for SLS when their checks are not as high as others. However, once the clients get into SLS-even those who have low SSI checks-we ALWAYS see their standard of living improve and they tend to have more spending money.	Jan 28, 2011 2:18 AM
14	ILS/ SLS should be available for any one who needs it at any time they need it. This service must be needs based!!!!	Jan 28, 2011 2:20 AM
15	Based upon the need of the individual. No more than 3x a week and no less than 1x.	Jan 28, 2011 2:37 AM
16	all the the time	Jan 28, 2011 2:37 AM
17	How do quantify this? Do you tell the consumer they can only go on one walk a week? I don't think so! Each person will need to figure out with their team or circle of support, what their goals and desires are, and what their physical and emotional needs are. Then within reason, work that framework into their budget. For instance, person A has lots of energy and wants to go out a DO all kinds of things. Person B is older and doesn't have the energy like person A. Person B may be happy with more hours in the daytime, with only one or two nights a week for seeing performances and just get dinner / undress support in the evening on other nights... I don't know how you quantify these things.	Jan 28, 2011 2:39 AM
18	Either state funded through the agency responsible for the consumer, or the family/trusted of the consumer.	Jan 28, 2011 3:01 AM
19	there should be no limit as to how often this service should be available	Jan 28, 2011 3:12 AM
20	as currently provided	Jan 28, 2011 3:17 AM
21	For a lifetime	Jan 28, 2011 3:33 AM
22	Support should be provided whenever it is necessary to keep the person safe and productive.	Jan 28, 2011 3:35 AM
23	Lanterman Act. Needs of the consumer as written in the IPP	Jan 28, 2011 3:45 AM
24	full time	Jan 28, 2011 3:47 AM
25	For daily living I would say daily. 24/7 for those incapable to live alone. Set days and hours for those more mentally and physically capable depending on needs and safety of the person.	Jan 28, 2011 4:05 AM

2. Suggested service standards about how often a specific service should be

	Response Text	
26	These services should only be provided to those individuals who can prove that they have gained enought knowledge to perform all necessary daily living skills on their own.	Jan 28, 2011 4:14 AM
27	If their needs to be a cap there should be a separate cap for those in the categories I listed above. It is obvious that living without one or two housemates needs to be the norm.	Jan 28, 2011 4:27 AM
28	Service should be provided on a case by case basis and only if it's cost effective to the RC	Jan 28, 2011 4:30 AM
29	If the consumer is found to be competent and capable of handling emergency situations etc, the Regional center should have a program set just for these consumers for on going education and training. There should also be a "mentor or counselor" of sorts that checks up on and assists each consumer with decisions etc. on a weekly or bimonthly basis. If the consumer should require more help, they should be able to ask for help. Sometime after they have moved out on their own, they need to prove they can do so .. if they cannot or have a lot of difficulty, then they should be removed from that status and placed back into a facility for their level of care.	Jan 28, 2011 4:40 AM
30	As often as necessary, to be determined by ISP's, staff observation, and the client themselves, if able to express it.	Jan 28, 2011 4:42 AM
31	As often as is deemed by the consumer's IPP	Jan 28, 2011 4:52 AM
32	This should be determined based on the IPP	Jan 28, 2011 5:00 AM
33	as needed but insist that sls folks share housing. nobody can afford to live alone these days	Jan 28, 2011 5:19 AM
34	The service model should require that only as much or as little supports are funded as are necessary for the individual, while allowing for increase or decrease in supports based on life changes.	Jan 28, 2011 5:30 AM
35	Consumers who require more than <some number, perhaps 2?> hours of service per day or 15? hours a week might have to be in group home.	Jan 28, 2011 5:33 AM
36	1) Getting around - 2 hrs. every day. 2) Speaking out for themselves - no fewer than 15 hrs a month. 3)Help with money - an hour three time a week	Jan 28, 2011 5:45 AM
37	Services should be monitored by the Reg Ctr Semi Annually (vs. Quarterly) to save costs. Semi-Annual meetings and reviews should still be able to determine/verify any need for change in services (when a persons medical or behavioral needs change requiring either an increase or decrease in the number of monthly hours that are needed).	Jan 28, 2011 6:03 AM
38	1) The cost of the amount of support services funded by the regional center must be no more than the appropriate level of care and supervision required for that individual, if provided in a licensed or certified residential facility or other cost-effective living option. 2) The regional center director or his designee may make an exception to the cost-effectiveness requirement, where no alternate resource exists that can meet the needs of that individual, or the only available alternative would be a State Developmental Center. 3) Supervision simply to monitor or prevent illegal or risky behavior which is under the voluntary control of the consumer should not be included in the level of supports purchased by the regional center.	Jan 28, 2011 6:12 AM
39	As in place for legal citizens.	Jan 28, 2011 6:15 AM
40	As much as necessary to prevent less independent settings - up to 24/7/365.	Jan 28, 2011 6:23 AM

2. Suggested service standards about how often a specific service should be

	Response Text	
41	SLS and ILS must be provided so that people live safely, healthfully, and as independently as possible as members of their community. The frequency of ILS and SLS is subject to a person`s individual need. Duration must be for as long as a person is living in their home and needs the services.	Jan 28, 2011 6:29 AM
42	Outcomes. Is the life improved? Is there family support? Is there an expanded social circle and increased opportunities. Is the service truly person centered and have clients, advocates and parents had training in what this means and how to implement?	Jan 28, 2011 6:43 AM
43	Life time.	Jan 28, 2011 6:44 AM
44	Services should be provided as often as the individual needs them. 24/7 services should be available for people with more severe service needs.	Jan 28, 2011 6:44 AM
45	The lack of training of Regional Center Service Coordinators, coupled with the complete lack of a referral system, permits unchecked elimination of services or starting up of services. These are basic life skills services and are subject to almost whimsical approaches by Service Coordinators.	Jan 28, 2011 7:10 AM
46	Services should be provided as needed to maintain and expand each individuals standard of living and ability to access the normal life patterns of the non disabled peers. given the cost effectiveness of Independent Living Services, emphasis should be placed on all modalities, including health, safety, social, budgets, and household maintenance.	Jan 28, 2011 7:17 AM
47	Should require a Doctor's recomendation and pass a questinaire.	Jan 28, 2011 7:23 AM
48	Daily or as needed depeding on the needs and abilities of the individual consumer.	Jan 28, 2011 7:54 AM
49	All depending on the specific need of the consumer. For some, services would be needed at all times and therefore should be provided at all times.	Jan 28, 2011 9:07 AM
50	Only when needed	Jan 28, 2011 1:15 PM
51	I have current experience with Supported Living through Jan Nolan and am very happy with it.	Jan 28, 2011 2:31 PM
52	many factors need to be considered. Most people who do not have a disability are not able to afford their own apartment.	Jan 28, 2011 3:02 PM
53	This service needs to be provided only for those who can gain with the goal of independence. Not just because someone thinks it might be fun.	Jan 28, 2011 4:36 PM
54	ILS services should be time-limited, and/or periodic in nature. Funding ILS for years at a time is not an effective use of the service.	Jan 28, 2011 4:37 PM
55	Based upon the client's needs/requirments.	Jan 28, 2011 4:44 PM
56	Services dependent on individuals ability to be independent. Higher support for more physically and/or mentally dependent person. Less support for more capable, independent person. Supports need to be individualized according to persons abilities.	Jan 28, 2011 4:55 PM
57	Service standards should be outstanding and should be provided as often as the clients requires the service. My daughter is in the HCDD group home and this was the fourth home she was placed in. The three previous placements were appropriate for the service standard she required or any of the clients placed there required.	Jan 28, 2011 4:56 PM
58	ILS: 1-10 hrs/week. SLS: up to 24 hours/day It should be noted that supported living is a great idea with a terrible track record of implementation.	Jan 28, 2011 4:57 PM
59	I have seen a few of these places. They are in the worst neighborhoods and are dumps. If you have two or three friends who would like to live together, they can't necessarily do so because of the lack of openings.	Jan 28, 2011 5:02 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
60	As per the IPP	Jan 28, 2011 5:13 PM
61	Independent living support is highly variable with each consumer. In our agency we range from providing as little as 4-12 hours per month up to 20-40 hrs per month. But I think the best care is comprehensive case management vs household support.	Jan 28, 2011 5:25 PM
62	ILS/SLS should be provided as often as needed by the individual. It is impossible to put a blanket standard on how often due to the vast array of consumer needs. Services should be provided and funded often enough to make sure healthy/clean living environments are maintained.	Jan 28, 2011 5:31 PM
63	SLS should be provided daily but should not need to be provided 24 hours a day. If a person needs 24 hour support it would appear that the support could be provided more cost effectively in a residential placement. ILS should be provided for a maximum number of hours per month and a maximum amount of time - ILS should focus on training and if training is not accomplished within 2 years then another service needs to be reviewed by the planning team. ILS needs to focus on teaching an individual to be more self sufficient and not rely on the ILS agency to do things for them.	Jan 28, 2011 5:31 PM
64	Independent living skills (grocery shopping, paying bills, getting help, transportation)	Jan 28, 2011 5:48 PM
65	when needed throughout the lifespan	Jan 28, 2011 5:51 PM
66	Continual.	Jan 28, 2011 6:10 PM
67	Based on an individual. For some it will take more support than others.	Jan 28, 2011 6:16 PM
68	As necessary to live independently if the individual demonstrates some ability to eventually perform the tasks required.	Jan 28, 2011 6:21 PM
69	Keep at the surrent rates and amounts.	Jan 28, 2011 6:21 PM
70	Not 24 by 7.	Jan 28, 2011 6:23 PM
71	If these services have been found to be effective, but basic non-goal driven guidance and assistance is still needed as determined by the Regional Center, perhaps the service could be modified to "personal assistant" service. This is service code is 062. This would still give the consumer the help they need, but at a much lower rate / cost to the Regional Center.	Jan 28, 2011 6:28 PM
72	should be IPP driven depending on the persons need up to 24/7 support.	Jan 28, 2011 6:37 PM
73	ANNUAL	Jan 28, 2011 6:42 PM
74	once a week	Jan 28, 2011 6:45 PM
75	Services should be flexible, possibly including both one-on-one and group services as appropriate.	Jan 28, 2011 6:47 PM
76	on-going/as needed	Jan 28, 2011 6:49 PM
77	Daily in SLS	Jan 28, 2011 6:51 PM
78	It would really depend on the disability on whether they need independent living with drop in support or supported living needing more of 24 hour support. I think that each case should be treated individually.	Jan 28, 2011 6:51 PM
79	ILS support for 3 hours a week. This shoulc consist od banking, cooking, meal planning and food shopping. Medical support such as transportation for DR appointments. Current bus pass program is wonderful providing support for those who are capable of working the bus system.	Jan 28, 2011 6:53 PM
80	Per IPP and individual needs	Jan 28, 2011 6:55 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
81	If a consumer is living in a Care Home, I think the Care Home should be developing goals for the individual to become independent and not use ILS services. By the Care Home providing the services, the consumer has already developed a trust factor with the Care Home and does not need to develop this relationshp. The state can make living skills part of the service for Care Home's thus eliminating or decreasing the cost for the consumer.	Jan 28, 2011 6:57 PM
82	If a client needs more than 20 hours per week of SLS then they should be placed in a care facility	Jan 28, 2011 7:00 PM
83	as needed	Jan 28, 2011 7:02 PM
84	Decisions about how often supported living agencies serve a particular consumer should be made by the ID team. It is important to recognize that each individual has different needs. In addition, any standards should also take into account what generic supports are available. For instance, individuals who live in rural or suburban areas may not have access to public transportation the way individuals who live in cities do.	Jan 28, 2011 7:07 PM
85	As often as needed for individuals that really show a determination.	Jan 28, 2011 7:09 PM
86	-This service should be provided for as long as individual requires necessary. -These services should be monitored on on a minimum of semi-annually and additionally as needed.	Jan 28, 2011 7:10 PM
87	The service should be provided as long as is deemed necessary by the individual and the planning team. Monitoring by the regional center should continue on at least a semi-annual basis.	Jan 28, 2011 7:10 PM
88	What is suggested in their IPP	Jan 28, 2011 7:10 PM
89	*The service should be provided as long as is deemed necessary by the individual and his/her planning team. *Monitoring by the Regional Center should continue on at least a semi-annual basis.	Jan 28, 2011 7:11 PM
90	As needed	Jan 28, 2011 7:13 PM
91	Current SARC standards are sufficient. They should be provided as needed as determined by current eligibility standards.	Jan 28, 2011 7:28 PM
92	Based on need of consumer.	Jan 28, 2011 7:30 PM
93	Services should be provided according to the recommendations in the IPP	Jan 28, 2011 7:33 PM
94	until goal is established. Much more then now. There are not enough facilites available for the demand of supported living or even independent living.	Jan 28, 2011 7:42 PM
95	ILS Training should be time limited to 2 years at reasonable levels followed by a maintenance contract..	Jan 28, 2011 7:43 PM
96	SLS is a problem in our industry. Reason being there are rates all over the map even within regional centers let alone counties and state wide. I believe there to be a lot of corruption and malpractice in this area as well. Some of the astronomical costs associated with SLS lead me to believe that there are financial cuts to be made here.	Jan 28, 2011 7:56 PM
97	Services need to be assessed based on the daily functions that a person needs to do or have done ex. feeding, hygiene, social/emotional needs. It is always best to have these needs met in a home environment through supported living which is less costly and more effective than any institutional setting. If these services are needed for a healthful quality of life they should be available 24/7.	Jan 28, 2011 8:02 PM
98	Parent's choice.	Jan 28, 2011 8:07 PM
99	NOTHING MORE THAN 8 HOURS A DAY. NO MORE OF THE 24/7 SLS!	Jan 28, 2011 8:11 PM
100	Independent and Supported Living arrangements should be provided in ALL cases where it is deemed a disabled person can live on their own and wants to.	Jan 28, 2011 8:18 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
101	yes	Jan 28, 2011 8:35 PM
102	persons who want to live on their own should have the opportunity to do so BUT within means..many people have to share rentals to save money..the state paying for 1 person without income to live in his own apartment without a housemate to share expenses SOLELY because that person has a disabilty is absurd and frankly biased against a non disabled person without money who wants his OWN apartment...living in the least restrictive environment does NOT mean I can have whatever I want because I am disabled and the state of California must pay for it.	Jan 28, 2011 8:39 PM
103	As long as your department focuses on buying houses for long-term care living arangements for people coming out of the Regional Center Facilities, in say, the Bay Area, then nothing else can be addressed because you spent all the money on a few privilaed individuals, losing site of your responsibility to reach the most with what we have collectively.	Jan 28, 2011 8:47 PM
104	if a client needs 24 hour services, that is fine but it should be cost effective as well	Jan 28, 2011 8:49 PM
105	As per the IPP	Jan 28, 2011 8:50 PM
106	Consumer driven requests.	Jan 28, 2011 8:54 PM
107	Until there is no more growth in independance.	Jan 28, 2011 8:54 PM
108	Service standard should achieve the promise that people with intellectual and developmental disabilities will have an individualized program plan and access to the services and supports best suited to them throughout their lifetime, to enable them to live an independent, self-directed, and typical life.	Jan 28, 2011 8:56 PM
109	independent living should be on a flat rate for most participants to reduce the time spent by the vendor and the Regional Center worker/accounting. Services should be provided frequently enough on an individual basis to prevent health and safety concerns.	Jan 28, 2011 9:09 PM
110	See response to question #1 of this section.	Jan 28, 2011 9:22 PM
111	To be determined by need.	Jan 28, 2011 9:23 PM
112	Individualized	Jan 28, 2011 9:29 PM
113	Number of hours of support needed needs to be decided during an ILS or SLS assessment process. Authorized hours should be reviewed quarterly and fading of hours should take place as soon as possible if the option arises and person can ensure their own health and safety without support persons oversight. Fading plans (when appropriate) will be reviewed quaterly and revised as necessary.	Jan 28, 2011 9:45 PM
114	Services should be based on an assessment and should be specific to the consumer based on need and access to available generic and natural supports. Services should be sufficient to maintain health and safety in the living arrangement.	Jan 28, 2011 9:52 PM
115	As needed to assure health and safety standards.	Jan 28, 2011 9:54 PM
116	Provided based on need (no maximum per month).	Jan 28, 2011 10:00 PM
117	As often as a particular individual demonstrates the need for the service. Safety and health should be the top priority.	Jan 28, 2011 10:09 PM
118	Training for max of 24 months for a max of 35 hours. Then go to maintenance phase with a max of 15 hours per month.	Jan 28, 2011 10:11 PM
119	no suggestions	Jan 28, 2011 10:20 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
120	I do not believe that ILS should have a lifetime cap. Some of our folks really aren't able to learn a certain goal in a set amount of time and may take a bit longer than others. That being said, I feel that we also need to acknowledge that most of the things ILS does, are really not "Training based" but rather a minimum almost casemanagement in order to keep people alive. (So really just making sure they have access and support with medical appointments, food, clothing, shelter, and budgeting rather than really Teaching or Training.) I feel that providing a different service for those that are not really able to do these things independently and will always need some support should have a different type of service. Maintenance based/Case management especially with medical.	Jan 28, 2011 10:22 PM
121	It depends on the client maybe 3-4 times a week. If the person is working and requires assistance completing their job then they may require sevices 5 days a week.	Jan 28, 2011 10:24 PM
122	Daily until learned and should be followed up with monthly.	Jan 28, 2011 10:26 PM
123	Residents need to have control over their living situation. SLS homes should not operate like an unlicensed group home.	Jan 28, 2011 10:33 PM
124	ILP: 15 hr/mo or less for services related to training issues, or a lower hourly maintenance rate established for ongoing needs such as support in medication management. SLS: Up to 24-hour/day in conjunction with IHSS. May be paid at an hourly rate with an upper threshold set (e.g., NTE $7500/mo).	Jan 28, 2011 10:36 PM
125	The functional levels of the consumers vary considerably. Accordingly, the amount and frequency of services provided will vary. Services should be on-going as-needed including live-in staff if necessary.	Jan 28, 2011 10:39 PM
126	allow consumer to live independantly even in a higher education setting	Jan 28, 2011 10:44 PM
127	as needed	Jan 28, 2011 10:45 PM
128	should be reviewed on an annual basis or as need changes.	Jan 28, 2011 11:00 PM
129	24/7	Jan 28, 2011 11:05 PM
130	Last resort. Not available for those requiring more than 10 hours per day of RC funded support.	Jan 28, 2011 11:06 PM
131	Will need to be consumer-determined.	Jan 28, 2011 11:07 PM
132	ILS services should be full-time for the first few years. Extra oversight and auditing is necessary to ensure credibility of services. ILS services should not remain stagnant (ie: 10 hour of service a week for indeterminant time.) the goal of ILS should be a gradual reduction of service hours until completely removed.	Jan 28, 2011 11:10 PM
133	quarterly review	Jan 28, 2011 11:19 PM
134	If a client is receiving ILS/SLS -- there should be a maximum of training hours for the first year, and then a gradual decrease each year of training hours, so that by the end of the third year, the client is receiving more personal assisitance (at a lower rate) and fewer ILS Training hours.	Jan 28, 2011 11:21 PM
135	A person should be able to be left alone for up to 4 hours at any one time. Night time staff should be reimbursed at a lesser rate.	Jan 28, 2011 11:22 PM
136	there is a delta between the needs a person has and what the dds funded system can pay for -- therefore, i would first figure out what are the total needs, what in all those needs can the dds assist with, what other options are available, how to use generic services/supports, technology, etc. also i think in a self-directed model each person purchases what they need from whom they want at the best price they can negoiate	Jan 28, 2011 11:22 PM
137	Individualized needs.	Jan 28, 2011 11:47 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
138	When needed and desired	Jan 28, 2011 11:57 PM
139	Once	Jan 29, 2011 12:00 AM
140	same	Jan 29, 2011 12:06 AM
141	Any time needed to provide a healthy lifestyle for one that needs support in home and community.	Jan 29, 2011 12:29 AM
142	Each service must be available in accordance with the individual need of the consumer. If a person cannot be trained to independently perform each task, services cannot be discontinued and the person should never have been placed into an independent living program. This does not mean that they should be disqualified from being accepted able to enjoy supported living services tailored to their need.	Jan 29, 2011 12:43 AM
143	Independent Living at least 4 hours a day 5 days a week. Supported Living: 24 hours if needed or at least 8 hours per day 7 days a week if 24 hour service is not needed.	Jan 29, 2011 12:45 AM
144	See above	Jan 29, 2011 1:04 AM
145	As indicated by need and team recommendation	Jan 29, 2011 1:34 AM
146	ILS: should not only be a training/teaching skill program but a mentoring program. ILS instructors wear many hats and they are always providing all kinds of support. In order to be effective an ILS program must also include a mentoring program. Thier Instructor is providing 1:1 support and encouragement and healthy recreational/social skills.	Jan 29, 2011 1:38 AM
147	When needed because of a physical condition.	Jan 29, 2011 1:39 AM
148	24-7, and for as long as the consumer wants/is able to live independently.	Jan 29, 2011 2:04 AM
149	Carers should be employed by the state to ensure screening of providers, standard of care and abuse of the system.	Jan 29, 2011 2:37 AM
150	At all times	Jan 29, 2011 3:05 AM
151	as needed	Jan 29, 2011 3:05 AM
152	services needed so consumer can live independently	Jan 29, 2011 3:09 AM
153	365 days per year, 24 hrs.per day	Jan 29, 2011 3:44 AM
154	daily and long term	Jan 29, 2011 3:51 AM
155	these services should be specific to the desires and needs of the person desiring services	Jan 29, 2011 4:30 AM
156	Use the existing standards and criteria for SLS and ILS as is in place. CAP placements such that they do not exceed the cost of comparable group home costs, unless approved by Exception and considering that such services might prevent institutional placement.	Jan 29, 2011 4:42 AM
157	as needed	Jan 29, 2011 4:42 AM
158	If possible have them living in the same community or complex that it's easier to manage housing, transportation and emergency needs. Transportation needs shoyuld be standardized like schedule bus runs per area. On special bus pick up at anytime set by client. Sometimes I see only one client in a bus being drop off at one place as an example.	Jan 29, 2011 4:55 AM
159	as often as what we have been doing in the past ten year.	Jan 29, 2011 5:00 AM
160	daily basis	Jan 29, 2011 5:06 AM
161	No one should be cut	Jan 29, 2011 5:09 AM
162	A continuum of services as needed, which shall be determined through the IPP.	Jan 29, 2011 6:11 AM

2. Suggested service standards about how often a specific service should be

	Response Text	
163	ILS and SLS need to be absolutely individualized to the adult's needs. Over time, some won't need services at all. Some will decrease from 5 times a week to once a month. My kid would need someone everyday, but not all day, since he has a program that takes care of him.	Jan 29, 2011 6:36 AM
164	Must be ongoing, with frequency determined by IPP team	Jan 29, 2011 6:42 AM
165	Supported Living is individualized to each person.	Jan 29, 2011 7:45 AM
166	As needed based on comprehensive evaluation.	Jan 29, 2011 7:45 AM
167	20 hours per week	Jan 29, 2011 7:46 AM
168	The current standard is ok, however the 6 month time frame for ILS is unrealistic.	Jan 29, 2011 7:59 AM
169	The primary issue that I see is the lack of comprehensive information about these programs: what they are, who may access them, how to access them, what is involved in setting them up including how long it takes for more complicated situations such as supported living. The regional centers dole out information as they see fit so parents really do not understand all the options. The regional centers say they develop resources but I do not believe they have an accurate picture of what resources are needed if they don't provide comprehensive disclosures of options up front and then keep track of how choices are made. For example, are families choosing X because Y is not available or takes too long to access or simply because X is actually what they want? Families don't know the differences between types of therapeutic care homes or the types of supports provided by agencies in supported living situations. I have many families who don't understand how to pay appropriate taxes, insurance etc. when they vendor providers.	Jan 29, 2011 8:07 AM
170	As an RSP, I'd rather you do away with these services since, according to even your own employees, these services costs ALTA extremely more than what it would cost you to place a resident in a care facility. Since funding is tight, eliminate this altogether.	Jan 29, 2011 3:47 PM
171	IHH has a chart for services. Some how this is a magic list & all services have time frame. I would like to see the Gov. Brow complete tasks for support in the time frame allowed. One example routine laundry, this includes multiple soiled sheets, pants, sleep ware etc Now Gov. please do this and all of the other household wash in the allotted time frame of 1Hr per week. If you can do this my hat is off to you sir.	Jan 29, 2011 4:04 PM
172	Needs to be based on individual needs.	Jan 29, 2011 4:33 PM
173	This would be depend on the consumers needs to achieve their independence, more frequently at the beginning of services, as the client gains independence with each goal this could be reassessed and discussed with the consumer. Monthly, quarterly, semi-annual, annual and so on.	Jan 29, 2011 7:28 PM
174	A consumer living on there own sould not go more that 5 days with out a instructor to be sure that they are not being taken advantage of . That they can make healthy choices when it comes to eating, medical care and money mangement.	Jan 29, 2011 7:38 PM
175	ongoing monitoring is necessary to make sure the individual is progressing and becoming more and more a part of society	Jan 29, 2011 7:47 PM
176	As long as it is needed.	Jan 29, 2011 8:32 PM
177	Some people will be okay with initial help and annual or semiannual check-in/support. Others may require monthly assistance with reviewing financial/budget skills, or modifying their plan to meet changing support needs as they become more skilled in self-care/independent living skills. A tailored plan should identify the service frequency based on need.	Jan 29, 2011 9:24 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
178	They should not be provided just to fulfill the consumers' wishes. It should be recognized that people with disabilities are limited and are not the same as other people. They may not get to do everything everyone else can do, but they can be assisted in living reasonably within their disability. Services should be provided only as ofter as there is a demonstrated need.	Jan 29, 2011 10:15 PM
179	24 HOURS	Jan 29, 2011 11:50 PM
180	Weekly assistance for grocery shopping and meal preparation and monthly services for banking needs.	Jan 30, 2011 12:32 AM
181	Based upon indivudual consumers needs	Jan 30, 2011 12:42 AM
182	N/A	Jan 30, 2011 3:59 AM
183	Should cut to the bare minimun.	Jan 30, 2011 4:50 AM
184	As long as medically possible with a caregivers assistance.	Jan 30, 2011 7:09 AM
185	As much as needed to be problem solving!	Jan 30, 2011 4:59 PM
186	This is too individualized for an effective ceiling to be set unless there are clear and reasonable exemptions.	Jan 30, 2011 6:10 PM
187	There should be a spectrum determined by need.	Jan 30, 2011 7:38 PM
188	24/7 housing or services 5-7 days per week	Jan 30, 2011 9:12 PM
189	I thik this should be based on the persons disability, abilities in the community and home, like do they need help with cooking, cleaning, shopping, dr. appt, etc. or are they more self sufficent.	Jan 30, 2011 10:42 PM
190	ILS seems to serve only those who require minimum levels of support. The emphasis historically has been on training achieveable goals, but the services continue on forever, without oversight, reassessment of client need, and reframing the objectives. In SLS, there are continuing cuts, such as through IHSS, and providers are requiring day program attendance and other types of methods to reduce the hours of support they are to provide.	Jan 31, 2011 12:15 AM
191	Increase the maximum hours per month so actual training can be effective	Jan 31, 2011 4:30 AM
192	CLasses could be offered by the regional center to train clients requesting supported or independnt living. After the training, the teachers could assess the ability of each client and what additional services are needed such as staff support for specific issues, ILP workers and for what issues and how often.	Jan 31, 2011 4:32 AM
193	SLS should be provided up to 75% of a 24 hour period. ILS should be provided up to 25% of a 24 hour period. No individual should receive both services.	Jan 31, 2011 2:51 PM
194	Asked/Answerd	Jan 31, 2011 3:45 PM
195	No more than 40 hours per month of ILS. SLS should be provided as needed, should be minimal and should account for other services such as In Home Support Services (IHSS). Limits should be placed on the transportation of clients in staff vehicles to no more than 50 miles per month.	Jan 31, 2011 4:19 PM
196	as needed.	Jan 31, 2011 4:28 PM
197	once per week, however this should be flexible based on what is going on in the consumer's life, i.e. a serious health concern or financial situation that requires additional support.	Jan 31, 2011 4:45 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
198	We generate Individual Service Plans to recommend services for the consumer who is new to our service and whom we have been servicing in our program. Recently all Supported Living Service reports are being revised and reduced. We feel that our assessments are accurate and that the liability should fall on the regional centers if they are going to change our reports significantly. We feel that they should be the ones writing the reports and letting us know what the hours for the consumer are going to be as they are not taking our assessment of the consumer seriously. They are cutting health and safety issues putting the consumer at risk. We are very frustrated as we are watching our consumers quality of life decline. IRC has misappropriated their funds but it is the consumer who is paying the price.	Jan 31, 2011 5:08 PM
199	The service should be based on need.	Jan 31, 2011 5:47 PM
200	In groups, not individually.	Jan 31, 2011 5:52 PM
201	daily as needed	Jan 31, 2011 6:02 PM
202	These services should be provided 24/7 as needed by the consumer.	Jan 31, 2011 6:09 PM
203	as deemed appropriate by the planning team	Jan 31, 2011 6:19 PM
204	The frequency depends on the individual consumer. Some need 24/7 coverage to be safe.	Jan 31, 2011 6:36 PM
205	An assessment should be done every year.	Jan 31, 2011 6:39 PM
206	grocery shopping-once a week laundry-once a week home visit to assist with paperwork, mail, and other things-once a week medical appointments-as needed	Jan 31, 2011 6:39 PM
207	ILS and SLS can be ongoing if the consumer lives in his/her own home ILS should be time specific if consumer lives with family and to be reviewed quarterly SLS assessment should reflect the consumer's life 24/7 ILS is goal oriented and time specific	Jan 31, 2011 6:41 PM
208	As often and as much as needed by the individual.	Jan 31, 2011 6:57 PM
209	In our technological age of smart phones, email, geo-location - there has to be better coordination of services for supportive living services between state agencies, vendors, non-profits, local services, and those mandated by law. It seems a lot of cost could be reduced if better coordination existed between services. Think of a unified backbone that does not compromise privacy or foster fraud that all services tie into. Government should take the lead, but other stakeholders may have better processes, delivery, and tracking. If the whole system could move this way I'd think you see better services, reduced cost, elimination of redundancy, and a drastic reduction in waste.	Jan 31, 2011 7:03 PM
210	Services should be provided on a as needed basis.	Jan 31, 2011 7:20 PM
211	Limit # of hours per month to 50 hours unless placement at risk.	Jan 31, 2011 7:26 PM
212	As needed to maintain consumer's independence	Jan 31, 2011 7:36 PM
213	*The service should be provided as long as is deemed necessary by the individual and his/her planning team. * Monitoring by the Regional Center should continue on at least a semi-annual basis.	Jan 31, 2011 8:14 PM
214	as often as needed, as specified in the consumer's IPP	Jan 31, 2011 8:23 PM
215	daily if needed	Jan 31, 2011 9:03 PM
216	I believe a person should receive service based on their individual needs.	Jan 31, 2011 9:15 PM
217	As necessary to keep the person safe in their home.	Jan 31, 2011 9:15 PM

Independent and Supported Living Services

2. Suggested service standards about how often a specific service should be

	Response Text	
218	I feel that visiting with the consumer once a week is imperative for both Independent and Supported Living situations.	Jan 31, 2011 9:22 PM
219	As per the IPP	Jan 31, 2011 9:30 PM
220	I think there should be more flexibility, since each consumer has unique needs. In addition, I believe that a certain number of hours should be set aside annually for extraordinary circumstances. For example: if a consumer has used his/her monthly allotted hours and has an accident occurs, necessitating help and care, those hours can be used.	Jan 31, 2011 9:32 PM
221	Throughout life.	Jan 31, 2011 9:41 PM
222	Through out life as needed.	Jan 31, 2011 9:52 PM
223	SLS and ILS should be provided based on individual needs.	Jan 31, 2011 9:54 PM
224	I oppose statewide purchase of service "standards"	Jan 31, 2011 9:58 PM
225	The assessment process should be standardized across the various agencies providing this service in order to ensure consistency.	Jan 31, 2011 10:11 PM
226	It should be agreed upon based on the needs of the individual.	Jan 31, 2011 10:16 PM
227	as needed	Jan 31, 2011 10:22 PM
228	Services should be based on the clients needs and future plans. Travel training and career planning.	Jan 31, 2011 10:25 PM
229	Tow or three times per week.	Jan 31, 2011 10:31 PM
230	Services should be required at least once per week	Jan 31, 2011 10:40 PM
231	I would eliminate this service except in cases where consumers are high functioning, able to speak for themselves and just need minimal supports. The cost is high on the community in comparison to residential services, and there is not enough oversee to make sure abuses do not occur.	Jan 31, 2011 10:47 PM
232	Shared staffing should be the standard. 1-3 people can live i the same home, sharing a single staff between them. Staff can be up to 24 hours per day.	Jan 31, 2011 10:54 PM
233	24-7 when needed	Jan 31, 2011 11:27 PM
234	twice a month minimum	Jan 31, 2011 11:41 PM
235	Probably a variety of many services could be offered each once a week with effectiveness, such as training about money, social events, empowerment activities, and so on.	Feb 1, 2011 1:15 AM
236	As designed by the team. Once again, keep the politics to a minimum so that individuals get the services that they need to be successful. Don't alienate families...work with them!	Feb 1, 2011 1:20 AM
237	No 24/7. ILS not to exceed 40 hrs per month.	Feb 1, 2011 1:21 AM
238	SLS should be offered first to all consumers-- why not???	Feb 1, 2011 1:43 AM
239	at all times	Feb 1, 2011 4:51 AM
240	as much as is needed to meet an client's unique individual situation.	Feb 1, 2011 4:52 AM
241	as needed	Feb 1, 2011 5:18 AM
242	from what I know there are not many standards in place and providers are going to this venue so they dont have to provide the other services that residential providers do.	Feb 1, 2011 5:19 AM
243	N/a	Feb 1, 2011 5:24 AM
244	everyday	Feb 1, 2011 5:59 AM
245	Ongoing.	Feb 1, 2011 7:11 AM

2. Suggested service standards about how often a specific service should be

	Response Text	
246	There should not be a statewide standard for how often this service should be provided. Services should be based on the individual's unique needs based on assessments of the individual's medical and professional experts. If statewide "standards", which in effect are statewide "limitations," are imposed, there should be exceptions available upon the individual's showing that the specific consumer needs more hours of service.	Feb 1, 2011 7:15 AM
247	There should be centers such as the Hatlen Center for the Blind in San Pablo which exist to teach people how to manage their own affairs, including housekeeping, travel, cooking, and financial management. The Hatlen Center is especially effective, because the attendees are treated as people capable of running their own lives, making their own decisions, and accepting the consequences of their decisions/actions. Go see the Hatlen Center for a model program.	Feb 1, 2011 8:55 AM
248	5 times per week	Feb 1, 2011 9:46 AM
249	All supported or independent living services must be provided based on a written assessment done by a separate, independent vendor. This vendor could be someone who just does these assessments and no SLS/ILS services, or another agency in the area who will be prohibited from providing any ongoing services to the consumers. The only exception to this would be in a rural county where there is only one ILS/SLS vendor. DDS would delineate the minimum areas convered by the assessment, but regional centers would be allowed to require more information; the assessment would describe the consumer's abilities and areas that need to be and can be improved upon to help him be more independent as well as areas that will need ongoing support to maintain the person in his home, and a recommendation for a range of hours likely to be needed for training and for ongoing support. The consumer's IPP team would then decide if the assessment is accurate, and if so, choose a new vendor to assist the consumer to move into supported living. The new vendor would be allowed "x" hours to compare the assessment with their own findings, and then would be required to provide a written plan for transition before the consumer starts moving out ---- that written plan would have to have objectives to address all areas of need and support, whether immediate training or training to take place later on, as well as activities that the SLS vendor will actually do for the consumer because he can't do them himself due to degree or type of disability.	Feb 1, 2011 10:46 AM
250	A review of services quarterly.	Feb 1, 2011 4:52 PM
251	depends on the individual needs of the person.	Feb 1, 2011 5:25 PM
252	The standards of how specific services should be provided should be assessed in the same manner that individuals are assessed to live in group homes. Based on their present needs and levels of performance, their medical history, the proximity of family, their work/school involvement could all be variables that can be used to determine the frequency of services.	Feb 1, 2011 5:41 PM
253	ILS should be provided on an as-needed basis.	Feb 1, 2011 5:48 PM
254	N/A? This service would be ongoing; every day.	Feb 1, 2011 6:06 PM
255	The service should not be provided in excess of 16 hours per day depending on the client's attendance/participation in a day or employment program.	Feb 1, 2011 6:07 PM
256	At least twice a week.	Feb 1, 2011 6:18 PM
257	upon request.	Feb 1, 2011 6:22 PM
258	have a maximum hours and ratio allowed	Feb 1, 2011 6:38 PM
259	Keep SLS from becoming a 1:1 day program.	Feb 1, 2011 6:48 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
260	Given how costly SLS is, it seems that while it is the ideal, it is also an expense that CA can not afford. From a funding point of view, it does not make sense for one person to receive services at over $100,000 per year so the person can live in their own apartment. People live how and where they can afford, this is what we all do, why should people with developmental disabilities be any different? SLS should be the exception and not the rule.	Feb 1, 2011 6:49 PM
261	I have no suggested service starndards regarding this issue as what is in place is ok, however services should be provided as much as realistically is needed according to the consumer.	Feb 1, 2011 6:51 PM
262	Use cost, avg cost if individual were in a licensed facility	Feb 1, 2011 6:54 PM
263	Based on individual need.	Feb 1, 2011 7:12 PM
264	Current service standards could be reduced by a maximum of 15%.	Feb 1, 2011 7:25 PM
265	As much assistance as determined through a family/team meeting. The decision can also be made by the Regional Center CSC but should not be dictated by upper RC management. Upper Regional Center management FREQUENTLY DICTATE the amount of support a consumer needs without ever meeting them.	Feb 1, 2011 7:36 PM
266	As often as needed	Feb 1, 2011 7:44 PM
267	1) "Purchase of Service Limits" is a more appropriate name than "standards." 2) We oppose statewide purchase of service "standards." 3) There is no "one size fits all" solution. Purchase of service standards for each individual are defined by the IPP. 4) "Up to but not to exceed the cost to house one individual in a Developmental Center."	Feb 1, 2011 7:56 PM
268	ILS - should be faded as skills are demonstrated SLS is too expensive in it's current model and should be completely reviewed to see if other more affordable models can be developed while still supporting individuals in the least restrictive environment.	Feb 1, 2011 8:31 PM
269	1) "Purchase of Service Limits" is a more appropriate name than "standards." 2) We oppose statewide purchase of service "standards." 3) There is no "one size fits all" solution. Purchase of service standards for each individual are defined by the IPP. 4) For questions 3 & 4: These standards already exist. 5) "Up to but not to exceed the cost to house one individual in a Developmental Center."	Feb 1, 2011 9:15 PM
270	Current standards are appropriate.	Feb 1, 2011 9:27 PM
271	IT SHOULD BE PROVIDED WHEN THE CLIENT IS READY TO GIVE IT A TRY. THEY MAY HAVE TO WAIT A BIT FOR AN OPENING BUT IT SHOULD NOT HAVE TO BE YEARS!!	Feb 1, 2011 9:40 PM
272	daily	Feb 1, 2011 9:40 PM
273	once per week to five days per week	Feb 1, 2011 9:58 PM
274	As determined through the IPP.	Feb 1, 2011 10:02 PM
275	This is always a team decision and often a safety issue. Most of our population is living with aging parents and that is not safe	Feb 1, 2011 10:13 PM

Independent and Supported Living Services

2. Suggested service standards about how often a specific service should be

	Response Text	
276	Specific services standards should continue as they are currently. Each consumer should decide how often they need services and to what extent. Who would know better as to how often a service should be provided than the consumer and those who are intricately involved with the consumer.	Feb 1, 2011 11:20 PM
277	Everything should be provided. Just bring clothes, electroinc equipments, and house hould cleaning supplies. Learn how to shop. Take them to barbor, groceries shopping, banking, laundry if they don't have on on site, doctors, etc.. just about anything that requires that your hear and when done is done as early and late but depend but can't tell. Job interview and tranfering within the same empoloyer and location. Trip to the museums, library, theme parks, parks, shows, movies, etc. like once a month.	Feb 1, 2011 11:25 PM
278	If it is determined that a consumer needs Independent Living Services, it should be noted that the agency can best determine the who, what, when and how. The template used to determine the level of service should be universal and defined by category to ensure efficency and consistent deliverables. It should also be used as a tool to develop a standard within the Regional Centers, right now its a true crap shoot!	Feb 1, 2011 11:37 PM
279	As often as needed as assessed by professionls developing these programs.	Feb 1, 2011 11:43 PM
280	Interview tje consumer to acertain this.	Feb 1, 2011 11:54 PM
281	Independent Living Services in my understanding is a service that should be initiated to train individuals how to do certain things on there own, such as grocery shopping, paying bills etc, with the expectation that the amount of service hours required would decrease over time. Whereas SLS may be an ongoing service. This may not be everyones understanding, but nevertheless, it should be clear as to when and for how long these services are justified.	Feb 2, 2011 12:27 AM
282	Rent, utilities, and aide fees should be paid by the RCs, minus any section 8 or other subsidies.	Feb 2, 2011 12:35 AM
283	I also work with an ILS (Independent Living Skills) Instructor 3 hrs a week. I wish I could meet more with my ILS on a weekly basis. I attend classes 3 1/2 hrs weekly. I would like have more time avaliable to me to take more classes. I don't like to go home.	Feb 2, 2011 12:53 AM
284	Many clients have ridiculous numbers of hours because they are being trained on multiple training areas at once. This is often overwhelming for the client and thus there is a lack of retention in those areas, extending the service. There should be a maximum number of goals that the client can pursue at one time and adjust as the skills are acquired.	Feb 2, 2011 12:54 AM
285	I meet with my Independent Living Skills (ILS) Instructor once per week for one hour, and I would like to continue to work with my ILS Instructor once per week-one hour. I am enrolled in 3 classes through ILS-1 hour per class. I would like to continue to recieve classes in the following services: diabetes class, reading class, and computer class. I have 1 teacher in my computer class, and 2 teachers in my diabetes class and reading class. I would like to continue taking classes.	Feb 2, 2011 1:00 AM
286	1. Training that sets long term and short term goals.	Feb 2, 2011 1:22 AM
287	Community services should be provided by qualfied individuals who have experience working with persons with disabilities. These workers should also undergo ongoing training.	Feb 2, 2011 2:00 AM
288	I have no business recommending how often a specific service should be provided. Sure, I can provide INPUT, but it is the Regional Center's determination, based on testing and qualifications that determine how often the service should ge provided.	Feb 2, 2011 2:36 AM
289	When needed & useful. Follow up to see if service is helping.	Feb 2, 2011 2:47 AM

2. Suggested service standards about how often a specific service should be

	Response Text	
290	Definitive guidelines are needed.	Feb 2, 2011 3:07 AM
291	When needed or when qualified for that service.	Feb 2, 2011 3:26 AM
292	When it is appropriate for consumer.	Feb 2, 2011 3:32 AM
293	7 days a week	Feb 2, 2011 3:44 AM
294	as needed. each person has a differant need. give them what they need. cheap for twice the cost.	Feb 2, 2011 4:16 AM
295	That varies, according to the skills and needs of the consumer, so the frequency of specific service provisions will depend on the individual consumer and their individual needs.	Feb 2, 2011 5:03 AM
296	Training should be time limited for no more than a year. If the person hasn't learned by then - they won't and support should be provided instead. IHSS needs to be utilized before considered RC spending.	Feb 2, 2011 5:15 AM
297	As often as necessary.	Feb 2, 2011 5:21 AM
298	The program I work at in Madison, WI was awesome. You have to do this case by case since everyone's needs are different.	Feb 2, 2011 5:33 AM
299	16-18 years old	Feb 2, 2011 5:48 AM
300	As often as needed	Feb 2, 2011 6:00 AM
301	should be individually determined, based on an assessment of behavioral deficits.	Feb 2, 2011 6:35 AM
302	If consumers are planning to move out their parents home of facility, no more that 10 hours per month.	Feb 2, 2011 2:01 PM
303	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 2, 2011 3:35 PM
304	5 hours per week or less.	Feb 2, 2011 3:40 PM
305	Daily Living	Feb 2, 2011 4:40 PM
306	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 2, 2011 4:55 PM
307	Set dollar cap	Feb 2, 2011 5:24 PM
308	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 2, 2011 5:51 PM
309	Daily	Feb 2, 2011 6:14 PM
310	As often as needed.	Feb 2, 2011 6:23 PM
311	Individualized planning	Feb 2, 2011 6:29 PM
312	aa	Feb 2, 2011 6:51 PM
313	As needed by the individual. Some need 5 days a week, others less	Feb 2, 2011 7:02 PM
314	Service should be provided that meets individual needs as identified in annual review.	Feb 2, 2011 7:18 PM
315	Supported Living Services should be provided commensurate with individual needs for safety and care. This will require individual assessments by Regional Center staff familiar with each consumer.	Feb 2, 2011 7:29 PM
316	Based on need, within set parameters/levels (e.g., 3 hours/week; 7 hours/week; 15 hours/week, etc). Should be provided if needed while generic resources are explored.	Feb 2, 2011 7:30 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
317	ILS should have a limit, except in situations where there is concern for health and safety. Temp increases in support should be granted on a case by case basis. A cap of 10 hours per week for ILS would be appropriate. SLS should have a cap, which is in the present cost effective caps- but those are currently out dated and rarley adhered to. In addition, there are clear differences from regional center to regional center on how these services are provided. If a person cannot be safe in the community and needs more than a 1:1 support, then maybe this should be considered in SLS planning- maybe this would not be the right service for the consumer.	Feb 2, 2011 7:41 PM
318	Depends on the level of need. For domestic chores and assistance with errands, a few hours per week and at the lowest rate. For the higher training and hab rate, those hours should be limited to a few per week since the intent is to train a person, not for personal support. Also, if the cost for someone to be in SLS exceeds a certain amount, they should not be in SLS - they should be in a group home or ICF.	Feb 2, 2011 8:27 PM
319	Supported living would only be an option if they could not live with in the guidelines of ILS. Supported living would be on going based on the consumers need. ILS should be a service that is provided for no longer that 2 years with a max. of 25 hours per month. After 2 years the RC would have the ability to put in a few hours a month for maintance. Maintance potentially would stay in place until the consumer moved out of that living arrangement or abused the service.	Feb 2, 2011 8:59 PM
320	If the client is truly living independently then 5 hours a week should be enough staff time to take them to the grocery store, doctors appointments, the bank and other errands. If they need more time then maybe they should not be living independently. Having someone living independently who requires 15 - 20 hours a week is not living independently. Most programs now provide hours per month this should be changed to per week. Clients go some days with only a phone call from staff to check on them and that is not safe.	Feb 2, 2011 9:19 PM
321	This is an area I've only researched thus far.	Feb 2, 2011 9:27 PM
322	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 2, 2011 9:38 PM
323	this is very evident	Feb 2, 2011 9:41 PM
324	daily	Feb 2, 2011 9:42 PM
325	AT LEAST 80% OF THEIR TIME WITH HELP FROM A HELPER	Feb 2, 2011 9:43 PM
326	If there diasablity is not curable then long term. They will always need assistance esically because as they age so does there family and they are not physically able to contribute in the same way or end up with there own health issues	Feb 2, 2011 9:47 PM
327	SAME AS PRIOR	Feb 2, 2011 10:05 PM
328	Based upon the individuals needs	Feb 2, 2011 10:05 PM
329	*As long as they needed. *If possible, the goal should be to help the individuals become independent.	Feb 2, 2011 10:07 PM
330	Freqency should be determined by need as seen by family, consumer, and clinicians.	Feb 2, 2011 10:11 PM
331	Do not implement a $750 million cut to the Department of Developmental Services (DDS) budget. It is too drastic! We need these services for our kids on the spectrum!	Feb 2, 2011 10:12 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
332	As often as the client desires this living situation and includes it in their IPP, the IPP team should deem this service to continue. A disabled indiv. typically does not want to be dependent on another indiv. they should be provided the support needed to grow to their potential. Even indiv. that require 24/7 supervision should not be forced to live sub standardly because the frequency of services are arbitrarily reduced.	Feb 2, 2011 10:15 PM
333	Please previous topic response....	Feb 2, 2011 10:19 PM
334	As needed by client and determined by Regional Center.	Feb 2, 2011 10:32 PM
335	Choice and IPP team decision that addresses specific goals.	Feb 2, 2011 11:04 PM
336	Based on client needs and their preferences.	Feb 2, 2011 11:32 PM
337	It depends on the service. I don't think there should be arbitrary service limits that apply to all services. That is a guarantee the effectiveness is not the criteria in choosing services.	Feb 3, 2011 12:06 AM
338	services should be very specific to each need and goal.	Feb 3, 2011 12:19 AM
339	As necessary to move a person's life forward.	Feb 3, 2011 12:25 AM
340	Regional Center should contract out these services but need to keep a better watch on the service providers.	Feb 3, 2011 12:26 AM
341	life long services.	Feb 3, 2011 12:42 AM
342	Same answer as previous pages	Feb 3, 2011 12:45 AM
343	As necessary decided by parents clients other family members or caregivers	Feb 3, 2011 12:51 AM
344	As needed based on the opinion of the members of the IPP team.	Feb 3, 2011 12:53 AM
345	This can be combined with other programs, such as supported employment programs, work activity programs or day programs, depending on these programs missions.	Feb 3, 2011 12:57 AM
346	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 3, 2011 1:00 AM
347	Eliminate option for 24 hour care. Fund through live-in roomate rate separate from agency rate.	Feb 3, 2011 1:15 AM
348	The adult with Autism should receive services as often as is required to maintain independent living. Case by case.	Feb 3, 2011 1:24 AM
349	what ever is appropriate on individual basis	Feb 3, 2011 1:31 AM
350	Regional Center and client should quarterly make the list of services needed and then hold the agency accountable. There is not enough accountablility	Feb 3, 2011 1:40 AM
351	Sometimes daily but at the minimum weekly. Consumers will need support navigating the community, running errands, advocating, performing daily living activities and participating in community life - on a daily basis so services need to be available at that level.	Feb 3, 2011 1:49 AM
352	This should be based on demonstrated need, and determined by a qualified individual such as a care provider or a Regional Center case worker.	Feb 3, 2011 1:51 AM
353	daily	Feb 3, 2011 1:58 AM
354	Develop a plan with the client and the people who work with the client, family members.	Feb 3, 2011 1:58 AM
355	As deemed needed.	Feb 3, 2011 2:04 AM
356	Depends on needs of consumer	Feb 3, 2011 2:24 AM
357	per IPP	Feb 3, 2011 4:32 AM
358	monthly expenses	Feb 3, 2011 4:38 AM
359	daily	Feb 3, 2011 5:04 AM

2. Suggested service standards about how often a specific service should be

	Response Text	
360	Service cost can not exceed standard for similar licensed facility. No exceptions. Providers and natural supports must find solutions to make the support complete. Share resources with others, paid roommates. May need to seek adjustment in EDD law to allow live in roommates to work under a contract basis (now they can claim they are working around the clock).	Feb 3, 2011 5:10 AM
361	provided daily, weekly, or monthly as the adult individual plan team determines	Feb 3, 2011 5:12 AM
362	Degree of necessity of the service.	Feb 3, 2011 5:32 AM
363	1 x/week	Feb 3, 2011 6:25 AM
364	all the time.	Feb 3, 2011 6:48 AM
365	Same standards as Valley Mountain Regional Center.	Feb 3, 2011 6:50 AM
366	No Comment	Feb 3, 2011 6:52 AM
367	every day	Feb 3, 2011 6:57 AM
368	Trained personnel from RCs make monthly visits to homes etc.	Feb 3, 2011 7:23 AM
369	Independent and Supported Living Services should be provided as much as the consumer needs for the services to be provided. These amount of services should be determined on a case to case basis.	Feb 3, 2011 3:36 PM
370	Roommates should be a must to share cost and foster personal relationship.	Feb 3, 2011 4:18 PM
371	Continue those currently in independent living. There has to be a death, add additional clients ratio to this standard.	Feb 3, 2011 4:32 PM
372	Daily.	Feb 3, 2011 4:46 PM
373	An assessment should be completed to determine in what areas a person needs support. Plans should be developed based on this assessment, and services provided accordingly.	Feb 3, 2011 4:53 PM
374	On a need basis up to the cost of a care home	Feb 3, 2011 5:17 PM
375	Should be determined by RC service coordinator, consumer and service provider.	Feb 3, 2011 5:22 PM
376	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 3, 2011 5:23 PM
377	Assessment for services should be completed by an agency who is not going to provide the service as the agency who is providing the service has a vested interest in the number of hours requested	Feb 3, 2011 5:42 PM
378	No Comment	Feb 3, 2011 5:44 PM
379	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 3, 2011 5:46 PM
380	I think it needs be flexible because a person's living condition could change any time for any reason, e.g., accident, illness, job, natural disaster, etc.	Feb 3, 2011 6:25 PM
381	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 3, 2011 6:29 PM
382	Services definately need to be "LIMITED" ILP services are not meant to be life long or replace other reasources. If Client is not able to be taught or learn independent living skills then service is not appropriate and should be discontinued. Offer other supports that may be more appropriate such has IHSS etc.	Feb 3, 2011 6:36 PM
383	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 3, 2011 6:39 PM
384	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 3, 2011 6:50 PM
385	caseworkers should check in once a year with guardians.	Feb 3, 2011 6:55 PM
386	Full time	Feb 3, 2011 7:14 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
387	As needed.	Feb 3, 2011 7:21 PM
388	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646 (a)(4).	Feb 3, 2011 7:23 PM
389	Daily	Feb 3, 2011 7:46 PM
390	daily	Feb 3, 2011 7:46 PM
391	As in the IPP	Feb 3, 2011 7:49 PM
392	This service should be available at all times for any disabled individual who is not able to live in their family's home or who is old enough to live in a group home situation.	Feb 3, 2011 7:54 PM
393	SLS is out of control. Why should the taxpayer pay 10 to 20,000.00 per month for one person to live in their own little "mini facility". Not right. A person needing 24/7 supports needs to be in a group home or similar situation. It is fiscally impossible and wrong. Now , that being said, SLS with a flat rate and a room mate can work and be cost effective. The state has to quit giving in to parents because they talk loud or call their elected representatives. Cost effective has to be the driving concept. It can be done	Feb 3, 2011 7:55 PM
394	In our area (Ventura, Santa Barbara, SLO counties) SLS is making ILS a bit obsolete. It has also increased the number of hours provided to individuals as it is hard to justify service vs. profit at say 15-20 hours per month. SLS providers should not do their own assessments. RC staff can not be the experts on what is required to serve a person. RC staff end up deferring to the SLS agency on recommendations, and hours are often excessive. Hours are never re-evaluated for reduction. Consider a model of service that has some sort of independent assessment for need of services (probably not easy, but out of control without it).	Feb 3, 2011 8:05 PM
395	This depends on the consumers ability to care for themselves. Clearly those with more severe physical and mental disabilities should qualify for more services. In our case we have made significant sacrifices to improve the possibility of independent living of our son someday. Families that take on the burden should be assisted.	Feb 3, 2011 8:09 PM
396	As needed	Feb 3, 2011 8:10 PM
397	More assistance to those clients who wish to remain with their families by need or neccessity.	Feb 3, 2011 8:17 PM
398	These services (depending on the person's independence) should be faded within a reasonable amount of time.	Feb 3, 2011 8:38 PM
399	Once per week. If they need it more often then they need supported living or maybe a live in.	Feb 3, 2011 8:48 PM
400	Time framed standard upon each individual's situation.	Feb 3, 2011 8:49 PM
401	Anyone needing the service should have it.	Feb 3, 2011 8:51 PM
402	help from case manager	Feb 3, 2011 8:54 PM
403	As often as needed for safety, health growth,likes and dislikes, should all be taken into consideration.	Feb 3, 2011 8:55 PM
404	That varies a lot with need. When my son first moved into his apartment, he had a independent living instructor come four times a week, but now only needs a couple of hours once a week.	Feb 3, 2011 9:02 PM
405	All Services Daily, as needed and determined by person with a disability in order to function in the community. Daily transportation services in a timely manner!!!	Feb 3, 2011 9:17 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
406	provision of service should be directed ultimately to health and safety and maintaining cost effective placements.	Feb 3, 2011 9:17 PM
407	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 3, 2011 9:20 PM
408	Services within the Indep Lving and Supp Lving services area would need to be provided daily, 7-days/week, if needed or as little as necessary as shown by how the individual has been living up to the point when they move to this option. Certainly there may need to be transition services since leaving a comfort zone and moving to a new setting would require support and adjustment; this would be reviewed qtrly/semi-annuall/annually.	Feb 3, 2011 9:38 PM
409	Whatever is needed to keep them at the level of independence that is needed, up to a point. If "institutional" options are good and available, then develop a transitional option.	Feb 3, 2011 9:38 PM
410	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 3, 2011 9:44 PM
411	n/a	Feb 3, 2011 9:53 PM
412	As often as deemed necessary.	Feb 3, 2011 10:15 PM
413	1/week	Feb 3, 2011 10:19 PM
414	With all of these services, there should be an expectation for reduced services over time. Maybe 3-5 years at a higher amount, then a reduction of 1/3 for 2 years, then another reduction of 1/3 for 2 years. The reduction should occur until some standard amount was reached, which was considered economically viable. If a person started at this level, then no reductions would be necessary. In this situation, any client would be eligible to receive services (there could be a total yearly or monthly cost cap). However, they would have to make progress in becoming more independent. If they failed to do so (as determined by the team) they would have to go into a less expensive living situation (e.g. group home). Or they could simply take the 1/3 cut and continue to live in supported/ind living - this would be a risk at times, but many individuals might surprise us with their ability to survive.	Feb 3, 2011 10:37 PM
415	As often as the IPP team has determined is necessary, as described in the Lanterman Act Section 4646.5 (a) (4).	Feb 3, 2011 10:45 PM
416	as often as the IPP deems is necessary	Feb 3, 2011 10:47 PM
417	As currently set, or more often if possible.	Feb 3, 2011 11:12 PM
418	The client along with their team should decide.	Feb 3, 2011 11:13 PM
419	As often as required to help individuals become independent in their community.	Feb 3, 2011 11:18 PM
420	Agencies to assist these indivdiuals to lcoate, secure and be successful at independent living.	Feb 3, 2011 11:34 PM
421	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 3, 2011 11:44 PM
422	Involve parents in the provision of assistance to this clientele	Feb 4, 2011 12:06 AM
423	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 4, 2011 12:06 AM
424	As often as needed	Feb 4, 2011 12:11 AM
425	ILS services agencies who have qualified personnel and not someone off the street. ILS services should be provided at least once a week.	Feb 4, 2011 12:19 AM
426	Services vary so much but the cost should not be the obstacle in receiving these services as they are critical in allowing our developmentally disabled to function at the highest level possible and this is especially true for early intervention.	Feb 4, 2011 12:53 AM

2. Suggested service standards about how often a specific service should be

	Response Text	
427	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 4, 2011 1:06 AM
428	The type of care needed should ultimately dictate the service provided and the number of hours approved.	Feb 4, 2011 1:08 AM
429	As often as needed determined by an IPP	Feb 4, 2011 1:22 AM
430	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 4, 2011 1:52 AM
431	Currently the standard is that independence services or supported living services should decline in hours based on time standards of 1 year to six months. Individuals with disabilities learn a different rates; therefore, these services should be extended until the appropriate and realistic goal is achieved and a higher standard can be applied.	Feb 4, 2011 2:02 AM
432	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 4, 2011 2:07 AM
433	as needed	Feb 4, 2011 2:09 AM
434	By trained or licensed individuals.	Feb 4, 2011 2:22 AM
435	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 4, 2011 2:49 AM
436	As determind by the profesional.	Feb 4, 2011 3:11 AM
437	This should be determined by the IPP team as described in the Lanterman Act.	Feb 4, 2011 3:41 AM
438	As much as it is safe and makes the clients happy.	Feb 4, 2011 3:52 AM
439	Daily	Feb 4, 2011 4:00 AM
440	depends on the individuals needs and if the parents will go along with the service plan	Feb 4, 2011 4:13 AM
441	This is very dependent upon the individual and their unique abilities, desires and the age of the person. Therefore, there should be a great deal of flexibility in the determination of standards. The IPP team should be the determining factor to encourage the best service at various stages in a person's life.	Feb 4, 2011 4:42 AM
442	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 4, 2011 4:57 AM
443	As needed by the individual!	Feb 4, 2011 4:58 AM
444	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 4, 2011 5:08 AM
445	Services should continue to be based on needs.	Feb 4, 2011 5:12 AM
446	Should be offered only to consumer that are pretty much independent and high functioning physically. Department should review the cases.	Feb 4, 2011 5:27 AM
447	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 4, 2011 6:42 AM
448	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 4, 2011 7:36 AM
449	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 4, 2011 3:17 PM
450	As often as determined necessary per the Lanterman Act provisions. A one size fits all model is clearly not appropriate for services which ensure that our adult son is not institutionalized, costing the State even more money. What are the decision-makers thinking?	Feb 4, 2011 3:54 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
451	Depending on the person and abilities, should be looked periodically at least annually to monitor if abilities have declined and see if more assistance is needed. This should be done physically not over the phone.	Feb 4, 2011 4:47 PM
452	only used for needed training of independent living	Feb 4, 2011 4:49 PM
453	Same as previous section	Feb 4, 2011 4:55 PM
454	N/A	Feb 4, 2011 5:01 PM
455	As often as the IPP team determines is necessary for improvement as described in the Lanterman Act	Feb 4, 2011 5:12 PM
456	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 4, 2011 5:16 PM
457	Consumers should be checked monthly at a minimum for money management, healthy eating, cleaining house, etc. Housemates, should be cleared by social services so that criminal records are known, and housemates are coached on how to support and live with the disabled person.	Feb 4, 2011 5:21 PM
458	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 4, 2011 5:44 PM
459	Determined by standardized assessment.	Feb 4, 2011 6:08 PM
460	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 4, 2011 6:12 PM
461	The services should be provided as often as needed to insure that the client has enough food for a week, that clean laundry is available, that bills are paid, that cash is available, that transportation to appointments is provided, that exercise is maintained, and any assistance with cooking and housecleaning is provided. How often during the week depends on the client's needs, but checking on the client at least once a day is probably wise.	Feb 4, 2011 6:18 PM
462	Everyday and Every night.	Feb 4, 2011 6:28 PM
463	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 4, 2011 6:37 PM
464	According to the needs of the client, from daily support to weekly, or even just monitoring monthly to ensure safety.	Feb 4, 2011 6:46 PM
465	As often as the IPP team determines necessary as described in The Lanterman Act section 4646.5 (a) (4)	Feb 4, 2011 7:09 PM
466	Consistently as long as it is needed.	Feb 4, 2011 7:17 PM
467	The same as previous #2.	Feb 4, 2011 7:19 PM
468	As needed	Feb 4, 2011 7:33 PM
469	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 4, 2011 7:50 PM
470	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 4, 2011 8:15 PM
471	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 4, 2011 8:39 PM
472	As often as the IPP Team deems necessary (see Section 4646 5 (a) (4) of The Lanterman Act	Feb 4, 2011 8:52 PM
473	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 4, 2011 8:56 PM
474	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 4, 2011 9:19 PM
475	twice a week	Feb 4, 2011 9:36 PM
476	Tailored to the client, but at a minimum once weekly.	Feb 4, 2011 9:43 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
477	As often as the IPP team determines necessary as described in The Lanterman Act section 4646.5 (a) (4)	Feb 4, 2011 9:55 PM
478	The need of the invidual is determined by assessment and varies.	Feb 4, 2011 10:07 PM
479	As often as needed to help the individual meet, hopefully pre-assigned goals, his/her individual standard for success.	Feb 4, 2011 10:08 PM
480	How often depends on the extent of services needed. Regional center case managers should decide how often on a case by case basis.	Feb 4, 2011 10:11 PM
481	As often as the IPP team determines is necessary, as described in The Lanterman Act.	Feb 4, 2011 10:22 PM
482	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 4, 2011 10:38 PM
483	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 4, 2011 10:45 PM
484	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 4, 2011 10:56 PM
485	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 4, 2011 11:15 PM
486	There should be a time-frame outline of how long the service should be provided and if the goal is not met then use a different provider/service----that should produce positive results quicker---if the provider is unable to meet the time-frame then they won"t get anymore referrals. If another provider is not able to get the desired results than the client should probably not be living alone but should be placed in a "Mentor" home if feasible.	Feb 4, 2011 11:20 PM
487	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 4, 2011 11:21 PM
488	This is very unique to the situation. It takes more consideration than this square allows. Certainly, independent individual living situations take more care and time than an approved group home. If individual independent living situations require daily services, then that person does not belong in that particular situation. Perhaps a group home or other facility would be warranted. Daily one on one care, 24 hours is not appropriate.	Feb 4, 2011 11:23 PM
489	The consumer should be presented with the various choices.	Feb 4, 2011 11:34 PM
490	24/7 if need be.	Feb 4, 2011 11:41 PM
491	As often as the Individual Program Plan (IPP) team determines is necessary, as described in The Lanterman Act Section 4646.5(a)(4).	Feb 5, 2011 12:22 AM
492	Frequency is determined at IPP Team meeting. Lanterman Act 4646	Feb 5, 2011 12:23 AM
493	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 5, 2011 12:32 AM
494	Less than 24/7;	Feb 5, 2011 12:41 AM
495	same as answers for the other programs and listen listen listen to the client, try to really understand what they are trying to say, what they feel , what they want or do not want (like or don"t like) Community is important for them, family is importsnt, their birth family is important, friends and activities.	Feb 5, 2011 1:28 AM
496	Support is geared to his needs now and the service provider gets/pays low wages. My son requires 24x7 supervison. Would a standard give him less that 24x7 support? or pay staff even less. I can't see that helping the situation in either the short or long term.	Feb 5, 2011 1:30 AM

2. Suggested service standards about how often a specific service should be

	Response Text	
497	Frequency of services should be based on an individual's particular need as measured by a standardized needs assessment tool completed with the input of family/ consumers/ involved professionals. Assessments should not be completed by vendors involved in the direct provision of independent living or supported living services.	Feb 5, 2011 2:04 AM
498	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 5, 2011 2:19 AM
499	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 5, 2011 3:57 AM
500	Daily	Feb 5, 2011 4:07 AM
501	equipment and training needed to how effectively for these people to self function in their homes and having viable /affordable options to transition to long term care homes if needed.	Feb 5, 2011 4:10 AM
502	Daily living quarters	Feb 5, 2011 4:29 AM
503	Once a week.	Feb 5, 2011 4:48 AM
504	1:1 or small group (i.e. cooking class w/ peers)	Feb 5, 2011 6:11 AM
505	As often as the IPP determines they are necessary.	Feb 5, 2011 6:49 AM
506	As often as necessary to ensure the clinet's health and safety.	Feb 5, 2011 6:51 AM
507	As often as the IPP team determines is necessary, as described in The Lanterman Act.	Feb 5, 2011 2:47 PM
508	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 5, 2011 5:27 PM
509	As often as the child needs.	Feb 5, 2011 5:38 PM
510	Specific stands should continue as they are currently. Each consumer should decide how often they need services and to what extent. Who would know better than the consumer and those who are intricately involved in the consumers' life.	Feb 5, 2011 6:30 PM
511	same as first set	Feb 5, 2011 6:40 PM
512	A parent or advocate should be included in the decision-making process	Feb 5, 2011 8:06 PM
513	As often as is needed as determined by an IEP or IPP team.	Feb 5, 2011 8:30 PM
514	I oppose POS standards. Please refer to the Lanterman Act section 4646.5 (a) (4).	Feb 5, 2011 8:54 PM
515	Assessment will determine this	Feb 5, 2011 10:13 PM
516	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 5, 2011 10:55 PM
517	never ,at this time due to the economy they should have to share a house or a apartment and be able to care for them selves. with some one to look in on them once a week to make sure they have food and the bills are paid and the house is clean.	Feb 5, 2011 11:28 PM
518	Serveces need to be taylored to the individual, as often as needed.	Feb 6, 2011 4:08 AM
519	Regardless of any suggested standards, the consumer, the consumer's parents and/or caregivers and consumer's teachers and other school service providers where applicable must still have input regarding independent living and supported living services, and the entire IPP team must retain the ability to determine how often the services and supports needed by the consumer should be provided.	Feb 6, 2011 5:45 AM
520	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 6, 2011 5:55 AM
521	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 6, 2011 4:35 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
522	Depends on the severity of the individual. Mild = once a week, severe = three times per week.	Feb 6, 2011 5:08 PM
523	As often as the IPP team determines is necessary, as described in The Lanterman Act	Feb 6, 2011 6:45 PM
524	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 6, 2011 6:47 PM
525	This depends on the specific needs of the client, A plan with specific goals and objectives tailored to each client should be negotiated with the clients support team.	Feb 6, 2011 8:11 PM
526	It should be discussed by the IPP team what would provide the best quality of life for the consumer and allow them to live in the community in which they are familiar. Services should be provided to allow the consumer to have a live as "normal" to that of the NT population. That should include any type of supervision to make that possible. Supports should be faded over time if possible. They may need to be put in place for the consumers entire life. A consumer's friends or family should be allowed to be vendored as a supported living services provider so they can use all the support to provide better in home care to the consumer. Agencies of all kinds vendored through regional center keep too much of their own profit.	Feb 6, 2011 8:46 PM
527	Some are weekly and then some are as needed.	Feb 7, 2011 12:40 AM
528	individuals with appropriate training and background checks.	Feb 7, 2011 2:26 AM
529	Each should probably receive service according to their disability most at least 2 times a week	Feb 7, 2011 3:42 AM
530	This would depend on the disability and its severity. There may be disabled individuals who need very few services; for others, the services they require may be more extensive.	Feb 7, 2011 4:25 AM
531	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 7, 2011 5:13 AM
532	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 7, 2011 6:40 AM
533	This should be provided over a 2-3 month period with a follow up after 6 months of end of treatment	Feb 7, 2011 6:46 AM
534	As often as the IP team determines is necessary, as described in the Lanterman Act.	Feb 7, 2011 2:46 PM
535	Service should be provided as often as the IPP team deems it is necessary, per The Lanterman Act.	Feb 7, 2011 3:25 PM
536	Services for health and safety need to be provided but if the client is not willing to participate in training then they should not be available to them.	Feb 7, 2011 4:28 PM
537	With as much dignity as is possible.	Feb 7, 2011 5:16 PM
538	As often as the IP team determines is necessary, as described in the Lanterman Act.	Feb 7, 2011 5:45 PM
539	As often as the IPP team determines is necessary, as described in the Lanterman Act section 4646.5 (a) (4).	Feb 7, 2011 6:21 PM
540	As determined by the IPP team.	Feb 7, 2011 7:50 PM
541	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 7, 2011 7:53 PM
542	When ever stated in the IPP.	Feb 7, 2011 9:11 PM
543	No comment	Feb 7, 2011 9:31 PM
544	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 7, 2011 10:06 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
545	based on assessment.	Feb 7, 2011 10:37 PM
546	Allow RC's to set the standards in their own communities.	Feb 7, 2011 10:45 PM
547	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 7, 2011 11:12 PM
548	Let the Regional Centers make the decisions regarding program services	Feb 7, 2011 11:13 PM
549	As often as the IPP team determines necessary, as described in the Lanterman Act Section 4646.5 (a)(4).	Feb 7, 2011 11:15 PM
550	Curently ILS is 17 hours a month. Seems ok. There are some sitation where it is not quite SLS, but more ILS is needed. Important to have this flexibility to save money before going into SLS. SLS is mostly 24 hours.	Feb 7, 2011 11:25 PM
551	Currently, many of those services are provided by vendors of the Regional Centers, which is a decent system as it stands. Regional Centers have performance standards for vendors, but I believe they could be a little more rigorous. However, currently the Regional Centers are so overburdened I believe they are hampered in their ability to provide comprehensive oversight. My child is a client of a Regional Center vendor.	Feb 7, 2011 11:56 PM
552	It should be provided on a daily or as needed basis. The ILS/SLS agency should keep daily records/logs of various activities done that day, especially for those activitites that fall under the "supports needed" catergory of the IPP.	Feb 8, 2011 12:13 AM
553	Services should be provided until death or until no longer needed by the consumer for any other reason.	Feb 8, 2011 1:00 AM
554	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 8, 2011 1:10 AM
555	As much as needed to help that person live independently. That is the goal!	Feb 8, 2011 1:24 AM
556	As needed based upon individual need	Feb 8, 2011 3:55 AM
557	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 8, 2011 4:06 AM
558	Daily.	Feb 8, 2011 4:26 AM
559	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 8, 2011 5:32 AM
560	Again as previously stated.	Feb 8, 2011 6:08 AM
561	To provide housing for these indivuduals will keep them safe. They need to be as independent as possible....to be able to be as productive as possible. They can often be employed so as not to be a burden on the community. These people cannot be turned out on the street.	Feb 8, 2011 6:37 AM
562	It should be provided as often as needed.	Feb 8, 2011 7:02 AM
563	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 8, 2011 3:40 PM
564	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 8, 2011 4:26 PM
565	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 8, 2011 4:27 PM
566	This service should be provided as frequently as the IPP says.	Feb 8, 2011 5:22 PM
567	Each individual is on a case by cas basis. Some need more assistance than others. Either way, it is more cost effective to have a person live out in the community with assistance than to live in a state run facility.	Feb 8, 2011 5:33 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
568	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 8, 2011 5:51 PM
569	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 8, 2011 6:03 PM
570	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 8, 2011 6:10 PM
571	Many need daily help.	Feb 8, 2011 7:47 PM
572	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 8, 2011 7:55 PM
573	Daily for a determined amount of time until the consumer has success.	Feb 8, 2011 8:40 PM
574	Long-term, based on client's ability to thrive.	Feb 8, 2011 8:52 PM
575	ILS services are crutial in ensuring participants lead full and enriching lives. ILS services are a benefit to the community because they assist participants in becomming more independent and over time, less reliant on service providers. For very independent individuals, services should be provided on monthly basis (maintenance). For individuals who need support with doctor visits, grocery shopping, cooking, domestic, etc, services should be provided on a weekly basis.	Feb 8, 2011 9:19 PM
576	daily since it pertains to ADL's	Feb 8, 2011 9:24 PM
577	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 8, 2011 9:31 PM
578	Whenever necessary.	Feb 8, 2011 9:43 PM
579	Supportive Living Services should be based on a Developmentally Disabled individual's ability to function in a normalized community. Every person has skills and functions in which they are able to perform at a standardized level, with most needing additional assistance, training and supports in everyday tasks. SLS supports should be based on an individualized level for each consumer, with some needing more supports than others. In order to determine supports an individual would need in this area, evaluation and assessment of each consumer would be needed to determine specific objectives and services to be provided. Quarterly IPPs would determine if the level of supports continue to be appropriate for consumer, or if supports need to be increased or decreased based on the consumer's success.	Feb 8, 2011 10:23 PM
580	When the young adult is in his/her twenties and has gained some skills in independent living, work skills, house management training, then they can transition from their parents' home into a supported living environment with back-up services provided to monitor the person as needed for their disability--possibly daily or every few days to make sure the person is eating properly, bathing and carrying out basic living skills.	Feb 8, 2011 10:35 PM
581	Persons with disabilities should receive no less than those people without disabilities. A decision by the consumer's opinion should be a number one indicatior of the type of living arrangement they participate in. However, The needs of the consumer must be taken in to consideration as well.	Feb 8, 2011 11:20 PM
582	As often as the IPP team has identified a need for these services, as described in the Lanterman Act Section 4646.5 (a) (4).	Feb 8, 2011 11:48 PM
583	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 8, 2011 11:54 PM
584	As a consumer involved many in SLS, I require round the clock care and this is exactly what I need. I feel that this is the proper amount of time.	Feb 9, 2011 12:25 AM

2. Suggested service standards about how often a specific service should be

	Response Text	
585	I meet with my ILS Instructor 2 times/week for 4 hours/week. I like meeting with my ILS Instructor twice/week. I am enrolled in a reading class and cooking class through Independent Living Skills (ILS) instruction. I love my classes. My cooking class is 1.5 hours each week and my reading class is 1 hour/week. I like the classes I am enrolled in through ILS and I like the length of my classes. I would like to take an automotive class if it were offered through ILS.	Feb 9, 2011 12:55 AM
586	Weekly telephone calls or bi-monthly visits would be approprate. Also, onsite mgrs (that have been background checked) in appartment complexes that could check on the clients daily. The onsight mgr. could report to Alta Regional regarding the progress or concerns of the clients.	Feb 9, 2011 1:06 AM
587	daily living	Feb 9, 2011 1:24 AM
588	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 9, 2011 1:25 AM
589	Answer: As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 9, 2011 1:28 AM
590	Per determination of the Planning Team up to a cap based on statewide use.	Feb 9, 2011 1:33 AM
591	same	Feb 9, 2011 2:28 AM
592	As often as needed	Feb 9, 2011 3:22 AM
593	I currently work with an ILS Instructor once a week for about 2 hours. I would like to meet with an ILS Instructor twice/week for 2 hours-4 hours/week total. I am currently in 3 ILS classes: diabetes, anger management, and computer. My diabetes class is 1.5 hours/week, computer class is 1 hour/week, anger management class is 1 hour/week. I do not want to take any additional ILS classes at this time. I would like my anger management class to be 1.5 hours/week and I would like my other classes to remain the same time.	Feb 9, 2011 3:36 AM
594	If services are needed more than twice a week it is likely the consumer should NOT be living independently and should be placed in a small family home where services can be accessed at a more sustainable rate.	Feb 9, 2011 5:39 AM
595	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 9, 2011 5:42 AM
596	Only when it is the absolute last option, not because a patent doesn't want to deal with caring did the child!	Feb 9, 2011 8:46 AM
597	Is the person making progress towards their goal? The IPP team determines the need as appropriate.	Feb 9, 2011 5:19 PM
598	How often a specific service should be provided must meet Lanterman, Medicaid, ADA and Due Process standards. Therefore, any POS Standards must consider the following elements: 1. Decisions about what services an individual needs including any services allowed by exceptions must be made by the IPP team. 2. Consumers and their family must receive written notice of any reduction in service including notification of any exceptions. 3. Services which exceed the POS standards must be provided when necessary to: a) Protect the consumer’s health and safety; b) Prevent out of home placement or placement in an institution; c) Prevent the provision of services in a more restrictive setting; d) Meet extraordinary consumer or family needs.	Feb 9, 2011 5:34 PM
599	services should be defined through the IPP and should be specific to helping individuals become more capable and independent in their health and home	Feb 9, 2011 6:14 PM
600	SLS should never cost more than residing in a CCF. This service has become extremely costly for too many of those we serve, it is out of control at our RC. If a person requires extensive hours to be supported, they should not be in SLS.	Feb 9, 2011 6:35 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
601	assessment by an independent not self surving agency. an agnecy that may provide the service should not be doing the assesssment.once needs and goals idnetified choice sof ILS/SLS serivce to be offered. Serivces must be client centered and aimed at increasing indepedence and health.	Feb 9, 2011 6:55 PM
602	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 9, 2011 7:57 PM
603	as often as IPP team determines is necessary per Lanterman Act section 4646.5 (a) (4)	Feb 9, 2011 8:11 PM
604	Services should be specific to the clients needs and what they wish to achieve. If they wish to achieve as much independence as possible, they should be taught the basic living skills one needs to function on their own. Based on the above, it is imperative that services be provided on the need of the service.	Feb 9, 2011 8:16 PM
605	Services should be provided only by persons or organizations that are properly venderized as described in the Lanterman Act, Sec. 4646A(3).	Feb 9, 2011 9:06 PM
606	The frequency and duration of services should be based on the level of need and the goals of the ISP.	Feb 9, 2011 9:15 PM
607	As long as deemed needed by Client and Team.	Feb 9, 2011 9:20 PM
608	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4).	Feb 9, 2011 9:48 PM
609	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 9, 2011 10:04 PM
610	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 9, 2011 10:34 PM
611	Each individual is different in their needs, the need should be documented as to what the person is capable of doing, what are the disabilities, what does the family recommend, what are the plans of each individual when planning to live independently (do they have a savings accout, a job, a place in mind, a roomate, and is not just a want without plans in place), and what is the maximum potential if it exist for the consumer to suceed independently. There should be a trial period in which the consumer should decide whether or not living independently will work for him and if not, is there a plan to return to a group home or to the family's home. Also does the consumer have knowledge of reality like paying bills, cooking, paying rent, and budgetting. Transition ILS is the best service that could be put in place when most of the plans mention above are happening.	Feb 9, 2011 10:37 PM
612	It should be an ongoing service.	Feb 9, 2011 10:42 PM
613	As needed or until a family member can be trained to assist.	Feb 9, 2011 11:32 PM
614	After an initial assessment, each person should be looked at for individual needs. The SC and the committee should not get to read some paperwork and determine someones life. Cunsumers in in out linning areas are being refused services because their SC send them to the program prefered by the SC, not client choice. The SC asked programs to provide support to their consumers in a specific way, they did not follow the rules now the clienbts are suffering becuase the support received for years at the SC request is now being told by the committee, "No that is not what the program is for". Where is their consequense for setting consumers up to fail now that we can't give the same support.	Feb 9, 2011 11:33 PM
615	ILS and SLS are community based residential services so should be provided the duration of need.	Feb 9, 2011 11:33 PM
616	Depending on client needs this service should be available daily.	Feb 9, 2011 11:35 PM
617	As per the IPP	Feb 9, 2011 11:58 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
618	Weekly to monthly for long-term support. Daily support and coaching, may be needed for an initial period of independent living.	Feb 10, 2011 12:44 AM
619	as long as necessary for life if needed depending on available of resources from the family for support. siblings and family members should be held responsible to help with the needs of their siblings. To many adults have been ignored for services because of lack of family support. That needs to change.	Feb 10, 2011 3:15 AM
620	see above	Feb 10, 2011 7:54 PM
621	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 10, 2011 8:02 PM
622	As often as the IPP team determines is necessary.	Feb 10, 2011 8:08 PM
623	Weekly	Feb 10, 2011 9:16 PM
624	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 10, 2011 9:32 PM
625	Yes,	Feb 10, 2011 9:45 PM
626	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 10, 2011 9:59 PM
627	Depends on the individual. Some need daily help others need less or weekly help. You have to take each case individually.	Feb 10, 2011 10:14 PM
628	As needed,as long as all other generic services have been used first.	Feb 10, 2011 10:20 PM
629	The IPP will inform this; some clients may need more time based on their individual needs and limitations. It's in The Lanterman Act Section 4646.5 (a) (4).	Feb 10, 2011 10:28 PM
630	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 10, 2011 11:42 PM
631	When ever needed	Feb 10, 2011 11:47 PM
632	ILS or SLS should be an opportunity for any client who desires to live on their own and wants to live an independent life.	Feb 11, 2011 12:02 AM
633	As often as needed by the consumer.	Feb 11, 2011 12:15 AM
634	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 11, 2011 12:22 AM
635	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 11, 2011 12:50 AM
636	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 11, 2011 12:55 AM
637	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 11, 2011 1:10 AM
638	As often as is needed.	Feb 11, 2011 1:32 AM
639	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 11, 2011 1:49 AM
640	Supports should remain the same or increase.	Feb 11, 2011 1:49 AM
641	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 11, 2011 2:19 AM
642	24 hours per day	Feb 11, 2011 2:57 AM
643	AT least one goal per year should be working toward independent or supportive living if the client has that potential.	Feb 11, 2011 3:07 AM
644	The specific service should be provided to the specific individual as often as the IPP team had determined to be necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 11, 2011 3:20 AM
645	5-7 Days a week.	Feb 11, 2011 3:29 AM

2. Suggested service standards about how often a specific service should be

	Response Text	
646	As appropriate, some may need help with daily living activities,and managing medications. Responding to emergencies, healthy living, the monitoring of health related conditions can be reviewed monthly. Other supports can be monthly and quarterly as appropriate.	Feb 11, 2011 3:44 AM
647	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 11, 2011 4:10 AM
648	The whole service plan should be determined. If the cost is more than having the person live in a standard ICF or CCF then the individual should not be funded above the standard cost of CCF or ICF. If a family wants to supplement the living situation, then the plan should be developed with family payment in the budget.	Feb 11, 2011 4:46 AM
649	no idea	Feb 11, 2011 5:06 AM
650	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 11, 2011 5:08 AM
651	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 11, 2011 5:44 AM
652	It seems like some providers work with family members to "develop" needs for the IPP that really aren't needed. I've witnessed this manipulation of the IPP to increase service needs, when the needs are overstated to get more hours of support.	Feb 11, 2011 5:48 AM
653	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 11, 2011 6:15 AM
654	As long as it takes.	Feb 11, 2011 6:22 AM
655	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 11, 2011 6:46 AM
656	As often as needed according to conclusions made by ISP team.	Feb 11, 2011 8:01 AM
657	While consumers may learn a specific skill, they may need on-going reminders, prompting, and emotion regulation to remain on task. Services cannot be terminated according to a fixed schedule, but take into account individual consumer needs and overall functioning.	Feb 11, 2011 4:24 PM
658	No time limits if successful and supports required to maintain independence. But consumers should pay all living costs.	Feb 11, 2011 6:16 PM
659	service should be provided as often as a consumer needs the service.	Feb 11, 2011 6:35 PM
660	A check list that is provided to group home, day prog must also be given to ILS to document training and if objective is met or on going. Especially for ILS the consumer can get services for 3 months only. as for group home and day prog. it must be ongoing until consumer decides to move out on their own. Services cannot be duplicated.	Feb 11, 2011 6:39 PM
661	As often as deemed necessary by an IPP team for that indicvidual according to the Lanterman Act.	Feb 11, 2011 6:44 PM
662	SAME AS PREVIOUS #2	Feb 11, 2011 6:47 PM
663	As often as the IP Team determines is necessary.	Feb 11, 2011 7:03 PM
664	based on need either a few hours a day or 24 hours a day.	Feb 11, 2011 7:19 PM
665	Should be for those that have the ability to be successful in that environment	Feb 11, 2011 7:23 PM
666	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 11, 2011 7:24 PM
667	until child is an adult or confirmed not in need	Feb 11, 2011 7:24 PM
668	Initialing a client should be given enough hours to get settled in the community, and then hours should be provided for maintenance only.	Feb 11, 2011 7:52 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
669	See comment under Behavioral Services	Feb 11, 2011 8:49 PM
670	At least once a week	Feb 11, 2011 8:52 PM
671	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 11, 2011 9:43 PM
672	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 11, 2011 9:46 PM
673	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 11, 2011 9:47 PM
674	This would depend on each case needs. What one person may need, the other one might not.	Feb 11, 2011 9:48 PM
675	everyday	Feb 11, 2011 9:48 PM
676	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 11, 2011 9:49 PM
677	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 11, 2011 9:51 PM
678	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 11, 2011 9:51 PM
679	individualized	Feb 11, 2011 9:53 PM
680	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 11, 2011 9:53 PM
681	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 11, 2011 9:55 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
682	Individual Living Services should be provided maybe 5-10 hours a week depending on the individual. This is keeping in mind that they are also probably learning skills in their day program or transitional school programs as well. Supported Living Services would greatly vary depending on the level of care required. It is also hard because they will provide emergency response as well. The third level of service presented I think should provide a max of 20 hours a month. This would allow for 5 - 4 hrs doctor appts, etc.	Feb 11, 2011 10:00 PM
683	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 11, 2011 10:01 PM
684	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 11, 2011 10:02 PM
685	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 11, 2011 10:07 PM
686	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 11, 2011 10:14 PM
687	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 11, 2011 10:32 PM
688	As needed and determined by health care provider and case coordinator for people with developmental disabilities.	Feb 11, 2011 10:35 PM
689	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 11, 2011 10:37 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
690	As often as the IP team determines is necessary, as described in the Lanterman Act.	Feb 11, 2011 10:43 PM
691	Depending on what skills the client needs that is how many hours should be determined.	Feb 11, 2011 10:52 PM
692	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 11, 2011 10:56 PM
693	once per month	Feb 11, 2011 11:08 PM
694	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 11, 2011 11:27 PM
695	For independent living services take the average yearly standard and work from there.	Feb 11, 2011 11:31 PM
696	ILS and SLS should be provided on an ongoing basis if effective. Services are to be terminated under the following circumstances: · The consumer no longer wishes to participate in SL. · The criterion for SL is no longer met. · The consumer no longer needs the level of support provided by the SL and can safely transition to a less comprehensive service. · Despite the provider's best efforts to implement effective training and supports, the health and safety of the consumer or the safety of others continues to be compromised. · Changes in the consumer's health status necessitate a move to a health-licensed facility. · The provider has significant deficiencies and/or can no longer meet the needs of the consumer. In this case, the regional center will attempt to arrange alternate SL services. · The consumer or service provider presents a barrier to the full utilization of all generic resources.	Feb 11, 2011 11:50 PM
697	N/A. I think it is appropriate at this time.	Feb 11, 2011 11:56 PM
698	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 11, 2011 11:58 PM
699	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 12, 2011 12:10 AM

2. Suggested service standards about how often a specific service should be

	Response Text	
700	Supported Living Services should be abolished. Independent living services with strict program admission requirements and measurable proof of success.	Feb 12, 2011 12:25 AM
701	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 12, 2011 1:17 AM
702	Has often as needed for each individual to live a dignified life without feeling like their independence is being hindered by others. Services should be provided to assist with activities of daily living, household maintenence, money management, medical needs, meal preparation and community integration.	Feb 12, 2011 1:23 AM
703	As often as needed for Customer successfully live independently.	Feb 12, 2011 1:44 AM
704	If the IPP plan deems it necessary.	Feb 12, 2011 2:35 AM
705	As needed to achieve independent living	Feb 12, 2011 2:41 AM
706	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 12, 2011 2:45 AM
707	People with diabilities should get this support all around the clock and these programs do excellent work to see that that they get the support needed.	Feb 12, 2011 2:47 AM
708	Provided in the least restrictive but most effective way. Help with areas of need.	Feb 12, 2011 3:47 AM
709	As long as the client needs assistance.	Feb 12, 2011 3:49 AM
710	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 12, 2011 5:19 AM
711	as often as Need. SUCH AS CHECKING TWO TO 3 TIMES A DAY TO MAKE SURE THEY NEED TO THE POLE ARE SAFE AND THEY ARE DOING WHAT THEY NEED TO DO.	Feb 12, 2011 5:56 AM
712	monthly	Feb 12, 2011 5:59 AM
713	Daily	Feb 12, 2011 6:17 AM
714	See previous answers.	Feb 12, 2011 6:28 AM
715	As often as is needed.	Feb 12, 2011 6:52 AM
716	Independent and supported living services	Feb 12, 2011 7:18 AM
717	Every day of their capable life with some assistance.	Feb 12, 2011 7:51 AM
718	Use a co-parenting approach between agencies and parents. ASK parents to take on more responsibility for services such as shopping, cooking, transportation, areas that do not need specialized training.	Feb 12, 2011 7:57 AM
719	Through their entire life	Feb 12, 2011 9:22 AM
720	Dad to day	Feb 12, 2011 3:11 PM
721	Also regional center should higher there tell ssi that they should let people have more than 2,000 in there bank accouts.	Feb 12, 2011 4:16 PM
722	Always have it available for the client but they should be monitored frequently to make sure they qualify for this.	Feb 12, 2011 4:20 PM
723	As needed to maintain patient-tolerable level of independence. That is, to keep the individual stable and functioning. Often the disabled require extended assistance. Mentally-challenged individuals may never progress to be able to handle money, self-support, emergencies.	Feb 12, 2011 4:25 PM
724	Pertaining to those recipients suggested in the response to No. 1 above, services could be provided on an as needed basis, such as providing educational services relating to social skills and skills required for participating in the local community.	Feb 12, 2011 4:27 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
725	As often as needfed,then to ween them off the support staffn to often such is seen as a liftime "entitlement". The client needs to be taught life skills. But NOT become dependent on the dssuppport staff.	Feb 12, 2011 4:36 PM
726	Services should be evaluated and set a goal but then as time goes on they should be set for needs that are most needed and shorten to where progress has been made , Then it should have periodic checks to see if more training is needed or needs an adjustment to make things easier.	Feb 12, 2011 5:41 PM
727	At least once a week.	Feb 12, 2011 5:52 PM
728	As seen by regional center professional	Feb 12, 2011 5:55 PM
729	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 12, 2011 6:11 PM
730	as often as needed.	Feb 12, 2011 6:27 PM
731	Needs based.	Feb 12, 2011 7:14 PM
732	Whatever is needed for safety for supported living. Independent living must show some learning of skills initially (i.e. a reduction in hours) then a maintenance set based on ability.	Feb 12, 2011 7:24 PM
733	Due to the variety of experiences for families of and individuals on the Autism Spectrum I am unable to respond to this question effectively.	Feb 12, 2011 8:23 PM
734	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 12, 2011 8:26 PM
735	We need affordable housing	Feb 12, 2011 8:49 PM
736	every 6 months	Feb 12, 2011 8:55 PM
737	Whenever and wherever possible.	Feb 12, 2011 9:20 PM
738	by those with appropriate degrees and training and on the job training	Feb 12, 2011 9:24 PM
739	As often as necessary.	Feb 12, 2011 10:07 PM
740	365 days a year	Feb 12, 2011 10:12 PM
741	Services should be provided based on need and frequency.	Feb 12, 2011 11:11 PM
742	Only by a note from a Dr.	Feb 12, 2011 11:30 PM
743	Covered in prior sections	Feb 12, 2011 11:43 PM
744	As Often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 12, 2011 11:56 PM
745	never	Feb 13, 2011 12:36 AM
746	The State has deducted hours 3 times in my case because my caregiver is living with me. I think they should stop deducting n eliminating hours for IHSS	Feb 13, 2011 12:37 AM
747	Bi-weekly.	Feb 13, 2011 12:38 AM
748	Ongoing support as needed	Feb 13, 2011 1:23 AM
749	minimum of 10 hours per week	Feb 13, 2011 1:31 AM
750	Should be done at least once a week for 3-4 hours a week; depending on the consumer and their needs.	Feb 13, 2011 1:52 AM
751	read the previous answer	Feb 13, 2011 2:41 AM
752	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 13, 2011 3:43 AM
753	Determined by the specialist.	Feb 13, 2011 4:22 AM
754	As needed for each individual	Feb 13, 2011 5:09 AM
755	Depend on their condition.	Feb 13, 2011 5:11 AM

2. Suggested service standards about how often a specific service should be

	Response Text	
756	Services should be provided at the time there is a need. If a person has a problem getting up in the morning to get to a workshop or employment, maybe they need morning help. Some need guidelines for grocery shopping and healthful meal planning. Clients with diabetes especially need help because this is very difficult to understand and control.	Feb 13, 2011 5:15 AM
757	Depends on the ability and need	Feb 13, 2011 5:25 AM
758	as often as needed the point here is to make sure they support themself that way they could feel good about themself and start taking care of them self with no more help from you or yes even the goverment. The more people you help stand on there own the better for all.	Feb 13, 2011 5:58 AM
759	Sevice should be provided as needed; from several hours a week to 24/7.	Feb 13, 2011 7:52 AM
760	Services are provided in the same manner; QR's are taught to be Individuals and learn how to be independent with minimum paid support and that's the way they want it; and the way the California and taxpayers want.	Feb 13, 2011 7:58 AM
761	Assigned regional center caseworkers should be involved in the moving and planning stages of the SLS process and complete an observation of the residential unit prior to a client moving in.	Feb 13, 2011 8:11 AM
762	A living situation should be provided for life if needed. A supported living situation allows individuals with disabilities to live in our communities	Feb 13, 2011 1:48 PM
763	not sure	Feb 13, 2011 3:41 PM
764	24/7	Feb 13, 2011 3:54 PM
765	When necessary	Feb 13, 2011 4:12 PM
766	Our son receives 5 hours a month in Psycho/Social Skills. He tries to practice verbal Psycho/Social Skills in various situations but understanding people comes from the sessions. It would be unwise to cut into the 5 hours.	Feb 13, 2011 5:51 PM
767	As needed.	Feb 13, 2011 5:53 PM
768	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 13, 2011 6:50 PM
769	As needed for the client's success.	Feb 13, 2011 7:07 PM
770	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 13, 2011 7:14 PM
771	daily support services around money food shopping medical hygience	Feb 13, 2011 10:17 PM
772	as determined by the Lanterman Act	Feb 13, 2011 10:32 PM
773	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 13, 2011 10:35 PM
774	Social workers should work with there clients once every 3-6months depending on the need.	Feb 13, 2011 11:51 PM
775	depends on the consumers ability	Feb 14, 2011 12:16 AM
776	This is appropriately determined by the IPP team. No one who is not completely informed about the life, needs, and community supports of the individual should assert any recommendations or limits.	Feb 14, 2011 1:06 AM
777	As often as the IPP team determines is necessary, as described in the Lanterman Act Sections 4646.5 (a) (4).	Feb 14, 2011 1:48 AM
778	Specific services are matched to needs. If the need exists a service should match.	Feb 14, 2011 1:52 AM
779	completely evaluated on a yearly basis... not just the superficial annual regional center worker visits!	Feb 14, 2011 2:29 AM
780	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 14, 2011 3:25 AM
781	As often as the IPP team determines is necessary	Feb 14, 2011 3:40 AM

Independent and Supported Living Services

2. Suggested service standards about how often a specific service should be

	Response Text	
782	as often as the IPP requires	Feb 14, 2011 4:11 AM
783	Service should reflect what the client wishes to have. Hopefully, the regional center will receive enough funding to meet these client needs which could include: living skills counseling, transportation skills training, assistance in resolving tenant issues, etc.	Feb 14, 2011 5:40 AM
784	There should be a variety of programs for providing such services: some clients can handle a daily program, others would benefit from a shorter daily time period, and or less frequent training/classes. This should be based on individual needs.	Feb 14, 2011 5:45 AM
785	ENTRANCE AVAILABLE TO CONSUMERS ONLY ONCE A YEAR FOR CLASSES THAT MUST BE TAKEN IN SERIES. LIMITED ENTRANCE FOR ANY INDIVIDUAL CONSUMER ALTHOUGH CLASSES WOULD GO ON CONTINUOUSLY. FOR EXAMPLE, CONSUMER MUST PASS CLASS "A" BEFORE PROGRESSING TO CLASS "B" , THEN ON TO "C", ETC. IF FAILS ANY OF THEM, RE-ENTRANCE COULD NOT BE DONE UNTIL THE NEXT YEAR.	Feb 14, 2011 7:15 AM
786	We usually attempt to evaluate the need every six months at the Annual or Semi-Annual reviews.	Feb 14, 2011 1:53 PM
787	Mon - Fri 9 - 5 PM	Feb 14, 2011 2:35 PM
788	depends on the individual	Feb 14, 2011 3:13 PM
789	WHENEVER IS NEEDED	Feb 14, 2011 3:51 PM
790	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 14, 2011 4:03 PM
791	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 14, 2011 4:27 PM
792	When a Consumer fails to meet a goal after several years of training, that area could become a "Service" area, where a low-cost contractor may be hired. These contractors may include a financial consulting service, a housekeeper, etc.	Feb 14, 2011 4:29 PM
793	depends of their disability	Feb 14, 2011 4:51 PM
794	Daily.	Feb 14, 2011 5:01 PM
795	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 14, 2011 5:05 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
796	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 14, 2011 5:26 PM
797	As needed, depending on the independence of an individual.	Feb 14, 2011 5:27 PM
798	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 14, 2011 5:46 PM
799	The number of support hours authorized should be dependent on the needs of the person and how much they agree to participate.	Feb 14, 2011 5:56 PM
800	Follow IPP to meet consumers' individual needs.	Feb 14, 2011 6:08 PM
801	Services should be provided as often as is necessary to make sure consumer has supports needed to live independently.	Feb 14, 2011 6:09 PM
802	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 14, 2011 6:19 PM
803	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 14, 2011 6:24 PM
804	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 14, 2011 6:27 PM
805	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 14, 2011 6:29 PM
806	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 14, 2011 6:30 PM
807	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 14, 2011 6:30 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
808	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month.	Feb 14, 2011 6:35 PM
809	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4).	Feb 14, 2011 6:38 PM
810	As often as needed	Feb 14, 2011 6:56 PM
811	When there is a need from an individual and or family especially if there is harm to themself or family members,	Feb 14, 2011 6:56 PM
812	as needed per disability requirements.	Feb 14, 2011 7:03 PM
813	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 14, 2011 7:08 PM
814	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 14, 2011 7:23 PM
815	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5(a)-(d)	Feb 14, 2011 7:25 PM
816	Based on the needs of the consumer as determined by the IDT team	Feb 14, 2011 7:31 PM
817	should group the people who need these service in a close location, not everywhere in the city. so, it can minimzie the admin cost and running cost.	Feb 14, 2011 7:44 PM
818	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 14, 2011 7:47 PM
819	I suggest no change.	Feb 14, 2011 7:57 PM
820	This service should be provided as long as it is necessary and effective for the consumer.	Feb 14, 2011 7:57 PM
821	one or two times per month	Feb 14, 2011 7:58 PM
822	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 14, 2011 8:05 PM
823	Staff to check on them weekly	Feb 14, 2011 8:24 PM
824	Depends on need. A statewide system can be developed to establish levels of support. SLS fees are escalating because the most difficult clients are being "funneled" into SLS because no care home or other living situation will work. Developing SLS homes for the most difficult could be a way to reduce cost.	Feb 14, 2011 8:31 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
825	The service must be continuous and provide for transitions that can arise from a variety of issues. Regional center should maintain lists of vendors, facilities and consumers and be prepared to make the required pairings to meet the needs of the facility owners or vendors as wells the clients in a timely manner (match consumers waiting for independent or supported living with facilities and vendors as soon as there is availability).	Feb 14, 2011 8:49 PM
826	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4).	Feb 14, 2011 9:00 PM
827	As needed based on individual. It might be daily or weekly.	Feb 14, 2011 9:20 PM
828	ILP or ILS	Feb 14, 2011 9:40 PM
829	As often as IPP team determines necessary. This of course, may be a lifetime commitment in order for the individual to successfully live independently.	Feb 14, 2011 9:55 PM
830	begin with daily help, and graduate to weekly and then monthly	Feb 14, 2011 9:57 PM
831	only a certain number of consumers and the case managers would've have them followed for a specified time before placing others in ILS	Feb 14, 2011 9:58 PM
832	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 14, 2011 10:19 PM
833	ILS- range from 5-35 hours per month SLS- Mimimum 1 hr. per day to maximum of 24 hour care.	Feb 14, 2011 10:36 PM
834	This needs to be determined by the IPP team as described in theLanterman Act Section 4646 (a)-(4).	Feb 14, 2011 10:38 PM
835	On-going	Feb 14, 2011 10:38 PM
836	as needed.	Feb 14, 2011 10:57 PM
837	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 14, 2011 11:05 PM
838	1. Students should be educated on ILS and SLS services. They should go through classes that demonstrate their ability to be independent and not a danger to themselves. Have students participate in a 2-3 week apartment experience. 2. Right now any client that wants ILS and SLS are supposed to get it. This is dangerous and too costly for poor outcomes. 3. How often a service is provided should depend on the degree a client needs assistance. There should be a rating scale	Feb 14, 2011 11:33 PM
839	There needs to a assesment that all providers needs to use to determine if a consumer is ready to begin independent living services or add more services to meet their independent living goals. All vendors need to provide the same services to consumers. The process or program a vendor uses to provide the same services should still be left to the vendor to chose.	Feb 14, 2011 11:42 PM
840	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 14, 2011 11:50 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
841	No comment	Feb 15, 2011 12:03 AM
842	As needed based on their plans	Feb 15, 2011 12:06 AM
843	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 15, 2011 12:19 AM
844	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 15, 2011 12:21 AM
845	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 15, 2011 12:43 AM
846	Services must be tailored to individual need. ILS - services should not exceed 60 hours per month. Supported Living - services may be available for 24 hour care; however, the consumer may be required to share supports with a roommate in order to ensure a cost-effective service delivery model.	Feb 15, 2011 1:03 AM
847	The disabled who need home support and ILS need this to live lives of dignity. The standards should be developed with the consumers support team and based on the spirit and letter of the Lanterman Act.	Feb 15, 2011 1:12 AM
848	As often as needed.	Feb 15, 2011 1:28 AM
849	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 15, 2011 1:32 AM
850	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 15, 2011 1:38 AM
851	The baseline should be the amount of time needed to accomplish set goals. It should not be based upon how many hours the staff want to check in on someone, or how many days the consumer "wants" to see the staff. The goals which are reached (grocery shopping, meal prep, etc.) should be monitored, not have the staff keep doing the same things with the consumers.	Feb 15, 2011 1:41 AM
852	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 15, 2011 1:53 AM
853	365 days	Feb 15, 2011 1:53 AM
854	Services should reflect "reasonable & customary" standards offered in the "typical" community.	Feb 15, 2011 1:57 AM
855	??	Feb 15, 2011 1:57 AM
856	Until it is not needed	Feb 15, 2011 2:03 AM
857	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 15, 2011 2:29 AM
858	Determined on an individual basis if a person needs full-time or part-time card.	Feb 15, 2011 2:45 AM
859	SEVEN DAYS A WEEK	Feb 15, 2011 2:53 AM
860	As often as the IP team determines is necessary, as described in the Lanterman Act.	Feb 15, 2011 3:21 AM
861	based on medical necessity; diagnosis	Feb 15, 2011 3:24 AM

2. Suggested service standards about how often a specific service should be

	Response Text	
862	As needed	Feb 15, 2011 3:31 AM
863	over 21 years old throw their lifetime.	Feb 15, 2011 3:37 AM
864	These services should be provided based on the indiduals personal requiements and needs. The amount of services is directly related to the needs of each individual.	Feb 15, 2011 3:44 AM
865	See the Lanterman Act!!	Feb 15, 2011 4:08 AM
866	As often as needed.	Feb 15, 2011 4:23 AM
867	Every hour needs to be justified.	Feb 15, 2011 4:36 AM
868	Two, Three times a month	Feb 15, 2011 4:54 AM
869	It is too hard to have a service standard. Everyone has different needs. Some need more (those with behaviors, live-in aid, total supervision) and some need less (those who are very independent).	Feb 15, 2011 5:29 AM
870	see comments on Behavior services	Feb 15, 2011 5:41 AM
871	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 15, 2011 6:06 AM
872	as often as individual needs to complete goals.	Feb 15, 2011 6:29 AM
873	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 15, 2011 6:32 AM
874	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4).	Feb 15, 2011 6:36 AM
875	depends on severe level, from couple of hours a day to full time care	Feb 15, 2011 7:05 AM
876	Those who are willing to be trained in technology to access: 1. Visual, auditory, or tactile schedules posted mentor outside the home 2. Telemedicine consults 3. Visual or auditory mentoring and check-in via teleconferencing 4. Use credit cards and supervised wire transfers for personal attendants 5. Use grocery and meal delivery services	Feb 15, 2011 7:18 AM
877	as o;ften as needed to meet the needs of consumer	Feb 15, 2011 7:29 AM
878	Again determined by the needs defined through an independent assessment.	Feb 15, 2011 7:33 AM
879	the amount of suppot needed by a consumer varies. once again an assesment would be beneficial.	Feb 15, 2011 8:24 AM
880	Depends on the child needs.must be assessed by a professional.	Feb 15, 2011 12:09 PM
881	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 15, 2011 3:45 PM
882	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 15, 2011 4:06 PM
883	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 15, 2011 4:23 PM
884	Therapist should visit home three- four times a week to make sure that the consumer is able to live indepenadntly by taking care of themselves.	Feb 15, 2011 5:09 PM
885	I'm not exactly sure what this means, but if the question is about the amount of time necessary, then, of course, in order to live one must be supported throughout the day and night and those hours must be determined by the extent of the disability, or better said by the amount of support needed to establish a life of one's own. This makes this a highly variable proposition, as some people will require 24/hr a day support and others will require less.	Feb 15, 2011 5:24 PM
886	Continuation of current standards	Feb 15, 2011 5:57 PM
887	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 15, 2011 6:01 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
888	See above.	Feb 15, 2011 6:04 PM
889	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 15, 2011 6:27 PM
890	If they need a lot of help, they should have daily help. It should be on a sliding scale.	Feb 15, 2011 6:34 PM
891	As often as the IP team determines is necessary, as described in the Lanterman Act.	Feb 15, 2011 6:34 PM
892	as needed.	Feb 15, 2011 6:56 PM
893	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 15, 2011 6:58 PM
894	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 15, 2011 6:59 PM
895	Close liaison with family and professionals. Clinical psychologist, behaviorist etc.	Feb 15, 2011 7:01 PM
896	Placing limits on these services is detrimental to the development of our kids.	Feb 15, 2011 7:11 PM
897	For ILS, the number of support hours authorized should be dependent on the needs of the person. It is expected that the number of hours authorized on an ongoing basis would not exceed 20 hours per month. Independent living support services should be time-limited (e.g., no more than a year) for consumers living with their families and preparing to transition into their own home or apartment.	Feb 15, 2011 7:13 PM
898	weekly to monthly depending on the service	Feb 15, 2011 7:16 PM
899	Ongoing.	Feb 15, 2011 7:31 PM
900	The services should be available as needed	Feb 15, 2011 7:41 PM
901	The services should be provided on a daily basis for as long as the individual has need for them.	Feb 15, 2011 7:46 PM
902	A consumer should receive 12 hours or less a day in needed services.	Feb 15, 2011 7:51 PM
903	Allow services to adults who are living at home with family members. Many services have been denied to adults living with family members. This can save money.	Feb 15, 2011 7:54 PM
904	See suggestions for Behavior services and Day programs	Feb 15, 2011 7:56 PM
905	As often as the IPP team determines necessary, as described in the Lanterman Act Section 4646 (a) (4).	Feb 15, 2011 7:56 PM
906	They should have access to activities and places where they can have some help and support everyday, according with their level of independence.	Feb 15, 2011 8:17 PM
907	Foe Indpendent Living and SLS the service should be offered and available whenever a client chooses to have that kind of life.	Feb 15, 2011 8:19 PM
908	SLS should not be 24/7, ILS should be limited to 10-15 hours a week, rest of hours should be IHSS/personal assistant.	Feb 15, 2011 8:28 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
909	Monitoring by consumer representatives.The providers have become warehouse fund users that again gather money rather than help clients. The individual perosn rarely shows up and if they are good they dont stay on with company!	Feb 15, 2011 8:52 PM
910	As often or as long as the IPP team decides. In my area, the RC says ILS can only be provided if the individual will live on their own within 6 months. I believe it is difficult to say for certain that an individual will be able to live independently within 6 months if they have not received ILS services yet.	Feb 15, 2011 9:01 PM
911	As long as needed. In this case we are talking about life long support. The alternatives are not acceptable. What is needed is a look at providing alternative housing opportunities to fit all clients needs from group home to Level 2 and up. For some reason the least amount of residential services are in the Level 2 arena. These are the folks who know what life can be about, but need more assistance and monitoring than the occasional check in. Their disabilities also make them the most vulnerable since they are most likely to be out in the world without the executive functioning skills needed to survive. Regional Centers seem to believe that ALL clients should live in the least restrictive environment, which in many cases leaves them isolated without social skills or social network to maintain a healthy lifestyle. We all like to share with others we consider to be "like us" not as outcasts or always being misunderstood or excluded.	Feb 15, 2011 9:02 PM
912	There should be separate services offered for both low & high functioning individuals.	Feb 15, 2011 9:18 PM
913	See above	Feb 15, 2011 9:22 PM
914	AS NEEDED AND DEPENDING ON LEVEL OF DISABILTY AND FAMILY SUPPORT	Feb 15, 2011 9:36 PM
915	Services should be provided as often as needed, as determined by the IPP team.	Feb 15, 2011 9:47 PM
916	As often as the IPP team determines is necessary, as described in the Lanterman Act 4646.5(a)(4)	Feb 15, 2011 9:59 PM
917	Standard: Frequency of services shall be defined by the IPP process.	Feb 15, 2011 10:06 PM
918	The goal of Independent Living is just that, to help the disabled person get the devices and services needed to live more independently. Sometimes a service dog can be provided for a person for a need other than vision or blindness. I know a lady who has balance problems and her dog enables her to walk. A specific service should be provided as an ongoing basis, as needed. E.g., it makes no sense for a health provider to allow counseling only once or twice monthly (e.g., Kaiser), especially when a patient with mental disabilities is released from the hospital and still is in a crisis mode. Counseling should be at least weekly for a period of time until the patient is stabilized. Most private counselors counsel their clients on a weekly basis.	Feb 15, 2011 10:07 PM
919	As often as the IP team determines is necessary, as described in the Lanterman Act.	Feb 15, 2011 10:31 PM
920	As often as the IP Team determines is necessary. See Lanterman Act.	Feb 15, 2011 11:17 PM
921	I think a service should be provided as much as that person needs it.	Feb 15, 2011 11:21 PM
922	8 to 12 hours/day MAX unless care provider is live-in and will be considered a natural resource for the overnight.	Feb 15, 2011 11:24 PM
923	Customized supports based on the needs of the individual.	Feb 15, 2011 11:25 PM
924	SLS can be for life, ILS a 2 year time trial, Try to taper support in areas where consumers are gaining independence. Do not pay for friendship...	Feb 15, 2011 11:29 PM

2. Suggested service standards about how often a specific service should be

	Response Text	
925	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 15, 2011 11:33 PM
926	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 16, 2011 12:00 AM
927	refer to IPP process, and ISP provided by sls/ils agency	Feb 16, 2011 12:01 AM
928	As needed to ensure the continued appropriateness of such a service for the person receiving it.	Feb 16, 2011 12:03 AM
929	As needed by the person.	Feb 16, 2011 12:14 AM
930	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 16, 2011 12:19 AM
931	So long as an individual is happy in the living situation -- he/she should remain in it. The concept of progress is not really relevant. The question is does the individual want to live independently or with support, is he/she happy in that situation, does it meet his basic safety and health needs.	Feb 16, 2011 12:31 AM
932	determined by need of person but should not be too extensive for those who really can function with a little support	Feb 16, 2011 12:42 AM
933	THESE SVCS HAVE TO BE 24/7, 365 DAYS A YR.	Feb 16, 2011 1:14 AM
934	WHEN EVER POSSIBLE	Feb 16, 2011 2:19 AM
935	As needed	Feb 16, 2011 2:28 AM
936	I meet with my ILS Instructor about twice a week for about 2 hours at a time. I would like to meet with my ILS Instructor twice a week for 3 hours at a time. I am currently enrolled in ILS classes: Anger management class, Diabetes Class, Self Esteem Class, and Computer class. I attend the classes once/week for each class. Anger management class is 1.5 hour, Diabetes class is 1 hour, Self Esteem Class is 1 hour, and Computer Class is 1 hour. I like the length of my classes but I would like to be in an additional class: Reading class. I think that any one with a developmental disability should be able to take ILS classes and receive instruction from ILS Instructor on a weekly basis.	Feb 16, 2011 2:41 AM
937	WHEN REQUESTED BY THE PERSON WHOM SERVICES WOULD BE PROVIDED FOR.	Feb 16, 2011 2:47 AM
938	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4)	Feb 16, 2011 3:04 AM
939	Service providers should submit a program plan for approval and vendorization through Regional Centers.	Feb 16, 2011 3:14 AM
940	Up to 24 hours per day	Feb 16, 2011 3:53 AM
941	Dependent on the need 1-5 x a week.	Feb 16, 2011 3:55 AM
942	As often as needed.	Feb 16, 2011 4:29 AM
943	As often as the IPP team determines is necessary, as described in the Lanterman Act Section 4646.5 (a) (4)	Feb 16, 2011 4:47 AM
944	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 16, 2011 5:05 AM
945	As needed. This need should be determined by the consumer with input from his/her service coordinator and interested family.	Feb 16, 2011 5:17 AM
946	each case varies. needing 5-12 hours per week	Feb 16, 2011 5:19 AM
947	Daily	Feb 16, 2011 5:29 AM
948	As often as IPP team determines is necessary as described by The Lanterman Act	Feb 16, 2011 5:31 AM
949	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 16, 2011 5:31 AM

2. Suggested service standards about how often a specific service should be

	Response Text	
950	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 16, 2011 5:41 AM
951	Depending on the severity of the disabilities services would be required from several hours a day to 24/7 care.	Feb 16, 2011 5:41 AM
952	As often as the IPP team determines is necessary, as described in The Lanterman Act Section 4646.5 (a) (4).	Feb 16, 2011 6:10 AM
953	as often as needed by the consumer provided the amount of services is less than the cost to house an individual in an adult residential facility.	Feb 16, 2011 6:11 AM
954	Depending on consumer's independent needs and requirement. Is a vague statement however, Developmental Disabilities are case by case of consumer's needs. My hope (of a perfect world) is to have more in depth one on one personal instruction. This I understand would be just too costly but, there must be a creative way to have this idea be realized.	Feb 16, 2011 6:48 AM
955	As needed by the Consumer to allow for 100% "life inclusion"	Feb 16, 2011 7:09 AM
956	none	Feb 16, 2011 7:38 AM
957	According to the IPP process.	Feb 16, 2011 7:51 AM

3. Suggested service standards about how to make sure the services provided

	Response Text	
1	Quarterly reports	Jan 28, 2011 12:57 AM
2	Quarterly or semi-annual review. Monthly visits by supervisors.	Jan 28, 2011 1:06 AM
3	IPP, progress reports, visits to consumer	Jan 28, 2011 1:10 AM
4	Balancing	Jan 28, 2011 1:10 AM
5	if the services meets the needs of the individual then it is useful and effective;	Jan 28, 2011 1:13 AM
6	If the consumer is happy that is the indication of the usefulness and effectiveness of the service.	Jan 28, 2011 1:13 AM
7	oversight, goals & objectives	Jan 28, 2011 1:16 AM
8	Services should be monitored and reviewed on a semi-annual basis to mark progresss on IPP goals.	Jan 28, 2011 1:19 AM
9	INDIVIDUAL CHOICE BUDGET	Jan 28, 2011 1:26 AM
10	should be based on how well the individual being served is maintaining quality of life. HOWEVER, if a ILS or SLS provider supports a individual with either behavioral excesses or deficits, the should be mandated to either have on staff or on consultation a professional with expertise in behavioral support	Jan 28, 2011 1:37 AM
11	ICB	Jan 28, 2011 1:51 AM
12	Staffing should be reduced over time so that there is never constant 1:1 staffing-consumer should be able to access community or be by themselves in their own living situation without staff for at least several hours.	Jan 28, 2011 1:55 AM
13	Outcome evaluation	Jan 28, 2011 2:05 AM
14	Develop sandards for all regional center to follow the most cost effective model per regulation.	Jan 28, 2011 2:10 AM
15	see WAPADH	Jan 28, 2011 2:13 AM

3. Suggested service standards about how to make sure the services provided

	Response Text	
16	SLS is wonderful. I have seen clients with behavioral problems completely change as a result of living in their own homes, with freedom, choices and dignity. Suddenly their behavioral issues disappear. I have see people's health improve dramatically when they can choose and prepare their own food. Providing employment and community inclusive opportunities to people is so much easier when we don't have to deal with liscenced group homes, with their strict and inflexible standards that prevent people from staying home when they are sick, getting help with showering and hygiene, and flexible staffing that allows for non-standard day program hours.	Jan 28, 2011 2:18 AM
17	There should be a review team that does unannounced visits to homes, cross referencing service records to verify services are being provided. Services should be generated by a program plan. History, along with current status, and future goals should be provided annually. There needs to be a plan to train and minimise services for those who are able to learn independence. For ILS, staff should work themselves out of a job :) For SLS some can share staff for specific services, cutting down on costs. However, when a consumer becomes elderly and desires to stay in their home, services and supports should increase, to meet their individual need!	Jan 28, 2011 2:20 AM
18	Having a clear and concise plan on which skills are being developed and provide monthly progress notes to regional center to ensure service delivery is consistent with ISP goals and obj.	Jan 28, 2011 2:37 AM
19	one one should recieve more funding compared to other DD's.	Jan 28, 2011 2:37 AM
20	ipp goals! and every 4 months we can figure out if we are happy with how things are going.	Jan 28, 2011 2:39 AM
21	Oversite by the case worker or family through quarterly meetings and unannounced visits along with feedback by the consumer, staff, and family in the meantime.	Jan 28, 2011 3:01 AM
22	provided an individual succeeds with their choice of living arrangements ..consumer is happy and healthy...	Jan 28, 2011 3:12 AM
23	as currently provided	Jan 28, 2011 3:17 AM
24	Assesments	Jan 28, 2011 3:33 AM
25	At least quarterly meetings with the circle of support to ensure the service is still necessary and useful. Reducing supports should be a 'consideration' at each review.	Jan 28, 2011 3:35 AM
26	Lanterman Act. Needs of the consumer as written in the IPP	Jan 28, 2011 3:45 AM
27	Service providers that offer these services should only exist if they are doing a good job.. Families of disabled loved ones visit and make decisions on the placements..	Jan 28, 2011 3:47 AM
28	Functionality and safety in home and community should be a gage. Behaviors and mental capacity are definite factors in determination. Incident reports that increase, and maintain a long history, with little to no decrease show ineffectiveness.	Jan 28, 2011 4:05 AM
29	When goals have been met. When the individual is competent enough to perform tasks on his/her own.	Jan 28, 2011 4:14 AM
30	Alll coaches should have DSP qualifications.	Jan 28, 2011 4:30 AM
31	Checks and balances need to be in place and used on a daily basis. As a facility is required to help and teach and assist the consumer to become more independent in many areas of life and are required to pass QA standards, then the "mentors or counselors" also should be accountable.	Jan 28, 2011 4:40 AM
32	Again, effective communnication, exceptional record-keeping, ISP's, etc.	Jan 28, 2011 4:42 AM
33	Quarterly IPP meetings.	Jan 28, 2011 4:52 AM

3. Suggested service standards about how to make sure the services provided

	Response Text	
34	This should be determined based on the IPP	Jan 28, 2011 5:00 AM
35	cost caps for admin and overhead	Jan 28, 2011 5:19 AM
36	Continuing quarterly reporting to check in on progress to maintan funding under the MediCaide Waiver is important to bring in federal dollars to offset state costs.	Jan 28, 2011 5:30 AM
37	Neither are licensed, poor regulation by Regional Centers for quality. Financial abuse widespread	Jan 28, 2011 5:32 AM
38	Rating of reliability, safety, health by consumer and by guardian or agency responsible for the consumer's person.	Jan 28, 2011 5:33 AM
39	1) Questionnaires for the clients. 2) Surveys/interviews for clients' family members. 3) Initial professional (psychologist, Social Workers', etc.) evaluation followed by a reevaluation every three months.	Jan 28, 2011 5:45 AM
40	Current quarterly face to face meetings for review of progress on IPP and ISP objectives currently required by regulations should be continued for anyone receiving ILS or SLS funded by the regional center.	Jan 28, 2011 6:12 AM
41	As in place for legal citizens.	Jan 28, 2011 6:15 AM
42	Part of an overall Life Plan.	Jan 28, 2011 6:23 AM
43	Services are useful for people who need them. They are effective when a person is safe, healthy, and happy with their lives and their provider agency.	Jan 28, 2011 6:29 AM
44	Ask the consumer and the family/advocates. Is the person happy? Is the person demonstrating that they are safe and comfortable?	Jan 28, 2011 6:43 AM
45	Supervisor visits and evals	Jan 28, 2011 6:44 AM
46	People served should be asked to give input, with whatever communication method possible, including gesture or facial expression. Personal satisfaction should be the primary provider of evaluation information.	Jan 28, 2011 6:44 AM
47	Have each Service Coordinator spend 40 hours in the field of direct services before permitting them to determine who needs services and who doesn't. There are Service Coordinators that have no direct service experience. One example of this is a service coordinator that drove a bus for a day program. She landed a job as a Service Coordinator and has terminated services when consumers have "disrespected" her. It is essential that any Service Coordinator knows what the services actually do and not just read about it in a training manual.	Jan 28, 2011 7:10 AM
48	Standards should be individually tailored, emphasizing outcomes and individual goals based on each persons level of need and skill level.	Jan 28, 2011 7:17 AM
49	Create jobs by having departments come out and check for fraud in using this service.	Jan 28, 2011 7:23 AM
50	Measure how long clients stay in their own homes or in supported living without having to go into more restrictive environments or to live with their parents.	Jan 28, 2011 7:54 AM
51	Frequent meetings, sometimes monthly or even weekly, need to happen to check on what is working and what is not. Written documentation is very important when many different people are involved in the care, so everybody can check a log to find out what has been going on.	Jan 28, 2011 9:07 AM
52	I think there is alot of individuals recieving Independet liveing services whom don't really need the amount of hours they have. A lot of times staff emmbers will go to the clien'ts home and watch TV. Is that a service that needs to be paid?	Jan 28, 2011 1:15 PM
53	Periodic interviews and/or family feedback.	Jan 28, 2011 2:31 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
54	Supported living is often used a last resort placement for violent, aggressive or sex offenders. This is a great misuse of this service	Jan 28, 2011 3:02 PM
55	Enforcement of Title 17 requirements for visits to individuals living independently.	Jan 28, 2011 4:08 PM
56	The goal for independent services needs to be independence. when more money is available they could broaden the abilities of the client served.	Jan 28, 2011 4:36 PM
57	Based upon the client's needs/requirments.	Jan 28, 2011 4:44 PM
58	Review person's living situation and supports at least annually to see if independence is maintained or even increasing.	Jan 28, 2011 4:55 PM
59	At the HCDD group home the service standards are outstanding and the services are useful and effective. My daughter's behaviors have become more managable due to highly trained staff that work in the home. She has began to learn to live a better quality of life. She still had a long way to go, yet, the services are useful and very effective and I am so thankful.	Jan 28, 2011 4:56 PM
60	Quarterly reviews of the service plan. Unannounced visits of supported living. The ability to financially penalize supported living providers who are not performing to standard.	Jan 28, 2011 4:57 PM
61	These standards already exist	Jan 28, 2011 5:13 PM
62	IAW service plan. Again, Reg Ctrs should have a template service plan and it should be standardized across the state. This will help DDS and Reg Ctrs avoid the bad press and mismanagement of funds/programs.	Jan 28, 2011 5:25 PM
63	there should be more oversight for the hours that are being billed each month. several times, consumers state that they saw their ILS worker twice for the month but the ILS agency bills for 24 hours and there is no recourse.	Jan 28, 2011 5:28 PM
64	Outcomes! Are consumers lives managed as well as can be expected? Are finances in order? Is the living environment clean and safe? Is the consumers health needs being met? Service providers should be held accountable to being responsive and available for consumer needs. Is there frequent enough face to face contact to make sure needs are met? Service providers are at the mercy of the consumers willingness to cooperate with assistance that is provided. If consumers do not cooperate or comply then they should not be allowed to live as independently or eventually be denied regional center services altogether.	Jan 28, 2011 5:31 PM
65	Sporadic checks to evaluate the health and safety of the caregivers (if non-family).	Jan 28, 2011 5:31 PM
66	Regional centers need to have the ability to provide consequences to ILS and SLS providers who are not providing services. Ablility to cite or sanction ILS and SLS providers like with residential providers would be appropriate.	Jan 28, 2011 5:31 PM
67	DDS should come up with clear and precise tools to assess the needs of consumer. The current syytem allows each vendor to have heir own tools of assessment and there is no consistancy through out the 21 regional center.	Jan 28, 2011 5:49 PM
68	constant monitoring to ensure that there is no abuse and that resources are allocated wisely	Jan 28, 2011 5:51 PM
69	Investigations and surveys.	Jan 28, 2011 6:10 PM
70	Again based on individual. The persons parents or trustees need to work with the team to make sure needs are met. Everything should be geared towards helping this person work and live independently. All services should contribute directly back to the community	Jan 28, 2011 6:16 PM
71	DDS should set standards	Jan 28, 2011 6:21 PM
72	Keep at the current rates and amounts.	Jan 28, 2011 6:21 PM
73	Ensure a clear distinction between training and support hours. Training should cease when it becomes clear that the client will not master the skill.	Jan 28, 2011 6:23 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
74	ANNUAL REVIEW TO DETERMINE IF PROGRAM IS STILL APPROPRIATE AND EFFECTIVE	Jan 28, 2011 6:42 PM
75	Services should be evaluated for outcomes including fading of necessary support, the evolution of objectives and basic outcomes including length of residence in the home, social comfort, health and vocational effort and achievement.	Jan 28, 2011 6:47 PM
76	quarterly review	Jan 28, 2011 6:51 PM
77	I believe that case managers at the regional center should always inform their consumers of options of SLS or ILS so that they are aware of their options.	Jan 28, 2011 6:51 PM
78	Current meetings with Rehional Support Personell seems to be effetcive.	Jan 28, 2011 6:53 PM
79	Audit and inspect property and living conditions	Jan 28, 2011 6:55 PM
80	rcrc surveys	Jan 28, 2011 7:02 PM
81	Since supported living services should be tailored to each individual, the ID team should be responsible for setting these standards in each particular case.	Jan 28, 2011 7:07 PM
82	Audit, Audit, Audit	Jan 28, 2011 7:09 PM
83	-Person Centered Planning -Trainings amongst team focused on individual needs and disability as seen fit -The program's design and evaluation should be built around the 5 principles of supportive living. -The person's services should be evaluated and monitored quarterly by a representative of regional center.	Jan 28, 2011 7:10 PM
84	Person Centered planning team will meet regularly to determine usefulness and effectiveness. The annual program review will determine this as well. The regional center will continue to review services regularly.	Jan 28, 2011 7:10 PM
85	These standards already exist. We should use them!	Jan 28, 2011 7:10 PM
86	*There are self-evaluation tools used within agencies to ensure that individuals receiving services are satisfied. *Program designs and evaluation tools should be centered around and founded upon the 5 Principles of Supported Living. *The planning teams developed around individuals consistently meet to monitor progress of services. * Regular monitoring by Regional Center is another means of tracking effectiveness of services.	Jan 28, 2011 7:11 PM
87	Services should be based on the five principles of Supported Living. Program designs and program evaluations should be developed using the five principles of supported living. The planning team and Circle of Support should monitor services ongoing. Services should be monitored by the service coordinator through quarterly visits.	Jan 28, 2011 7:13 PM
88	surveys and assessments as appropriate	Jan 28, 2011 7:28 PM
89	Services need to be monitored better by Regional Centers. At this time only the service coordinators are out in the field monitoring the consumer and the service provided. Inland Regional Center has "liaisons"; however they never go out to observe consumers and how their ILS or SLS services are being used. Often it is discovered by service coordinators that hours are not being used appropriately. They is no one monitoring the companies other than the services coordinators. We can only do so much. Need more oversight by the agency.	Jan 28, 2011 7:30 PM
90	These standards already exist.	Jan 28, 2011 7:33 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
91	supervision by Regional Center	Jan 28, 2011 7:42 PM
92	Limit ILS and SLS authorizations to performance based outcomes. Require use of generic resources (IHSS) and separately vendored personal assistance of chore helper and ADL assistance.	Jan 28, 2011 7:43 PM
93	I feel that the consumers using this program should be able to care for themselves. It seems to be a waste of funds to supply a staff person to help with daily living issues such as grocery shopping, cleaning and Dr's appt. If these consumers cannot care for these issues on their own then they need to be in a board & Care place until they can or permanetly.	Jan 28, 2011 7:53 PM
94	Both the Regional Center and IHSS make annual visits and service plans. They do this efficiently and in the client's home. No changes are needed in this process.	Jan 28, 2011 8:02 PM
95	independent assessment by dept rehab.	Jan 28, 2011 8:11 PM
96	Since there are so many more children with autism now than when my brother was born 49 years ago, it is crucial that society set up independent and supported living situations for when they reach adulthood, as in Senior Assisted Living -- Disabled Assisted Living. This then would become the standard, rather than institutions. So Victorian!	Jan 28, 2011 8:18 PM
97	yes	Jan 28, 2011 8:35 PM
98	is there improvement? Is the consumer satisfied? Can this service be decreased without negative results? as far as money management...is the consumer NOT copaying any expenses but he/she just bought a case of beer and 22 cds? we need to remember that our state finances are in a world of hurt	Jan 28, 2011 8:39 PM
99	Quarterly progress reports should be submitted to the regional center by the vendor, and a face to face assessment conducted by the Service Coordinator.	Jan 28, 2011 8:45 PM
100	As long as your department focuses on buying houses for long-term care living arangements for people coming out of the Regional Center Facilities, in say, the Bay Area, then nothing else can be addressed because you spent all the money on a few privilaed individuals, losing site of your responsibility to reach the most with what we have collectively.	Jan 28, 2011 8:47 PM
101	statewide measurable outcomes that every agency would need to assess and submit	Jan 28, 2011 8:49 PM
102	These Standards already exist	Jan 28, 2011 8:50 PM
103	Consumer satisfaction, health and safety.	Jan 28, 2011 8:54 PM
104	Service standard should achieve the promise that people with intellectual and developmental disabilities will have an individualized program plan and access to the services and supports best suited to them throughout their lifetime, to enable them to live an independent, self-directed, and typical life.	Jan 28, 2011 8:56 PM
105	establish a set of standards and outcomes-	Jan 28, 2011 9:09 PM
106	See response to question #1 of this section.	Jan 28, 2011 9:22 PM
107	Always useful and effective if needed by client.	Jan 28, 2011 9:23 PM
108	Data exists - use it	Jan 28, 2011 9:29 PM
109	SLS services should be based on a shared staffing model. 1 - 3 individuals can live together in a home and share their staffing support. Shared staffing should be the priority model used and 1:1 options used only when health and safety or behavioral challenges don't allow for a person to live with a housemate. Share staffing options will be driven by the IPP process.	Jan 28, 2011 9:45 PM
110	Quarterly meetings with ID team where providers report on progress. Individual service plans are developed with reasonable and attainable goals and progress towards goals are reported on quarterly.	Jan 28, 2011 9:52 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
111	Quarterly progress reports and meetings.	Jan 28, 2011 9:54 PM
112	Annual reassessment assures they are being used and effective	Jan 28, 2011 10:00 PM
113	Monthly progress reports by vendors with semi-annual ISP's	Jan 28, 2011 10:11 PM
114	no suggestions	Jan 28, 2011 10:20 PM
115	Interview and report from the consumer, their family and employer.	Jan 28, 2011 10:24 PM
116	Family intervention	Jan 28, 2011 10:26 PM
117	ILP: For regular ILP services, the goals need to be limited to 3 per quarter, with quarterly review. The training goals should be time-limited, and attainable. A maximum of 3 goals helps ensure that the individual may be successful. The goals are determined by the IDT, first starting with the RC Service Coordinator and individual (and/or legal representative), and then to include the vendor. The goals should be determined through the IDT process and should not be vendor-generated. For maintenence ILP services, the goals must be related to long-term health and safety issues such as medication assistance. These services could be reviewed less frequently, (e.g. every 6 months) as they are expected to continue. SLS: The need for SLS needs to be determined first by the IDT including the RC Service Coordinator and individual (and/or legal representative), and then to include the vendor. Often, SLS is a long-term need, but should be reviewed quarterly (unless the identified client requests otherwise) to ensure health and safety. Providers should be discouraged from becoming glorified taxi services and should instead work on training individuals or helping schedule use of bus routes and/or handi-ride, taxis, Medi-Cal funded medical transport, etc. If providers need to transport then they should not be able to bill the full hourly rate for that time, or for wait time at doctors offices. There should be provision for ILP/ILS group training (such as grocery shopping) at a group rate (e.g. a 1:3 ratio).	Jan 28, 2011 10:36 PM
118	Visit/inspect the living facilities on a quarterly basis to ensure services are being properly provided.	Jan 28, 2011 10:39 PM
119	cosumers ILS shuld be supervise closely should that is providing the services and that the person has expierence working with people with desabilities.	Jan 28, 2011 10:45 PM
120	SLS vendor to provide to IDT monthly reports on status of consumer's progress.	Jan 28, 2011 11:00 PM
121	Identify outcomes, measure outcomes, report on outcomes.	Jan 28, 2011 11:05 PM
122	Certified written test required of all employee's of provider agency.	Jan 28, 2011 11:06 PM
123	Quantifiable goals.	Jan 28, 2011 11:07 PM
124	Yearly audits of ILS service providers as well as surveys of ALL parties involved with the client in question. For example: A client who receives ILS services might attend a program, go to school, have a family. All individuals involved with the client's circle of support should be interviewed/surveyed regarding client's abilities, independance and overall acheivments in regards to ILS domains.	Jan 28, 2011 11:10 PM
125	supervisory reviews witha case load of not more thatn 100	Jan 28, 2011 11:19 PM
126	These dhudl be delineated in 17, including how to verify hours are provided and the regional center's responsibility to monitor thes servcices	Jan 28, 2011 11:21 PM
127	Unnaounced visits by RC; Disallow situations where parents can be the SLS vendor.	Jan 28, 2011 11:22 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
128	again, if this was a self-directed model then the individual will determine whether this has been successful, effective, efficient, etc. secondly, the key is the upfront negoiations - you have 5,000 per month this is the best we can do - find more money elsewhere, dds controls with the consumer the upfront issue, but after that it is up to the person and their supporters to figure this out	Jan 28, 2011 11:22 PM
129	Again...enfore the ISP tool. Providers need to be accountable for goals and objectives that show growth from year to year.	Jan 28, 2011 11:47 PM
130	Semi-annual and annual progress reports, semi-annual and annual ID team meetings	Jan 28, 2011 11:57 PM
131	By seeing the result.	Jan 29, 2011 12:00 AM
132	same	Jan 29, 2011 12:06 AM
133	Data collection.	Jan 29, 2011 12:29 AM
134	Two standards are necessary: 1)The person lives in an environment that is safe. 2) The person's health is not in any way in jeopardy.	Jan 29, 2011 12:43 AM
135	Independent Living: One day a week a qualified manager or service provider should visit the location the staff and consumer are working in. Supported Living: House checks weekly by a manager or qualified service provider.	Jan 29, 2011 12:45 AM
136	As long as the person indicates a desire in whatever means used, or interpreted by those that know the person best, or whose family desires the service for the person should be offered the services. If the services are rejected or undesired then the person should have their costs covered by the parent, etc.	Jan 29, 2011 1:04 AM
137	Evidenced based practice	Jan 29, 2011 1:34 AM
138	We need cooperation and consequences for cooperating in this service.	Jan 29, 2011 1:38 AM
139	Reveiw the person helth status .	Jan 29, 2011 1:39 AM
140	this is individual. the whole person assessment completed by qualified staff is essential to determining each consumer's needs with input form the persons who know the consumer best - his/her parents and perhaps his/her siblings. quarterly RC reviews seem to be adequate - in some cases these could be reduced to 2 or 3 per calendar year.	Jan 29, 2011 2:04 AM
141	Standards should have clear guidelines for providers to highlight the special needs of the client, especially protective supervision care to avoid emergency care or long term institutionalized care.	Jan 29, 2011 2:37 AM
142	The living arrangements would be monitored by the caseworker at the Regional Center and any family members.	Jan 29, 2011 3:05 AM
143	When the individual is ablity to demonstrate to this case worker that he has mastered the life skills that he has been taught, it will be time for him to become independent.	Jan 29, 2011 3:05 AM
144	communcation, keep log on consumer daily routine, have this log availabel on-line to comminicated to parents etc.	Jan 29, 2011 3:44 AM
145	third party evaluation	Jan 29, 2011 3:51 AM
146	the services should be provided individually based on preferences and needs; planning team should meet to access effectiveness of services through agency written information provided to the regional centers	Jan 29, 2011 4:30 AM
147	Standardize the circle of support concept for every person receiving SLS services.	Jan 29, 2011 4:42 AM
148	documentation	Jan 29, 2011 4:42 AM
149	Transport pick-up and drop off should be set areas and time. On special trip just for one person.	Jan 29, 2011 4:55 AM

3. Suggested service standards about how to make sure the services provided

	Response Text	
150	periodical evaluation and review	Jan 29, 2011 5:06 AM
151	No one should be cut	Jan 29, 2011 5:09 AM
152	Determination through the IPP.	Jan 29, 2011 6:11 AM
153	Ask the parents.	Jan 29, 2011 6:36 AM
154	Evaluate all employees annually, including evaluation done by the consumer.	Jan 29, 2011 6:42 AM
155	The personal assistants are the most critical part of the supported living system. They should receive ongoing trainings in order to give the best service to each consumer they work with. Daily notes and records are kept and shared with the regional center to ensure that each individual is living a worthwhile and happy life.	Jan 29, 2011 7:45 AM
156	Self repoting to independent third party reporters.	Jan 29, 2011 7:45 AM
157	Since ILS' hours, etc. has been cut, change it all to SLS. Pay one rate to train and give a realistic time limit to do so and then as the support begins increase the rate to a realistic rate.	Jan 29, 2011 7:59 AM
158	See above re information being more readily disseminated and not simply at the discretion of the regional center case manager. For example, I have many families who want someone they know and trust to be a care provider but to be vendorized they are told the person must have a large amount of insurance they don't even know how to locate or pay for. So the system favors large companies with greater turnover to provide such staff but that does not necessarily meet the needs of the families who would be happier developing their own resources.	Jan 29, 2011 8:07 AM
159	How about speaking to clients and providers. Talk to Doctors & Physiologist to insure services are useful. Don’t give the only one monitoring clients 500.	Jan 29, 2011 4:04 PM
160	Any service provider advocates contracted or provided by the consumers Regional Center should be able to advocate for that consumer to their Regional Center; the consumers themselves, Area Boards, families, friends.	Jan 29, 2011 7:28 PM
161	They should be provided by the regional centers that are knowledgeable of the needs and help that a consumer is in need of. Detailed reports done dalily and monthly should be summited to show the progress or problems the consumer is having living independently. Consumers that contine to live at home should be given the options of learning how to live in the community independently. Family members should allow the consumer and instructor the time and ability to work on making own medical appts. handling own money, while be in a safe enviornment.	Jan 29, 2011 7:38 PM
162	Develop standards to monitor and evaluate the successes of the individual is paramount to making sure that the programs are operatiing at a level of excellence	Jan 29, 2011 7:47 PM
163	Make sure it is working for them.	Jan 29, 2011 8:32 PM
164	Set certain triggers to identify if there is a problem area. For example, the services may not be effective for choosing a personal attendant if the turnover is every month. Then further investigation would need to be done to determine why the selections are not appropriate and what can be done to more effectively meet the clients needs.	Jan 29, 2011 9:24 PM
165	Observation of the consumer by the case manager, determining whether the service has resulted in the specified outcome.	Jan 29, 2011 10:15 PM
166	CLOSE EVALUATION BY PROFESSIONALS, CARE STAFF, FAMILIES AND CLIENTS	Jan 29, 2011 11:50 PM
167	Quarterly visits from a regional center caseworker to verify the consumer is living adequately would be helpful.	Jan 30, 2011 12:32 AM
168	Monitoring of the home environment, health and safety in the home Monitor nutritional standards, hygiene of clients and social interaction in the community	Jan 30, 2011 12:42 AM

Independent and Supported Living Services

3. Suggested service standards about how to make sure the services provided

	Response Text	
169	Quality Assurance in Supported Living is almost non existent. The Regional Center conducts an excellent yearly inspection of business operations, but no quality assurance for the consumer. When the CSC visits the home for quarterlies they should be checking to see if the consumer has adequate food and supplies. They should be checking to see if their medication is current and prescriptions are filled. They should be checking to see if medical appointments are sufficient for the consumer's health needs. If the consumer has diabetes are their toenails being cut regularly? We took a client from another program once whose toenails were so long they were wrapped around her toes. This person is diabetic. Her medication hadn't been filled for 6 months. Programs neglect to get routine mammograms and pap smears. I had one consumer who did not get a mammogram in her other program and lost her life due to complications from stage 4 breast cancer. An enlarged heart was diagnosed and her SLS worker put off the cardiologist appt because she was going on vacation. She had severe heart failure and was forced to go to work in the hot sun when the day program threatened to fire her if she didn't show up to work. She ended up in emergency surgery before she ever made it to the cardiologist. She was also forced to walk to the doctor on her skill's trainers day off. More and more I am seeing day programs threaten consumers when they have a medical appointment during program hours. Sometimes it can't be avoided. There needs to be more training on how to recognize a serious illness. I do believe it would have killed this consumer immediately if she had been forced to work another day when she tried to call in sick. She lived for a few more years after that. Numerous consumers have told me that their former skills trainer had them sign for a month of hours when they were only their once or twice. We even had one incident in our own program, which we caught right away by asking the right questions. After that we implemented a call in system for our employees to prevent fraud and refunded the regional center for the hours that we knew were not accurate. I know the CSC's have a huge case load, but simple direct questions from a CSC can prevent a lot of fraud and health and safety issues. ISP: There is no longer an Individual Service Plan for consumers. The Regional Center dictates to us what they want in an ISP. When the first budget cuts were implemented the Regional Center went through and cut any consumer that had more than 40 hours per month. That is an absurd way to make cuts. The consumer I mentioned about with the breast cancer and heart failure was cut from 40 to 30 hours per month. We were working for free to keep her alive and manage her health and safety issues. Budget cuts should be based on the individual, not on whether they have more than 40 hours per month. There are no longer any IDT meetings to determine the consumer's needs or changes to their ISP. There is no longer a circle of support that gives their input. There is no way a CSC can decide that based on a 15 minute quarterly visit. I have seen consumers manipulated by CSCs and their Supervisors to cut the consumer's hours. I would fire an employee of mine if I saw them treat a consumer like that. The consumers no longer have rights. If they are not high functioning enough to appeal or call an advocate they are out of luck. This is the case most of the time in Supported Living. If the Regional Center is going to dictate our reports they should write the reports and be liable for the content. When I have a consumer who weighs 400 pounds and I'm forced to remove nutrition as a goal I am not comfortable creating a report without the nutritional goal. That is an example of what we are being forced to do. The housing goals are being removed. We are told that it is the consumers choice if they want to live in a dirty house. Safety is being removed. We like to have monthly earthquake, fire, and safety reviews with each consumers every month. Advocacy is being removed. We always advocate for a consumers with their family, friends, landlords, and most of all with their physicians and pharmacy.	Jan 30, 2011 1:48 AM

3. Suggested service standards about how to make sure the services provided

	Response Text	
169	Center in addition to the IPP. The ISP cannot be dictated to us and then be looked at as our contract with the consumer when it is really a contract between the Regional Center and the Consumer. They system is broken and needs to be fixed.	Jan 30, 2011 1:48 AM
170	IF REASON FOR THIS SURVEY IS TO FIND OUT WAYS/MEANS TO CUT DOWN ON EXPENSES THEN RESPONSE ON ITEM 1 SHOULD BE CONSIDERED AND GIVEN A THOUGHT. USEFULNESS: CONSUMERS GIVEN A CHANCE TO LIVE ON THEIR OWN. EFFECTIVENESS: REMAINS TO BE SEEN.	Jan 30, 2011 3:59 AM
171	Not every effective b/c Regional Center paid too much.	Jan 30, 2011 4:50 AM
172	Visit us semi-annually to review that we are still able to live independentky with dignity with a caregivers assistance.	Jan 30, 2011 7:09 AM
173	Must have regular meetings with the client and family, at a rate that families agree to, not just an annual IFSP, and really listen to the client, staff, and familiy about how things are going.	Jan 30, 2011 4:59 PM
174	Regular evaluation by a social worker.	Jan 30, 2011 7:38 PM
175	surveys and reviews	Jan 30, 2011 9:12 PM
176	Daily notes/time sheets when time spent with client. Updates/meetings with supervisors/regional centers	Jan 30, 2011 10:42 PM
177	The IPP is supposedly a flexible and meaningful document, but I have seen the same pages and the same goals and objectives for person after person. There is little assessment or re-evaluation of actual need, or attainment of skill, or plan to reduce expenses.	Jan 31, 2011 12:15 AM
178	There should be more objective writing with reports of progress and notes that verify the service is needed.	Jan 31, 2011 1:21 AM
179	Continued assessment by the service provider.	Jan 31, 2011 4:32 AM
180	Prohibit TV or video games as a social activity after the first three visits.	Jan 31, 2011 5:21 AM
181	QA needs to be more involved on a monthly basis with providers.	Jan 31, 2011 2:51 PM
182	No different than prior questions from prior categories. A useful tool of measurement must be used and DESIGNED but person's who ACTUALLY work in the system such as the social worker...NOT THE BRASS---they usually are more concerended with the operations and not how this actually operate.	Jan 31, 2011 3:45 PM
183	The services should be provided as outlined by law. ILS is TRAINING and is TEMPORARY. There are people who have been receiving "training" for 25 years. At that point it is maintenance and should be converted to supported living. I think mandated 2 years for ILS at a maximum of 40 hours per month. If at two years, there is still a need, it should convert to supported living.	Jan 31, 2011 4:19 PM
184	More training for caregivers and a system of communicating the client's needs.	Jan 31, 2011 4:28 PM
185	regional center counselors should know their consumers and be able to gage effectiveness of the ILS/ SLS agency. currently, quarterly meetings are held between the consumer, counselor and ILS/SLS agency. special meetings with the consumer, counselor and ILS/SLS agency are called as needed as well. further, supervisory personnel at ILS/SLS agencies monitor their staff through weekly supervision meetings at which time consumers in each of the ILS/SLS instructor's caseload are discussed with problem-solving, exchange of ideas, etc included. progress reports are submitted by the ILS/SLS agency to the regional center every six months to keep the counselor aware of the consumer's strengths and challenges in terms of ILS/SLS instruction.	Jan 31, 2011 4:45 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
186	The regional centers and case workers do not give referral packets to three vendors so that the consumer can decide which supported living service they would like. Instead the the case workers use the company that they are accustomed to and prefer. This is favoritism and unfortunately this has not been addressed with the case workers and if it has it is not enforced. Our consumers should have a choice of the vendor that they prefer. This is a right that they have that is being taken away from them due to favoritism from the regional centers and the case workers. It would be great if there was a system for referrals that is computerized. The vendor advisory committee could give the referrals to three vendors via the computer with a code to obtain the referral packet taking the delivery of the referral packet out of the case workers hands ensuring the consumer their right of choice.	Jan 31, 2011 5:08 PM
187	The training should yield a level of competence/independence in the area that the client is trained in.	Jan 31, 2011 5:47 PM
188	If siginificant progress is not made, service should be terminated.	Jan 31, 2011 5:52 PM
189	visits by service coordinators, etc. to make sure the client is heathy, happy, house clean, doctors appits attended. etc. By some one who cares and is responsible for their health and safety.	Jan 31, 2011 6:02 PM
190	Annual review by consumer, agency and regional center employee.	Jan 31, 2011 6:09 PM
191	Social workers who get to know the people they are working for should be able to tell you if the service is working. providers who are providing the services should be able to tell you if the person is doing well. the person should be able to tell you if they are doing well. you cut the best quality assurance program you had in favor of a form to fill out- that certainly isnt the way to tell	Jan 31, 2011 6:19 PM
192	Is the consumer safe from injury or medical issues?	Jan 31, 2011 6:36 PM
193	Have a quarterly check up form.	Jan 31, 2011 6:39 PM
194	DDS to conduct surveys to ensure services are meaningful and beneficial and meets the training needs and outcomes Providers to submit semi-annual reports Regional Center should have a QA specialist for monitoring and completes bi-annual assessments on each Agency	Jan 31, 2011 6:41 PM
195	Record activities done at each session. Set goals of things that the clients can learn to do by themselves and record progress of the goals. If the goals is to teach the clients to do more for themselves then they can lower the amount of service that they need.	Jan 31, 2011 6:57 PM
196	Services should be overseen by a Regional Center employee/Service Coordinator.	Jan 31, 2011 7:20 PM
197	CARF accreditation.	Jan 31, 2011 7:26 PM
198	On-going assessments of skills and conversations with consumer and family (if appropriate)	Jan 31, 2011 7:36 PM
199	* Individual being served and or advocates must be present at all planning team meetings to ensure they are satisfied with services. * Agencies should utilize self-assessments to ensure that individuals receiving services are satisfied. * Program designs and evaluation tools should be centered around and founded upon the 5 Principles of Supported Living. * The planning teams developed around individuals consistently meet to monitor progress of services. • Regular monitoring by Regional Center is another means of tracking effectiveness of services.	Jan 31, 2011 8:14 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
200	The overarching indication of usefulness is that the person is able to remain independent, while living a productive, healthy life. It has been determined many times that a person living independently in the community is less expensive to the State than one in an institution.	Jan 31, 2011 8:23 PM
201	Individual's ability to follow through	Jan 31, 2011 8:48 PM
202	a state licensed overseer, doctors, in the field of services that are needed should check to make sure services provided are useful and efective	Jan 31, 2011 9:03 PM
203	Setting specific goals for the resident by the agency and providing consistent follow-up to be sure the goals have been addressed and/or accomplished.	Jan 31, 2011 9:22 PM
204	These standards already exist	Jan 31, 2011 9:30 PM
205	I think that quarterly meetings with consumers should provide an opportunity for them to give feedback on usefulness and effectiveness of services.	Jan 31, 2011 9:32 PM
206	Periodic monitoring, by the Dept. of Developmental Services, to provide oversight as to how the arrangements are benefiting the consumers using these services.	Jan 31, 2011 9:41 PM
207	Quality of life interview, random surveys to participents and families, ask people what they want in their lives. Continue to involve more people and family members in the policymaking process.	Jan 31, 2011 9:52 PM
208	For ILS, there should be some timeline for skill development. In Santa Cruz County, ILS is used as a catch all for any other service, even though the cost for ILS is higher than other services. I was even told that one provider was requested to use his ILS hours to subcontract with a respite vendor, since respite was capped. This means, SARC was paying approximately $35 an hour instead of paying $17 for the actual respite service the person needed. ILS is desparately in need of some controls. Other providers note that they receive ILS hours while they are negotiating for an SLS budget approval. This means that SARC is paying approximately $35 an hour instead of the less than $17 for SLS for every hour of service needed. It seems a little crazy to me.	Jan 31, 2011 9:54 PM
209	Government sponsored agency like Regional Center	Jan 31, 2011 9:56 PM
210	no one size fits all should be determined by the individual;s IPP These standards already exist	Jan 31, 2011 9:58 PM
211	Attendance sheets should be developed for individuals in each organization. If staff working with them provide a service, they write a case note and document the interacton. A set rate can be established and eliminate all the billing paperwork.	Jan 31, 2011 10:16 PM
212	progress reports and consumer feedback.	Jan 31, 2011 10:22 PM
213	No changes	Jan 31, 2011 10:25 PM
214	QMS system	Jan 31, 2011 10:30 PM
215	Can consumer learn and benefit from services? Gauge at 3-, 6-, and 9-month intervals.	Jan 31, 2011 10:31 PM
216	Assessments should be standardized across the state and entered into a statewide database system so historical measures can be taken into perspective. When a client transfers from program to program it is difficult to gage whether a client has been successful or not.	Jan 31, 2011 10:40 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
217	Regional Centers are all but useless to the SLS/ILS system. Very few service coordinators schedule or show up to quarterly ISPs and there are some service coordinators who go a year or more without seeing or hearing from consumers on their caseload. I know of one particular person who has been the service coordinator for a woman I support for over two years. She has never met her, nor has she ever made any attempt to and when I can get her to schedule an ISP with me she does not show up. In fact, when I called to report abuse concerning the person supported, she never returned my calls. Although there are wonderful and caring service coordinators, due to their case loads they have no way of effectively monitoring services for quality. I oversee 54 people with disabilities and I cannot think of a single thing a service coordinator has done to help the people I serve in my nearly nine years as a provider. Basically they funnel money from DDS to us as nothing more than a middle man.	Jan 31, 2011 10:54 PM
218	local regional centers should judge	Jan 31, 2011 11:27 PM
219	Case management notes that show an improvement in living skills	Jan 31, 2011 11:41 PM
220	Evaluations	Feb 1, 2011 1:15 AM
221	Fair evaluation of individual's progress.	Feb 1, 2011 1:20 AM
222	IPP goals are specific to what skills are being taught with delineation of skills which might be life-long maintenance skills, money mgt for example and assistance with healthcare appointments.	Feb 1, 2011 1:21 AM
223	Microboard system to handle all quality/ financial control and accountable to state with frequent reports/audits as needed. The regional center just steals SLS money now and gives it the admin salaries -- Valley Mountain is a example. The RC director--if they want the job-- should be audited regarding their 5, 10 plans of progress for the RCs. If they are still in the 1940s the whole staff should be cleaned out. Better yet--defund the RCs!	Feb 1, 2011 1:43 AM
224	Someone needs to evaluate this and families need to monitor it also.	Feb 1, 2011 3:15 AM
225	1. Regional centers should implement systems to insure quality services from SLS vendors, based on results (not subjective opinion or politics). Current case management outcome reviews are not adequate, due to lack of case management resources. 2. Specific results-based standards should exist to evaluate the quality of services from SLS vendors. 3. Vendors should receive feedback at least annually on their performance.	Feb 1, 2011 4:46 AM
226	monitor over a 2-3 week period	Feb 1, 2011 4:51 AM
227	monitor the provider agencies/organizations for quality, adherence to a code of ethics, any sanctions against a provider agency/organization - and ACT on any such concerns. Check providers training, education and experience and their proven track history to meet an individual's needs.	Feb 1, 2011 4:52 AM
228	monitoring	Feb 1, 2011 5:18 AM

3. Suggested service standards about how to make sure the services provided

	Response Text	
229	the whole theme of supported services is to do for the clients what they cant do for themselves, but if you check out the clients that are out there getting services there are alot of them who really dont belong in such an environment. they need a more structured place where staff are with them when they go on outings. I dont know how many times I see clients out in town with no workers, bothering people who are shoping shoplifting and causing problems because someone thought they were capable of supported living services.	Feb 1, 2011 5:19 AM
230	N/a	Feb 1, 2011 5:24 AM
231	see other answers - same.	Feb 1, 2011 5:59 AM
232	A Regional Center Case Coordinator should be required to confer bi-annually with the consumer on usefulness and effectiveness. However, the consumer, not the regional center or the State, should be the primary determinate of how he/she feels about the program's usefulness and effectiveness.	Feb 1, 2011 7:15 AM
233	See the Hatlen Center.	Feb 1, 2011 8:55 AM
234	Service coordinators, quality assurance. There have been times I have been in clients apartments and homes tht are filthy and they typically are boarders and clients say they meet counselors of regional centers at local eating areas for meetings, over the phone or they make an appointment for meetings and case managers don't show up. No monitor of health and safety if counselor cannot see living arrangements	Feb 1, 2011 9:46 AM
235	A firm standard that requires objectives agreed on by the IPP team are met within the timelines set by the IPP team (which would include the vendor as well as the consumer and case manager). Failure to achieve any objective must be identified and a reason documented by the case manager, and a decision by the team made if the reason is justifiable (e.g. consumer got sick, original objective was just not correctly framed by the IPP team, etc.). If not justiable (e.g. consumer refused to participate, vendor staff failed to provide adequate training, vendor staff missed hours, etc.), then team must either choose a new vendor within "x" weeks or assist consumer to move to a different living situation (depending in reason for objectives not being met) within "x" amount of time. SLS services tend to keep sliding along with little motivation by anyone (consumer, case manager, vendor) to push forward toward effectiveness and growth otherwise. SLS, like every other service category, is not really very performanced or achievement based --- our system says services are performanced based, but without strict rules that have to be enforced, people hate to rock the boat for either the consumer or the vendor. It isn't easy on a consumer to start living on their own and then have to go home or to a care home, but struggling along with half-baked support is dangerous.	Feb 1, 2011 10:46 AM
236	Some type of monotoring needs to be done.	Feb 1, 2011 5:25 PM
237	ILS programs operate under Title 17 regulations. Regualar meetings with families, consumers and others ensure that services are meeting the need of the individual.	Feb 1, 2011 5:48 PM
238	Ask. Is the person happy in their living arrangement? Do they like it better than what they came from? This provides the BEGINNING of an evaluation of effectiveness. Monitor the costs (hopefully this is already done) to make sure they are not excessive for that type of living arrangement.	Feb 1, 2011 6:06 PM
239	Review client's progress annually.	Feb 1, 2011 6:07 PM
240	reguarly meeting, effective communication and feedback from the customer or family member.	Feb 1, 2011 6:18 PM
241	quality assurance standards that are measurable	Feb 1, 2011 6:38 PM
242	same answer as provided for day programs	Feb 1, 2011 6:48 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
243	Ask the consumer and their family members how they feel about the services. The Service Coordinators need to become more involved to assure that the consumers are receiving their services.	Feb 1, 2011 6:51 PM
244	Cost limitations	Feb 1, 2011 6:54 PM
245	Current service standards could be reduced by a maximum of 15%.	Feb 1, 2011 7:25 PM
246	The Regional Center CSC can dictate the objectives for consumers and the track the individuals progress. Annual/Biannual Audits of Programs can insure that the services an organization are supposed to be providing are actually being provided. Individual organizations should be afforded the opportunity to have a management hierarchy so each organization can self police. With all of the financial CUTS over the years, organizations have had to eliminate positions where middle management staff can do unannounced spot checks.	Feb 1, 2011 7:36 PM
247	Keep same	Feb 1, 2011 7:44 PM
248	1) "Purchase of Service Limits" is a more appropriate name than "standards." 2) We oppose statewide purchase of service "standards." 3) There is no "one size fits all" solution. Purchase of service standards for each individual are defined by the IPP. 4) These standards already exist. 5) "Up to but not to exceed the cost to house one individual in a Developmental Center."	Feb 1, 2011 7:56 PM
249	ILS - goals and objectives to be reviewed and reported quarterly (this does not mean that a formal staffing needs ot occur - written reports of progress can be sent).	Feb 1, 2011 8:31 PM
250	Interviews and questionnaires completed by consumers should be collected and reviewed routinely, random inspections should be completed to evaluate quality of service and to ensure progress relating to consumer goals and independence is being made.	Feb 1, 2011 8:54 PM
251	1) "Purchase of Service Limits" is a more appropriate name than "standards." 2) We oppose statewide purchase of service "standards." 3) There is no "one size fits all" solution. Purchase of service standards for each individual are defined by the IPP. 4) For questions 3 & 4: These standards already exist. 5) "Up to but not to exceed the cost to house one individual in a Developmental Center."	Feb 1, 2011 9:15 PM
252	INtroduce them to parents at age 14. To start the selection process.	Feb 1, 2011 9:26 PM
253	Current standards are appropriate.	Feb 1, 2011 9:27 PM
254	A QUALIFED TRAINED PROFESSIONAL TO LOOK IN ON THE CLIENT TO MAKE SURE THEY ARE KEEPING THEIR PLACE CLEAN, EATING HEALTHY MEALS, AND EITHER GOING TO WORK, SCHOOL, OR ATTENDING A FULL TIME DAY PROGRAM.	Feb 1, 2011 9:40 PM
255	review by consumer and family	Feb 1, 2011 9:40 PM
256	Require taht Regional Centers develop and use a scale that assist in determining a percentage of intervention. This could be used to promote effective fading of services, to promote transition from a support to training model, when appropriate.	Feb 1, 2011 9:49 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
257	Reviewed semi-annually.	Feb 1, 2011 10:02 PM
258	This can be done only through contact with the client and experiencing the environment. This is a basic service the Regional Center should be providing	Feb 1, 2011 10:13 PM
259	This is loaded question based on assumption that services get provided to be only measured in terms of what a person without a development disability would expect. Rather, programs should be measured on the ability to add to the quality of life of an individual and if the individual is happy. Not all consumers should be measured by the same standards. If a consumer is able to enjoy life by living in the most independent manner then the service has been provided.	Feb 1, 2011 11:20 PM
260	cleint can email or in person can write out the next time they came over. Can be the addresses that the client would like to go and there off. Save gas and can do a lot if it is local.	Feb 1, 2011 11:25 PM
261	Have one consistent tool, that is used, shared and cross referencd in documents. It could also be helpful when one consumer moves from one agency to another. It establishes a clear baseline of services and a standard definition of goals and possible deliverables. It also makes barriers and obstacles clearly communicated to all parties.	Feb 1, 2011 11:37 PM
262	Annual review, goal setting and interventions.	Feb 1, 2011 11:43 PM
263	See #2 above.	Feb 1, 2011 11:54 PM
264	Perhaps putting together a rubric for all RCs to follow that outlines the types of need and the amount of time that correlates to the need. For example, if a person has been identified as needing assistance/training on grocery shopping, laundry and public transportation, the amount of time alotted for those for all RCs would be X amount of hours.	Feb 2, 2011 12:27 AM
265	ILS and SLS agencies should be audited regularly, and each ILS and SLS arrangement should be audite by the RCs twice a year to ensure the consumer is well cared for.	Feb 2, 2011 12:35 AM
266	I like meeting with my Case Manager with San Andreas Regional Center every six months. I like meeting with her. My meetings help me understand what my progress is and what my needs are. I know what goals I am working on and love to share with my Case manager my own success	Feb 2, 2011 12:53 AM
267	I like meeting with my service coordinator at the San Andreas Regional Center, every 3 months. I like talking about my goals and progress with my service coordinator and ILS Instructor.	Feb 2, 2011 1:00 AM
268	1. Evaluate periodically and if limit time for the training. Ex: Over the next year _____will learn to budget. If the consumer doesn't meet the goal or time frame discontinue the service and just have support.	Feb 2, 2011 1:22 AM
269	Workers should write reports about how the services that are provided were successful with their clients and should be overseen by the regional centers. The workers in the regional centers should maintain ongoing communication with each other. Workers should be invited to regional center meetings with the client.	Feb 2, 2011 2:00 AM
270	Quarterly, semi-annual and Annual reports should help. Also, the organization providing the service is required to give monthly updates. This information should be what support or negate the service hours recommended at the original intake.	Feb 2, 2011 2:36 AM
271	Follow up & meetings set for follow up. Eveyone needs to be involved to make sure everything is working for the benefit of the client.	Feb 2, 2011 2:47 AM
272	Better monitoring is needed.	Feb 2, 2011 3:07 AM
273	Documentation and close monitoring of the facility and the progress of the consumers.	Feb 2, 2011 3:26 AM

3. Suggested service standards about how to make sure the services provided

	Response Text	
274	Anything that would help a consumer live in a least restricted environment (and cheaper than group home).	Feb 2, 2011 3:32 AM
275	Hygiene coaching Cooking coaching Cleaning coaching Job coaching Laundry coaching Begin with a lot of coaching and gradually back off.	Feb 2, 2011 3:44 AM
276	Clear communication between the service coordinators and rentals, apartments, and service providers	Feb 2, 2011 4:48 AM
277	follow up on the success of the consumers by talking with the consumers, their advocates, and their families to see how beneficial and successful the services actually are for them.	Feb 2, 2011 5:03 AM
278	The person needs to be accessing their community. If they are essentially alone and only with staff - this is not living.	Feb 2, 2011 5:15 AM
279	Audits.	Feb 2, 2011 5:21 AM
280	Have an annual IPP with the team & find out. Have a written agreement on who's responsible for what & when it has to done.	Feb 2, 2011 5:33 AM
281	Review the living situation of the kids annually, follow up at age 21 to see how successful the program is vs non-program kids at 21 years old.	Feb 2, 2011 5:48 AM
282	Evaluations yearly. Is the idiviual meeting his or her ipp goals in this setting	Feb 2, 2011 6:00 AM
283	employ a bcba to direct programming.	Feb 2, 2011 6:35 AM
284	Againg, these ILS instructors are not well paid. Check all the Incident reports to have a better idea.	Feb 2, 2011 2:01 PM
285	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 2, 2011 3:35 PM
286	Weekly Review	Feb 2, 2011 4:40 PM
287	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 2, 2011 4:55 PM
288	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 2, 2011 5:51 PM
289	Follow up on a regular basis and talk to the consumer about how it is going. See if the consumer is growing and feeling better about themselves. Talk to them about what they are doing and learning and how active they are in the community and at home and work. etc.	Feb 2, 2011 6:14 PM
290	Involve the person receiving services, a case manager, family, and friends in the assessment.	Feb 2, 2011 6:23 PM
291	Periodic reviews by SC and by RC or DDS.	Feb 2, 2011 6:29 PM
292	a	Feb 2, 2011 6:51 PM
293	Provider services need certification	Feb 2, 2011 7:02 PM
294	Vendors and service providers should be screened, their policies and procedures reviewed and random audit of services provided.	Feb 2, 2011 7:18 PM
295	In general, the case managers of the regional centers seem to be doing a better job of assessing and monitoring supported living arrangements for our disabled community.	Feb 2, 2011 7:29 PM
296	Assessment of needs and goals for increase in independence (if appropriate) established at outset of service; progress reports on goal progress and services provided at least every 6 months; breakdown of hours required (e.g., how many hours were spent helping with budgeting, how many hours for getting around community, etc.).	Feb 2, 2011 7:30 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
297	Agencies that would provide the service should have extensive experience in community safety and support. Agencies should also have a history of exemplary service to consumers in the community. Standards for turn over and staffing should be explored.	Feb 2, 2011 7:41 PM
298	Be specific about what types of support can be provided and for how many hours per week and at what level of pay. Also, if there is another service code that can be used for the support at a lower rate, that should be used first. For example, Tutor. The SLS agency should not provide tutoring at a rate that is higher than the median rate for a tutor under the tutor code. Don't pay the monthly Admin fee to agencies unless the direct service hours they provide to a person exceed a certain amount - say 30 per month.	Feb 2, 2011 8:27 PM
299	If the client starts with a high level of hours and then is able to have their hours reduced then the service is useful and effective.	Feb 2, 2011 9:19 PM
300	vigilance on the part of the consumer	Feb 2, 2011 9:27 PM
301	Weekly monitoring of caseworker	Feb 2, 2011 9:35 PM
302	Usefulness and effectiveness of services should be termined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a)(6)	Feb 2, 2011 9:38 PM
303	periodic monitoring	Feb 2, 2011 9:41 PM
304	monitored by a government or independent agency that has certain standards for that service	Feb 2, 2011 9:42 PM
305	MAKING SURE WITH CHART REGULAR VISITS TO THE PEOPLE HOME MAKING SURE THE THINGS ARE GETTING DONE OFTEN.	Feb 2, 2011 9:43 PM
306	SAME AS PRIOR	Feb 2, 2011 10:05 PM
307	Based upon the individuals needs and choices of how they want to live their life.	Feb 2, 2011 10:05 PM
308	* Progress	Feb 2, 2011 10:07 PM
309	Do not implement a $750 million cut to the Department of Developmental Services (DDS) budget. It is too drastic! We need these services for our kids on the spectrum!	Feb 2, 2011 10:12 PM
310	Usefulness and effectiveness of services should be determined by the IPP team at every IPP meeting, as described in the Lanterman Act. Section 4645.5 (a)(6)	Feb 2, 2011 10:15 PM
311	Please previous topic response....	Feb 2, 2011 10:19 PM
312	Quarterly review by Regional Center	Feb 2, 2011 10:32 PM
313	Research based and meeting IPP goals that honor choice.	Feb 2, 2011 11:04 PM
314	evaluate individual's improvement.	Feb 2, 2011 11:16 PM
315	Require outcome measures for each IPP training objective	Feb 2, 2011 11:48 PM
316	Ask the parents/client. Look at the goals. Are they being met? Progress being made toward being met? Do the client and parents agree with the goals?	Feb 3, 2011 12:06 AM
317	Regular team meetings, consistent communication between team.	Feb 3, 2011 12:19 AM
318	A review team; not just one person.	Feb 3, 2011 12:25 AM
319	Ongoing evaluations for the consumer and provider.	Feb 3, 2011 12:26 AM
320	Choosing a group of people whom are very trustworthy and have the education and experience..	Feb 3, 2011 12:42 AM
321	Same answers as previous pages	Feb 3, 2011 12:45 AM
322	Moniitor often, use of cameras essential	Feb 3, 2011 12:51 AM
323	Goals should be written regarding the services provided. Keep in mind that the safety of a client in his/her community home should be part of the objective of the services.	Feb 3, 2011 12:53 AM

3. Suggested service standards about how to make sure the services provided

	Response Text	
324	How about a REGULAR EVALUATION of the ILS worker's performance as defined by DDS? Again, it would take the program the worker reports to for the evaluation, or the regional center, etc	Feb 3, 2011 12:57 AM
325	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 3, 2011 1:00 AM
326	Checks and balances, audits, interviews, etc.	Feb 3, 2011 1:24 AM
327	monitored by regional center	Feb 3, 2011 1:31 AM
328	Independent party consultant	Feb 3, 2011 1:40 AM
329	The services should be provided by individual educationally qualified and qualified by experience in order to be useful and effective.	Feb 3, 2011 1:49 AM
330	Evaluations by qualified persons such as RC Caseworkers and with the consumers feedback whenever possible.	Feb 3, 2011 1:51 AM
331	six months evaluation	Feb 3, 2011 1:58 AM
332	Develop a plan with all the people who work with the client. Develop some goals that need to be meet in order to meet the criteria of Independent Living.	Feb 3, 2011 1:58 AM
333	Make sure the trainers are trained themselves and has an understanding of what is needed for each individual that is getting the service.	Feb 3, 2011 2:04 AM
334	Again please take the opinions of families who actually visit and observe often. Don't base on one vist by Regional center. Should be unannounced like Licensing Surveys.	Feb 3, 2011 2:24 AM
335	follow thru with client	Feb 3, 2011 4:38 AM
336	check on providers	Feb 3, 2011 5:04 AM
337	evaluated every 3 months, meet as a team, re-evaluated the plan, revise, and make a new plan	Feb 3, 2011 5:12 AM
338	Again, determine if the service is needed and necessary.	Feb 3, 2011 5:32 AM
339	Please, don't just assume all ILS aide has experience. Some were just awful and had such heavy accents my clients said they could not understand what the aide was saying to them. Some just sat around like babysitters and did not engage in a useful, educational way. The aide should have experience of at least 2 years prior to being given the job to watch over and train another adult.	Feb 3, 2011 6:25 AM
340	quarterly evalutaions.	Feb 3, 2011 6:48 AM
341	Same standards as Valley Mountain Regional Center.	Feb 3, 2011 6:50 AM
342	No Comment	Feb 3, 2011 6:52 AM
343	standards, protocols and evaluations	Feb 3, 2011 6:57 AM
344	Monthly reports on clients who have these services.	Feb 3, 2011 7:23 AM
345	The ILS/SLS agency needs to submit quarterly reports to regional center for review.	Feb 3, 2011 3:36 PM
346	If an ILS Instructor, or agency, continues to do a poor and ineffective job, there should be a process to remove a consumer from the agency. The reason for this is that many consumers become attached to their ILS Instructor and do not want to leave the ILS Instructor even if they are doing a poor job. If an ILS agency continues to be ineffective in meeting IPP goals, not following through on appointments, etc., and repeatedly not handing in required paperwork, a regional center should be able to remove consumer from said agency despite protests from consumer.	Feb 3, 2011 3:45 PM
347	By checking to see if the client is independent and able to function independently. My son used to need a lot of monitoring, now he needs less. That shows the service IS WORKING AND THE AMOUNT OF MONITORING IS CORRECT!	Feb 3, 2011 4:32 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
348	Providers with credentials. Personal references also to make sure they are humane, kind, fun. Frequent monitoring. Need to keep teaching self help skills to person with autism. Never give up on anybody growing! Everybody deserves to live and work in an environment with dignity and respect. Facilities need to be clean, safe and have cheerful. Everybody deserves to feel like they are contributing and feel proud of themselves.	Feb 3, 2011 4:46 PM
349	Services should meet needs identified in the assessment.	Feb 3, 2011 4:53 PM
350	Hiring of more qualified care staff and personnel	Feb 3, 2011 4:55 PM
351	Consumer report, regional center monitoring	Feb 3, 2011 5:17 PM
352	Regular reports - possibly visit/activity log.	Feb 3, 2011 5:22 PM
353	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 3, 2011 5:23 PM
354	Train people to learn how to effectively help the child transition	Feb 3, 2011 5:36 PM
355	There seems to be little incentive for providers to decrease their support to individuals or to provide instruction so that consumers are less reliant on the provider. There should be some incentive for increasing real in/interdependence and decreasing the amount of support someone utilizes.	Feb 3, 2011 5:37 PM
356	No Comment	Feb 3, 2011 5:44 PM
357	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 3, 2011 5:46 PM
358	survey of consumer, family member, and/pr care giver	Feb 3, 2011 6:25 PM
359	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 3, 2011 6:29 PM
360	Vendors should be required to submit a monthly progress report with data to reflect how effective ILP services are for individual. Maintain quarterly team meetings and discussion. And an actual program plan for ILP services should be developed much like day programs, CCF's, ICF's, etc.	Feb 3, 2011 6:36 PM
361	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 3, 2011 6:39 PM
362	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 3, 2011 6:50 PM
363	again caseworker needs to check in with guardians	Feb 3, 2011 6:55 PM
364	Should be in accordance with Lanterman Act Section 4646.5(a) (6).	Feb 3, 2011 7:23 PM
365	a yearly followup	Feb 3, 2011 7:46 PM
366	dont know	Feb 3, 2011 7:46 PM
367	Again, as stated in the IPP and reviewed with each new meeting of IPP team	Feb 3, 2011 7:49 PM
368	The burden lies with the home in which the disabled person is living.	Feb 3, 2011 7:54 PM
369	We must focus services on the most needy. Not the most verbal and demanding. Services driven by consumer need but not whim. Maybe you dont want a room mate but fact is we all make compromises to have the best life we can.	Feb 3, 2011 7:55 PM
370	The individual should be allowed to live as independently as possible. This benefits the individual and all of our society.	Feb 3, 2011 8:02 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
371	RCs need leverage to address performance issues with providers way before the de-vendorization option, which will not occur in our current legal climate. Controlling referrals when services are sub-standard is difficult, and can be problematic as the provider can sue for restricting their business.	Feb 3, 2011 8:05 PM
372	Check on families unexpectedly to be sure that the services are actually necessary if you need to.	Feb 3, 2011 8:09 PM
373	Licensing should ALL Be under Dept of Health as it is for Intermediate Care Facilities -	Feb 3, 2011 8:10 PM
374	I am not sure how to make sure these services are useful and effective. However, I do have an observation to share. I used to work in supported living services and it was my observation that I was basically being used as a taxi. The consumers were not really interested in developing more skills, they were interested in having someone drive them to the store, or to the doctor, or to the social services office. This was my observation over the course of a year, working with 10 different consumers on a regular basis. I was unable to utilize the full number of hours they were authorized for because they only wanted me to take them places and then would say they were done for the day.	Feb 3, 2011 8:22 PM
375	Service needs to be monitored closely with liaisons and reports due from service providers. Often times, they just provide company to the consumer but that is not why we pay them.	Feb 3, 2011 8:48 PM
376	Should clearly define between ILS and PAS as well as SLS.	Feb 3, 2011 8:49 PM
377	Measure it's effectiveness multiple times per year.	Feb 3, 2011 8:51 PM
378	oversight evaluations	Feb 3, 2011 8:54 PM
379	Ask the person receiving services. People to check up on the person. Give the person a place to call and say thank you and need help, its not working.	Feb 3, 2011 8:55 PM
380	Parent/consumer/instructor and case worker meetings.	Feb 3, 2011 9:02 PM
381	Make sure there is an abundance of Independent Living and Supported Living Housing opportunities. Plan for an increasing population in this area! Hire many more, high quality, personal assistants and pay them a Decent Living Wage so that they will stay in the profession!!! Certify Professional Personal Assistants. Give them on the job "shadow" training with a supervisor that specializes in disability housing and community supports. More Para Transit-like organizations, Disability Taxi services, etc. so that the usual, depressing 3 hour cross town trip is equal to the time that it takes for everyone else with an abled-body to get from one place to another. Make sure those Para Transit vans are repaired and in excellent condition!	Feb 3, 2011 9:17 PM
382	Services should be reviewed not only on achieving the goal of placement, but also in consideration of the impact of discontinuing a service. Health and safety issues should be paramount.	Feb 3, 2011 9:17 PM
383	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 3, 2011 9:20 PM
384	Set goals, measure if they are being met; review these on a qtrly/semi-annual/annual basis.	Feb 3, 2011 9:38 PM
385	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 3, 2011 9:44 PM
386	n/a	Feb 3, 2011 9:53 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
387	RC Social Worker should review ISP annually to make sure goals and objectives are realistic and relevant and at the services begin provided are supporting the client in reaching those goals and objectives. I believe Social Workers should do more unannounced visits to clients for quality control purposes. Too often SLS providers are "babysitters" and do little work towards the goals outlined in the client's ISP.	Feb 3, 2011 10:15 PM
388	Annual reviews of the effectiveness of the service in relation to other services and the cost-effectiveness.	Feb 3, 2011 10:18 PM
389	check data	Feb 3, 2011 10:19 PM
390	I think that increasing independence is the benchmark of success in supported/independent living. Often, there is not sufficient push in this direction, often for safety concerns or for family desire that their child live a life full of activities. In both cases, the independence of the client (who is an adult) is put second to other concerns. Measures of independence would be: do they now take Whistlestop or the bus for transportation (before they may have been driven by family or counselors), do they now go places alone (even if it is just "safe" places like Special Olympics), have they learned their neighborhood and can they take walks, can they use their stove (if not that, then the microwave, if not that then a hot plate with automatic shut off) to cook for themselves, can they successfully employ IHSS for help in any way, can they grocery shop and bank using the above mentioned means of transportation, etc.	Feb 3, 2011 10:37 PM
391	Usefulness and effectiveness of services need to be determined by the IPP team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 3, 2011 10:45 PM
392	this should be determined by the IPP team at each IPP meeting	Feb 3, 2011 10:47 PM
393	Parents surveys.	Feb 3, 2011 11:12 PM
394	Through quality assurance by the regional center every 2-3 years.	Feb 3, 2011 11:13 PM
395	A case manager should oversee and assess the consumer's ability to live independently.	Feb 3, 2011 11:18 PM
396	Outcomes - how many of these individuals successfully and safely can exist in independent living homes.	Feb 3, 2011 11:34 PM
397	Statewide standards on quality indicators that are shown in an annual evaluation, agency self-evaluation and consumer satisfaction survey. All regional centers should run a weekly purchase of service review team that is made up of service coordinators, program managers and community services staff.	Feb 3, 2011 11:42 PM
398	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 3, 2011 11:44 PM
399	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6	Feb 4, 2011 12:06 AM
400	Paying close attention to the providers notations	Feb 4, 2011 12:11 AM
401	Need to clearly define difference between Independent Living Services and Supported Living Services. ILP services re a specific learning objective need to be time limited...currently see ILP workers 'teaching how to budget and or buy groceries' goes on for years and years. A common 'joke' is that ILP is another word for rides to store, doctor, etc.	Feb 4, 2011 12:48 AM
402	Effectiveness of services should be evaluated quarterly. Services that are not noted to be effective should be discontinued after two documented ineffective quarters.	Feb 4, 2011 12:48 AM
403	regular monitoring	Feb 4, 2011 12:50 AM

3. Suggested service standards about how to make sure the services provided

	Response Text	
404	Should be developed with a multi-disciplinary approach amongs all providers to ensure that the goals of the INDIVIDUAL are being met not that the providers are the primary dictum of what services are offered and when.	Feb 4, 2011 12:53 AM
405	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 4, 2011 1:06 AM
406	Reports provided by the service provider should clearly indicate the objectives worked on or care provided. This should be evident via observation and consumer report as well. Regional Center counselors should provide clear expectations of service providers, with time-limits, as applicable.	Feb 4, 2011 1:08 AM
407	This should be determined at the time of the IPP and updated as necessary by the individual or advocates.	Feb 4, 2011 1:22 AM
408	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 4, 2011 1:52 AM
409	The development of solid and appropriate goals should be the guiding rule for ILS and supported living services. Each team should know and understand their consumer well enough to be able to determine the amount of support each consumer needs. Services should be provided by vendors with commitment, integrity and training who assesses each individual well and determines the hierarchy of which services and goals are needed immediately and which ones can be deferred for the future. Consistency in the level of training as well as avoidance of staff turnover can be improved by continuing the same level of funding or increasing of rates paid to the providers. It is difficult to provide consistency for consumers when there is a high level of personnel turnover. Social workers should learn about providers, training and staffing before recommending an agency to a consumer. A non-profit status and having operated for a long time is not always the best choices for a consumer as well as, making consumers accept services from providers that are tied to housing is also unfair and lends itself to abuse of the systen and waste of money for everyone concerned.	Feb 4, 2011 2:02 AM
410	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 4, 2011 2:07 AM
411	none	Feb 4, 2011 2:09 AM
412	Extensive monitoring, by GGRC, QA and other individuals.	Feb 4, 2011 2:22 AM
413	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 4, 2011 2:49 AM
414	Frequent survey by professional parent and regional center.	Feb 4, 2011 3:11 AM
415	This should be determined by the IPP team as described in the Lanterman Act.	Feb 4, 2011 3:41 AM
416	Parents, professionals and clients should be involved.	Feb 4, 2011 3:52 AM
417	Third party does periodic checks to make sure that the services are useful and effective	Feb 4, 2011 4:00 AM
418	quarterly visits to the individuals home and going over the goals/objectives to see what is actually going on, talking to the individual to see if they are improving and are happy with their service provider	Feb 4, 2011 4:13 AM

3. Suggested service standards about how to make sure the services provided

	Response Text	
419	Again, this is very dependent upon the individual's abilities and the local opportunities. You are not necessarily able to do this with a strict economic model. Think about how important YOUR independance is to YOUR identity and self-worth. It is crucial! Independence for a developmental disabled individual is probably even MORE important to them than you can imagine. They deeply desire to be productive and make their own decisions. It is normalizing and brings great dignity. It is also very important to their loved ones to see the joy in a person's heart when they are able to be more independent. But how do you measure that? Be flexible and not stingy! Be progressive and humane.	Feb 4, 2011 4:42 AM
420	The IPP team, made up of people who know and work with the individual should strive to offer the best possible situation for the individual to live to their full potential.	Feb 4, 2011 4:58 AM
421	Department should reviewed the consumers cases.	Feb 4, 2011 5:27 AM
422	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 4, 2011 6:42 AM
423	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 4, 2011 7:36 AM
424	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 4, 2011 3:17 PM
425	Check with the client via phone and visitation, not just the time card, to make sure clients are not being taken advantage of by their worker.	Feb 4, 2011 4:47 PM
426	detailed logs of services provided	Feb 4, 2011 4:49 PM
427	Same as previous section	Feb 4, 2011 4:55 PM
428	N/A	Feb 4, 2011 5:01 PM
429	The usefulness and effectiveness of services should be determined by the IPP team at every meeting based on the individual needs of the consumer as described in the Lanterman Act	Feb 4, 2011 5:12 PM
430	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 4, 2011 5:16 PM
431	Train the social workers on issues the consumers may face. Make sure they identify problems early on and follow up with effective monitoring and action if problems arise.	Feb 4, 2011 5:21 PM
432	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 4, 2011 5:44 PM
433	Ask the parents how it's going	Feb 4, 2011 5:46 PM
434	At least quarterly Quality Assurance reviews by the RC. These reviews should include consumer feedback, family feedback, conservator feedback, etc.	Feb 4, 2011 6:08 PM
435	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 4, 2011 6:12 PM
436	Observation through phone calls or visits will provide information on whether the client is getting to work on time, eating regularly, wearing clean clothes, being well groomed, and getting exercise.	Feb 4, 2011 6:18 PM
437	Not reducing the budget for supported living services. Drug testing those who are employed by IHSS.	Feb 4, 2011 6:28 PM
438	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6	Feb 4, 2011 6:37 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
439	Services provided should address needs of the client and should be designed to teach a skill. Once skills are taught, services may be decreased. The effectiveness of the service should be measurable by the increased independence and decreased reliance upon support services.	Feb 4, 2011 6:46 PM
440	Usefulness and effectiveness of services should be determined by the IPP team at every IPP meeting as described in The Lanterman Act section 4646.5 (a) (6).	Feb 4, 2011 7:09 PM
441	Feedback from professionals, care givers and family.	Feb 4, 2011 7:17 PM
442	The same as previous #3.	Feb 4, 2011 7:19 PM
443	Review by Regional Center	Feb 4, 2011 7:33 PM
444	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 4, 2011 7:50 PM
445	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 4, 2011 8:15 PM
446	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting	Feb 4, 2011 8:39 PM
447	Services should be determined by the IPP	Feb 4, 2011 8:52 PM
448	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 4, 2011 8:56 PM
449	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 4, 2011 9:19 PM
450	monthly supervisory meetings	Feb 4, 2011 9:36 PM
451	Plan of action, progress notes from each meeting, quarterly review.	Feb 4, 2011 9:43 PM
452	Usefulness and effectiveness of services should be determined by the IPP team at every IPP meeting as described in The Lanterman Act section 4646.5 (a) (6).	Feb 4, 2011 9:55 PM
453	Long tern evaluation is the only way one can tell if the service is usefull or effective.	Feb 4, 2011 10:07 PM
454	Once the person is assessed, provide only those services that are useful and effective for the individual, WITHOUT PARTIALITY. This should not even be an issue.	Feb 4, 2011 10:08 PM
455	IPP process, communication between families, regional centers and service providers.	Feb 4, 2011 10:11 PM
456	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act.	Feb 4, 2011 10:22 PM
457	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 4, 2011 10:38 PM
458	: Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 4, 2011 10:45 PM
459	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 4, 2011 10:56 PM
460	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 4, 2011 11:15 PM
461	As stated above. If a provider cannot produce results then they will be out of business---problem solved.	Feb 4, 2011 11:20 PM
462	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 4, 2011 11:21 PM
463	Interview all related consumers and professionals frequently.	Feb 4, 2011 11:23 PM
464	Set goals, and measure progress (with life skills,community integration, etc).	Feb 4, 2011 11:41 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
465	Non essential administration should be cut, home administrators should also provide direct care.	Feb 4, 2011 11:53 PM
466	Usefulness and effectiveness of services should be determined by the Individual Program Plan (IPP) team at every IPP meeting, as described in The Lanterman Act Section 4646.5(a)(6).	Feb 5, 2011 12:22 AM
467	IPP Team determines if service is useful and effective for consumer. Lanterman Act 4646	Feb 5, 2011 12:23 AM
468	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 5, 2011 12:32 AM
469	Person should be learning skills and beginning to fade from supports until supports are at a minimal, maintenance level - perhaps no more than 75 hours/month.	Feb 5, 2011 12:41 AM
470	same as answer for other proograms and above	Feb 5, 2011 1:28 AM
471	We have more than enogh oversite now. Mosr oversite will just end up costing more money.	Feb 5, 2011 1:30 AM
472	Progress (or lack of) should be well documented and measurable. (Confidentially secured) Consumer feedback should be obtained as part of the process of assessing efficacy of services.	Feb 5, 2011 2:04 AM
473	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 5, 2011 2:19 AM
474	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 5, 2011 3:57 AM
475	Depending on client functioning levels, daily to weekly supervisory visits.	Feb 5, 2011 4:29 AM
476	ISP bi-annual reports / meetings with client's core support system (case manager; significant others; ILS instructor)	Feb 5, 2011 6:11 AM
477	The IPP team will determine how useful and effective the services are. Vendors who fail to perform well will find that their services are no longer being requested.	Feb 5, 2011 6:49 AM
478	Frequent meetings regarding individual's ability to live as independently as possible.	Feb 5, 2011 6:51 AM
479	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act.	Feb 5, 2011 2:47 PM
480	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 5, 2011 5:27 PM
481	Keeping data collection and clear communication between the parent(s) and the service provider.	Feb 5, 2011 5:38 PM
482	same as first set	Feb 5, 2011 6:40 PM
483	not sure	Feb 5, 2011 8:06 PM
484	I oppose POS standards. Please refer to the Lanterman Act section 4646.5 (a) (6).	Feb 5, 2011 8:54 PM
485	Assessment will drive the need of services.	Feb 5, 2011 10:13 PM
486	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 5, 2011 10:55 PM
487	if a person is in need of 24hour care they need to be in a home where there are 4 to 6 people live .then you have live in staff that can care for more that one person .times are hard we all have to give up on some things and living independently is one of them. this would make more jobs for care providers.	Feb 5, 2011 11:28 PM
488	meetings with the inhome staff, day program and Regional Center.	Feb 6, 2011 4:08 AM

3. Suggested service standards about how to make sure the services provided

	Response Text	
489	Regardless of any suggested standards, the consumer, the consumer's parents and/or caregivers and consumer's teachers and other school service providers where applicable must still have input regarding independent living and supported living services, and the entire IPP team, including the above, must retain the ability to determine if the services and supports provided to the consumer are effective.	Feb 6, 2011 5:45 AM
490	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 6, 2011 5:55 AM
491	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 6, 2011 4:35 PM
492	Management supervision and follow up to make sure employees are providing what is needed.	Feb 6, 2011 5:08 PM
493	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act	Feb 6, 2011 6:45 PM
494	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 6, 2011 6:47 PM
495	Monthly meetings with client, support staff and family members (if available). Quarterly meetings with same individuals plus regional center administrator.	Feb 6, 2011 8:11 PM
496	Less paperwork, more meaningful procedures. The state is overrun with meaningless jargon and stupid rules that don't assure jobs are being done.	Feb 6, 2011 8:46 PM
497	periodic reviews of whether benchmarks and goas established ealrier are being met by supervisory staff	Feb 7, 2011 2:26 AM
498	Report to servers the task completed where most help is needed and to follow up daily living style.	Feb 7, 2011 3:42 AM
499	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 7, 2011 5:13 AM
500	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 7, 2011 6:40 AM
501	work closely with guardians, school and work staff train others on how to work with behavior problems to solve them	Feb 7, 2011 6:46 AM
502	The IP Team at every IP meeting, as described in the Lanterman Act, should determine usefulness and effectiveness of services.	Feb 7, 2011 2:46 PM
503	The usefulness and effectiveness of services should be determined by the IPP team at each meeting, per The Lanterman Act.	Feb 7, 2011 3:25 PM
504	Goals need to be realistic and time limited with progress being made and services hours reduced on an annual basis.	Feb 7, 2011 4:28 PM
505	Coordinate with existing programs whenever possible.	Feb 7, 2011 5:16 PM
506	The IP Team at every IP meeting, as described in the Lanterman Act, should determine usefulness and effectiveness of services.	Feb 7, 2011 5:45 PM
507	The IPP team determines the usefulness and effectiveness of services at every IPP meeting, as described in the Lanterman Act ection 4646.5 (a) (6).	Feb 7, 2011 6:21 PM
508	Consumers have to demonstrate the life skills required for living indipendently. This should be srutinized at the time of the annual and semi annual meetings.	Feb 7, 2011 6:55 PM
509	Should be determined at every IPP meeting.	Feb 7, 2011 7:50 PM
510	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 7, 2011 7:53 PM
511	Determined by the family or individual.	Feb 7, 2011 9:23 PM
512	No comment	Feb 7, 2011 9:31 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
513	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 7, 2011 10:06 PM
514	goals are met, support plans are appropriate and meet the needs of the consumer.	Feb 7, 2011 10:37 PM
515	Allow RC's to set the standards in their own communities.	Feb 7, 2011 10:45 PM
516	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 7, 2011 11:12 PM
517	Let the Regional Centers make the decisions regarding program services	Feb 7, 2011 11:13 PM
518	The IPP team should determine usefulness and effectiveness at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a)(6).	Feb 7, 2011 11:15 PM
519	Base on outcomes and performance. Ensure staff have core training curriculum and ensure that the training is paid for by Regional Center. Satifaction Surveys from consumer and family. ISP are a good way to measure progress. Make sure goals are well documented regarding progress.	Feb 7, 2011 11:25 PM
520	Giving the Regional Centers the power, tools (and funds) to create an investigative unit to make sure services are being provided in the most efficient and comprehensive manner.	Feb 7, 2011 11:56 PM
521	The ID Team [CPC, ILS/SLS program coordinator, the PA's, family, etc] meets on an annual basis [or as requested if ppl suspect services need immediate improvement/review] to review the current program and ensure it continues to meet the consumer's need and/or aid in the continued growth and development of the consumer's basic and independent living skills.	Feb 8, 2011 12:13 AM
522	There should be a "watchdog" agency that checks on the each facility at least yearly and visits should be unannounced. Any complaint from the consumer or their families should be investigated immediately. Every facility should have to adhere to all health and safety standards.	Feb 8, 2011 1:00 AM
523	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 8, 2011 1:10 AM
524	Monitor individual by agency or parent/guardian feedback.	Feb 8, 2011 1:24 AM
525	Providers need to be accredited and present 5 letters of recommendation, whhich should be followed up upon to prove authenticity.	Feb 8, 2011 3:55 AM
526	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 8, 2011 4:06 AM
527	Living situations should be visited for quality control at least once a year. If the person can communicate, he should be questioned about how staff are treating him, if he likes his roommate(s), etc.	Feb 8, 2011 4:26 AM
528	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 8, 2011 5:32 AM
529	Again as previously stated.	Feb 8, 2011 6:08 AM
530	The individuals would have to be monitored and documented. There should be counseling provided.	Feb 8, 2011 6:37 AM
531	Quality assurance done by the Regional Center for all service providers.	Feb 8, 2011 7:02 AM
532	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 8, 2011 3:40 PM
533	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 8, 2011 4:26 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
534	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 8, 2011 4:27 PM
535	Routine follow-up with a meeting six months to a year after an IPP. Working directly with the client, their service provider to ensure they are receiving full support. Perhaps have a number clients can call to report when they are not receiving services.	Feb 8, 2011 5:22 PM
536	Annual and semi annual evaluations. Listen to the client, the provider, family, medical professionals, and, if provided, case manager.	Feb 8, 2011 5:33 PM
537	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 8, 2011 5:51 PM
538	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 8, 2011 6:03 PM
539	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 8, 2011 6:10 PM
540	Monthy accounting of money, budgeting.	Feb 8, 2011 7:47 PM
541	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 8, 2011 7:55 PM
542	Reports reviewed by the support group.	Feb 8, 2011 8:40 PM
543	Monitor service providers, involve 3rd party agencies (ombudsman & protective services) to ensure proper care and nurturing environment is provided to an individual.	Feb 8, 2011 8:52 PM
544	Data tracking and review of progress with objectives on a quarterly or semi-annual basis.	Feb 8, 2011 9:19 PM
545	evaluations at least every 3 months	Feb 8, 2011 9:24 PM
546	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 8, 2011 9:31 PM
547	Ask the recipient what he/she would imagine the living situation to be.	Feb 8, 2011 9:43 PM
548	Consumers' skills should be monitored and a level of improvement noted quarterly on their IPP/ISPs. Consumers' progress noted daily by support staff, and charted to see if consumer is actively participating and progressing.	Feb 8, 2011 10:23 PM
549	The IPP process is currently in place. This standard of evaluating the consumer and their programs during the IPP process should continue. Regional center case managers should monitor the consumer progress and need for the program. Reports from the consumer's program should also be incorporated.	Feb 8, 2011 11:20 PM
550	Usefulness and effectiveness of services should be determined by the IPP team at every IPP meeting, as described in the Lanternman Act Section 4646.5 (a) (6).	Feb 8, 2011 11:48 PM
551	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 8, 2011 11:54 PM
552	Not sure.	Feb 9, 2011 12:25 AM
553	I like meeting with my ILS Instructor and I like the classes I am enrolled in through ILS. I wouldn't change anything about my classes. I take a survey each year on ILS services. I like the survey which is provided each year through ILS and I think taking the survey gives me the opportunity to share what I think is useful and effective about ILS. I don't receive a yearly survey from the San Andreas Regional Center, but I think a survey on the regional center would be usefull.	Feb 9, 2011 12:55 AM

3. Suggested service standards about how to make sure the services provided

	Response Text	
554	If an onsite mgr. in a complex accepts the responsibility of checking on or making sure the clients are safe and their needs are met it would save social workers many man hours as a cost savings. Computer records on a safe network is a good way to convey to social workers how clients are doing or report a problem. once again saving many, many man hours of making home visits.	Feb 9, 2011 1:06 AM
555	parents and family should help evaluate.	Feb 9, 2011 1:24 AM
556	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 9, 2011 1:25 AM
557	Answer: Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 9, 2011 1:28 AM
558	Require quarterly reports which describe progress in meeting health and safety, behavioral, and community safety goals.	Feb 9, 2011 1:33 AM
559	same	Feb 9, 2011 2:28 AM
560	Keep progress reports	Feb 9, 2011 3:22 AM
561	I take a survey through ILS agency once/year which evaluates how useful and effective the services are. I like taking the survey each year.	Feb 9, 2011 3:36 AM
562	If the services are useful and effective their need should diminish over time, if the service remains constant or increases we are not achieving independent living we are simply funding more expensive individual living.	Feb 9, 2011 5:39 AM
563	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 9, 2011 5:42 AM
564	Need more quality control & ongoing assessment to see if this is placement for each individual.	Feb 9, 2011 8:46 AM
565	IPP team reviews service for effectiveness and usefullness. ILS teaches independence and documents progress towards goals. It is also cost effective. SLS services need to examined to dertimine if the serviceis useful and effective and cost effective.	Feb 9, 2011 5:19 PM
566	The usefulness and effectiveness of services should be measured by the outcomes for the people served. Services should be monitored by all the IPP team members. It should be ensured that services are delivered in the manner to which it was agreed by the IPP team. Area Boards should continue to monitor consumer quality of life.	Feb 9, 2011 5:34 PM
567	on going review of goals, visits to client's home	Feb 9, 2011 6:55 PM
568	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 9, 2011 7:57 PM
569	IPP team should determine this at every IPP meeting per Lanterman Act section 4646.5 (a) (6)	Feb 9, 2011 8:11 PM
570	Vendors need to write plans that are clean and concise with the clients needs or objectives. Clients meet with their Service Coordinators quarterly, this provides a good way for Regional Center to see how the client is improving or regressing.	Feb 9, 2011 8:16 PM
571	The Lanterman Act in Sec. 4648A(5) and 4690 requires the Director of the department of developmental services to develop and maintain equitable processors for settings rates to assure that Regional Centers can secure high quality service for persons with developmental disability. The Director should comply with these laws.	Feb 9, 2011 9:06 PM
572	Measure baseline skills, and monitor growth in reaching desired outcome behaviors or skills.	Feb 9, 2011 9:15 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
573	Via Self-Directed Services (SDS): Save significant state funds by reducing the "middle men" when providing services for Regional Center clients. SDS requires only one mandatory meeting per year to project the upcoming year's IPP. A plan is established, a budget is agreed upon and that's it! No jumping through hoops, endless meeting after meetings, and LESS fair hearings and all the expense that goes with them. REDUCE THE COGS IN THE DDS WHEEL AND FUNNEL THE FUNDS MORE DIRECTLY TO THE CLIENTS! Cut way back on the inflated overhead of the 21 Regional Centers and fine tune "the DDS Machine" to only include personnel positions absolutely necessary to provide adequate services to clients: 1) Move out of large, expensive offices to smaller, less expensive locations. 2) Amend the Lanterman Act to streamline extraneous activities by Regional Centers that don't directly result in services being delivered to clients. 3) RESTRUCTURE the 21 Regional Centers to re-establish the organizations' priorities: SERVE CLIENTS' NEEDS FIRST AND THE ORGANIZATIONS' NEEDS SECOND.	Feb 9, 2011 9:20 PM
574	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting. as described by in the Lanterman Act Section 4646 (a) (6).	Feb 9, 2011 9:48 PM
575	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 9, 2011 10:04 PM
576	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 9, 2011 10:34 PM
577	Golden gate Regional Center had done a good job. in provided and making useful and effective.	Feb 9, 2011 10:42 PM
578	Perhaps a quality assurance group made up of volunteers who can be objective.	Feb 9, 2011 11:32 PM
579	By someone else assessing the client on an annual basis. Not the SC, Committee or the program.	Feb 9, 2011 11:33 PM
580	Reference comments under Day Programs	Feb 9, 2011 11:33 PM
581	Consultation with family. If no family exists, then each client should have an advocate.	Feb 9, 2011 11:35 PM
582	These standards already exist	Feb 9, 2011 11:58 PM
583	Service goals measured and progress occurring, goals being met. Services are being reduced over time/consumer becoming more independent/other natural supports being utilized.	Feb 10, 2011 12:44 AM
584	obviously as long ha there is a clear plan and routine established.. the ADL and management of their personal and hygiene.. should be evident enough.	Feb 10, 2011 3:15 AM
585	check out the establishment and monitor the persons care	Feb 10, 2011 7:54 PM
586	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 10, 2011 8:02 PM
587	Data collected and outlined in ISP should determine effectiveness of services.	Feb 10, 2011 8:08 PM
588	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 10, 2011 9:32 PM
589	Monitor the service by written speciifc criteria.	Feb 10, 2011 9:45 PM
590	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 10, 2011 9:59 PM
591	The provider of the services should write case notes and the agency should keep them on file.	Feb 10, 2011 10:14 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
592	An outside agency should objectively evaluate performance of a vendor on at least an annual basis. If evaluation is made with poor results, it should be manditory that a consumer try a new service. Also, consumers should be evaluated yearly on progress of skills learned. If skills learned or poor or nonexistant, it should be manditory that a new agency be assigned.	Feb 10, 2011 10:20 PM
593	The IPP team should determine the usefulness and effectiveness of the services every time it meets (Lanterman Act Section 4646.5 (a) (6).	Feb 10, 2011 10:28 PM
594	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 10, 2011 11:42 PM
595	they are useful and effective.	Feb 10, 2011 11:47 PM
596	The client's personal testimony.	Feb 11, 2011 12:02 AM
597	Consumers show they have control of their life and make heir own decisions.	Feb 11, 2011 12:15 AM
598	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 11, 2011 12:22 AM
599	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 11, 2011 12:50 AM
600	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 11, 2011 12:55 AM
601	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 11, 2011 1:10 AM
602	We've been involved in the disabled system for many years. We still have never been referred to or explained what services are available. With the cost of providing these services, how is it that every disabled and/or family of the disabled person doesn't know more about these programs and service providers?	Feb 11, 2011 1:32 AM
603	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 11, 2011 1:49 AM
604	Supports should remain the same or increase.	Feb 11, 2011 1:49 AM
605	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 11, 2011 2:19 AM
606	data collection and quarterly report to show progress and/or effectiveness	Feb 11, 2011 2:57 AM
607	The usefulness and effectiveness of services should be determined by the IPP team for each individual at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 11, 2011 3:20 AM
608	Same as before.	Feb 11, 2011 3:29 AM
609	Regular quarterly reviews of service providers.	Feb 11, 2011 3:44 AM
610	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 11, 2011 4:10 AM
611	Service provider should be required to meet standard. Service coordinator must make regular visits to determine whether the consumer is safe and healthy in the living situation.	Feb 11, 2011 4:46 AM
612	no idea	Feb 11, 2011 5:06 AM
613	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 11, 2011 5:08 AM
614	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 11, 2011 5:44 AM
615	regular inspection and reporting of services and the living environment	Feb 11, 2011 6:10 AM
616	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 11, 2011 6:15 AM
617	Check up, check on, monitor.	Feb 11, 2011 6:22 AM

3. Suggested service standards about how to make sure the services provided

	Response Text	
618	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6)	Feb 11, 2011 6:46 AM
619	Individual and ISP team should determine whether the individual is thriving in this living situation.	Feb 11, 2011 8:01 AM
620	Information about services provided, staff training and supervision, and evaluation results should be made easily available to consumers and their families to help them find the service providers that are best suited to their needs.	Feb 11, 2011 4:24 PM
621	It would be helpful if all ILS vendors receive frequent and mandatory trainings from Regional Center Comunity Services unit regarding regional center expectations (per the law), development of ISPs, and to maintain a more collaborative relationship. Joint trainings with both vendors and RC staff are the best venue to encourage the feeling of working together for the benefit of our consumers.	Feb 11, 2011 5:18 PM
622	This should never be 24 hours per day. That would be called something else, not Supported Living.	Feb 11, 2011 5:39 PM
623	Consumers could be asked about their service and their satisfaction. Also, families who are involved could be questioned about how their family member is being supported. This cpuld be done annually.	Feb 11, 2011 6:35 PM
624	obtain a check list from consumer on what services/ areas that need to be improved eg. cooking, laundry etc.	Feb 11, 2011 6:39 PM
625	For the IPP team to come up with a plan after gathering input from the person that requires support and their circle of support. According to the Laterman Act.	Feb 11, 2011 6:44 PM
626	SAME AS PREVIOUS #3	Feb 11, 2011 6:47 PM
627	The IP Team should determine the usefulness and effectiveness of these services at every meeting.	Feb 11, 2011 7:03 PM
628	strong quality assurance and training of professionals hired to do the jobs collaborative approaches to providing services and sharing of information to ensure that services are not being duplicated by other similar services (IHSS) ensure that level of support provided meets the needs of the individual	Feb 11, 2011 7:19 PM
629	Should have improvement objectives to the point of normalcy	Feb 11, 2011 7:23 PM
630	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 11, 2011 7:24 PM
631	tests come back good if improvement has been seen by actions	Feb 11, 2011 7:24 PM
632	The Regional Center needs to be provided with standards that they have to follow or be fined. As with all of the services clients and families are allowed to use SLS services at at exhorbitant rate dependening on their favoribility with administration.	Feb 11, 2011 7:52 PM
633	Survey clients care givers.	Feb 11, 2011 8:42 PM
634	See comment under Behavioral Services	Feb 11, 2011 8:49 PM
635	Provide follow up to ensure those employeed in such a position are doing what is required.	Feb 11, 2011 8:52 PM
636	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 11, 2011 9:43 PM
637	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 11, 2011 9:46 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
638	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 11, 2011 9:47 PM
639	Don't ask the providers only...ask the recipients as well.	Feb 11, 2011 9:48 PM
640	feedback from consumers and their parents or guardians	Feb 11, 2011 9:48 PM
641	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 11, 2011 9:49 PM
642	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment	Feb 11, 2011 9:51 PM
643	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 11, 2011 9:51 PM
644	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 11, 2011 9:53 PM
645	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 11, 2011 9:55 PM
646	Quarterly reports. With ILS there should be specific goals identified and progress monitored to see if they are achieving the goals. Once the goals are met or no further progress can be made in those skill acquisition areas the program should be terminated. SLS should have quarterly reports so that there is effective communication about emergency call outs, concerns the worker may have regarding hygeine, dietary, housekeeping, etc. with case management The other type should report on dates and times and with whom appts were, or other errands	Feb 11, 2011 10:00 PM
647	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 11, 2011 10:01 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
648	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 11, 2011 10:02 PM
649	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 11, 2011 10:07 PM
650	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 11, 2011 10:14 PM
651	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 11, 2011 10:32 PM
652	Perform quarterly reviews as needed by case coordinators and program director.	Feb 11, 2011 10:35 PM
653	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 11, 2011 10:37 PM
654	The IP Team at every IP meeting, as described in the Lanterman Act, should determine usefulness and effectiveness of services.	Feb 11, 2011 10:43 PM
655	Take feedback from the client if the provider is not doing what they are suppose to do. Monitor what gains the client is making and find out why they are not making progress. Is it the provider or the goals are to high at the moment and need to be adjusted	Feb 11, 2011 10:52 PM
656	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 11, 2011 10:56 PM
657	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 11, 2011 11:27 PM
658	None	Feb 11, 2011 11:31 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
659	1. Annual Quality Assurance reviews by the regional center should be mandated for ILS and SLS. 2. Regular audits conducted by regional center should be mandated for ILS and SLS. 3. The consumers who receive ILS and SLS should have people in their lives that are not paid to be there. Vendors must have specific objectives and curriculum to help consumers build a durable circle of support that includes non-paid members. 4. Vendors must fully assist with obtaining and using generic resources. Regional Centers should be prohibited from working with any vendor that has demonstrated a pattern of incompetence / refusal regarding the use of generic resources. 5. Vendors must assist people with working towards greater independence. Regional Centers should be prohibited from using any vendor that demonstrates a patter of increased dependence.	Feb 11, 2011 11:50 PM
660	There are already standards in place that are appropriate.	Feb 11, 2011 11:56 PM
661	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 11, 2011 11:58 PM
662	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 12, 2011 12:10 AM
663	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 12, 2011 1:17 AM
664	more oversight from the Regional Centers through documentation, surprise visits, and increased number of quarterly meetings. At least making sure the servcie coordinator is seeing a consumer every three months.	Feb 12, 2011 1:23 AM
665	Having someone checking in with the Customer more often. Requiring parents/family members to do the same.	Feb 12, 2011 1:44 AM
666	The usefulness of these services should be determined by the IPP Team at every meeting according to The Lanterman Act Section 4646.5 (a) (6)	Feb 12, 2011 2:35 AM
667	Should bemeasured bu satisfaction surveys and meeting of objectives including moving out of the family home	Feb 12, 2011 2:41 AM
668	: Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 12, 2011 2:45 AM
669	By progress notes and when giving reprt to the next person doing the next shift.	Feb 12, 2011 2:47 AM
670	Constant review and "shadowing" if appropriate to ensure individuals' abilities are up to different skills. Provide ongoing training as needed.	Feb 12, 2011 3:47 AM
671	Evaluations of facility, programs and of the client as to whether they feel successful.	Feb 12, 2011 3:49 AM
672	Clear goals need to be determined with the family, and they need to be measurable in reports at four to six months intervals.	Feb 12, 2011 4:55 AM
673	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 12, 2011 5:19 AM
674	MONITORINGAND KEEPING A CLOSE LOOK ON THE CLIENT TO MAKE SURE HE/SHE FOLLOWS THROUGH.	Feb 12, 2011 5:56 AM
675	home visits, interviews	Feb 12, 2011 5:59 AM

3. Suggested service standards about how to make sure the services provided

	Response Text	
676	Quarterly reviews	Feb 12, 2011 6:17 AM
677	See previous answers.	Feb 12, 2011 6:28 AM
678	Regional Centers.	Feb 12, 2011 6:52 AM
679	Communicate with those who have worked with the consumers, get suggestions and make sure the consumer is aware of all the things that go along with living on there own.	Feb 12, 2011 6:58 AM
680	IEP evaluation	Feb 12, 2011 7:18 AM
681	Reports from family, caregivers, assigned employed assistants etc.	Feb 12, 2011 7:51 AM
682	Charts and graphs for accountability. Check lists for "household chores". These should be done daily/weekly and turned in to agency to make sure what should be done by hired staff is being done since there are no "on site" supervisors. Surveillance cameras...no, it's not invasion of privacy from a parents' prospective. It's for security.	Feb 12, 2011 7:57 AM
683	Caretakers monitor condition on a case by case situation	Feb 12, 2011 9:22 AM
684	Regional center needs bring back there dental program and also have more locations available like ones are in Tustin who are good dentist and who are in irvine too for good eye vision too.	Feb 12, 2011 4:16 PM
685	Monthly evaluations of a list of self-care functions.	Feb 12, 2011 4:25 PM
686	They need an audit done on each to see if all hours designated is provided or needed and fix appropriately to make that person successful for themselves and then be cut to fit their safety.	Feb 12, 2011 5:41 PM
687	The social worker is trained/knowledgeable to know the services provided ARE useful & effective	Feb 12, 2011 5:52 PM
688	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 12, 2011 6:11 PM
689	quarterly reports from providers stating progress, goals and plan for future. Yearly eval of services by SARC case workers.	Feb 12, 2011 6:27 PM
690	Subsidized housing. Apartment blocks where services could be pooled.	Feb 12, 2011 7:14 PM
691	Standardized assessment tools.	Feb 12, 2011 7:24 PM
692	Polling of individuals receiving service using a proven instrument.	Feb 12, 2011 8:23 PM
693	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 12, 2011 8:26 PM
694	family of consumer and consumer review and feedback	Feb 12, 2011 8:55 PM
695	Accountability and monitoring of caregivers is essential to running an effective and mutually beneficial program.	Feb 12, 2011 9:20 PM
696	make sure adequate staffing and training of staff	Feb 12, 2011 9:24 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
697	This area needs serious consideration on the part of Regional Center Staff and the State Department of Developmental Services. Vendors who are part of programs providing services in home should be evaluated on the ability of the vendor to effectively provide those services and the proximity in which those services can be provided. My orpedically handicapped son (Cerebral Palsy Spastic Triplegia) lives in an apartment that was/is part of an independent living program. We moved him there so he could have a modicum amount of independence with support. His growth in independent functions over the past 12 years has been spectacular. For someone who only has the use of his left arm, he has far outstripped the "norm". The norm and the "standard" do not fit his growth and development. He would be better served by the holistic approach. Stability is extremely important to developmentally disabled consumers. The living program had a satellite office in the apartment complex. Activities were weekly. The economy took the downturn. The satellite office closed. The local community activities stopped. If he wants to participate in an activity he must travel by para-transit transportation approximately 15 miles. This is not local!	Feb 12, 2011 10:07 PM
698	Health--pass a physical (either through Regional Center or independently) Money--Power of Atty to help keep a bank account; file taxes in a timely manner Advocacy--access to someone who can speak for them and avoid unnecessary bullying, manipulation, or miscommunication Screening done by families for roommates, with process explained ahead of time (not waiting around for whether or not the process is even being started) Help finding and meeting landlords for independent living and help filling out required paperwork, not merely being told to apply for SSI which denies 95% of its applicants.	Feb 12, 2011 10:12 PM
699	bimontlhy reviews or meetings with the individual with their counselor/advisor as to how the services are performing or provided.	Feb 12, 2011 11:11 PM
700	A goal of independence should be considered for all affected persons. The more responsibility we can transfer on them as consumers, the less cost associated with support of these persons.	Feb 12, 2011 11:43 PM
701	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a)(6).	Feb 12, 2011 11:56 PM
702	dont provide this service to anyone	Feb 13, 2011 12:36 AM
703	Ask for feedback. If not well attended, is that due to poor advertising or a poor speaker/leader?	Feb 13, 2011 12:38 AM
704	participants should demonstrate growth and initiative	Feb 13, 2011 1:23 AM
705	is consumer making progress?	Feb 13, 2011 1:31 AM
706	Checking up with consumers and their service providers.	Feb 13, 2011 1:52 AM
707	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6)	Feb 13, 2011 3:43 AM
708	Evaluated by the service provider, care giver.	Feb 13, 2011 4:22 AM
709	Family member and if that isn't available social worker or a court appointed	Feb 13, 2011 5:09 AM
710	Frequent observation.	Feb 13, 2011 5:11 AM
711	The agencies providing the providers and services should keep their administrative expenses as low as possible and pass on more money to the aides who are in contact with the clients. I think (I do not know) but I do not think a very high percentage of the hourly charge goes to the aides. They need to have aides that are capable and motivated. If a client has diabetes it is important that the aide is very knowledgeable in the care of diabetes in order to help the client.	Feb 13, 2011 5:15 AM
712	The disabled prson should be observed three months after. A report should be givn by the person who provides the services and on how much the person had accomplish since he or she came there.	Feb 13, 2011 5:25 AM

3. Suggested service standards about how to make sure the services provided

	Response Text	
713	Keep track of every progress encourage there progress. Make them suceed and they will	Feb 13, 2011 5:58 AM
714	The consumer is happy, healthy, and making progress towards being more independent in the area of life skills, whether dressing themselves, getting a snack or choosing which TV program they want to watch.	Feb 13, 2011 7:52 AM
715	As previously stated: help individuals become independent and watch the hours of support go down.	Feb 13, 2011 7:58 AM
716	All staff should complete a rigorous training on medication. (This was something that I had to complete when I worked in residential services in Maryland. Twenty-four years later, I am still able to identify various medication concerns).	Feb 13, 2011 8:11 AM
717	Special needs housing for adults	Feb 13, 2011 3:54 PM
718	The service providers should be qualified and trained for the service they provide	Feb 13, 2011 4:12 PM
719	Monitor consumer's progress, attitude, behavior, etc.	Feb 13, 2011 5:51 PM
720	The test is whether the consumer makes progress toward being able to live independently and does actually transition to independent living.	Feb 13, 2011 5:53 PM
721	Usefulness and effectiveness of services should be determined by the IPP team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 13, 2011 6:50 PM
722	Monitor client's overall health and happiness.	Feb 13, 2011 7:07 PM
723	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 13, 2011 7:14 PM
724	Monitoring such services should be the responsibility of the payer. Regular self-monitoring by agencies or providers would assist paying agencies to conduct reviews.	Feb 13, 2011 8:36 PM
725	monthly check ins by social worker - visits to living situationl, talking to client, caregivers and parent s if alive	Feb 13, 2011 10:17 PM
726	by periodic eval as set forth in the Lanterman Act	Feb 13, 2011 10:32 PM
727	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 13, 2011 10:35 PM
728	Social workers should keep a record of their clients progress.	Feb 13, 2011 11:51 PM
729	call and ask keep communication up	Feb 14, 2011 12:16 AM
730	Giving the person served maximum input re: who, what, when, where, and how s/he is supported is the only way to ensure quality and efficacy of the services. If the individual does not feel supported and his/her personal needs are not met, then the service is not effective. If the individual feels supported, respected, and appropriately cared for, then the service is effective.	Feb 14, 2011 1:06 AM
731	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 14, 2011 1:48 AM
732	Assessment of success should be done before, during, and after the delivery of services. A measurement of their effectiveness and of the continuing need would be helpful. Consider the list: help with their money; getting around in their community; staying healthy; speaking up for themselves; moving into a home; choosing personal attendants and housemates; acquiring household furnishings; performing daily living activities, responding to emergencies; and participating in community life	Feb 14, 2011 1:52 AM

3. Suggested service standards about how to make sure the services provided

	Response Text	
733	Measurement placed and Measurement checked. The regional center has to step up it's annual visits to make them meaningful to the consumer and their guardians not just another annual tea party visit.	Feb 14, 2011 2:29 AM
734	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 14, 2011 3:25 AM
735	Discuss at every IPP team meeting	Feb 14, 2011 3:40 AM
736	The living skills counselors etc would provide periodic reports on progress toward client goals to the regional center.	Feb 14, 2011 5:40 AM
737	All organizations and service providers should have some kind of a track record in providing ILS. RC's should have strict controls and monitor all ILS programs which they vendorize. Success rates make sense.	Feb 14, 2011 5:45 AM
738	AS PER USUAL TEACHING CRITERIA, TESTS AND TASK COMPLETION BY THE CONSUMERS.	Feb 14, 2011 7:15 AM
739	Make sure to use and Inter-Disciplinary Team to determine these issues.	Feb 14, 2011 1:53 PM
740	Follow-up with train individual and pay them accordingly to their schooling and or knowledge	Feb 14, 2011 3:13 PM
741	PROVIDE A "HOTLINE" OR "SURVEY EVERY EVERYMONTH.	Feb 14, 2011 3:51 PM
742	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 14, 2011 4:03 PM
743	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 14, 2011 4:27 PM
744	When a Consumer fails to meet a goal after several years of training, that area could become a "Service" area, where a low-cost contractor may be hired. These contractors may include a financial consulting service, a housekeeper, etc.	Feb 14, 2011 4:29 PM
745	monitor more ofter, mandated quartely reports.	Feb 14, 2011 4:51 PM
746	Current ways are sufficient.	Feb 14, 2011 5:01 PM
747	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 14, 2011 5:05 PM
748	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 14, 2011 5:26 PM
749	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 14, 2011 5:46 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
750	Periodic assessments should be conducted every 6 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 14, 2011 5:56 PM
751	Qualified Case Managers	Feb 14, 2011 6:08 PM
752	Plan should be developed that outlines the needs of consumer. Frequency of services needs to be established.. Multiple consumers could go with one staff member for shopping or other ommunity activities. Consumers with similar needs could share staff thereby reducing travel expenses. Increase use of technology... this might save trips to do banking, picking up medication or grocery shopping. Life alert systems may decrease hours needed for supervision. Medication alerts may be programmed into watches or cell phones.	Feb 14, 2011 6:09 PM
753	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 14, 2011 6:19 PM
754	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 14, 2011 6:24 PM
755	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 14, 2011 6:27 PM
756	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 14, 2011 6:29 PM
757	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 14, 2011 6:30 PM
758	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 14, 2011 6:30 PM
759	Periodic assessments should be conducted at least every 12 months in order to evaluate whether the services are promoting an independent and inclusive life in the community, whether the individual's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 14, 2011 6:35 PM
760	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 14, 2011 6:38 PM
761	Follow ups either by mail email or personally	Feb 14, 2011 6:56 PM
762	to see progress in that individual	Feb 14, 2011 6:56 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
763	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment	Feb 14, 2011 7:08 PM
764	Usefulness and effectiveness of services should be determined by the IPP team at every IPP meeting, as described in the Lanterman Act Section 4646.5(a)-(d)	Feb 14, 2011 7:25 PM
765	Based on the IPP process	Feb 14, 2011 7:31 PM
766	A yearly surprise visit.	Feb 14, 2011 7:32 PM
767	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 14, 2011 7:47 PM
768	I have no suggestions.	Feb 14, 2011 7:57 PM
769	RC should be monitoring as well as parents or guardians. The consumer well being is top priority here.	Feb 14, 2011 7:57 PM
770	consultation type of service	Feb 14, 2011 7:58 PM
771	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 14, 2011 8:05 PM
772	RC oversight. Many vendors are not honest with their billing	Feb 14, 2011 8:31 PM
773	Parent/sibling reports. Accredited providers of living options.	Feb 14, 2011 8:49 PM
774	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 14, 2011 9:00 PM
775	Form a group of parents or other relatives of the consumers to help select the service provider.	Feb 14, 2011 9:20 PM
776	Quarterly monitoring, client input.	Feb 14, 2011 9:40 PM
777	Determination should be made at every IPP meeting by the IPP team.	Feb 14, 2011 9:55 PM
778	involve client and his parents on setting goals to say what services are needed, then allow parents to answer survey on how well the service is working for the client, and make alterations to goals	Feb 14, 2011 9:57 PM
779	closer case management because these consumers are returning to adult residential. The hours taken from this area was not good. These consumers need alot of supervision. They are in transition	Feb 14, 2011 9:58 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
780	We are new to the state of California and have been trying to navigate the system. One issue we have run into regards respite care. We were unable to obtain respite services through a contracted provider due to the limited number of hours we were requesting. We have opted to get our own provider, but are running into issues in trying to get services started. Our son is 19 and on paper, his issues look quite cumbersome. However, we are quite comfortable with receiving care via a trained non-medical provider. The system seems to be dragging on. Our son just became eligable for RCOC services in November and here we are in mid February with no provider. I have the person ready to go, but am still waiting for a call back from the nurse at RCOC. The person is already trained in that she has CPR/First Aide and works at my son's school. Somehow this process needs to be streamlined. I feel like I am flying without a safety net with no one to call if I need a provider. My husband travels frequently and I am left on my own to care for him. If an emergency were to arise, I would have no one to call to care for my son.	Feb 14, 2011 10:01 PM
781	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer’s participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 14, 2011 10:19 PM
782	Tighter adherance to use of generic and natural support systems for consumers living independently. I see too many consumer who allow their support agency to provide everything for them. They isolate themselves from neighbors, community activies, and social opportunities. Support agencies must do a better job of getting folks truely included in thier community. Consumer's must do "something productive and meaningful: Again I see many consumers who have been allowed to just "Milk the system". The expectation is Regional Center owes me and I owe nothing. Consumer's Rights do not outweigh the team of "Resonsibility and Freedom". SLS- Mandatory inclusion of Family/Natural Support in the IPP and SL plan prior to move out.	Feb 14, 2011 10:36 PM
783	This needs to be determined by the IPP team at every IPP meeting, as described in the Lanterman Act Section 4646 (a)- (6).	Feb 14, 2011 10:38 PM
784	Proper monitoring and evaluation.	Feb 14, 2011 10:38 PM
785	evaluations by provider and sc on a regular basis. make sure true goals are being set and a plan and goal dedline and have goals change to meet the needs of the individual.	Feb 14, 2011 10:57 PM
786	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 14, 2011 11:05 PM
787	1. Outcomes need to be measured. Can the client with assistance get their groceries, pay their bills, be responsible for taking baths regularly, wearing clothes that fit etc. Not staying out all night. Is the student gaining skills with ILS services? Right now I have seen several of my ILS clients in very unhealthy living situations where malnutrition and severe grooming and hygiene issues are a problem. (Hair falling out, rotting gums and teeth) They are supposedly receiving ILS support but I am seeing a decline in health.	Feb 14, 2011 11:33 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
788	There needs to be a assessment that all providers use once a year to determine if a service is useful and effective for them. A consumer should still retain the right to have a say in continuing with the same service provider or if a change in service provider is recommended as much as possible depending on the results of their annual assesment.	Feb 14, 2011 11:42 PM
789	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 14, 2011 11:50 PM
790	No comment	Feb 15, 2011 12:03 AM
791	Outcomes and health and safety. satisfaction. there is a dignity and responsibility for people who choose this support.	Feb 15, 2011 12:06 AM
792	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 15, 2011 12:19 AM
793	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 15, 2011 12:21 AM
794	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 15, 2011 12:43 AM
795	Services should be provided face to face in the residence, and can include the immediate community. Services should not be recreational in nature, and consumers should be faciliated to develop relationships with other persons that are not paid staff.	Feb 15, 2011 1:03 AM
796	IPP meeting.	Feb 15, 2011 1:28 AM
797	Usefulness and efffectiveness of services should be determined by the IPP team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 15, 2011 1:32 AM
798	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 15, 2011 1:38 AM
799	Keep accurate records of WHAT is covered - not just the hours that the staff were supposedly at the home.	Feb 15, 2011 1:41 AM
800	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 15, 2011 1:53 AM
801	Basic questionnaire developed to manage expected benefit progress, monthly. Reviewed by IT.	Feb 15, 2011 1:57 AM
802	?	Feb 15, 2011 1:57 AM
803	Talk to the consumer	Feb 15, 2011 2:03 AM
804	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 15, 2011 2:29 AM
805	When possible evaluated by a family member and a case worker.	Feb 15, 2011 2:45 AM
806	All Service Coordinators need to know their consumers well enough to know if these sevices are useful to them or not.	Feb 15, 2011 2:45 AM
807	QUARTERLY ASSESSMENTS	Feb 15, 2011 2:53 AM

3. Suggested service standards about how to make sure the services provided

	Response Text	
808	can establish baseline then collect data on consumers carryover with each task.	Feb 15, 2011 3:20 AM
809	The IP Team at every IP meeting, as described in the Lanterman Act, should determine usefulness and effectiveness of services.	Feb 15, 2011 3:21 AM
810	periodic review; typically; by the time the consumer is of age; it has been determined that assistance for independent living is necessary for quality of life.	Feb 15, 2011 3:24 AM
811	They should take deta and save it.	Feb 15, 2011 3:37 AM
812	The care providers need to be trained people in life skills supprt, able to guide the individual in all the areas needed to live independently. They need to be paid a wage that will retain these qualified people so that there is continuity in lifestyle, safety, happiness and day-to-day routine of the person with disabilities.	Feb 15, 2011 3:44 AM
813	See the Lanterman Act!!	Feb 15, 2011 4:08 AM
814	Regional Centers should be actively involved in mobilizing funds and support for affordable housing for developmentally disabled people (who are often on a very, very low income and thus excluded from most affordable housing).	Feb 15, 2011 4:23 AM
815	Often sls staff doesnt teach people objectives but do it for them.	Feb 15, 2011 4:36 AM
816	Individual Service Plan, annually. Must have objectives. As long as the consumers are able to afford their share of rent, then the services must be provided.	Feb 15, 2011 5:29 AM
817	see comments on Behavior services	Feb 15, 2011 5:41 AM
818	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 15, 2011 6:06 AM
819	monitoring of service providers for quality control and progress of consumer.	Feb 15, 2011 6:29 AM
820	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 15, 2011 6:32 AM
821	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 15, 2011 6:36 AM
822	reports from clients, regular visits from supervisors	Feb 15, 2011 7:05 AM
823	Those who are willing to be trained in technology to access: 1. Visual, auditory, or tactile schedules posted mentor outside the home 2. Telemedicine consults 3. Visual or auditory mentoring and check-in via teleconferencing 4. Use credit cards and supervised wire transfers for personal attendants 5. Use grocery and meal delivery services	Feb 15, 2011 7:18 AM
824	safety should be evaluated, so that if the consumer is not safe in the community then the program has failed them	Feb 15, 2011 7:29 AM
825	The program must be monitored on a routine calendar.	Feb 15, 2011 7:33 AM
826	weekly/monthly mtgs with servise provider, consumer & parents/gaurdian/conservator.	Feb 15, 2011 8:24 AM
827	Have co-pays for families based on income and family size similar to FCPP.	Feb 15, 2011 8:36 AM
828	Behavior is improving.	Feb 15, 2011 12:09 PM
829	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 15, 2011 3:45 PM
830	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 15, 2011 4:06 PM
831	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 15, 2011 4:23 PM
832	Random unexpected visitations to witness the quality of those taking care of the disabled, in addition to scheduling an appointment with the client and caregiver to see any differences in the use of services provided.	Feb 15, 2011 5:04 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
833	Qualified people should help provide these serevices such as passing background test etc.	Feb 15, 2011 5:09 PM
834	Clear, clean, minimalist requirements of program organization and responsibility, including a timeline or calendar. For example, is a particular kind of training a 'good idea' or is it required? If it is required, then how often must it be completed (every 6 months, annually, etc)? If it is required, is a list of resources for the training provided or is program manager responsible for finding resources? Clean, clear, minimalist. Not intrusive or invasive, clear and supportive.	Feb 15, 2011 5:24 PM
835	Continuation of current standards	Feb 15, 2011 5:57 PM
836	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 15, 2011 6:01 PM
837	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 15, 2011 6:27 PM
838	The IP Team at every IP meeting, as described in the Lanterman Act, should determine usefulness and effectiveness of services.	Feb 15, 2011 6:34 PM
839	clients have conferdent and willing to work with the person who provide supporting service. They are trained.	Feb 15, 2011 6:56 PM
840	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 15, 2011 6:58 PM
841	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 15, 2011 6:59 PM
842	Social worker visits every year or on an as needed basis to ensure adequate care. Liaison with family and professionals such as clinical psychologist, behaviorist etc.	Feb 15, 2011 7:01 PM
843	Ask the client or the parents if the services are useful and effective. Regional Center staff are not always the correct people to ask as they are only thinking of budgets and not what the client needs.	Feb 15, 2011 7:11 PM
844	Useful, that is the question. There is a well meaning program out there Safety First, or something like that. They visited my sister 4 times and worked with her individually on learning her way around her neighborhood. I very much appreciated the effort, but 4 times to a mentally challenged individual is not going to do it. It was a good start. Since then her peers have taught how to go out into the community. I'm thinking of ways for the State to save money, and in my experience Safety First was not worth the time and money cost to have this service provided. It was a nice start, but alone it did not solve the problem, so the desired result was not achieved, it was ineffective. Ineffective things should be cut despite the fact that they are well meaning. Someone from the outside should do an evaluation by talking with the group homes, family members to learn from the ground up what is working and what is not. Eliminate what is not. It is not about effort or a good idea, a hard look at results is the key. No major long paper study lots of calls, visits and listening. Having clients teach clients (obviously at the high end of ability) is a win win. I know this is a wild idea, and it will not work in every circumstance, but new thoughts, new creative ideas are needed.	Feb 15, 2011 7:13 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
845	Periodic assessments should be conducted every 12 months in order to evaluate whether the services are promoting independent and productive living, whether the consumer is making reasonable progress toward an integrated and productive life in the community, whether the consumer's participation in the program is providing him/her with the opportunity to maintain his/her present skill level and whether the services are provided in the least restrictive environment.	Feb 15, 2011 7:13 PM
846	is the person able to live outside a board and care home with these services	Feb 15, 2011 7:16 PM
847	Site visits.	Feb 15, 2011 7:31 PM
848	These services should be available to help the individual with special needs be able to make the transition from living with family to moving into a place with a roommate (besides a group home). They need to have the skills to be able to accomplish this.	Feb 15, 2011 7:41 PM
849	Ongoing determination of the ability of the individual to be maintained in the assisted living environment and thereby continue as independent an existende as is consistent with his/her disabilties and capabilities.	Feb 15, 2011 7:46 PM
850	Include independent living skills as well a job skills.	Feb 15, 2011 7:54 PM
851	See suggestions for Behavior services and Day programs	Feb 15, 2011 7:56 PM
852	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 15, 2011 7:56 PM
853	There should be a Program Supervisor or Social worker that will help them to choose and revise programs that are suitable to each person individually.	Feb 15, 2011 8:17 PM
854	Generally, there needs to be less Regional Center involvement in the day to day life. The RC intervention is intrusive and meaningless and probably wasteful of the DDS funds. The RC's spend a lot of time having clients, who are known to the system to be DD with lots of issues, constantly verify their ongoing condition which never changes much. People do not become "unretarded". What the client needs is good support in the community to avoid having to be hospitalized or live in a Development Center or an institution of some flavor. The person needs to have enough support to maintain a decent quality of life.	Feb 15, 2011 8:19 PM
855	Online blog or tools for rating and for monitoring	Feb 15, 2011 8:52 PM
856	Again, through assessments by an independent party who specializes in people with special needs.	Feb 15, 2011 9:02 PM
857	Not only should they be monitored by professionals to determine if they're useful & effective; but, the consumer should be allowed to express their feelings about the services & how they feel they're meeting their needs.	Feb 15, 2011 9:18 PM
858	MONTHLY REPORTS BY CARE PROVIDER CLIENTS AND FAMILIES	Feb 15, 2011 9:36 PM
859	Effectiveness and usefulnesss of services should be reviewed by the IPP team in its meetings, and overseen by the regional centers and DDS.	Feb 15, 2011 9:47 PM
860	Usefulness and effectiveness of services should be reviewed and determined by the IPP team at every IPP meeting, as described by the Lanterman Act 4646.5 (a)(6)	Feb 15, 2011 9:59 PM
861	Standard: At the individual level, usefulness and effectiveness of these services shall be determined through the IPP process, and services shall be continued, discontinued or modified as a result of that determination. Standard: At the quality control level, Regional Centers shall conduct random audits and make recommendations for program improvement. Standard: CA DDS shall find out ow other states do this. Some states do this well. Check with Indiana.	Feb 15, 2011 10:06 PM

3. Suggested service standards about how to make sure the services provided

	Response Text	
862	Funding should be provded to make sure the budget is not an excessive worry for providers. Again, compare it with what other providers allow. Ask client for feedback at a certain predetermned juncture.	Feb 15, 2011 10:07 PM
863	The IP Team at every IP meeting, as described in the Lanterman Act, should determine usefulness and effectiveness of services.	Feb 15, 2011 10:31 PM
864	Supported living should provide data on objectives they are working on to support the consumer in thier own home. There should be some way to determine the effectiveness of the staff working with the consumers.	Feb 15, 2011 10:50 PM
865	The IP Team at every IP meeting, as described in the Lanterman Act, should determine usefulness and effectiveness of services.	Feb 15, 2011 11:17 PM
866	Well all services are useful to those that need it.	Feb 15, 2011 11:21 PM
867	Instill a median rate across the board for each geographical area, and eliminate the grandfathered high end administration rates. Admin rates should be tiered according to the amount of service provided. IHSS needs to be used and the IHSS time needs to be excluded from the admin rate calculation.	Feb 15, 2011 11:24 PM
868	quarterly meetings to check progress on annual goals.	Feb 15, 2011 11:25 PM
869	Refer to the Individual Service Plan, and KRC Individual Program Plan to be sure that goals/objectives are being addressed, monthly progress notes, quarterly reports, physical inspection of living situation to be sure it is healthy and safe, communication with the vendor and the consumer.	Feb 15, 2011 11:29 PM
870	Usefulness/effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 15, 2011 11:33 PM
871	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 16, 2011 12:00 AM
872	follow MediCaide Waiver requirements to ensure federal dollars are tapped to offset state costs.	Feb 16, 2011 12:01 AM
873	Require service provider complete progress reports. Conduct audits.	Feb 16, 2011 12:03 AM
874	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 16, 2011 12:19 AM
875	The IPP planning team assesses whether or not the individual is pleased, happy and wishes to continue in the supported or independent living environment. Standards beyond safety and the individual's choice are really not relevant.	Feb 16, 2011 12:31 AM
876	surveys supervision self survey pre/post	Feb 16, 2011 12:42 AM
877	Review of ISP, semi-annual and annual reports to Reg. Ctr. and MUST include face-to-face contact by case mgr. with client at both home and day program environments annually at a minimum.	Feb 16, 2011 1:14 AM
878	DIRECT CONTRACT WITH INDEPENDANT CONTRACTORS. CUT OUT THE MIDDLE MEN	Feb 16, 2011 2:19 AM
879	The caseworker would follow up with the consumer/client on a periodic basis to check if the living arrangements are effective or if they require a more restrictive arrangement.	Feb 16, 2011 2:28 AM
880	I participate in completing an annual survey on ILS through Employment and Community Options. I think the survey is effective and I am able to give my feedback. I think staff should receive training and have a knowledge of basic subjects for ILS classes taught.	Feb 16, 2011 2:41 AM
881	QUARTERLY VISITS WITH THE PERSON BEING PROVIDED THE SERVICES.	Feb 16, 2011 2:47 AM

Independent and Supported Living Services

3. Suggested service standards about how to make sure the services provided

	Response Text	
882	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 16, 2011 3:04 AM
883	Regional Centers should focus their Quality Assurance staff on these areas rather than wasting time surveying facilities that are licensed under the CA Dept of Public Health.	Feb 16, 2011 3:14 AM
884	Standards that RCs can enforce for providers	Feb 16, 2011 3:53 AM
885	Set and reach specific goals and make sure they are maintained when reached.	Feb 16, 2011 3:55 AM
886	Evaluate vendors and service providers. This requires Regional Centers to actively monitor delivery of services. Service coordinators need to be available to recipients on a regular basis to determine that services are individualized	Feb 16, 2011 3:56 AM
887	Provide correct and appropriate support to individuals in accordance to their needs.	Feb 16, 2011 4:29 AM
888	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in the Lanterman Act Section 4646.5 (a) (6).	Feb 16, 2011 4:47 AM
889	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 16, 2011 5:05 AM
890	survey, follow ups by RCOC and managers at providing agency	Feb 16, 2011 5:19 AM
891	Usefullness and effectiveness of services should be determined by the IPP team and at every IPP meetingas described in the LAnterman Act	Feb 16, 2011 5:31 AM
892	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 16, 2011 5:31 AM
893	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 16, 2011 5:41 AM
894	Individual support plans need to be developed to identify the specific supports unique to their medical needs.	Feb 16, 2011 5:41 AM
895	Usefulness and effectiveness of services should be determined by the IPP Team at every IPP meeting, as described in The Lanterman Act Section 4646.5 (a) (6).	Feb 16, 2011 6:10 AM
896	written quarterly reports prepared by the support agency	Feb 16, 2011 6:11 AM
897	personalized, collaborative and consumer centered with more "Open Communication" with the Family member and Consumer. This is so critical for family members advocating by Remote. Understandably so, there are far too many consumer's on a Case Mgrs. work load. I feel as though we operate more as a reactive rather than a proactive team.	Feb 16, 2011 6:48 AM
898	Eval every 3 mos.	Feb 16, 2011 7:09 AM
899	none. the irony here is that you must meet the client where they are in order for them to learn and grow, so you cannot be too high on the horse where you cannot talk with them. Often SC's do not know their clients just on paper. The provider does.	Feb 16, 2011 7:38 AM
900	Consumer driven. Listen to the consumers and their families and not make decisions based on money alone.	Feb 16, 2011 7:51 AM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
1	Annual plans. Spot visits. Background checks. Adequate training about how to work with individuals with disabilities (at least annually).	Jan 28, 2011 1:06 AM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
2	again, people must demonstrate knowledge, talent, capacity, understanding, about person-centeredness and person-centered support	Jan 28, 2011 1:13 AM
3	If there are going to be more qualifications added on to the persons' or organizations providing the services, the cost of providing the service will have to be increased. Currently the rates are so low that providers get the bare minimum so the actual provider of the service is getting paid $8-$12/hr. If qualifications are changed to a minimum of bachelor degree, the rates must reflect the change and $15-$20/rates will have to be accepted. This of course means that agencies cannot get reimbursed $18-$22/hr because they will be unable to cover the cost of running an agency.	Jan 28, 2011 1:13 AM
4	oversight, goals & objectives	Jan 28, 2011 1:16 AM
5	Providers should have masters degrees in a field reflective of services for clients. Staff should have no less than an AA.	Jan 28, 2011 1:19 AM
6	QUALITY ASSURANCE. FROM CONSUMER/FAMILIES AND SERVICE COORDINATORS. HAVING DATA AVAILABLE TO COMPARE FOR CONSUMERS AND FAMILIES.	Jan 28, 2011 1:26 AM
7	performance-based competence in supporting individuals with disabilities	Jan 28, 2011 1:37 AM
8	QUALITY ASSURANCE FOR ALL VENDORS. INPUT FROM CONSUMERS AND FAMILIES AND SERVICE COORDINATORS. DATA COLLECTED SHOULD BE AVAILABLE TO CONSUMERS/FAMILIES FOR COMPARISON.	Jan 28, 2011 1:51 AM
9	Staff should be fingerprinted, first aid/CPR certificate. In addition a core curriculum of classes should be provided to staff of these agencies to include: nutrition, healthy cooking, healthy living, identification of serious health issues (when to go to the ER, when to call the doctor) and managing common health issues (diabetes, seizures, high blood pressure, etc.) Basic Mental Health course.	Jan 28, 2011 1:55 AM
10	Should be specialist in the area	Jan 28, 2011 2:05 AM
11	well trained family members and staff	Jan 28, 2011 2:10 AM
12	see WAPADH	Jan 28, 2011 2:13 AM
13	Service standards and definitions should be set state wide. SLS should be SLS no matter what part of the state you travel to!!! Some regulating of services and agency requirements need to be established. . Annual reviews of agency client files need to take place. All regional Centers should require the same accountability from all agencies that provide similar services. DOR has very clear guidelines for positions and agency requirements. Many regional centers don't have quality because no one requires quality!!!	Jan 28, 2011 2:20 AM
14	SAME as Day programs and Supported employment	Jan 28, 2011 2:37 AM
15	CCL Standards	Jan 28, 2011 2:37 AM
16	A licensed agency to provide supportive living or a person deemed appropriate by the caseworker, consumer, staff, and family.	Jan 28, 2011 3:01 AM
17	they must be there to help the client and not demean them. they must pay close attention to what is going on with the client and not just ask "how are you doing/" "are you eating good". they must look around and talk to the clients support network and or family	Jan 28, 2011 3:09 AM
18	all services should be monitored by a quality controllers..and providers should be certified by state standards and checked on at least a quarterly basis	Jan 28, 2011 3:12 AM
19	as currently provided	Jan 28, 2011 3:17 AM
20	Degree and state standards and the compassion to do this.	Jan 28, 2011 3:33 AM
21	Lanterman Act. Needs of the consumer as written in the IPP	Jan 28, 2011 3:45 AM
22	Organizations that provide services should be licensed and periodic checks by licensing /parents check standards	Jan 28, 2011 3:47 AM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
23	Same method can be used as that of teachers - student show progress is evidence of teacher performance. Qualification should come through some type of certification program.	Jan 28, 2011 4:05 AM
24	Again, this is an area where the State should focus its attention and re-evaluate the effectiveness and safety of this type of program.	Jan 28, 2011 4:14 AM
25	complete survey, most cost effective provider....	Jan 28, 2011 4:30 AM
26	It doesnt take a teaching degree or accounting degree to help a consumer with their bills, or to help them understand the basics of everyday living. It does however take someone with patience and the ability to discern whether or not the consumer is out on a limb and or bit off more than they can chew, to redirect them back into alignment (re educate them with additional training) or with a social worker's assistance help the consumer see that being on their own is not what they need at this time.	Jan 28, 2011 4:40 AM
27	As before, exceptional.	Jan 28, 2011 4:42 AM
28	They should be licensed	Jan 28, 2011 4:52 AM
29	This should be determined based on the IPP	Jan 28, 2011 5:00 AM
30	have some more formal QA process	Jan 28, 2011 5:19 AM
31	Audits every 3 years, with an option to audit in the event of a concern at any time, giving the person or organization an opportunity to improve.	Jan 28, 2011 5:30 AM
32	In the least, make it a licensed type facililty	Jan 28, 2011 5:32 AM
33	1) Detailed background investigation for "persons" 2) Knowledge of an organization's history. 3) Non-profits preferred.	Jan 28, 2011 5:45 AM
34	See previous comments on Regional Centers.	Jan 28, 2011 6:15 AM
35	The same as today.	Jan 28, 2011 6:29 AM
36	Data	Jan 28, 2011 6:43 AM
37	Smart educated persons who can speak the language of the client	Jan 28, 2011 6:44 AM
38	Direct services providers should be fluent in the language of the person served, and should speak only that language while serving the person. Organizations should provide extensive training to direct service providers, including training on person-centered thinking and service provision.	Jan 28, 2011 6:44 AM
39	Minimum 1 year of experience or 2 years of college. Field training of no less than 20 hours accompanied by a Training Officer from the service providing agency.	Jan 28, 2011 7:10 AM
40	Supports should have the expertise to monitor and assist in not only personal health and nutrition but in housing benefits, social security, medical, social and personal nutrition and health. Levels of experience should include staff with experience and knowlege on all levels. Oversight and money management should include self audits and safeguards for fraud and abuse.	Jan 28, 2011 7:17 AM
41	They must be qualified personnel. Not just someone who works for their city, county or state!	Jan 28, 2011 7:23 AM
42	Staff people need a high school diploma, an AA Degree at minimum. They need to be background checked. They need good training especially if they are going to manage consumers money they need to know benefit requirements and how much money a consumer can make on the job before benefits get impacted. They need continuing education.	Jan 28, 2011 7:54 AM
43	Again highly qualified staff is needed to attend to people with disabities, so training is very important. There ought to be some kind of certification process.	Jan 28, 2011 9:07 AM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
44	SDRC must monitor IL services closer as half of the agency's are not giving the client thier services such as watching TV, just sitting and talking, making hours up, and little or no supervision with medical needs.	Jan 28, 2011 1:15 PM
45	It is up to the service provider to make sure that the consumer is getting the appropriate support. I believe that staffing is more a "personal fit" issue than an objective qualifications issue.	Jan 28, 2011 2:31 PM
46	Many times these services have been provided by lazy folks who don't have other jobs. Energy and enthusiasm must be exhibited.	Jan 28, 2011 4:36 PM
47	High standards, being licensed and has a heart for the client.	Jan 28, 2011 4:44 PM
48	Agencies committed to the support of individuals w/ developmental disabilities to live and work in their own communities.	Jan 28, 2011 4:55 PM
49	The qualifications and performance of the person or organization should be outstanding that provide these services. I have been Blessed to have this with Mr. Bradshaw and the HCDD staff. My daughter has been 5150 so many times that all I could do was pray, pray, pray, and pray. I was so Blessed to find the HCDD group home.	Jan 28, 2011 4:56 PM
50	ILS: 2 years community college or more. SLS: Completion of high school for supervisory roles, instructional roles must meet ILS standards.. Completion of a curriculum regarding instructional methods and verifying basic knowledge of life skills tasks through the employer, with certification to the Regional Center, before providing 1:1 service.	Jan 28, 2011 4:57 PM
51	These standards already exist	Jan 28, 2011 5:13 PM
52	IAW with Standardized Service Plan.	Jan 28, 2011 5:25 PM
53	some ILS agencies submit quarterly reports; others submit semiannual reports. it should be semiannual reports for ALL ils agencies. writing reports uses up the actual ILS hours that could be spent providing the training. if the consumer is not living with family, the service coordinator needs to visit with the consumer quarterly anyways and write the reports. so its duplicate time spent for the SC and the ILS agency to write quarterlies.	Jan 28, 2011 5:28 PM
54	Organizations providing services need to have management in place that have sufficient education and work experience to provide both financial and programmatic oversight. Staff who are in contact with consumers need to be meet basic educational qualifications to supply the oversight of consumers daily living needs. Performance should be based on providing due diligence to both be proactive and responsive to consumer needs. Service providers cannot do what consumers don't cooperate with.	Jan 28, 2011 5:31 PM
55	If a professional is living with a RC client, they should have yearly back ground checks.	Jan 28, 2011 5:31 PM
56	Individuals providing SLS and ILS services to consumers should have at a minimum fingerprint clearances. There needs to be more clarification on the qualifications for someone to open an SLS agency like with ILS agencies. There needs to be an experience requirement and an educational requirement like with ILS. However, the requirements need to be clearly defined. People operating agencies need to have an understanding in mulitple areas, including business, social work, and managment skills.	Jan 28, 2011 5:31 PM
57	ILS instructors/ organizations should have trainings on professionalism and boundaries. They often make themself "friends" with the consumer and not the professional when it comes to boundaries. Building a rapport with the consumer/ family is different than borrowing money; taking the consumer out for dinner/ lunch; asking the consumer for gas money, and etc.	Jan 28, 2011 5:49 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
58	State certified.	Jan 28, 2011 6:10 PM
59	Trained personnel should direct but I think for some, the person that can provide these servcies can be a family member or a friend that is paid a little extra to help. For example if my son wants to move in with a friend when he grows up and that friend is able to be his supervisor, that is the ideal arrangement to be made. This friends under the direction of a trained person, can provide help with budgeting, cooking, and general safety.	Jan 28, 2011 6:16 PM
60	DDS should evaluate the organizations and certify the providers	Jan 28, 2011 6:21 PM
61	Keep at the current rates and amounts.	Jan 28, 2011 6:21 PM
62	Providers must have min of 5 years experience in SLS and in management prior to vendorization. Regional Center service coordinator experieince should not qualify as "experience" as it is not direct support nor is it management experience.	Jan 28, 2011 6:37 PM
63	SKILLS AND LEVEL OF EXPERIENCE	Jan 28, 2011 6:42 PM
64	finger print clearance, 18 years old, understanding of need	Jan 28, 2011 6:45 PM
65	appropriate edu/exper for the position adequate background checks continuous training/updates	Jan 28, 2011 6:49 PM
66	quarterly review	Jan 28, 2011 6:51 PM
67	rcrc surveys	Jan 28, 2011 7:02 PM
68	Supported living agencies should be able to demonstrate that their services fully adhere to the core principles of SLS.	Jan 28, 2011 7:07 PM
69	CARF Certified	Jan 28, 2011 7:09 PM
70	-The program's design and evaluation should be built around the 5 principles of supportive living. -Evaluations should be done from an outside agency annually. -Adequately trained and supervised team of service provided. -People providing services should be cleared through the DOJ -A guideline of offenses that would prevent people from providing support should be developed	Jan 28, 2011 7:10 PM
71	Program designs and program evaluations should be based on the 5 principles of community living. All employees should be able to pass a fingerprinting screen. A set of guideline of offenses that would prohibit people from providing services should be developed. They must be 18 years or older. The employees must be adequately trained.	Jan 28, 2011 7:10 PM
72	These standards already exist. We should use them!	Jan 28, 2011 7:10 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
73	*Program designs and evaluation tools should be centered around and founded upon the 5 Principles of Supported Living. *Agencies providing services should be able to prove that they believe and provide services based on the 5 Principles of Supported Living. *Persons hired to provide support to individuals should be mandated to perform a background check and a fingerprinting process. *Quarterly monitoring by Regional Centers are set in place to track performance. *Service providers must adequately train and supervise all employees. *Guidelines of offenses should be developed that would prevent people from providing support.	Jan 28, 2011 7:11 PM
74	The agency providing services should be able to demonstrate that their services are based on the five principles of supported living. People providing services should be fingerprinted and cleared through DOJ. A guideline for offenses that would prevent people form providing support should be developed.	Jan 28, 2011 7:13 PM
75	Current methods are sufficient.	Jan 28, 2011 7:28 PM
76	IRC or appropriate Regional Center.	Jan 28, 2011 7:30 PM
77	These standards already exist.	Jan 28, 2011 7:33 PM
78	I have a friend whose son lives in his own place with support from an SLS provider and I don't think that this provider has ever been audited by the regional center, which seems like it should be an annual requirement.	Jan 28, 2011 7:35 PM
79	Require finger printing and background checks for direct care staff, training of staff to curriculum-based service delivery with time limits and measurable achievement.	Jan 28, 2011 7:43 PM
80	It is my experience as the parent/conservator of a developmentally disabled person that the Regional Center and the Public Authority/IHSS do professional efficient work that enables my daughter and many others to live in their own homes and enjoy a decent standard of living.	Jan 28, 2011 8:02 PM
81	no idea	Jan 28, 2011 8:11 PM
82	There are so few organizations that provide this service, but I suggest that those who are successful in supporting their consumers in independent living situations be given the most support and priority.	Jan 28, 2011 8:18 PM
83	yes	Jan 28, 2011 8:35 PM
84	again dont purchase blindly research the provider..the regional center contracts are too general too cookie cutter..if you want to purchase day program for consumer in wheelchair check transportation vehicles....there are a lot of $$$ minded providers out there be aware remember english is the language most consumers understand...why purchase a non signing day program for a deaf consumer that signs to communicate....really look at what you are buying and the reason that you are buying it	Jan 28, 2011 8:39 PM
85	As long as your department focuses on buying houses for long-term care living arangements for people coming out of the Regional Center Facilities, in say, the Bay Area, then nothing else can be addressed because you spent all the money on a few privilaed individuals, losing site of your responsibility to reach the most with what we have collectively.	Jan 28, 2011 8:47 PM
86	must have necessary experience of working with clients with DD	Jan 28, 2011 8:49 PM
87	These Standards already exist	Jan 28, 2011 8:50 PM
88	Consumers, families, and caregivers are capable of ensuring the people working with the consumer is qualified.	Jan 28, 2011 8:54 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
89	Service standard should achieve the promise that people with intellectual and developmental disabilities will have an individualized program plan and access to the services and supports best suited to them throughout their lifetime, to enable them to live an independent, self-directed, and typical life.	Jan 28, 2011 8:56 PM
90	should be well trained in communityoptions and have a minimum of a BA	Jan 28, 2011 9:09 PM
91	See response to question #1 of this section.	Jan 28, 2011 9:22 PM
92	Determined by outcome.	Jan 28, 2011 9:23 PM
93	Ditto per previous comments	Jan 28, 2011 9:29 PM
94	ISP's, goals, objectives and other documenation will record progress made by each indviduals in reaching their goals towards the highest level of independence that is appropriate for each person. Agencies will track the information and have available for review upon request. Service Providers will maintain this documentation and tracking as most currently are. There is no or at most a minimal need for Regional Center oversight in many cases. Providers hold the responsiblity of holding true to their contracts with the state and the use of RC's is an additional expense with minimal or no benefit to providers or supported individuals	Jan 28, 2011 9:45 PM
95	Surveys completed by consumer and family on at least an annual basis.	Jan 28, 2011 9:52 PM
96	Like the current standards that are in place	Jan 28, 2011 9:54 PM
97	There needs to be data collected on those nonprofits staffing these homes to determine which providers are most effective and to duplicate their strategies.	Jan 28, 2011 10:03 PM
98	no suggestions	Jan 28, 2011 10:20 PM
99	The company can mail or email surveys for the family or consumer to fill out to discuss the service.	Jan 28, 2011 10:24 PM
100	Trained	Jan 28, 2011 10:26 PM
101	Criminal background checks, DOJ clearance, CPR/First Aid, CPI training	Jan 28, 2011 10:33 PM
102	ILS: The person should have a minimum of a bachelors degree in Rehab, Social Work, Psychology or a related field. The person should be fingerprint cleared by DDS and have a DMV and DOJ check as well (frequency should match that established through the current FHA programs.) For ILPs, the Program Manager should have a minimum of a bachelors degree in Rehab, Social Work, Psychology or a related field. Staff must have a minimum of a High School diploma or equivalency. The manager and all staff should be fingerprint & background cleared by DDS and have a DMV and DOJ check as well (frequency should match that established through the current FHA programs.) All ILS/ILP individuals should also have current First Aid and CPR to be updated as required by DDS. SLS programs should have the same requirements.	Jan 28, 2011 10:36 PM
103	Trained/educated in the requirements of the services to be provided.	Jan 28, 2011 10:39 PM
104	it must be a mature person with expierence and have finger print clear.	Jan 28, 2011 10:45 PM
105	Able to meet the specified outcomes.	Jan 28, 2011 11:05 PM
106	QA visits unannounced	Jan 28, 2011 11:06 PM
107	Continued training for all staff, but most importantly assigning a committee that will ensure adequate training is being done. More regional center trainings for programs should be available as opposed to leaving all training up to the company that employees staff and services clients.	Jan 28, 2011 11:10 PM
108	should be no reason to change what is in place now... but I don't know the specifics.	Jan 28, 2011 11:19 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
109	These should be outline in Title 17-- for ILS and SLS they are currently included in Title 17	Jan 28, 2011 11:21 PM
110	Do not allow parents or relatives to be the vendor.	Jan 28, 2011 11:22 PM
111	while there are no very good accrediation programs both carf and leadership are ok, but are not perfect; some organizations have solid histories of doing work - some of the people have good histories of being in the business; people have used outside resouces to keep their programs fresh and up to date- these are the real good programs	Jan 28, 2011 11:22 PM
112	Expect more and pay more.	Jan 28, 2011 11:47 PM
113	Initially, vendorize organizations who meet title 17 criteria (beware of program designs that are created by consultants who just cut and paste - all program designs should involve an interview with the actual program director/organization owner prior to vendorization. It is easy to buy a program design, it is harder to implement it). Evaluate services annually unless an agency has a proven track record. If they are a strong agency with consumers demonstrating increase in independence or successful living in community, audit less frequently and focus on struggling agencies.	Jan 28, 2011 11:57 PM
114	Hire the person, then fire them if they are not performing the tasks you hired them to perform. Do not hire an organization. That involves too much expense and red tape. Also, there are too many layers of communication to go through to get anything done or changed when working with an organization.	Jan 29, 2011 12:00 AM
115	Same	Jan 29, 2011 12:06 AM
116	Highly qualified.	Jan 29, 2011 12:29 AM
117	People and organizations who can DO THE JOB should be providing and running these services. If they place people in jeopardy, consumers should be removed from their program and no referrals made.	Jan 29, 2011 12:43 AM
118	Well known providers and service coordiantors that know of these providers and can verify that they are on the up and up.	Jan 29, 2011 12:45 AM
119	People providing these support serivces should be screened for hoensty and integrity as they are dealing with the intimate details of a person's life. Training should be expected and provided for new staff tod evelop the neede skills to be involved with a person requiring support. this includes hand on training. Currently, McDonalds offers more and more relevant training to its employee than most ILS or SLS providers	Jan 29, 2011 1:04 AM
120	Follow state guidelines	Jan 29, 2011 1:34 AM
121	I think a background check is in place.	Jan 29, 2011 1:39 AM
122	ILS and SLS organizations must be willing and able to work with the consumer and his/her family - to listen and consider their desires for their adult child. they sh have regular staff contact, check lists, training, house visits, safety rules to follow, meetings where caregivers can network and problem solve. they sh be advocates for the consumer and want what is best for him/her and for their health and safety, life enjoyment. They sh be able to advocate for the consumer and be a "go-between" for RC help if other services become necessary - e.g. behaviors or needs that arise	Jan 29, 2011 2:04 AM
123	The provider must be screened for criminal backgrounds and clean driving records and should be able to communicate with their client, understanding the client's language, communication aides and have CPR training.	Jan 29, 2011 2:37 AM
124	They must be licensed and have background checks, fingerprints and references.	Jan 29, 2011 3:05 AM
125	services should be provided by experienced staff particularly leadership of organizations	Jan 29, 2011 4:30 AM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
126	trained experienced caring, loyal patient, honest trusting	Jan 29, 2011 4:42 AM
127	service provider should be properly certified	Jan 29, 2011 5:06 AM
128	No one should be cut	Jan 29, 2011 5:09 AM
129	Ask the parents	Jan 29, 2011 6:36 AM
130	Substantial initial training, followed by required annual training.	Jan 29, 2011 6:42 AM
131	see above. Others in the organization need to have a philosophy that believes in the people they serve. They need to be able to work with each family and consumer in a positive, supportive way encouraging teamwork.	Jan 29, 2011 7:45 AM
132	SOBER AND DRUG FREE!!!	Jan 29, 2011 7:45 AM
133	As is, ok.	Jan 29, 2011 7:59 AM
134	needs to meet the needs of the client.	Jan 29, 2011 4:04 PM
135	The consumer is the best judge about the service standards, the qualifications and performance of the person(s) or organization providing the/or their service(s). Ask them!!!, talk to them!!!	Jan 29, 2011 7:28 PM
136	Well trained, mature instructors that have not only the schooling but the life experience. companies that employee such employees should have continual training in the areas of money management, medical awarness and community service.	Jan 29, 2011 7:38 PM
137	The individuals operating these programs should be trained and educated people in the area of assisting the disable	Jan 29, 2011 7:47 PM
138	Highly trained personnel. also train the family to take on responsibility.	Jan 29, 2011 8:32 PM
139	Minimum training (safety, health, nurturing independent skills) should be given to the person providing the services. No service provider should have any history of abusive treatment of people or animals. They should also not have a history of theft, cheating or other crimes against people's financial stability.	Jan 29, 2011 9:24 PM
140	They should be trained for their specific tasks after interviews and background and experience checks.	Jan 29, 2011 10:15 PM
141	MAJOR EXPERIENCE AND PROFESIONAL CERTIFICATION	Jan 29, 2011 11:50 PM
142	Anyone who can provide live-skills is qualified.	Jan 30, 2011 12:32 AM
143	Suprise visits need to be increased to the consumer homes a check list of minimal standards need to be met or the staff and vendor sanctioned	Jan 30, 2011 12:42 AM
144	I feel the qualifications are adequate. I do believe the standards for the consumer's medical care should be higher and quality assurance should be much better.	Jan 30, 2011 1:48 AM
145	Not sure, obviously people who are responsible and listen and learn about the person they are dealing with. These are almost more about character than training. It is a simple list. Maybe they need to know more about services and resources too.	Jan 30, 2011 4:59 PM
146	There are already state and federal laws covering many of these services and providers (eg: HHAs). However, in my direct experience, RCs do not confirm that the regs are in fact being followed. Our own RC failed to do so even afer I gave them a copy of the relevant Fed. regs and written proof that their vendor was failing to comply at a taped IPP meeting.	Jan 30, 2011 6:10 PM
147	surveys and reviews	Jan 30, 2011 9:12 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
148	Training and experience with disabled people, love and joy for them.	Jan 30, 2011 10:42 PM
149	Trained in the area they are responsible for training to the client.	Jan 31, 2011 4:32 AM
150	An individual that oversees a program should have a 4 year degree. Also employees should complete 16 units at a community college.	Jan 31, 2011 2:51 PM
151	Asked/answered	Jan 31, 2011 3:45 PM
152	Should be at least 18 and have experience with DD population or similar. Should be supervised by someone with at least a bachelor's degree.	Jan 31, 2011 4:19 PM
153	This seems to be the biggest area of concern. Direct providers are not trained well enough. Also, it should not be enough to just "be there" for a consumer. If the consumer requires the supervision then the caregiver should be caring for other areas of the individuals home care. Such as helping with laundry or light house cleaning. Working with the individual on learning new skills even after adulthood.	Jan 31, 2011 4:28 PM
154	most important is respect for the consumers and a clear understanding of their rights. a degree in social work is preferred, however most ILS/SLS instructors make between $10-$12 an hour, which greatly narrows the degree of education for those interested in this work. the executive director should be required to continue education in order to know and teach newer methods, etc.	Jan 31, 2011 4:45 PM
155	The independent living instructors should have at a minimum an AA degree and 12 hours of training. They should also have on going supervision and monitoring. If significant progress is not seen after the first two years, the service could be terminated and a new program put in place. Progress should be measured by the consumer's ability to complete the task competently.	Jan 31, 2011 5:47 PM
156	Providers should be required to show evidence of DOJ and health screenings and to carry insurance to protect persons served against financial and other abuse and exploitation. Minimum training standards should be set for support staff.	Jan 31, 2011 5:50 PM
157	Must be fingerprinted, cleared. No criminal record. The client deserves the best caregiver, with no background problems.	Jan 31, 2011 6:02 PM
158	The industry standards should be taken into consideration. Performance should also be reviewed annually.	Jan 31, 2011 6:09 PM
159	Vendorized by regional center.	Jan 31, 2011 6:36 PM
160	Care providers should receive training before performing services to consumers The agency or organization needs to be able to provide adequate training to each care provider.	Jan 31, 2011 6:39 PM
161	Qualifications are the same as the day programs, WAP and Supported Employment	Jan 31, 2011 6:41 PM
162	CARF	Jan 31, 2011 7:26 PM
163	Appropriate training to support independence and inclusion in the community	Jan 31, 2011 7:36 PM
164	* Program designs and evaluation tools should be centered around and founded upon the 5 Principles of Supported Living. * Agencies providing services should be able to prove that they believe and provide services based on the 5 Principles of Supported Living. * Persons hired to provide support to individuals should be mandated to perform a fingerprinting screening process. * Quarterly monitoring by Regional Centers are set in place to track performance. * Service providers must adequately train and supervise all employees. * Guidelines of offenses should be developed that would prevent people from providing support.	Jan 31, 2011 8:14 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
165	The person or agency providing these services should be vendorized by the appropriate regional center. They should have passed background check for criminal history and should be financially stable. They should have appropriate insurance and an internal system of supervision and accountability as will as periodic external quality assurance review. The review should look for outcomes and satisfaction of the consumer as well as practice standards.	Jan 31, 2011 8:23 PM
166	Must have proper training or educational background to work with individuals with DD's	Jan 31, 2011 8:48 PM
167	people preforming these services should be state licensed	Jan 31, 2011 9:03 PM
168	The quality and qualifications are very important for the type of services an individual receives. A qualified education and knowledge of the population is extremely important to better serve.	Jan 31, 2011 9:15 PM
169	Staff providing these services need to be trained on how to help a person empower themselves and learn how to do things for themselves. The purpose of an independent living worker, should be to train a consumer on how to do these things on their own, and not to do it for them and get them dependent on them.	Jan 31, 2011 9:17 PM
170	Having a history of positive experiences with vendors in this role would indicate their reliability and standards that are acceptable. Also, if possible, obtain thoughts and experiences from the consumer.	Jan 31, 2011 9:22 PM
171	These standards already exist	Jan 31, 2011 9:30 PM
172	I would think oversight could be provided by people with a 4-year college degree and proper on-the-job training.	Jan 31, 2011 9:41 PM
173	Agencies that abuse people or steal should not be allowed to continue as a provider. One chance is all we should give. Zero tolerance. Lots of other things are less important and can be worked on. But, not abuse or theft.	Jan 31, 2011 9:52 PM
174	The Quality Assurance used by San Andreas Regional Center focuses on "best practices" rather than regulations. Unfortunately, it appears that many SARC SLS providers have forgotten what is required in regulations and is more worried about these "best practices" that require things like a standardized face sheet, or a standardized emergency kit, etc. These best practices were put together from individuals who have never provided SLS services - so I believe it would be benefitical for SARC to just stick to regulations when it comes to performance and not institute best practice requirements that are questionable at best and not best practice at all at their worst.	Jan 31, 2011 9:54 PM
175	Same as other non-disabled persons	Jan 31, 2011 9:56 PM
176	These standards already exist	Jan 31, 2011 9:58 PM
177	Organizations should have standardized training prior to the implementation of service. Their in-house training program for employees should also be monitored.	Jan 31, 2011 10:11 PM
178	State certifications for all agencies. Eliminate the mom and pop agencies.	Jan 31, 2011 10:16 PM
179	have training and experience.	Jan 31, 2011 10:22 PM
180	ILS counselors are doing the work most social workers should be doing.	Jan 31, 2011 10:25 PM
181	Those that have issues need to be addressed as oppossed to looking at those that get it right all the time!	Jan 31, 2011 10:26 PM
182	Vendorization	Jan 31, 2011 10:30 PM
183	??	Jan 31, 2011 10:31 PM
184	CEU's should be an ongoing requirement and should be given by regioanl centers.	Jan 31, 2011 10:40 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
185	Currently, Regional Centers are suppose to watch the quality of support services through quarterly ISP meeting. These meetings actually happen rarely and nothing about quality could be discovered if a provider wanted to hide it.	Jan 31, 2011 10:54 PM
186	local regional centers should judge	Jan 31, 2011 11:27 PM
187	Social service agency	Jan 31, 2011 11:41 PM
188	Some training and education are essential, plus a commitment to helping others (a feeling of satisfaction at helping others).	Feb 1, 2011 1:15 AM
189	If an organization is supporting an individual with success, don't try to change that out...continuity is important for the developmentally disabled population.	Feb 1, 2011 1:20 AM
190	SLS must engage best practices and prove results each year base on consumer choice of the service. Only those vendors successful with consumers get funded--END BABYSITTING !!! Give people with disabilites a life! SLS should also integrate support for microbusinesss development!!	Feb 1, 2011 1:43 AM
191	I believe there should be certification standards. Then there needs to be monitoring and evaluations on the part of families, friends and consumers.	Feb 1, 2011 3:15 AM
192	background check on credentials/experience	Feb 1, 2011 4:51 AM
193	see above #3	Feb 1, 2011 4:52 AM
194	moitoring	Feb 1, 2011 5:18 AM
195	no	Feb 1, 2011 5:19 AM
196	N/a	Feb 1, 2011 5:24 AM
197	see other answers - same	Feb 1, 2011 5:59 AM
198	DDS must stop the regional centers who develop their one non-profits and funnel development money back to themselves under the name of housing. Clients choice is limited because the regional center is funneling resources of the clients to their own housing choice. Additionally, most all regional center sponsored housing options cost more the traditional providers.	Feb 1, 2011 7:11 AM
199	The State can reasonably set minimum standards, but the local regional center should be able to supplement or modify the standards depending on local circumstances.	Feb 1, 2011 7:15 AM
200	Hatlen Center	Feb 1, 2011 8:55 AM
201	Must be 18 experience in the field, some type of college credit in psychology, dsp classes	Feb 1, 2011 9:46 AM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
202	If rates for SLS/ILS and regional center staff funding weren't be cut at this time, it would be best to require that the regional center, or a contractor of the regional center, provide a basic training course that all SLS/ILS staff have to participate in and pass before they could provide services for an SLS/ILS vendor. This would be on top of training and experience requirements for vendors already in regulations. This could be something similar to the care home staff training courses once required, so that there is a basic, state-wide body of knowledge that all SLS/ILS staff would bring to their work to ensure basic competence, safety, etc. All SLS/ILS staff must be cleared for criminal (including sexual predation) background before they can work. Any SLS/ILS staff providing transportation must be currently licensed, have a clean DMV, and if he/she used own vehicle must have current and approprirate insurance (meaning that the insurance company knows they are using their vehicle for this purpose....this would mean higher rates for staff and the need to pay them accordingly). Contracts with SLS companies should include performance criteria to determine whether their contract should continue or not: measurement of objectives achieved by consumers (e.g. minimum of 90% of all consumer's SLS goals achieved during the quarter preceding the contract review), minimum number of consumers served that retain their SLS situation (meaning that "x" number or percent of consumer referred to the SLS vendor during contract year remain in their homes at the time of the contract review), etc. Contracts should also have financial penalties for vendor non-performance e.g. "x" dollars returned to the regional center for any special incident that is not reported in a full, timely, and accurate manner, "x" dollars returned to the regional center for failure to report suspected abuse to the authorities and the regional center in a timely and accurate manner. This would ensure vendor management stays on top of staff performance and that serious mistakes are negatively reinforced. Any moneys refunded to the regional center could either stay in POS or be put into a special fund of some kind if DDS preferred.	Feb 1, 2011 10:46 AM
203	small amount of assistance	Feb 1, 2011 4:28 PM
204	Workers should have extensive experience working with the DD population. Experience should trump education.	Feb 1, 2011 4:52 PM
205	The organization providing the services needs to follow Title 17 regulations. The people providing services need to pass background check, fingerprinting, be certified in CPR and 1st aid and provide quality services.	Feb 1, 2011 5:48 PM
206	Hopefully many standards already exist in this area. Are they monitored and enforced? Going all-union does not necessarily improve standards-based care. My friends' non-union providers are excellent, and seem to go by higher standards than the minimums. Standards for care should be set by independent, third-party organizations and not by unions or other groups that have a financial stake in living by those standards.	Feb 1, 2011 6:06 PM
207	Every employee of an agency providing the services should be required to pass a yearly drug test and a background check, know CPR, be atleast 21 years old, possess a high school diploma/GED and be able to chart notes.	Feb 1, 2011 6:07 PM
208	The qualifications and performance of the person that provideds these services should be responsive, understand people with disability, patient, flexible and creative.	Feb 1, 2011 6:18 PM
209	not a babysitting service.	Feb 1, 2011 6:22 PM
210	those with experience; profit or non profit - doesn't matter	Feb 1, 2011 6:38 PM
211	same answer as provided for day programs	Feb 1, 2011 6:48 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
212	Standard person should have had at least 2-3 years experience in dealing with people with developmental disabilities. More trainings should be provided by Regional Centers to assist the vendors with providing the best possible person to deliver services.	Feb 1, 2011 6:51 PM
213	As is	Feb 1, 2011 6:54 PM
214	Current service standards could be reduced by a maximum of 15%.	Feb 1, 2011 7:25 PM
215	High School Graduate without a criminal background. Completely trained by the individual organization and monitored by that organization to insure that the consumers are receiving the services agreed upon.	Feb 1, 2011 7:36 PM
216	Keep same	Feb 1, 2011 7:44 PM
217	1) "Purchase of Service Limits" is a more appropriate name than "standards." 2) We oppose statewide purchase of service "standards." 3) There is no "one size fits all" solution. Purchase of service standards for each individual are defined by the IPP. 4) These standards already exist. 5) "Up to but not to exceed the cost to house one individual in a Developmental Center."	Feb 1, 2011 7:56 PM
218	Quality reviews should be implemented initially and then the outcomes of client progress should be monitored to assure that the service continues to be of quality for ILS.	Feb 1, 2011 8:31 PM
219	Supported Living staff should have at least an associates degree in a field related to working with disabled individuals. Supported Living Staff need to be educated and demonstrate good habits in their own lives before guiding people with disabilities.	Feb 1, 2011 8:54 PM
220	1) "Purchase of Service Limits" is a more appropriate name than "standards." 2) We oppose statewide purchase of service "standards." 3) There is no "one size fits all" solution. Purchase of service standards for each individual are defined by the IPP. 4) For questions 3 & 4: These standards already exist. 5) "Up to but not to exceed the cost to house one individual in a Developmental Center."	Feb 1, 2011 9:15 PM
221	Have job placement services actually place in jobs.	Feb 1, 2011 9:26 PM
222	Current standards are appropriate.	Feb 1, 2011 9:27 PM
223	THE GOVERNMENT SHOULD TAKE CARE OF THE FINANCING OF THESE SERVICES. HEY, WE TAX PAYERS PROVIDE FOR ALL THE DAMN CRIMINALS WHO ARE TREATED BETTER THAN PEOPLE WITH DISABILITIES. THE CLIENTS CASEWORKER SHOULD MAKE SURE THAT THIS PROGRAM IS BEING IMPLEMENTED APPROPRIATELY, AS WELL AS PARENTS/GUARDIANS.	Feb 1, 2011 9:40 PM
224	review by consumer and family	Feb 1, 2011 9:40 PM
225	Require new venodrs be 501c3s so that they can access fundraising/grant writing to mitigate operating expenses.	Feb 1, 2011 9:49 PM
226	quality checks for service providers training for service providers through regional centers at low/no cost	Feb 1, 2011 9:58 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
227	History of providing support, ability to provide linguistic and cultural competent services.	Feb 1, 2011 10:02 PM
228	This must be a person who is found to have no legal barriers to working with Regional Center Clients This shall be a person who is interested in the clients best welfare This shall be a person supported by an organization that holds them accountable This shall be a person who is visited and trained by a qualified manager This shall be done through an organization that the Regional Center knows it can trust	Feb 1, 2011 10:13 PM
229	The qualifications for organizations and individuals that are employed by the organizations are often over bearing given the amount the state is willing to pay for services. If qualifications are to go up then the state needs to pay additional rates for these qualifications.	Feb 1, 2011 11:20 PM
230	Once Services are defined, it is important to have a model in place that shows flow of responsibilities, expectations and challenges. Because the consumer is disabled, doesn't mean that they shoulnd't have the ability to have a honest picture of what is "reality" for them and what they should expect. In many instances the 40 hours of service gets in the way of progress. This service is clearly, underpaid, rigid and inflexible, and fails to provide the overall support of success for the client.	Feb 1, 2011 11:37 PM
231	Qualified and degreed personnel.	Feb 1, 2011 11:43 PM
232	Prevailing standards are ptobably .adequate	Feb 1, 2011 11:54 PM
233	There is truly a need to have a standard put in place, as I have wondered how and why some of these trainers are in these positions. I do think that trainers should be required to have some college education.	Feb 2, 2011 12:27 AM
234	I see my ILS (Independent Living Skills) Instructor 3hrs a week. She teaches me how to stay on track and organize my life using a daily planner. She also listens to me and I feel she understands me. I think these are important traits an ILS should have. As far as education and experience, I think they should have a college degree and 1 year experience.	Feb 2, 2011 12:53 AM
235	I like that my ILS Instructor helps me with bills, shopping, socialization. I like that my ILS Instructor listens to me, she helps me problem solve, and she advocates for me. I think my ILS Instructor should have a college degree and 6 years of experience in working with adults with developmental disabilities.	Feb 2, 2011 1:00 AM
236	1. Have some ability to teach. 2. Use a curriculium and modules with testing. 3. Do in a group.	Feb 2, 2011 1:22 AM
237	The workers should meet performance standards. They should have experience and proper training with persons with developmental disabilities. They should have to answer to any complaints about them.	Feb 2, 2011 2:00 AM
238	CARF.	Feb 2, 2011 2:36 AM
239	If it is a success with the client and achievments are made. There always needs to be follow up on any service to see if it is working.	Feb 2, 2011 2:47 AM
240	Education levels, experience of staff and the program plan design	Feb 2, 2011 3:26 AM
241	Licenced, good caring providers. Low tunover rates, ability to keep clients despite difficult behaviors.	Feb 2, 2011 3:32 AM
242	Someone who can break down tasks into component parts and someone who has a lot of patience. Does not necessarily need to be licensed.	Feb 2, 2011 3:44 AM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
243	From observation, have noticed that some group homes do not provide adequate supervision of their clients. Isn't it up to them to see that their clients leave on a cold morning with a coat? That they have their glasses? Too much emphasis is placed on "independence" when often times these folks don't have the capacity to make good decisions on their own. That's why they are in a group home...they need guidance.	Feb 2, 2011 3:52 AM
244	The person or organization providing the services needs to put the consumer, their safety and well being, and their happiness at the top of the list. If the consumer exhibits success and is able to be managing well, then it would be helpful in determining the performance of those providing the services. Qualifications should consider experience knowing and working with persons with developmental disabilities	Feb 2, 2011 5:03 AM
245	Assistance should be more related to attitude, ability and willingnes to be helpful than to elaborate or extensive qualifications.	Feb 2, 2011 5:21 AM
246	Again experience is everything when providing this service. I had people I supervised that had more education than I had. Many of them I had to train on how to respond effectively to our consumers. The classes taught what to do in certain situations it didn't real life situations. Experience gives you the knowledge of how the tweak the ABA or approach to use to fit the person &/or situation. The organization needs to provide workshops & support. This is a very complex job. You are helping someone who has challenges to accomplish their life dream. Also to be able to live not at home or in a more confining situations.	Feb 2, 2011 5:33 AM
247	There needs to be a trained (Masters level) vendor/owner that supervises staff and is accountable for therapeutic plans being implemented, changed as needed, and brought to completion. Success in changing a behavior is the responsiblityof the owner of the SL/ILS agency..	Feb 2, 2011 5:46 AM
248	Degrees/certifications, success rate, survey of participants annually.	Feb 2, 2011 5:48 AM
249	Is the staff caring and well trained. Are they effective at meeting the needs of the individuals. Are the staff personable and treat the clients with dignity and respect.	Feb 2, 2011 6:00 AM
250	Honestly, many times the people hired to be the care providers are underpaid and/or under-educated. This is not always the case, there are many options for individuals, but if the agency is not reputable, and not inspected regularly, adults who need these services can be taken advantage of. Regular check-ups on the indivduals actually providing the services, not just the agency in general, would be helpful. Also, continuity in care for the affected adults is important, as it can take a long time to establish a relationship.	Feb 2, 2011 6:03 AM
251	bcba should be supervising.	Feb 2, 2011 6:35 AM
252	Title 17 regulations is very very vague. You should get together and make the requirements even more difficult to meet. So only qualified people and people who cares work with our consumers	Feb 2, 2011 2:01 PM
253	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 2, 2011 3:35 PM
254	Far to many times the ILS worker provides transportation and does not follow the IPP.	Feb 2, 2011 3:40 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
255	Be sure to include the qualifications and performance requirements of the regional center employees who authorize the services. The decisions about all funding should be based on what benefits the person with disabilities the most. If the question were posed to the client/consumer/individual/participant, how would they answer the following question: Would you prefer to continue getting services you need to maintain a roof over your head or an agency representative who completes the paperwork to authorize payment? All SL and ILS direct care employees should be well trained to standards agreed on at the state level. That would certainly include dignity, respect, independence - based on the quality of life standards already developed by the state.	Feb 2, 2011 4:06 PM
256	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 2, 2011 4:55 PM
257	Enforce that these services be provided in the consumer's home and not allow providers homes	Feb 2, 2011 5:24 PM
258	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 2, 2011 5:51 PM
259	Follow up with the organization and make sure they hire qualified staff to help the consumers to learn, and grow and develop living skills that are useful to them. They don't need babysitters, they need staff that will teach and help them to develop into useful adults that can perform functions they need for everyday living with support.	Feb 2, 2011 6:14 PM
260	Communication between the person receiving services, a case manager, family, and friends.	Feb 2, 2011 6:23 PM
261	Established standards to be reviewed with and enforced by RC or by DDS	Feb 2, 2011 6:29 PM
262	a	Feb 2, 2011 6:51 PM
263	see above	Feb 2, 2011 7:02 PM
264	All staff with direct contact should have pre-hire background checks and drug testing, with random periodic drug testing. All staff should be trained in emergency proceedure, first aide and CPR, and be committed to providing assistance if the individual needs emergency care. Staff should be trained on a tiered basis, with those individuals requiring more support with medical concerns or behavioral concerns assisted by staff with appropriate training.	Feb 2, 2011 7:18 PM
265	Minimum A.A. degree + standardized training for direct service providers	Feb 2, 2011 7:30 PM
266	SLS agencies should be very experience in community support and safety. ILS agencies should have the same. Depending on the supports needed, direct staff that provide these services, at the very least should have a high school dipolma, experience with our clientel, and a good work history.	Feb 2, 2011 7:41 PM
267	Probably for most SLS services, high level education is not required and therefore the rates of pay for the SLS direct care workers does not need to be very high. I am concerned about the growing number of individuals vendored under 062, personal support. I am uncertain if these people are trained and there is potential liability here. I'm sure most do not carry insurance and do not operate like a business owner. Stricter requirements need to be in place for 062 and then it should be considered first as a least costly option instead of agency SLS under 894/896.	Feb 2, 2011 8:27 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
268	The organization needs to have a check list of skills the client wanting to live independently needs to have and if they do not meet the requirements then they do not live independently. The organization needs to also have a check list for items that the client moving into an aparmtent/condo will need and a plan on how to make sure the client has what they will need before they move in. The organization that is providing the service needs to have a list of requirements that the apartment/condo will met, i.e. light bulbs in the ceiling lights, carpets clean, etc. Safety of the client should always be the first and formost in everything. The social life of the client that lives independently, in my estimation, is not at the same level as it would be if he lived in a different situation. Since the staff that works with the clients is not allowed to transport for social events and if they can not ride the bus then they can only participate in those activites that they can walk to and that may not be an option. They begin to feel isolated and this leads to other problems. Social activites need to be an important part of there goals if they are to leave independently.	Feb 2, 2011 9:19 PM
269	vigilance on the part of the consumer	Feb 2, 2011 9:27 PM
270	services should be provided only by persons or organizations that are properly vendorized as described int eh Lanterman Act Section 4648 (a)(3)	Feb 2, 2011 9:38 PM
271	classes / training	Feb 2, 2011 9:41 PM
272	Right now it is too difficult for a new home to open up. The liencing requirements are ridiculously too high. The standards need to be brought down so homes are able to make a profit or at least break even. There is too much paperwork now for a home to open	Feb 2, 2011 9:42 PM
273	ALL PROGRAMS SHOULD BE INVOLED	Feb 2, 2011 9:43 PM
274	SAME AS PRIOR	Feb 2, 2011 10:05 PM
275	Trainings, efficiency, whether consumers are happy	Feb 2, 2011 10:05 PM
276	* People who do well at living on their own and can manage their own household responsibly * Role models--these providers should reflect what they are teaching others. * People who enjoy working with other individuals and can keep respect towards them.	Feb 2, 2011 10:07 PM
277	See Early Start response to this question	Feb 2, 2011 10:11 PM
278	Do not implement a $750 million cut to the Department of Developmental Services (DDS) budget. It is too drastic! We need these services for our kids on the spectrum!	Feb 2, 2011 10:12 PM
279	Services should be provided only by persons or organizations that are properly vendorized as described in the Lanterman Act. Section 4648 (a)(3)(A).	Feb 2, 2011 10:15 PM
280	Please previous topic response....	Feb 2, 2011 10:19 PM
281	Have at least an AA in a related field.	Feb 2, 2011 11:16 PM
282	suggested minimum 2 years experience, high school graduate for direct care staff.	Feb 3, 2011 12:19 AM
283	Strong providers should be very qualified and the RC should evaluate on an ongoing basis.	Feb 3, 2011 12:26 AM
284	supervise very often..and be in contact with the guardians..send different groups not just one.	Feb 3, 2011 12:42 AM
285	Same answer as previous pages	Feb 3, 2011 12:45 AM
286	peo[ple passionate in the field dedicated to helping others, nurses are wlcome	Feb 3, 2011 12:51 AM
287	Providers should be vendorized and approved by the regional centers.	Feb 3, 2011 12:53 AM
288	see 3.	Feb 3, 2011 12:57 AM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
289	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 3, 2011 1:00 AM
290	Bachelor's Degree or higher in related field.	Feb 3, 2011 1:24 AM
291	monitored by regional center	Feb 3, 2011 1:31 AM
292	Quarterly review	Feb 3, 2011 1:40 AM
293	The persons or organizations providing these services should meet safety qualifications, have criminal background screening and have sufficient educational and vocational experience to provide these services.	Feb 3, 2011 1:49 AM
294	There should be an industry standard, created by professionals in this field, to provide information regarding these services.	Feb 3, 2011 1:51 AM
295	highly qualified	Feb 3, 2011 1:58 AM
296	The ILS facilitators should have a knowledge in the field of work. ILS facilitators should always be on time , follow a schedule with the client. Always respect the client values, and family members.	Feb 3, 2011 1:58 AM
297	An understanding of the disabilities and how their services are provided with trained staff.	Feb 3, 2011 2:04 AM
298	Should monitor whether actual persons submitted in the paperwork are the actual persons providing services.	Feb 3, 2011 2:24 AM
299	I don't know the answer to this, but there must be some requirement for at least experience if not a college degree. This has been a field that has been seen as a lucrative money maker for providers who do not perform adequately.	Feb 3, 2011 2:24 AM
300	quaterly follow thru with the client with monthly phone check up to ensure that all is fine	Feb 3, 2011 4:38 AM
301	check education and have back round checks	Feb 3, 2011 5:04 AM
302	could use a similar DSP training as a basis.	Feb 3, 2011 5:10 AM
303	HIGHLY qualified people and organizations	Feb 3, 2011 5:12 AM
304	It depends on the particular service to be provided. I understand that ths is a whole variety of servces.l	Feb 3, 2011 5:32 AM
305	You need better interviewing techniques before hiring. That should have fallen on the agencies you get your people from; make them more responsible. I had one of your agencies ask if I would call their employee and describe waht "autsim and Aspergers means" and what they should do. I told them I was not paid to train their employees.	Feb 3, 2011 6:25 AM
306	same as today.	Feb 3, 2011 6:48 AM
307	Same standards as Valley Mountain Regional Center.	Feb 3, 2011 6:50 AM
308	No Comment	Feb 3, 2011 6:52 AM
309	evaluations	Feb 3, 2011 6:57 AM
310	Trained employees of RCs can provide these services.	Feb 3, 2011 7:23 AM
311	There needs to be more supervision and training of workers, but most companies can't afford it. Some companies are too big to have quality services. I believe that ILS and SLS companies should be small with no more than 50 individuals for SLS and 75 for ILS. In addition there should be supervision of the staff by a MA level person who reviews the plans and gives input to improve the client outcome with adaptive skills and life activities so that hours may be reduced if appropriate.	Feb 3, 2011 7:30 AM
312	All direct care staff need to have criminal background checks and regular and spontaneous drug screenings. They should also have some experience in working with the special needs population.	Feb 3, 2011 3:36 PM
313	Controlled by Regional Center or organizations like Project Independence that provide support for the disabled living independently.	Feb 3, 2011 4:32 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
314	Providers with credentials. Personal references also to make sure they are humane, kind, fun. Frequent monitoring.	Feb 3, 2011 4:46 PM
315	Generic services and supports should be utilized when available. All support staff should be fingerprinted. Accommodations should be made for family members who are willing to provide some of the needed services, and some reimbursement should be made available to the family members. Regional Center Service Coordinators should monitor to ensure that services are being provided.	Feb 3, 2011 4:53 PM
316	Care staff need to be qualified to some degree in relating to consumers in a caring manner rather than just minimum wage "babysitters"	Feb 3, 2011 4:55 PM
317	Judged by the vendor QA standards by regional center staff	Feb 3, 2011 5:17 PM
318	Direct care staff should participate in on-going trainings of working with people with disabilities.	Feb 3, 2011 5:22 PM
319	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 3, 2011 5:23 PM
320	Providers should be able to differentiate their services based on what consumers really want. Right now we have a full range of "vanilla" - some taste better than others, but it is still all vanilla. Direct care staff are woefully underpaid, and there should be incentives provided for them to provide better customer service and outcomes.	Feb 3, 2011 5:37 PM
321	experience serving the population for which they wish to serve.	Feb 3, 2011 5:42 PM
322	No Comment	Feb 3, 2011 5:44 PM
323	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 3, 2011 5:46 PM
324	same as above	Feb 3, 2011 6:25 PM
325	Services should be provided only by persons or organizations that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 3, 2011 6:29 PM
326	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A). .	Feb 3, 2011 6:39 PM
327	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 3, 2011 6:50 PM
328	none	Feb 3, 2011 6:55 PM
329	Should be kept as in accordance with The Lanterman Act Section 4648(a)(3)(A).	Feb 3, 2011 7:23 PM
330	experience working with people with dd/mi	Feb 3, 2011 7:46 PM
331	drug testing, DOJ background checks	Feb 3, 2011 7:46 PM
332	Make sure they are properly vendorized	Feb 3, 2011 7:49 PM
333	The people providing daily ongoing care should be trained in restraint practices, CPR, and have general knowledge in all disabilities.	Feb 3, 2011 7:54 PM
334	Vendors must agree to some rate ceilings. The state may want to rethink how they veiw the state developmental centers. We may need to have a few small ones around the state. Not everyone is fit to be in the community whether they are disabled or not.	Feb 3, 2011 7:55 PM
335	See #3. Continuation of funding of services should be dependent upon meeting certain service standards; again, way before the de-vendorization option that won't happen. For example - many ILS agencies don't do progress reporting as required, yet they know we won't de-vendor them so they don't bother.	Feb 3, 2011 8:05 PM
336	Only qualified individuals should be providing services just as they are now.	Feb 3, 2011 8:09 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
337	ALL consumers should be able to e-mail a face expression or words to their RC worker. State must have AREA BOARD 12 as eyes and ears along with parents empowered along with CONSUMERS	Feb 3, 2011 8:10 PM
338	Training, Background checks, inspections of facilities. In my 30 years of law enforcement experience I have seen very few homes/facilities that I would allow a loved one to live in. Most are all about the funding and provide minimal of any services to the residents. And yes as a first responder, mandated reporter and more importanly a father I made numerous complaints to APS about several of these facilities	Feb 3, 2011 8:17 PM
339	Only organizations holding the required permit, license, education should be able to service.	Feb 3, 2011 8:51 PM
340	trained personnel	Feb 3, 2011 8:54 PM
341	????	Feb 3, 2011 9:02 PM
342	So much of this service seems related to effective organization and case management of basic ADL and self help skills. Standards should not be oriented to degrees, but should reflect the ability to provide the actual services needed on the schedule and frequency determined. Services should be paid for demonstrated performance of a service and not as a monthly flat fee unless that is shown to be the most cost effective model that also insures the goals of the service. Peer review and RC supervision and QA are vital.	Feb 3, 2011 9:17 PM
343	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 3, 2011 9:20 PM
344	Prior experience with these services, ideally with disabled population being served OR a plan for providing service with the partnership of service providers (behaviorists, teachers, counselors, etc.) if the agency was new to the industry.	Feb 3, 2011 9:38 PM
345	The use of CNA's is critical. Pay them appropriately and provide a career path and you will attract more.	Feb 3, 2011 9:38 PM
346	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 3, 2011 9:44 PM
347	n/a	Feb 3, 2011 9:53 PM
348	Better billing checks to ensure the hours begin billed for are reflective of the actual hours of service being provided. Frequent reassessment of the hours needed to actually support a client.	Feb 3, 2011 10:15 PM
349	I don't know	Feb 3, 2011 10:19 PM
350	In my opinion, the qualifications and performance should be solely based on the above mentioned benchmark of independence. Have these clients improved on their ability to complete ADL's (activities of daily living) while receiving services from this provider? If not, the provider has failed. Client independence serves the role of improving the lives of clients while also reducing the cost to the state. Making benchmarks clear will force agencies to be more directed in helping clients achieve independence. It will also provide a defense against families who are pressuring agencies to do more and more for their children (who are really adults).	Feb 3, 2011 10:37 PM
351	Services should be provided only by persons or organizations that are properly vendorized as described in the Lantermasn Act Section 4648 (a) (3) (A).	Feb 3, 2011 10:45 PM
352	providers of these services should be people or organizations properly vendorized	Feb 3, 2011 10:47 PM
353	Obviously, criminal background checks, intensive interviews.	Feb 3, 2011 10:54 PM
354	As currently set.	Feb 3, 2011 11:12 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
355	The regional center should evaluate programs every 3 years.	Feb 3, 2011 11:13 PM
356	Again, there should be some guidelines for qualifications for providers.	Feb 3, 2011 11:18 PM
357	Vocational or experienced individuals	Feb 3, 2011 11:34 PM
358	There should be comptency-base testing and training for all support staff. There should also be specific standards for owners and administrator staff incorporating specific criteria for education, background and years of experience.	Feb 3, 2011 11:42 PM
359	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 3, 2011 11:44 PM
360	Services should be provided only by persons or organizations that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 4, 2011 12:06 AM
361	Liscenced & certified	Feb 4, 2011 12:11 AM
362	ILS agency should go through re-vendorization every two years. ILS agencies should not be allowed to provide any further services if they themselves are manipulating consumers and using them to make a buck for themselves. Require an ILS agency to spend a full hour a week at least to review areas of needs and see how they can support consumer for the rest of the week. Too many ILS workers show up to the consumers home and take no more than 15 minutes to work with them. Limit how many IL consumers an agency could have in one particular month or period of time.	Feb 4, 2011 12:19 AM
363	Run records checks and DMV checks yearly.	Feb 4, 2011 12:48 AM
364	Should be accredited by the appropriate organization to meet the goals of whatever therapy service they are supposed to perfrom and should be monitored and evaluated by supervisors in a non-bureacratic method to ensure that they are providing the proper services in the proper manner so that they are effective. Communication with the consumer is critical by both the provider and the supervisory personnel.	Feb 4, 2011 12:53 AM
365	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 4, 2011 1:06 AM
366	services should be provided by organizations that are properly vendorized	Feb 4, 2011 1:22 AM
367	Services should be provided only by persons or organizations that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 4, 2011 1:52 AM
368	Counselors that provide ILS or supported living services should be thoroughly trained by the agencies providing these services. DDS can and should standarize the qualifications of these individuals in the same manner that group home trainers are expected to follow. A course of study, CPR training and standards for criminal background should also be established. With the standarization of these requirements, rates should also be standarized thus avoiding long established non-profit agencies who earn huge rates for low-quality and inefective services to increase the bar of training and compete fairly and effectively with agencies that demonstrate inegrity and commitment.	Feb 4, 2011 2:02 AM
369	Services should be provided only by persons or organizations that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 4, 2011 2:07 AM
370	In my own experience there are several inexperienced SLS providers who are unable to provide the appropriate care to the individuals we serve. It is also important that the service provider have training and hire staff that are trained and have experience.	Feb 4, 2011 2:22 AM
371	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 4, 2011 2:49 AM
372	Regional center need to screen the professional and educate the parent what to expect from the provider.	Feb 4, 2011 3:11 AM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
373	Services should be provided only by persons or organizations that are properly vendorized as described in the Lanterman Act.	Feb 4, 2011 3:41 AM
374	Both parents, clients and regional centers.	Feb 4, 2011 3:52 AM
375	Background checks to make sure individuals have educational and positive prior employment history in order to be able to understand and compassionately deliver the services.	Feb 4, 2011 4:00 AM
376	the employees need to have at least a year of experience in the field working with the DD population and proper training for two weeks before they are on their own with a client	Feb 4, 2011 4:13 AM
377	The current low pay has resulted in the great difficulty in attracting appropriately qualified individuals. Things have been holding up only due to the long term integrity and sacrifice by honorable people in the industry. That generation is passing away. The existing services standards cannot be relaxed or the disabled will suffer greatly. That is not right. That is not civilized.	Feb 4, 2011 4:42 AM
378	Everyone who is involved with the individual consumer must be bound to the vision of giving the individual the best possible situation for them to live up to their full potential.	Feb 4, 2011 4:58 AM
379	Provider should obtain a license from community care licensing and should operate by the regulation of Title 22.	Feb 4, 2011 5:27 AM
380	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 4, 2011 6:42 AM
381	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 4, 2011 7:36 AM
382	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 4, 2011 3:17 PM
383	Services should be provided by recognized and qualified vendors dedicated to the well-being of its clients as prescribed in the Lanterman Act. They must also possess the proper training- this is critical to success.	Feb 4, 2011 3:54 PM
384	Criminal background check. Recommendations. Family members if avalible, but this to should be followed through with physical check-ins and phone calls.	Feb 4, 2011 4:47 PM
385	None	Feb 4, 2011 4:49 PM
386	Same as previous section	Feb 4, 2011 4:55 PM
387	N/A	Feb 4, 2011 5:01 PM
388	Services providers should be provided only by persons or organizations that have been approved as vendors as described in the Lanterman Act	Feb 4, 2011 5:12 PM
389	Services should be provided only by persons or organizations that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 4, 2011 5:16 PM
390	Social services accrediation, MSW's are especially useful for social workers and work experience is also very useful. Families of diabled people can provide insight into issues and should be contacted at least bi-annually, but monthly would be more effective.	Feb 4, 2011 5:21 PM
391	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 5:44 PM
392	The RC should have an evaluation process based on the CA rules, regulations and laws governing these services. Providers should be certified using this tool before beginning services and re-certified at least every two years. If providers do not meet the certification requirements, provision certifications should be issued with a limited amount of time to correct the deficiencies.	Feb 4, 2011 6:08 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
393	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 4, 2011 6:12 PM
394	The qualifications are the same ones I listed on the Day or Work Program section of this form.	Feb 4, 2011 6:18 PM
395	Properly training every employee to ensure overall satisfaction.	Feb 4, 2011 6:28 PM
396	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A)	Feb 4, 2011 6:37 PM
397	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act section 4648 (a) (3) (A).	Feb 4, 2011 7:09 PM
398	For individuals - a minimum of 2 years of college plus additional training to work with individuals with disabilities.	Feb 4, 2011 7:17 PM
399	The same as previous #4.	Feb 4, 2011 7:19 PM
400	Review by Regional Center	Feb 4, 2011 7:33 PM
401	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 4, 2011 7:50 PM
402	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 4, 2011 8:15 PM
403	Services should be provided only by persons or organization that are properly vendorized	Feb 4, 2011 8:39 PM
404	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 4, 2011 8:56 PM
405	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 4, 2011 9:19 PM
406	education and experience	Feb 4, 2011 9:36 PM
407	Experience social worker with disabled client experience.	Feb 4, 2011 9:43 PM
408	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act section 4648 (a) (3) (A).	Feb 4, 2011 9:55 PM
409	Those trained, qualified, and equipped to do the job WITHOUT PARTIALITY...this too should not even be an issue.	Feb 4, 2011 10:08 PM
410	Service providers should be screened through the regional centers.	Feb 4, 2011 10:11 PM
411	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act.	Feb 4, 2011 10:22 PM
412	Services should be provided only by persons or organizations that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 4, 2011 10:38 PM
413	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 4, 2011 10:45 PM
414	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 4, 2011 10:56 PM
415	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 4, 2011 11:15 PM
416	Using the qualifications/standards we now have in place will be sufficient in this case.	Feb 4, 2011 11:20 PM
417	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 4, 2011 11:21 PM
418	Licensed, educated, background checks, spot checks, evaluations.	Feb 4, 2011 11:23 PM
419	These should be highly skilled, patient people. This needs to be a respected career path for interested individuals.	Feb 4, 2011 11:41 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
420	Services should be provided only by persons or organizations that are properly vendorized, as described in The Lanterman Act Section 4648(a)(3)(A).	Feb 5, 2011 12:22 AM
421	Lanterman Act 4648 describes that services are only provided by persons or organizations who are properly vendorized.	Feb 5, 2011 12:23 AM
422	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 5, 2011 12:32 AM
423	Pass background checks. Be bondable. Know basic CPR. Literate in English.	Feb 5, 2011 12:41 AM
424	same as for other programs and above	Feb 5, 2011 1:28 AM
425	Standards in this area could be helpful but would most likely add to cost as they would specify higher qualifications and more training.	Feb 5, 2011 1:30 AM
426	Individuals should have no felony record. They should have a minimal education of a high school diploma (or a GED). There should requirement that they receive and complete ongoing training in areas specific to developmental disabilities.	Feb 5, 2011 2:04 AM
427	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 5, 2011 2:19 AM
428	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 5, 2011 3:57 AM
429	People with either experience or training as apprentices under supervision	Feb 5, 2011 4:29 AM
430	Job/living skills trainer types.	Feb 5, 2011 4:48 AM
431	ILS instructor: AA Degree or other Advanced Degree in Human Services; or/ persons whose maturity, education and/or life experiences are potentially rich & helpful for clients within the ILS / Supported Living ILS instructors and contracted service agencies need to exemplify compassion, courage, maturity, integrity and creativity in serving the diversity of learning styles, needs & capabilities of clients.	Feb 5, 2011 6:11 AM
432	Services should be provided only by organizations that meet standards from The Lanterman Act Section 4648 (a) (3) (A).	Feb 5, 2011 6:49 AM
433	Qualifications and experience necessary to provide the appropriate services.	Feb 5, 2011 6:51 AM
434	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act.	Feb 5, 2011 2:47 PM
435	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 5, 2011 5:27 PM
436	The service provider should have training in this program and have had experience with children with autism. Should have a background check for the following: criminal/sexual abuse, etc.	Feb 5, 2011 5:38 PM
437	same as first set	Feb 5, 2011 6:40 PM
438	not sure, but if a child is provided direct care by a parent or relative the SDRC should be reasonsible for providing protective supervision of that individual to ensure that they are receiving the care and services they need. The should be ensuring the consumer is seen regularly by a physician and dentist and verifying these contacts. A referral to APS should be maid if there are any concerns for further investigation.	Feb 5, 2011 8:06 PM
439	I oppose POS standards. Please refer to the Lanterman Act section 4648 (a) (3) (A).	Feb 5, 2011 8:54 PM
440	background check, clear standards set that can be assessed twice a year or more.	Feb 5, 2011 10:13 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
441	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 5, 2011 10:55 PM
442	the workers should go to classes and the homes need to be inspected every three months	Feb 5, 2011 11:28 PM
443	i just want to say that here at Alegria CL, the team is awesome same as the clients. The clients are treated as royalties, which actually is what they deserve.	Feb 6, 2011 12:06 AM
444	The supervisors of the organization need to have appropriate education and or experience in providing in home support. and chordinating ihhs staff	Feb 6, 2011 4:08 AM
445	Regardless of any suggested standards, the consumer, the consumer's parents and/or caregivers and consumer's teachers and other school service providers where applicable must still have input regarding independent living and supported living services, and the entire IPP team, including the above, must retain the ability to determine if the services and supports needed by the consumer are performing adequately.	Feb 6, 2011 5:45 AM
446	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 6, 2011 5:55 AM
447	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 6, 2011 4:35 PM
448	Training, management follow up with parent for feed back on quality and ideas for improvement.	Feb 6, 2011 5:08 PM
449	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act	Feb 6, 2011 6:45 PM
450	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 6, 2011 6:47 PM
451	Support specialists should have a background in the field. Others(e.g., companions, etc.) should have a caring attitude and specific training by the support specialist that is relevant to the particular client and situation they are working with.	Feb 6, 2011 8:11 PM
452	Regional center should provide training for families who want to have a disabled member live on their own and are willing to help them, instead of working against them.	Feb 6, 2011 8:46 PM
453	I would hope that the organizations and individuals who are providing the service should have certain stantards and be better paid.	Feb 7, 2011 2:18 AM
454	need thorough back ground checks/periodic reviews of bench marks ,timely attention to any complaints by consmers and resolutionof conflicts by appropriate parties.	Feb 7, 2011 2:26 AM
455	Training should be done with someone in field with some experience or knowledge of challenges met each day by these special needs person and also presented to each individual so they to have a say as to what they feel is needed to help them to be successful in living in the community	Feb 7, 2011 3:42 AM
456	Someone who is experienced in working with disabled clients. A degree in one of the academic disciplines (e.g. social work) might also be helpful, but not required.	Feb 7, 2011 4:25 AM
457	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 7, 2011 5:13 AM
458	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 7, 2011 6:40 AM
459	Trained, college degree professionals with background checks	Feb 7, 2011 6:46 AM
460	Only persons or organization that are properly vendorized as described in the Lanterman Act should provide services.	Feb 7, 2011 2:46 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
461	These services should only be provided by persons or organizations that are vendorized, per The Lanterman Act.	Feb 7, 2011 3:25 PM
462	The agencies that provide the service hire employees that are usually relatives or people that are uneducated and untrained. They provide minimal or no training as the staff are usually bewildered in cases of emergencies and are reprimanded or fired for not reacting appropriately. The agencies are not transparent about the qualfications of their staff or their training.	Feb 7, 2011 4:28 PM
463	Only persons or organization that are properly vendorized as described in the Lanterman Act should provide services.	Feb 7, 2011 5:45 PM
464	Services should only be provided by persons or organizations that are properly vendorized as described in the Lanterman Act section 4648 (a) (3).	Feb 7, 2011 6:21 PM
465	Properly vendored organizations or vendors should provide these services as Lanterman Act section 4648 (a) (3) (A) states.	Feb 7, 2011 7:50 PM
466	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 7, 2011 7:53 PM
467	No comment	Feb 7, 2011 9:31 PM
468	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 7, 2011 10:06 PM
469	vendors should have experiance in actual hands on provision of the services.	Feb 7, 2011 10:37 PM
470	Allow RC's to set the standards in their own communities.	Feb 7, 2011 10:45 PM
471	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 7, 2011 11:12 PM
472	Let the Regional Centers make the decisions regarding program services	Feb 7, 2011 11:13 PM
473	Services should only be provided by persons or organizations which are properly vendorized as described in the Lanterman Act Section 4648 (a)(3)(A).	Feb 7, 2011 11:15 PM
474	See Day program information	Feb 7, 2011 11:25 PM
475	I believe Regional Centers already have significant requirements for vendors who apply for vendor status.	Feb 7, 2011 11:56 PM
476	Persons providing ILS/SLS support [the PA's] should be capable of making sound judgement calls and assess situations to meet the needs of the consumer, as well as ensure the goals/objectives made by the ID Team are carried through in the day-to-day. The Program Coordinator should have the educational background and experience in a related field in order to be eligible for this position. S/he should be willing to and encouraging of continued growth of each individual consumer and thus maintain good and open communication with the ID Team - excluding the Annual Meeting and annual/semi-annual reports.	Feb 8, 2011 12:13 AM
477	All providers should be background checked and have experience and expertise with this population. There should be at least one medically-qualified staff member at every facility and there should be behavioral and/or psychiatric staff that come in periodically to help staff and/or the individuals living in the facility.	Feb 8, 2011 1:00 AM
478	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 8, 2011 1:10 AM
479	Based on many vendors or providers, based on word of mouth from those who receive care and also if there is a watchdog agency to check all available and rate them.	Feb 8, 2011 1:24 AM
480	Same as above	Feb 8, 2011 3:55 AM
481	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 8, 2011 4:06 AM
482	The pay should be enough so "normal" people will apply for the job.	Feb 8, 2011 4:26 AM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
483	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 8, 2011 5:32 AM
484	Again as previously stated.	Feb 8, 2011 6:08 AM
485	The person/organization would have to be accredited with trained staff on board.	Feb 8, 2011 6:37 AM
486	Everyone needs to be qualified to provide services. Some agencies and/or organizations hire staff that is not qualified.	Feb 8, 2011 7:02 AM
487	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 8, 2011 3:40 PM
488	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 8, 2011 4:26 PM
489	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 8, 2011 4:27 PM
490	Must be licensed.	Feb 8, 2011 5:22 PM
491	Experience commiserate to a bachlors degree in the field of human services. Regular inquires to clients as to their success and not just the sqeaky wheels.	Feb 8, 2011 5:33 PM
492	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 8, 2011 5:51 PM
493	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 8, 2011 6:03 PM
494	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 8, 2011 6:10 PM
495	Must be trained in behavioral interventions.	Feb 8, 2011 7:47 PM
496	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 8, 2011 7:55 PM
497	Could be anyone representing a licensed entity.	Feb 8, 2011 8:40 PM
498	Meaningful exerience in field, periodic training re care and management of this type of client.	Feb 8, 2011 8:52 PM
499	complete background checks for ruling out child, elder or sexual abuse, no drug abusers since these people could be easily exploited	Feb 8, 2011 9:24 PM
500	Services should be provided only by persons or organizations that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 8, 2011 9:31 PM
501	people should be familiar with the housing market and what is available for low income recipients, taking into account safety and proximity to transportation.	Feb 8, 2011 9:43 PM
502	Individuals/organizations who provide supportive living services for Developmentally Disabled individuals should already be established and demonstrate an understanding of working and providing services to consumers with developmental disabilities. Monitoring to ensure the implementation of said program meets the standards set forth from the beginning, and maintained through regular quality assurance.	Feb 8, 2011 10:23 PM
503	People who have been background checked for crimes or dangerous activities in their past, fingerprinted, given specific courses on how to manage a supported living environment.	Feb 8, 2011 10:35 PM
504	Individuals/organizations who provide supportive living services for Developmentally Disabled individuals should already be established and demonstrate an understanding of working and providing services to consumers with developmental disabilities. Monitoring to ensure the implementation of said program meets the standards set forth from the beginning, and maintained through regular quality assurance.	Feb 8, 2011 11:20 PM
505	Services should be provided only by persons or organizations that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 8, 2011 11:48 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
506	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 8, 2011 11:54 PM
507	I work with a lot of diferent people from different backgrounds and education. In my experience, I dont't think that it matters unless it's a safety concern. I find that people whom are generally kind and respectful are the type of people I prefer to work with.	Feb 9, 2011 12:25 AM
508	I think an ILS Instructor should have experience in working with adults with developmental disabilities and I think an ILS Instructor should have a valid drivers license. I like the performance of my ILS Instructor and the teachers of my ILS classes. I think an ILS Instructor should be on time to scheduled meeting and work on my ILS goals. I like all of my ILS goals.	Feb 9, 2011 12:55 AM
509	1. Back ground checks is the first place to start. Next any person that has a criminal record of any felony should not be allowed to care for our children or clients. 2. Any one with a abusive criminal charge of any kind should not be allowed to care for our children or clinets.	Feb 9, 2011 1:06 AM
510	qualifications should be established.	Feb 9, 2011 1:24 AM
511	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 9, 2011 1:25 AM
512	Answer: Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 9, 2011 1:28 AM
513	same	Feb 9, 2011 2:28 AM
514	Have fully trained people	Feb 9, 2011 3:22 AM
515	I think an ILS Instructor should be aware of their client's health issues and be involved in medical and dental appointments. I think ILS Instructors should assist clients with home work for classes. I think ILS Instructors should have knowledge of class topics for ILS classes they teach. I think ILS Instructors should have a knowledge of resources and know how to connect me to resources. I think all ILS Instructors should have a clean DMV record and valid drivers license.	Feb 9, 2011 3:36 AM
516	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 9, 2011 5:42 AM
517	Need to be screened better! Require more education & experience, plus if families were very involved as they should be, they could help complete quality control surveys about services being provided.	Feb 9, 2011 8:46 AM
518	Organization should be properly vendored by the Regional Center	Feb 9, 2011 5:19 PM
519	Services should be provided in a manner that meets the consumer's needs without undue barriers, including but not limited to, unnecessary qualifications, paperwork, and time delays. To the extent the services intended to be considered in this section are covered by the DD Waiver, provider qualifications are set forth in the Waiver.	Feb 9, 2011 5:34 PM
520	Verification of time spent working with individual. Have found too many cases where the vendor billed all allotted hours each month then find out from the person served they had not seen their SLS worker for months. This was researched and the persons account was verified.	Feb 9, 2011 6:35 PM
521	must have experience, teaching skills. knowedge and training about DD and enpowerment as well as community resources,	Feb 9, 2011 6:55 PM
522	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 9, 2011 7:57 PM
523	services shoujld be provided by persons who are properly vendorized per Lanterman Act section 4648 (a) (3) (A)	Feb 9, 2011 8:11 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
524	It is imperative that Regional Center look into their new vendors. There are vendors that have not even graduated high school and they have been vendored because Regional Center refuses to look into their qualifications. Also Title 17 regulations stipulate that vendors must not have 1099's and must have business insurance and pay workers compensation. There are too many vendors that do not have the required above items and Regional Center has been notified but they choose to look the other way.	Feb 9, 2011 8:16 PM
525	Services should be provided only by persons or organizations that are properly venderized as described in the Lanterman Act, Sec. 4646A(3).	Feb 9, 2011 9:06 PM
526	Direct care providers should be licensed or certified. They should have specified levels of education and work experience. RC service coordinators should meet with Consumer and Direct Care Provider on an annual basis in their homes.	Feb 9, 2011 9:15 PM
527	Ask the clients -- they know if the performance of their service provider is meeting their needs or not. Clearly, the provider should not have a criminal record and undergo training before and during the first 3 months of working with client. Thereafter, a monthly check-in for the first year by the Regional Center, and as needed from there.	Feb 9, 2011 9:20 PM
528	Services should be provided only by persons or organizations that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 9, 2011 9:48 PM
529	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 9, 2011 10:04 PM
530	Services should be provided only by persons or organizations that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 9, 2011 10:34 PM
531	There should be a reevaluation for these type of services and the need based on evidence on a yearly basis. A criteria should be put in place to address the need of the client, and the situation the client is at the time to determine how many service hours the person needs. For example has the person made progress, a track of hours in which the agency spend doing on certain activities like cooking, locating public resources, and budgetting. Also to require explanation on why a service hasn't change within a time period, what is the reason for a person requiring the same amount of hours.	Feb 9, 2011 10:37 PM
532	No suggestions	Feb 9, 2011 11:32 PM
533	Again, you get what you pay for, if your rates are low, you can only pay staff a certain rate based on fees. Reevaluate those who get a higher rate, set a flat fee, nd then set a standard. Quality programs will meet the performance standard.	Feb 9, 2011 11:33 PM
534	Reference comments under Day Programs	Feb 9, 2011 11:33 PM
535	Some type of reporting mechanism and a governing board is necessary to provide oversight to orgnaizations that provide these services. A method for public comment that rolls up to the state level to ensure the safety of the disabled people. I am sure a method is already in place and should be followed. My sister receives these independent living services and for the most part I feel they are at an acceptable level. If anything, I wish she had more supervision as sometimes she is not safe.	Feb 9, 2011 11:35 PM
536	These are hard jobs: personnel should be both enthusiastic and experienced	Feb 9, 2011 11:50 PM
537	These standards already exist	Feb 9, 2011 11:58 PM
538	Basic behavior management training for all ILS trainers.	Feb 10, 2011 12:21 AM
539	A behavior analyst should be involved in the programming.	Feb 10, 2011 12:44 AM
540	professional, unbiased, clearly fingerprinted with FBI Background since they will probably be exposed to privacy act information.	Feb 10, 2011 3:15 AM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
541	is the recipient being treated like a human being ? safe , clean , health needs taken care of	Feb 10, 2011 7:54 PM
542	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 10, 2011 8:02 PM
543	Should be vendorized by the regional center.	Feb 10, 2011 8:08 PM
544	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 10, 2011 9:32 PM
545	Vendors should train the persons in the organization to utilize a person centered perspective, and utilize the IPP document.	Feb 10, 2011 9:45 PM
546	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 10, 2011 9:59 PM
547	An agency should have training and a proven background of assisting people with disabilities.	Feb 10, 2011 10:14 PM
548	Those providing services should be trained as educators and they should adhear to the ISP plans.	Feb 10, 2011 10:20 PM
549	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 10, 2011 10:28 PM
550	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 10, 2011 11:42 PM
551	Standards should be outlined in the program design.	Feb 11, 2011 12:02 AM
552	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 11, 2011 12:22 AM
553	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 11, 2011 12:50 AM
554	should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 11, 2011 12:55 AM
555	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 11, 2011 1:10 AM
556	Effective communication. Effective provision. Effectively spending the budget for the benefit of those in need of these services.	Feb 11, 2011 1:32 AM
557	: Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 11, 2011 1:49 AM
558	Supports should remain the same or increase.	Feb 11, 2011 1:49 AM
559	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 11, 2011 2:19 AM
560	organization state licensed	Feb 11, 2011 2:57 AM
561	The suggested services by the IPP teams should only be provided by persons or organizations that are properly vendorized as described in the Lanterman Act Section 4648 (a)(3)(A).	Feb 11, 2011 3:20 AM
562	As appropriate for state and local licensing. Bi annual reviews by regional centers.	Feb 11, 2011 3:44 AM
563	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 11, 2011 4:10 AM
564	Service providers should be trained; there should be stand performance plan; there should be a description of services.	Feb 11, 2011 4:46 AM
565	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 11, 2011 5:08 AM
566	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 11, 2011 5:44 AM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
567	Finger printing..... Also, there seems to be a wide variety of payments that doesn't make sense. Two consumers get the same services, but one provider just got an increase for saying the consumer was in danger. Much more scrutiny needed here as to the assessment of the individuals needs.	Feb 11, 2011 5:48 AM
568	need background checks and experience	Feb 11, 2011 6:10 AM
569	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 11, 2011 6:15 AM
570	Experience working with "older" individuals with disabilities. Experience! Kindness, enthusiasm for the job, not just "book smart".	Feb 11, 2011 6:22 AM
571	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 11, 2011 6:46 AM
572	Independent living workers should receive training on hygiene, cooking, diabetes management, behavioral interactions, and first aid. They should be paid a living wage, and should have background checks to prevent the hiring of predatory criminals in these positions. There should be certified and licensed supervisors who meet frequently to discuss beneficial strategies in helping the individuals in their care. Services should be vendorized through the Regional Center.	Feb 11, 2011 8:01 AM
573	Statewide QA tool	Feb 11, 2011 6:16 PM
574	All employees should be drug tested and fingerprinted. Drug testing should be done randomly during employment. Ideally, a Bachelor degree should be required for the job. Contining education is very important as well. Unfortunately, our community colleges do not provide training in this field. It would be a valuable resource if this were available. I think organizations should do an internal process of evaluation of their employees and have it available to DDS if requested.	Feb 11, 2011 6:35 PM
575	must be licensed	Feb 11, 2011 6:39 PM
576	Qualified vendors according to the Lanterman Act.	Feb 11, 2011 6:44 PM
577	SAME AS PREVIOUS #4	Feb 11, 2011 6:47 PM
578	Only properly vendorized persons or organizations as described under the Lanterman Act should provide services.	Feb 11, 2011 7:03 PM
579	individuals who are properly trained, and at minimum have medical, rehabilitation, and or some type of social service background. AA degreed or certifications employees to be and remain free from convictions or criminal offenses	Feb 11, 2011 7:19 PM
580	must be qualified for the level of service provided	Feb 11, 2011 7:23 PM
581	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 11, 2011 7:24 PM
582	doctors and therapists should have a documented education	Feb 11, 2011 7:24 PM
583	The people that work with developmentally disabled adults in the home should posess an associates degree.	Feb 11, 2011 7:52 PM
584	See comment under Behavioral Services	Feb 11, 2011 8:49 PM
585	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 11, 2011 9:43 PM
586	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 11, 2011 9:46 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
587	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 11, 2011 9:47 PM
588	Top notch qualifications and performance should be required.	Feb 11, 2011 9:48 PM
589	service providers should only send people who are trained for this job properly.	Feb 11, 2011 9:48 PM
590	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 11, 2011 9:49 PM
591	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 11, 2011 9:51 PM
592	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 11, 2011 9:51 PM
593	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 11, 2011 9:53 PM
594	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 11, 2011 9:55 PM
595	There should be some type of accountability with regard to whether the worker shows up on time, if they keep professional relationships with the client, ongoing education, and some level of basic behavioral training and redirection techniques.	Feb 11, 2011 10:00 PM
596	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 11, 2011 10:01 PM
597	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 11, 2011 10:02 PM
598	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 11, 2011 10:07 PM
599	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 11, 2011 10:14 PM
600	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 11, 2011 10:32 PM
601	Perform quarterly reviews as needed by case coordinators and program dire	Feb 11, 2011 10:35 PM
602	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 11, 2011 10:37 PM
603	Only persons or organization that are properly vendorized as described in the Lanterman Act should provide services.	Feb 11, 2011 10:43 PM
604	Have qualified trained people do this job. We have had problems in the past with people not showing up when they are suppose to and not doing what they are suppose to do.	Feb 11, 2011 10:52 PM
605	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 11, 2011 10:56 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
606	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 11, 2011 11:27 PM
607	None	Feb 11, 2011 11:31 PM
608	This regional center has experienced an overwhelming increase in requests to become vendored for ILS and SLS. Most applicants meet minimum Title 17 qualifications, but are still unprepared with inadequate skills to meet the challenges of service provision. SL Director--Must have at least 5 years providing SLS, at least 2 years in a SLS management position. SL Coordinator--Must have at least 2 years providing SLS. SL Direct staff--Must be trained with consumer specific medical / behavioral information. SL Administration--agency must demonstrate that they have the business savvy to remain viable in today's economic climate. Is the agency aware of its wage order? (Many vendors are currently being sued due to illegal labor practices.) Do they have an adequate accounting system that will prevent overbilling? (Many vendors do not adjust billing to match actual usage). DDS should invest more time and resources towards vendor audits. A well-designed auditing program should pay for itself. Regional centers should be given the ability to conduct routine audits.	Feb 11, 2011 11:50 PM
609	N/A	Feb 11, 2011 11:56 PM
610	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 11, 2011 11:58 PM
611	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 12, 2011 12:10 AM
612	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 12, 2011 1:17 AM
613	change people working in the management positions who do not perform their duties	Feb 12, 2011 1:23 AM
614	Better training for provider.	Feb 12, 2011 1:44 AM
615	Services should only be provided by organizations that are properly vendorized as described by The Lanterman Act Section 4648 (a) (3) (A)	Feb 12, 2011 2:35 AM
616	Minimum BA degree	Feb 12, 2011 2:41 AM
617	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 12, 2011 2:45 AM
618	Most of the people working in this field are all qualified and are given trainning to make sure of this.	Feb 12, 2011 2:47 AM
619	Qualified, experienced in specific area. Knowledgeable about higher functioning individuals who may present as normal initially but have difficulty in social or employment settings.	Feb 12, 2011 3:47 AM
620	Must be willing and able to help client suceed. Social workers, therapists, professional caregivers.	Feb 12, 2011 3:49 AM
621	A Masters Degree level person needs to supervise someone with their B.A. Often, behavioral agencies would be best in offering these services.	Feb 12, 2011 4:55 AM
622	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 12, 2011 5:19 AM
623	Licensed agencies	Feb 12, 2011 6:17 AM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
624	See previous answers.	Feb 12, 2011 6:28 AM
625	Regional Centers.	Feb 12, 2011 6:52 AM
626	Current Standards	Feb 12, 2011 7:18 AM
627	They need to be trained by learning on site. All situations differ. It's too hard to hand someone a list of expectations and think it's going to be accomplished. A training period followed by employment or trial period subject to recommendation for permanent placement.	Feb 12, 2011 7:57 AM
628	Licensed professionals	Feb 12, 2011 9:22 AM
629	Always think for the clients' needs and try the best to meet them. I know in some counties, Group Homes are provided for our people. The rules are for the goodness of staff instead of the clients. I.e., one clients was late b/c his bus broke down and he had to wait for another one, so he came Home late. Dinner WAS NOT saved for him, neither anyone try to find out why he was late. (These are high function clients with semi disability). Clients have some social events, such as being invited to a BD party , Home Staff only provide ONE WAY trip for that event. Sat. and Sun staff is off and get one VOLUNTEER to sit and watch the clients. The volunteer usually do not know how to look after some of the less function clients. Clients' clothings sometimes are mixed for other person to wear. Clients pay for their deserved services.	Feb 12, 2011 3:34 PM
630	The patient must trust the service provider to act in his/her interests. Qualifications are not as important as honesty and caring.	Feb 12, 2011 4:25 PM
631	The Regional Center or Doctors or Social services or organizations specializing in helping special needs adults even parents should have the availability of help to make this person a succesful citizen like themselves in the community	Feb 12, 2011 5:41 PM
632	Regional center knows the qualifications & performance of the persons/organizations provided these services and always 'keeps an eye' on it.	Feb 12, 2011 5:52 PM
633	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 12, 2011 6:11 PM
634	Could be part of the Day Program services.	Feb 12, 2011 7:14 PM
635	CARF	Feb 12, 2011 7:24 PM
636	Providers should be experienced in working with individuals on the Autism Spectrum.	Feb 12, 2011 8:23 PM
637	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 12, 2011 8:26 PM
638	qualified through score on assessment completed by owner of organization so as to assess for accuracy of philanthropic intentions	Feb 12, 2011 8:55 PM
639	Education and on-site training are essential to be working in the caregiving field.	Feb 12, 2011 9:20 PM
640	psych or other degree plus additional training plus experience	Feb 12, 2011 9:24 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
641	When a vendor applies to provide consumer services, Regional Center Staff and the California Department of Developmental Services have a responsibility to the consumer and to the community at large to be very sure that the training of these individuals meet all requirements of the law and necessary regulations. I seriously doubt that there is any followup or evaluation that a vendor is providing a service that they have contracted to perform. As an active and involved parent, I certainly see no evidence that is happening. Are there scheduled and unscheduled visits to ensure that contracted services are being performed? Because personnel and legal issues are not public information, as a parent, I understand this. But, I know my son and he expresses himself very well. I really see that I am really his only advocate other than himself. How can parents and family of adult consumers be assured that he has an advocate? It is my opinion that the State of California needs to be a better advocate for those who a least able to advocate for themselves.	Feb 12, 2011 10:07 PM
642	Licensed Meets needs of individual with recreation and social integration into the community	Feb 12, 2011 10:12 PM
643	All individuals who are providing services should be qualified by the State and should be reviewed by all those involved- disabled person, parent, advisor, and vendor.	Feb 12, 2011 11:11 PM
644	Covered in prior sections	Feb 12, 2011 11:43 PM
645	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 12, 2011 11:56 PM
646	I suggest that they put a person who is receiving the IHSS in charge of this particular program.	Feb 13, 2011 12:37 AM
647	Social worker. Or a caring parent.	Feb 13, 2011 12:38 AM
648	community supported	Feb 13, 2011 1:23 AM
649	Qualifications should be based on experience.	Feb 13, 2011 1:52 AM
650	read the previous answer	Feb 13, 2011 2:41 AM
651	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 13, 2011 3:43 AM
652	Every person providing service should be licensed, or should have received training from a licensed provider, and the organizations' duty is to oversee that the qualification are met and provide service providers a venue where collaboration and team work can take place for the benefit of the people who has a difficulty.	Feb 13, 2011 4:22 AM
653	Not sure my oldest child with a diabilty is only13 yrs old	Feb 13, 2011 5:09 AM
654	I hope these organizations are reviewed on a yearly or every other year basis and the reasons for the turnover in staff and clients is reviewed and they are given some kind of a rating. When a client changes agencies it is kind of a pig in a poke. You do not really know how they operate until you have started using their services.	Feb 13, 2011 5:15 AM
655	There should be inspection and quality control by settin up standards and knowing what kind of people are hired by this facililties.	Feb 13, 2011 5:25 AM
656	Make sure they LOVE what they to they have to have that very important.	Feb 13, 2011 5:58 AM
657	2-3 years of experience in the area of working with individuals with disabilities. An understanding and ability to respect individual needs and preferences (class on person centered planning) knowledge of the manifestations of the consumer's disability, business knowledge.	Feb 13, 2011 7:52 AM
658	As duly noted in all previous sections.	Feb 13, 2011 7:58 AM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
659	SLS is a great model. However, these programs are often difficult to manage, especially in areas of manpower, etc. Additional oversight in needed in this area as many SLS/ILS program managers are exhausted and experiencing professional burn-out, which in turn significantly impacts the quality of the program.	Feb 13, 2011 8:11 AM
660	Trained in behavioral management and licensed housing	Feb 13, 2011 3:54 PM
661	Shoud be familier with Autism apecific training.	Feb 13, 2011 5:51 PM
662	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 13, 2011 6:50 PM
663	The services standards should be the same as any other job that puts someone in the position of care-giving....appropriate education, fingerprinting, background check, TB test, etc.	Feb 13, 2011 6:50 PM
664	Trained as appropriate to support client in service offered.	Feb 13, 2011 7:07 PM
665	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 13, 2011 7:14 PM
666	As many of the services needed for independent living require training, those individuals who demonstrate ability to train and fade their services over time.	Feb 13, 2011 8:36 PM
667	traiing in working with dd clients kindness,	Feb 13, 2011 10:17 PM
668	as determined by standards set forth in the Lanterman Act	Feb 13, 2011 10:32 PM
669	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A	Feb 13, 2011 10:35 PM
670	See Q. 3	Feb 14, 2011 1:06 AM
671	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 14, 2011 1:48 AM
672	The outcomes of service delivery should be the standard. If needs are met, as defined, and progress (if possible) or maintenance (if that is all that can be done) should be tracked. Again the RCOC is the case carrier for service and is by law responsible for determining and enforcing standards.	Feb 14, 2011 1:52 AM
673	Accountability! 360 reviews of regional center workers by their supervisors, peers, consumers, service providers, guardians etc. as a basis for continued employment, advancement or need for more training and probation.	Feb 14, 2011 2:29 AM
674	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 14, 2011 3:25 AM
675	Only those people and organizations properly vendorized, per the Lanterman Act	Feb 14, 2011 3:40 AM
676	They should be licensed trained professionals who provide written/oral reports on the needs and progress of clients.	Feb 14, 2011 5:40 AM
677	See above answer. Good staff are likely to produce good results. All staff persons should meet minimal certification/licensing requirements plus experience.	Feb 14, 2011 5:45 AM
678	requirements to become an aid for supported living with behavioral problems, Psychological techniques, presuasive behavioral techniqes, combative handling,	Feb 14, 2011 6:10 AM
679	STATE STANDARDS	Feb 14, 2011 7:15 AM
680	Again, a licensed behavioral psychologist with experience (although I know I am biased in this area) is the best qualified to determine how these services are affecting the individual's quality of life and general level of happiness or adjustment.	Feb 14, 2011 1:53 PM
681	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 14, 2011 4:03 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
682	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 14, 2011 4:27 PM
683	Continue to observe and measure met goals, consult as needed.	Feb 14, 2011 4:29 PM
684	three years experience	Feb 14, 2011 4:51 PM
685	Current ways are sufficient.	Feb 14, 2011 5:01 PM
686	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 14, 2011 5:05 PM
687	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 14, 2011 5:26 PM
688	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 14, 2011 5:46 PM
689	Qualifications of staff should include an ability to communication in the English language, at least a high school education, some level of experience and training in dealing effectively with challenging behavior.	Feb 14, 2011 5:56 PM
690	Proper QA and visitations	Feb 14, 2011 6:08 PM
691	Staff need to enjoy working with people with disabilities. All staff should be finger printed. Specific educational requirements is not as improtant as common sense and kindness and creativity.	Feb 14, 2011 6:09 PM
692	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 14, 2011 6:19 PM
693	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 14, 2011 6:24 PM
694	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 14, 2011 6:27 PM
695	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 14, 2011 6:29 PM
696	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 14, 2011 6:30 PM
697	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 14, 2011 6:30 PM
698	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population served by that program.	Feb 14, 2011 6:35 PM
699	Services should be provided only by persons or organizations that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 14, 2011 6:38 PM
700	Should be renown, good background persons or org	Feb 14, 2011 6:56 PM
701	they need to be trained and/or liscenced with behavioral modification and intervention, including restraint.	Feb 14, 2011 6:56 PM
702	Family memebers should be required to provide support and help as much as they can. Paid help should paid help should only be used as alternative due to lack of family help available.	Feb 14, 2011 7:03 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
703	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 14, 2011 7:08 PM
704	Services should be provided only by persons or organizations that are properly vendorized as described in the Lanterman Act Section 4646(a)(3)(A).	Feb 14, 2011 7:25 PM
705	Based on the needs of the consumer as determined by the IDT team.	Feb 14, 2011 7:31 PM
706	Thoroughly experienced and mature.	Feb 14, 2011 7:32 PM
707	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 14, 2011 7:47 PM
708	Add these three requirements for SLS vendorization: (1) Minimum one year* experience as follows: (A) six months* of direct care work experience providing SLS and six months* work experience as a supervisor or manager providing SLS; or (B) one year* work experience as a supervisor or manager providing SLS, or one year* experience as an advocate for the rights and opportunities of the developmentally disabled; [* = full time equivalent] (2 Department of Justice (DOJ) fingerprint clearance; and (3) Regional centers must deny vendorization to applicants with poor prior work performance or if results of finger print clearance are not clear [meaning: favorable].	Feb 14, 2011 7:57 PM
709	RC should be monitoring as well as parents or guardians.	Feb 14, 2011 7:57 PM
710	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 14, 2011 8:05 PM
711	Accredited vendors and facilities inspected by Regional Center.	Feb 14, 2011 8:49 PM
712	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 14, 2011 9:00 PM
713	Same as #3. Involve parents and relatives.	Feb 14, 2011 9:20 PM
714	Staff should have reasonable knowledge of community resouces and how to access them.	Feb 14, 2011 9:40 PM
715	Licensed and reviewed vendors.	Feb 14, 2011 9:55 PM
716	licensed therapist	Feb 14, 2011 9:57 PM
717	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 14, 2011 10:19 PM
718	Organization and persons serving developmentally disabled consumers should be properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A)	Feb 14, 2011 10:38 PM
719	Committment to support the consumer needs.	Feb 14, 2011 10:38 PM
720	providers must comply with all regulations or be fined if they do not stay in compliance.	Feb 14, 2011 10:57 PM
721	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 14, 2011 11:05 PM
722	1. Formalized training of ILS managers who should also have a minimum of a bachelors' degree in a related field and	Feb 14, 2011 11:33 PM
723	No comment	Feb 15, 2011 12:03 AM
724	Programs should have well trained staff with adequate supervision. Turnover would be limited if pay was better and people could afford to stay in these jobs.	Feb 15, 2011 12:06 AM
725	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 15, 2011 12:19 AM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
726	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 15, 2011 12:21 AM
727	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 15, 2011 12:43 AM
728	Direct care staff should have some college training, at minimum.	Feb 15, 2011 1:03 AM
729	Masters degree and training.	Feb 15, 2011 1:28 AM
730	Services should be provided only by persons or organizations that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 15, 2011 1:32 AM
731	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 15, 2011 1:38 AM
732	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 15, 2011 1:53 AM
733	A demonstrated history of success in the exact or related service area is vital. Outcome measurements results from the perspective of the circle of support, collaborative agencies, etc.	Feb 15, 2011 1:57 AM
734	?	Feb 15, 2011 1:57 AM
735	Finger prints and specialist	Feb 15, 2011 2:03 AM
736	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 15, 2011 2:29 AM
737	Either a family member or if an outside care provider someone who has had the necessary training for the level of care needed.	Feb 15, 2011 2:45 AM
738	Supervisors should provide surveys to the consumers receiving the services to be sure they are being helped properly.	Feb 15, 2011 2:45 AM
739	AS SET BY THE STATE	Feb 15, 2011 2:53 AM
740	clients/social worker need to complete a survey regularly to evaluate performance	Feb 15, 2011 3:08 AM
741	Only persons or organization that are properly vendorized as described in the Lanterman Act should provide services.	Feb 15, 2011 3:21 AM
742	such services as Easter Seals and those already deemed reputable; periodic review	Feb 15, 2011 3:24 AM
743	Whoever needs.	Feb 15, 2011 3:37 AM
744	The organizations should be held accountable for all the same qualities stated in #3 for the care providers. They must also be required to track and follow the activities of each individual with disabilities to make sure the care providers are reliable, honest, and accountable for the responsibilities of caring for their clients.	Feb 15, 2011 3:44 AM
745	See the Lanterman Act!!	Feb 15, 2011 4:08 AM
746	Regional Centers should be actively involved in mobilizing funds and support for affordable housing for developmentally disabled people (who are often on a very, very low income and thus excluded from most affordable housing).	Feb 15, 2011 4:23 AM
747	The companies need to pay staff more money to get a better qualified staff person.	Feb 15, 2011 4:36 AM
748	They should be profesinals and should have some qualifications to deal with autistic behaviors.	Feb 15, 2011 4:54 AM
749	Service providers follow all rules and regulations set forth by regional center. Regional centers must come up with the same standards for all regional centers. We should have a state committeee selected representatives from each regional center to separate into smaller committees .	Feb 15, 2011 5:29 AM
750	see comments on Behavior services	Feb 15, 2011 5:41 AM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
751	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 15, 2011 6:06 AM
752	observation and consistent documentation	Feb 15, 2011 6:29 AM
753	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 15, 2011 6:32 AM
754	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 15, 2011 6:36 AM
755	special trainings, feedback from clients	Feb 15, 2011 7:05 AM
756	Post public grades similar to childcare facilities and dining establishments	Feb 15, 2011 7:18 AM
757	expertiese in the area of disability, background checked,	Feb 15, 2011 7:29 AM
758	This question touches me personally. It was necessary for me to file a claim since regional center denied any assistance for an incredible program placement for my son. Even though they agreed with me that if they were to piecemeal a program together for him outside of this "assisted living" model it would cost them at least four times what I was asking for them to contribute. The judge agreed and today regional center pays 1/2 of his monthly program fees. In addition, I pay all of the other daily living costs for him. Over the past two years, regional center has reduced that court ordered amount to be reduced by 4-5%. For some families, they will not be able to have their children stay. So when they return home, they will still be under regional center and the services could cost much more. Or, they could find themselves living in situations they are not able to deal with and eventually end up on the street with all of the challenges associated with that lifestyle. I argue against "kicking the can down the street". It is imperative that the state set more comprehensive standards and require that all levels be provided for. It appears that there is coverage for the group home clients and for the more independent levels but minimal for what you classify as Level 2. These are the men and women who understand that life can be filled with experiences and opportunities, but the need greater supervision and assistance to function successfully.	Feb 15, 2011 7:33 AM
759	Must be ABA trained.	Feb 15, 2011 12:09 PM
760	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A)	Feb 15, 2011 3:45 PM
761	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 15, 2011 4:06 PM
762	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 15, 2011 4:23 PM
763	Service providers should be trained in CPR, behavior intervention, and screened for any aggression issues.	Feb 15, 2011 5:04 PM
764	Pass background test, drug/physical test, finger printing, etc.	Feb 15, 2011 5:09 PM
765	For a start, a willingness to provide services, follow guidelines, be financially responsible, educated in and experienced with supporting people with disabilities.	Feb 15, 2011 5:24 PM
766	Continuation of current standards	Feb 15, 2011 5:57 PM
767	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 15, 2011 6:01 PM
768	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 15, 2011 6:27 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
769	Only persons or organization that are properly vendorized as described in the Lanterman Act should provide services.	Feb 15, 2011 6:34 PM
770	the supporting persons should be responsive, patient and creative.	Feb 15, 2011 6:56 PM
771	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 15, 2011 6:58 PM
772	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 15, 2011 6:59 PM
773	Trained family members implementing a program which supports the individual in their daily skills so that they continue to learn and be independent as much as possible. Otherwise fully trained individuals an empirically valid, peer reviewed methodology such as PRT or ABA.	Feb 15, 2011 7:01 PM
774	Regional center often creates barrier after barrier for innovative people to provide unique services. just because the service is new does not mean the program should be so hindered by useless paperwork that the program gives up. VMRC again is notorious for requesting huge amounts of information that does not pertain to unique supported living situations. VMRC's ignorance hinders our kids from receiving amazingly progressive programs.	Feb 15, 2011 7:11 PM
775	Qualifications of staff that provide ILS and SLS will vary based on the stated mission and outcomes of the specific program and the population of consumers served by that program.	Feb 15, 2011 7:13 PM
776	NGOs with written and measurable standards for their program and staff	Feb 15, 2011 7:16 PM
777	Licensing process, adequate training and compensation for staff.	Feb 15, 2011 7:31 PM
778	licensed staff and facility	Feb 15, 2011 7:35 PM
779	The Regional Centers should provide training to the disabled even if they live at home with family.	Feb 15, 2011 7:41 PM
780	the provider, person or organization should be qualified by training and appropriately licensed. Presumably, the standards for licensure of an organization providing these services have already been established.	Feb 15, 2011 7:46 PM
781	See suggestions for Behavior services and Day programs	Feb 15, 2011 7:56 PM
782	Services should be provided only by persons or organizations that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 15, 2011 7:56 PM
783	The provider should be able to show their workers stay with them on average for more than 2 years, so they don't have a lot of employee turnover.	Feb 15, 2011 8:12 PM
784	Agency-qualified personnel should provide any therapy provided.	Feb 15, 2011 8:17 PM
785	The current service standards in Title 17, Subchapter 19 for SLS are very tedious with such an emphasis on demonstrating progress and an emphasis on continually demonstrating the need for service that more time is spent on these activities than developing the program for the indivudual being served. This is particularly true for clients that have been in the system for a long time. People with a low IQ who cannot care for themselves and are functionally dependent are not really going to develop in these areas. Why must they keep proving it and although I think quality is important there is so much redundency that it costs the RC's $$$ keeping up with these criteria.	Feb 15, 2011 8:19 PM
786	Partner with community based organizations	Feb 15, 2011 9:01 PM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
787	The regional center's quarterly monitoring program should be able to determine if services are working or not. The problem I see is that the case loads are way to high and the messages are "give as little as possible". Being a person in government I see the top heavy administration and the service cuts at the "people" level. This is true in most government programs. Constant internal challenges to improve the service models and being open to "change can be for the good" should be a motto to work by.	Feb 15, 2011 9:02 PM
788	Service providers in home should have criminal background checks and pass drug test	Feb 15, 2011 9:18 PM
789	Right now I feel that the Regional Services may be being "ripped off" by some of the companies that are providing housing. I feel that somebody needs to come up with a better system.	Feb 15, 2011 9:18 PM
790	Service providers should be qualified and monitored according to the existing vendorization process, and overseen by the regional centers and DDS.	Feb 15, 2011 9:47 PM
791	Services should be provided only by persons and organizations that are properly vendorized as described by the Lanterman Act 4648 (a) (3) (A)	Feb 15, 2011 9:59 PM
792	Standard: Regional Centers shall develop standards for vendors, whether individual or organization. Standard: Tasks that require a license shall be performed by persons with the appropriate license. Standard: For tasks that do not require a license, vendors shall demonstrate to the Regional Centers that they have an adequate system of recruitment, hiring, training and supervision that will assure high level performance.	Feb 15, 2011 10:06 PM
793	Service standards should be high wherever they are provided. If organizations are ethical, this should be less of a problem. Employees who provide services should be evaluated to make sure they are being empathic, courteous and efficient.	Feb 15, 2011 10:07 PM
794	Only persons or organization that are properly vendorized as described in the Lanterman Act should provide services.	Feb 15, 2011 10:31 PM
795	SLS administrators should possess at least a license in social services or behavioral field, a masters degree, or at the very least a bachelor's degree with 5 years experience with the population. Administrators should pass fingerprint and criminal record clearances on a yearly basis.	Feb 15, 2011 10:50 PM
796	Only persons or organizations that are properly vendorized, as described in the Lanterman Act should provide services.	Feb 15, 2011 11:17 PM
797	Well sometimes it may seem that someone does not need a service but they do because of learning disabilities or many other reasons.	Feb 15, 2011 11:21 PM
798	Establish a "bonus" for organizations with exemplary performance; allow Regional Centers to de-vendor problematic providers.	Feb 15, 2011 11:24 PM
799	All providers must be in good standing with the contracting organization (regional center and/or DDS)	Feb 15, 2011 11:25 PM
800	Background checks, no criminal history, agreements about reporting alleged abuse, and routine oversight, demonstration of skillfull living and healthy living	Feb 15, 2011 11:29 PM
801	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 15, 2011 11:33 PM
802	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 16, 2011 12:00 AM
803	in good standing with DDS/Regional Center -- complete all requirements in a timely manner, follow contract as agreed upon at time of vendorization.	Feb 16, 2011 12:01 AM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
804	Background checks, offer trainings.	Feb 16, 2011 12:03 AM
805	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 16, 2011 12:19 AM
806	no criminal records knowledge of special needs knowledge of regional center systems	Feb 16, 2011 12:42 AM
807	THESE SERVICE PROVIDERS.,, ESPECIALLY THOSE WITH SEVERE BEHAVIORAL PATIENTS, MUST BE OF ADEQUATE MINIMUM STANDARD/HISTORY OF PERFORMANCE - AND MUST BE COMPENSATED APPROPRIATELY FOR THAT ON ON-GOING BASIS.	Feb 16, 2011 1:14 AM
808	NEED MORE	Feb 16, 2011 2:19 AM
809	ASK CLIENT	Feb 16, 2011 2:19 AM
810	same standards as IHSS workers	Feb 16, 2011 2:28 AM
811	I think ILS Instructors should have experience in working with adults with developmental disabilities and have completed education.	Feb 16, 2011 2:41 AM
812	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 16, 2011 3:04 AM
813	Service providers should have ICF/DD-N Administrative experience with medically fragile individuals.	Feb 16, 2011 3:14 AM
814	Experienced and qualified workers or organizations & yearly client surveys done with guardians or family assistance, should provide a continuing good track record.	Feb 16, 2011 3:55 AM
815	Monthly communication with recipient of services to make certain that services are appropriate and timely	Feb 16, 2011 3:56 AM
816	Persons and organizations who have proper qualifications to provide services and have background and specialty in providing these services.	Feb 16, 2011 4:29 AM
817	Services should be provided only by persons or organization that are properly vendorized as described in the Lanterman Act Section 4648 (a) (3) (A).	Feb 16, 2011 4:47 AM
818	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 16, 2011 5:05 AM
819	some school or experience	Feb 16, 2011 5:19 AM
820	Credentialed Providers	Feb 16, 2011 5:29 AM
821	Services should only be provided by persons or an organization that has been properly vendorized as described in The Lanterman Act	Feb 16, 2011 5:31 AM
822	Answer: Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 16, 2011 5:31 AM
823	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 16, 2011 5:41 AM
824	Some form of licensing and oversight by DDS should be required for service providers.	Feb 16, 2011 5:41 AM
825	Services should be provided only by persons or organization that are properly vendorized as described in The Lanterman Act Section 4648 (a) (3) (A).	Feb 16, 2011 6:10 AM
826	Each organization should be led by professional educators, social workers or healthcare professionals. An ideal organization would be led by individuals representing all three specialty areas.	Feb 16, 2011 6:11 AM

4. Suggested service standards about the qualifications and performance of the

	Response Text	
827	In the time I've work with SARC in Santa Clara County they have been professional and very informative. There is however a 2 - 3 year term for each. Which I find very confusing! The transitions is a choice to accept what is presented and move forward. For the consumer this is always a big surprise and nuisance. No suggestions, but the communication is a collaborative and cohesive one with family members included.	Feb 16, 2011 6:48 AM
828	2 years DD exp.	Feb 16, 2011 7:09 AM
829	in place now	Feb 16, 2011 7:38 AM

5. Suggested service standards about the payment for these services:

	Response Text	
1	Payment within a month of service. Hourly pay, rather than a monthly payment.	Jan 28, 2011 1:06 AM
2	hourly payments that are fair and equitable --	Jan 28, 2011 1:13 AM
3	pay market rate or above to maintain quality staff	Jan 28, 2011 1:16 AM
4	RCs along with clients should cover costs of the services.	Jan 28, 2011 1:19 AM
5	INDIVIDUAL CHOICE BUDGET	Jan 28, 2011 1:26 AM
6	regionally negotiated based on local cost of living indexes	Jan 28, 2011 1:37 AM
7	ICB	Jan 28, 2011 1:51 AM
8	co pay based upon family income	Jan 28, 2011 2:10 AM
9	see WAPADH	Jan 28, 2011 2:13 AM
10	There should be an hourly rate identified per agency, based on their cost to do business. Each consumer should have an annual budget for service hours they require. This should be reviewed annually when there are medical changes, otherwise every 2-3 years.	Jan 28, 2011 2:20 AM
11	Same as day programs and supported employment	Jan 28, 2011 2:37 AM
12	direct to Provider from state	Jan 28, 2011 2:37 AM
13	should be more than minimum wage! because if people can make more money at pizza hut or Wendy's then you will have retention problems! And if we have a revolving door of assistants, it creates a LOT OF STRESS for we consumers! Also, it creeates instability and we can't make commitments to do things like school or work.	Jan 28, 2011 2:39 AM
14	The team overseeing the consumer's care should decide what services are needed in order for the consumer to live as independently as possible. The caseworker provides a request to the regional center or agency overseeing the funding, and the state provides the funds. It may be necessary to have a waiting list for new applicants for supportive living, with the exception being situations such as the death of a parent or the inability of the parent to care for the consumer due to divorce, etc. If a functional index is to be required, those already in supported living should be grandfathered in.	Jan 28, 2011 3:01 AM
15	fees should be competitive as the quality of care should always be a high priority	Jan 28, 2011 3:12 AM
16	as currently paid	Jan 28, 2011 3:17 AM
17	Covered 100%	Jan 28, 2011 3:33 AM
18	Lanterman Act. Needs of the consumer as written in the IPP	Jan 28, 2011 3:45 AM

5. Suggested service standards about the payment for these services:

	Response Text	
19	Co payments by families/ fundrasing/ donations along with state/federal funding. It is expensive , yes, but we are humans and need to take care of those who can't take care of themselves...	Jan 28, 2011 3:47 AM
20	At present am corresponding with legislators.	Jan 28, 2011 4:05 AM
21	Independent Living and Support Living should be the financial responsibility of the person receiving the service.	Jan 28, 2011 4:14 AM
22	Different service codes for specific services rendered could work for consumers who need something extra than the norm ie feeding, bathing, ect	Jan 28, 2011 4:27 AM
23	Median rates have to be established.	Jan 28, 2011 4:30 AM
24	Payment should be based on the level of care of the consumers they watch over and work with on a daily basis and multiplied by the number of hours they actually spend doing the training. Perhaps set on a flat fee basis by consumer level of care, paid either monthly or bimonthly.	Jan 28, 2011 4:40 AM
25	See prior	Jan 28, 2011 4:42 AM
26	Regional Center should pay for these services	Jan 28, 2011 4:52 AM
27	This should be determined based on the IPP	Jan 28, 2011 5:00 AM
28	median	Jan 28, 2011 5:19 AM
29	.	Jan 28, 2011 5:27 AM
30	Pay hour for hour for awake, sleep hours, and pay a negotiated administrative rate per individual rather than flat monthly rates. Accomodations need to be made for cost of living differences from around the state.	Jan 28, 2011 5:30 AM
31	At the discretion of Regional Centers	Jan 28, 2011 5:45 AM
32	online billing & direct deposit for payment with an email detailing payment	Jan 28, 2011 6:03 AM
33	1) Regional centers should not provide funds for rent or other household expenses commonly incurred by the general population in similar living arrangements, and not directly related to support required due to that person's developmental disability. 2) Payments for ILS or SLS services should not be made to immediate family members who provide care or supervision of any sort. These should be considered natural supports.	Jan 28, 2011 6:12 AM
34	Vendors should be paid on time.	Jan 28, 2011 6:15 AM
35	Any cost less than institutional care is justified.	Jan 28, 2011 6:23 AM
36	The same as today.	Jan 28, 2011 6:29 AM
37	Utilizing generic services which is already mandated. Families already offset the cost of these services by having their son's and daughter's home more frequently than any other parent has an adult child coming to stay with them.	Jan 28, 2011 6:43 AM
38	Government and Grants	Jan 28, 2011 6:44 AM
39	Perhaps have family/Consumer sign off on hours worked with each billing from vendor. Mileage should only be paid for direct travel with the Consumer that is required as part of programming.	Jan 28, 2011 7:07 AM
40	Allow the service agency to make a clear determination and distinction between a goal that can be realistically worked on and a goal that represents a maintanence situation. Have each worker submit, under penalty of perjury, the time sheet for hours worked.	Jan 28, 2011 7:10 AM

5. Suggested service standards about the payment for these services:

	Response Text	
41	Services should be reimbursed based on the level of expertise and quality of programs. Often newer programs actually have much higher rates of reimbursement yet staff have no experience with social security, medical oversight, aging issues or any behavioral expertise. Exemplary services can be delivered with monthly "performance contracts' allowing services to be delivered based on indivual need within the program. More time can then be spent providing direct services, rather than paperwork and billing issues. SL services are developed based on individual budgets, reviewed regularly and adjusted. IL services are usually hourly but current rates are completely inadequate. Doggie day care has higher rates of reimbursement.	Jan 28, 2011 7:17 AM
42	Degrees, or In-training for a degree.	Jan 28, 2011 7:23 AM
43	Rates need to be as uniform as possible. But they also need to reflect the different issues of providing consumer services in different parts of the state. There should not be a capitation system.	Jan 28, 2011 7:54 AM
44	The State might find that if more money is spent on these services, more qualified people would be attracted to the jobs, and people with disabilities would live more fulfilling lives and possibly become more independent and thereby require fewer services. Also, the money that has previously come from the Federal Government for the Development Centers should go to services for those same people in the community.	Jan 28, 2011 9:07 AM
45	Only payment should be recieved once the service is provided	Jan 28, 2011 1:15 PM
46	I understand that these services are expensive and therein lies the dilemma, since I also think that they are the most self-directed.	Jan 28, 2011 2:31 PM
47	Supported living should be put on freeze until the economy improves.	Jan 28, 2011 3:02 PM
48	Flat tier system for supported living. Negotiated rates only for clients coming out of the DC or for deflection. There is a huge problem, where different Regional Centers can pay SLS agencies vastly different amounts of money for the same services. Needs to be a set structure for payment delivery.	Jan 28, 2011 4:08 PM
49	There needs to be proof that the client will become self sustaining within a specific period of time. Service should not be available indefinitely.	Jan 28, 2011 4:36 PM
50	DDS I hear that the cost of someone living in Independent Living or Supported Living is much less to the state of CA than paying for people to live in group homes or institutions.	Jan 28, 2011 4:55 PM
51	I know that the payments should be kept the same, not cut at all. You have to pay for good staff and I have seen so many poorly operated homes, that when you have a Great one, you do not want to lose it.	Jan 28, 2011 4:56 PM
52	POS to run quarterly.	Jan 28, 2011 4:57 PM
53	Pay what they actually cost and provide for decent benefits - we'll take a fraction of what State employees get and be happy	Jan 28, 2011 5:13 PM
54	A switch across the board to an hourly rate seems like a more ecconomical choice for SLS.	Jan 28, 2011 5:17 PM

5. Suggested service standards about the payment for these services:

	Response Text	
55	- It is ok to have an hourly rate for non professional service like money management/household support. But the better model is comprehensive case management provided by social workers or case aids who have training in working with DD persons. In this model the payment should be based upon the expected amount of hours expected to support the consumer and a sliding scale based upon those with intense needs vs those with minimal needs. This is the standard we use at my agency. But, the rate has not been adjusted in decades and we are now providing the same service in 2011 at 95.75% of the rate we earned in the mid 1990's. I am not sure how much longer we can hang in there.	Jan 28, 2011 5:25 PM
56	one flat rate for all ILS providers!!	Jan 28, 2011 5:28 PM
57	Payment should be adequate to attract reasonable living wages for all levels of staff and operational costs. It would not be difficult to estimate payment rates using statewide factors which include hours per month consumer is served, hourly/salary rates comparable to like positions outside DDS system, geographical cost of living factors, and administrative/operations percentages. Rates for ILS/SLS should be within the same range for the same service in every regional center with the only adjustment factor being geographical cost of living differences. Much cost can be saved when more models of small shared living arrangements are set up. One support staff can do housekeeping and cooking as easily for 3 people in one location much more efficiently than in 3 separate locations.	Jan 28, 2011 5:31 PM
58	For SLS it should be a set hourly rate that is comparable across vendors.	Jan 28, 2011 5:31 PM
59	There is massive fraud with regards to how ILS is delivered. There is almost no acountabability and it is common knowledge that we fund for services that are never delivered. A call in system to some kind of data bank when workers arrive and when workers would make a big difference.	Jan 28, 2011 5:50 PM
60	Should be funded through state funds.	Jan 28, 2011 6:10 PM
61	based upon ability to pay. Trusts should be set up to help provide for some of these services	Jan 28, 2011 6:16 PM
62	sliding scale co pay	Jan 28, 2011 6:21 PM
63	Keep at the surrent rates and amounts.	Jan 28, 2011 6:21 PM
64	Enforce the section in the Lanterman Act that says the cost of supported living should not exceed the average cost of residential care for a person with similar needs.	Jan 28, 2011 6:23 PM

5. Suggested service standards about the payment for these services:

	Response Text	
65	Rates for these services fluctuate wildly depending on when the provider was vendored and where. Many times, vendors that came in later have a higher rate due to the determined cost of providing these services at the time. Perhaps, a reasonable entry level rate could be determined for new providers with annual increases based on good evaluation of services. Then, a cap on the rate could be established based on a formula as determined by DDS. Nothing complicated. Perhaps something as simple as the median rate plus 20% or the like. Currently, the median rate punishes possible new vendors, giving existing vendors with higher rates an unfair competitive advantage. Entry level rates and caps should be based on current usual and customary rates in the service community. For instance, the cost of doing business in Fresno may, or may not, be less expensive than Los Angeles. A simple look at the rate tables for a given service on a Regional Center by Regional Center basis would give you the data you need. Also, there seems to be a veil of secrecy surrounding median rates. No community services department is willing to share their list of rates given to them by DDS. This does not bode well for the transparency in contracting for which the department is striving and deters possible new vendors from contracting with Regional Centers, limiting competition.	Jan 28, 2011 6:28 PM
66	Shared staffing must become a priority and should be IPP driven. If an IPP team feels that a person must live indpendently on their own without a roomate due to behavioral reasons and/or health and safety then the person should be allowed to live on their own. In all other cases the person should have one but nor more than 2 roomates. Roomates may or may not have a disability themselves. It should be encoruaged that Regional Centers assist with the matching of potential roomates to live in SLS. Shared staffing will change how billing is done for some regional centers. FOr example the only way to effectively do it is to bill on an hourly rate ie. 1:1 = $23.00/hour of service 1:2 (1 staff 2 consumers) = $12.00/hour of service and 1:3 (1 staff 3 consumers) = $10/hour of service. All providers should be adjusted to these rates similar to ARM rates. This will tone down those providers who are at astronomically high rates.	Jan 28, 2011 6:37 PM
67	MATCHES COST OF LIVING IN THE LOCATION/AREA OF SERVICE	Jan 28, 2011 6:42 PM
68	Regional centers should be required to include the or a least-costly provider among a client's choices. The range of rates should be transparent so that higher-cost agencies know what competitive rates will be. A budgeted process that allowed clients more comprehensive services in exchange for less costly providers might help restore the breadth of support and produce savings.	Jan 28, 2011 6:47 PM
69	Adequate pay to maintain LT stability of staff to ensure relationship is developed with consumer & the training level is adequate	Jan 28, 2011 6:49 PM
70	government funded	Jan 28, 2011 6:51 PM
71	Property management services shall not exceed 25% of rental. The ballance of rent shall be returned to Regional Center.	Jan 28, 2011 6:55 PM
72	evaluation of local cost of living per county	Jan 28, 2011 7:02 PM
73	There needs to be a recognition that different areas within California have very different costs of living. Standards for payment should be based on the actual cost of providing services. For instance, in the East Bay, the average hourly pay rate for attendants is between $11-$13/hour. However, in the North Bay, the average hourly pay rate is $14-$16/hour, and even then it is difficult to find qualified attendants.	Jan 28, 2011 7:07 PM
74	They should remain the same as they currently are.	Jan 28, 2011 7:09 PM

5. Suggested service standards about the payment for these services:

	Response Text	
75	-A standardize method of payment should be established throughout the state. This standardize method should be based on individual budget based of state standards. -POS contract should be honored unless alternate agreements have been made. -All decisions regarding POS contracts should be put in writing prior to services being provided -Payment agreements should be in writing prior to any start of services -Adequate notification should be given prior to any changes in contract of POS and after a planning team meeting -	Jan 28, 2011 7:10 PM
76	**** a standardized method of payment should be established throughout the state and should be based on individualized budgets with a standardized hourly rate for services for supported living services. No changes to POS contracts without a planning team meeting. Individualized funding will be determined by the planning team, that agreement will be solidified in writing prior to the initiation of procurement and/or services. That agreement will only be altered as the needs of the person change, changes occur to generic resources or through legislative changes.	Jan 28, 2011 7:10 PM
77	Pay what they actually cost; provide for cost of living adjustments and benefits	Jan 28, 2011 7:10 PM
78	* A standardized method of payment should be established throughout the state and be based on individualized budgets with a standardized hourly rate for services for supported living. *Individualized funding will be determined by the planning team and that agreement will be solidified in writing prior to initiation of Procurement Services and/or services. *That agreement may only be altered with a unanimous decision by the planning team as a whole, as the needs of the person being served change, changes to generic resources or funding changes due to legislative action.	Jan 28, 2011 7:11 PM
79	For Supported Living, a standardized method of payment should be established throughout the state and be based on individualized budgets with a standardized hourly rate for services. Individualized budgets will be determined by the planning team and that agreement will be solidified in writing prior to the initiation of services or procurement . That agreement will only be altered with agreement from the planning team as the needs of the person being served change, generic resources or natural supports change or through legislative changes.	Jan 28, 2011 7:13 PM
80	Current SARC systems are sufficient.	Jan 28, 2011 7:28 PM
81	The state and families.	Jan 28, 2011 7:30 PM
82	These services should be paid according to the cost of the service plus cost of living adjustments.	Jan 28, 2011 7:33 PM
83	co-payments through SSI, client, parents and Health Insurances	Jan 28, 2011 7:42 PM
84	Allow no more than 13% administrative overhead. This has been grossly abused in the delivery of SLS services especially.	Jan 28, 2011 7:43 PM

5. Suggested service standards about the payment for these services:

	Response Text	
85	I have worked and paid taxes for many years until semi-retirement. The incomes of family members should be taken into account and those who can pay a co-pay could help. In my case there was no health insurance when my daughter was diagnosed with a brain tumor at age three and I had to be eligible for MediCal until she was 18. Of course this had a major effect on my income and i have never been able to recoup lost income. The corporations and property owners who benefited from Prop 13 should be made to contribute to the State and the oil companies that extract and refine oil in CA should also pay.	Jan 28, 2011 8:02 PM
86	it is ridiculous to provides services which cost more than 50% than the cost to place the person in a developmental center.	Jan 28, 2011 8:11 PM
87	If the State is going to reorganize its social responsibility toward the disabled, then a far-reaching vision is needed to guide us out of ending up paying inferior groups to provide supported living. This could be done by organizing a state-wide drive to set up Disabled Assisted Living Apartments and the infrastructure to support living in them, participating in community activities, working, and recreational activities. Oh, how we need an inspiring leader now!	Jan 28, 2011 8:18 PM
88	Could be sliding scale based on the income of the client but not so expensive that they are forced to choose a more supportive and probably more costly service.	Jan 28, 2011 8:25 PM
89	yes	Jan 28, 2011 8:35 PM
90	any one disabled or not needs to live within their means..doesn't the state realize that self esteem comes from self achievement? maybe consumers will feel great because they just helped paid their monthly bills and still can go out for dinner and a movie?	Jan 28, 2011 8:39 PM
91	Costs for these services should be no greater than the cost of services that would be needed for that individual, if they received residential services in a licenced or certified residential facility, providing services to others with similar needs. These costs should be exceeded only when an appropriate facility is not available. Regional centers should not pay for any residential costs that are typically paid by the general population in similar living arrangements (e.g., rent, utilities, maintenance, etc.).	Jan 28, 2011 8:45 PM
92	As long as your department focuses on buying houses for long-term care living arangements for people coming out of the Regional Center Facilities, in say, the Bay Area, then nothing else can be addressed because you spent all the money on a few privilaed individuals, losing site of your responsibility to reach the most with what we have collectively.	Jan 28, 2011 8:47 PM
93	Regional Centers should pay for these services if the clients do not have the appropriate insurance.	Jan 28, 2011 8:48 PM
94	SLS should NEVER cost more than institutional living. If a client lived at Porterville and the state paid $240k, then their TOTAL state paid services with SLS should never exceed $240k per year. there should be statewide maximum rates that are paid for SLS that would only vary based on geography to account for wage differentials and building cost differences, for example	Jan 28, 2011 8:49 PM
95	Pay what they actually cost; provide for cost of living adjustments and benefits, to at least a fraction of what State employees get	Jan 28, 2011 8:50 PM
96	Vouchers.	Jan 28, 2011 8:54 PM
97	Service standard should achieve the promise that people with intellectual and developmental disabilities will have an individualized program plan and access to the services and supports best suited to them throughout their lifetime, to enable them to live an independent, self-directed, and typical life.	Jan 28, 2011 8:56 PM
98	See response to question #1 of this section.	Jan 28, 2011 9:22 PM
99	Paid as soon as billed.	Jan 28, 2011 9:23 PM

5. Suggested service standards about the payment for these services:

	Response Text	
100	Rate structures that are consitant throughout the state: 24.00 per hour SLS 1:1 12.00 per hour SLS 1:2 10.00 perhour SLS 1:3 Administrative rate of 500.00 per person per month for administrative overhead and oversight for providers. This again minimizes the need for Regional Center oversight as providers are the point on programming, emergencies, coordinating services, hiring, etc.	Jan 28, 2011 9:45 PM
101	Providers should bill for actual services provided - not bill the max every month. So if a consumer goes to an activity where the support person does not attend - like piano lessons - (but the paid support person is on call as back-up because consumer may not go one particular day), the days the support person actually provides the back-up can be billed but the days they don't provide back-up isn't billed at the full rate. Can you create a back-up person rate? Private time should be reviewed and if not implemented, justified why it's not present.	Jan 28, 2011 9:52 PM
102	Not sure	Jan 28, 2011 9:54 PM
103	Increae hourly funding for these services to market wage depending on county's cost of living and other pay scales. Wages, cost of living vary so much from county to county and even city to city.	Jan 28, 2011 10:00 PM
104	Staff in behavior homes need to be paid at a higher rate. They need to work with the psych teams working with these consumers to monitor meds and behaviors to ward off problems quickly.	Jan 28, 2011 10:03 PM
105	Regional Center to fund.	Jan 28, 2011 10:11 PM
106	no suggestions	Jan 28, 2011 10:20 PM
107	Provider must provide service as outlined in their RC approved program design and contract. If provider is not compliant, RC should be able to withhold or reduce payment. If provider does not have a current signed contract, RC should be able to renegotiate the terms. Cost for SLS should not exceed cost of appropriate licensed residential care facility.	Jan 28, 2011 10:33 PM
108	IHSS must be utilized to the greatest extent possible.	Jan 28, 2011 10:36 PM
109	Appropriate government agency.	Jan 28, 2011 10:39 PM
110	ILS should be pay well to provide good services	Jan 28, 2011 10:45 PM
111	Pay what it costs.	Jan 28, 2011 11:05 PM
112	1 % co-pay for all RC funded services	Jan 28, 2011 11:06 PM
113	Extra precaution for family members who get paid to provide service to their son/daughter/relative who is a regional center client. Stringent rules on family members who are providing service, just as the stringent rules applied to programs who provide service. Many times I have witnessed family members who get away with not providing adequate IHSS for their client (relative) without reprecautions due to limited oversight.	Jan 28, 2011 11:10 PM
114	under the current budet .. what you pay now but with with a 20 % reduction	Jan 28, 2011 11:19 PM
115	A rate for initial assessment; a rate for ongoing training; and a rate for personal care	Jan 28, 2011 11:21 PM
116	Develop a tier system that allows some negotiation between RCs and Vendors. There is a lot of down time in this service and periods of the day or night that is down time should not cost as much.	Jan 28, 2011 11:22 PM

5. Suggested service standards about the payment for these services:

	Response Text	
117	money should be allocated based on an individual assessment and negoiations - paying 10,000 per month might be a deal and paying 3,000 a month maybe foolish- it depends upon the person, their needs, what other things they can access, their family, generic resources, etc.	Jan 28, 2011 11:22 PM
118	Expect more and pay more.	Jan 28, 2011 11:47 PM
119	Regional centers should have the same SLS reimbursement standards across the board. Some regional centers develop an hourly rate with the provider while others do it in a tier system. Many agencies are able to provide services across catchment areas but it gets messy having different regional centers reimbursing and billing in different ways. SLS reimbursement also needs to cover the basic costs. Right now, it is hard for a small agency to provide SLS and cover a minimum wage based payroll for SLS clients who recieve less than 24 hours a support due to the poor reimbursement rates.	Jan 28, 2011 11:57 PM
120	Pay every two weeks or every month, after services are performed.	Jan 29, 2011 12:00 AM
121	Same	Jan 29, 2011 12:06 AM
122	That depends on financial situations.	Jan 29, 2011 12:29 AM
123	In order not to discriminate against people who are the most challenging, rates for services must be based on individual needs.	Jan 29, 2011 12:43 AM
124	Same as reported befor in this survey	Jan 29, 2011 12:45 AM
125	If the family wants to place in a facility then the costs are theirs with the use of generic resources. If they want SLS then this is a cost that is needed due to the person's disability.	Jan 29, 2011 1:04 AM
126	Develop steady funding stream	Jan 29, 2011 1:34 AM
127	REGIONAL CENTERS NEED TO CHANGE THE PAYMENT OPTION FOR ILS...THEY NEED TO START PAYING FOR MILEAGE! ALTHOUGH, THIS MAY COST MORE, ILS VENDOR'S ARE ALREADY DOING IT WITHOUT RECEIVING PAYMENT. THIS WILL INCREASE VEDNOR MORAL WITH THE REGIONAL CENTER'S. THEIR COULD BE A DISCLOSURE THAT SAYS "CONSUMER MUST LEARN TRANSPORTATION SKILLS IN SIX MONTHS OR A YEAR WHICH WILL THEN CONCLUDE THE MILEAGE PAYMENTS.	Jan 29, 2011 1:38 AM
128	Leave as is with time card being sent in.	Jan 29, 2011 1:39 AM
129	Consumers' SSI monies in California have been cut 2-3 times by out former governor, leaving most consumers below the official poverty line but yet they cannot get food stamp support to suplement this loss of monthly disability funding. This is not fair. One can barely squeak by on $800 a month in California. After paying their share of rent & utilities, food, clothing, medical needs not covered by Medi-cal... there is nothing left. Fair wages again are necessary and critical to obtain qualified staff for this type of job. RC must receive adequate funding to provide these services to our adult consumers esp those who have no other support and who will at some point in their lives will no longer have parents to help them. providing services via the ILS and SLS service models is more cost effective than group homes and /or the developmental centers.	Jan 29, 2011 2:04 AM
130	I understood that the client would need to provide a finger print confirmation on each time card. This is practically impossible for some with severe disabilities and sensory disorders. Abuse should be tracked down but this seems an undue burden on everyone else. Surely, we can think of something less burdensome or allow those clients which severe behavioural needs to opt out of mandatory fingerprinting.	Jan 29, 2011 2:37 AM

5. Suggested service standards about the payment for these services:

	Response Text	
131	1. Need to consider family cost participation rules for obtaining services. 2. Any monthly cost above the level 4I residential rate has to be an exception. Costs have completely spun out of control for SLS. 3. For someone coming out of the developmental center, deflection rates need to be time limited.	Jan 29, 2011 2:58 AM
132	Department for Developmental Disabilities, SSI	Jan 29, 2011 3:05 AM
133	Full payment by Regional Center	Jan 29, 2011 3:44 AM
134	service standards should be consistent throughout the state; it appears as if regional centers have different formulas to determine rates. While it is hard to set one rate the regional centers should account for cost of living	Jan 29, 2011 4:30 AM
135	adequately	Jan 29, 2011 4:42 AM
136	transport should not be free , it should not be fully subsidized for the client who are independent. They should have allowance per month for free bussing, otherwise they should pay so they do not abuse the system If oit's all free tendency is for it to be abuse in usage and people don't care.	Jan 29, 2011 4:55 AM
137	fully supported by regional center	Jan 29, 2011 5:06 AM
138	No one should be cut	Jan 29, 2011 5:09 AM
139	Follow what is already in place.	Jan 29, 2011 6:11 AM
140	Ask the parents	Jan 29, 2011 6:36 AM
141	Hourly rates need to stay the same or be increased slightly each year.	Jan 29, 2011 6:42 AM
142	Understanding that IHSS and the SSI payments will most likely not cover the costs for supported living, it is vital that everyone understand the importance of the government including regional centers help support these most worthy individuals.	Jan 29, 2011 7:45 AM
143	MediCal funded!	Jan 29, 2011 7:45 AM
144	If DDS wants consumers to strive, they should be trained by the best possible person or persons. If the rate is low, you will have to hire a person who is willing to accept minimum wage, which is ok, however again, you get what you pay for.	Jan 29, 2011 7:59 AM
145	This is an interesting topic. You are putting a price on life. The State and County need to insure Handicapped, Disabled, Mentally ill people are safe. This needs to be accomplished by in-home care, or residential care facilities. There are not enough care facilities for all who need them. That leaves IHSS minimal hours maximum benefit. The payment for service should not be cut 3.6% hrs. & another 8.4hrs. & lowered to minimum wage & cut domestic service in half. How will this attract qualified, responsible, knowledgeable care giver I don’t know. Payment for service should be above minimum wage & cover the needed services not some at a fraction of the needed hours of care.	Jan 29, 2011 4:04 PM
146	Payment should come directly through the Regional Center, POS should be received by service provider or organization providing service within 30 days after agreement with consumer and Regional Center, before service is provider. (at the very least). Verbal contract and written contract would be best at meeting of agreement, when possible. If this is an emergency service affecting consumers health and safety or their independence in the community they should be able to get the POS immediately. This can include IHSS or direct care delivery support; medical; behavioral; emergency housing, food and any service vital to the consumers goal of living independent in their community.	Jan 29, 2011 7:28 PM
147	Regional center, as they know the needs of the consumers and monitor the services provided.	Jan 29, 2011 7:38 PM

5. Suggested service standards about the payment for these services:

	Response Text	
148	an ongoing monitoring of the success rate of employing and providing independent living conditions is a must	Jan 29, 2011 7:47 PM
149	Evaluated each case.	Jan 29, 2011 8:32 PM
150	Sliding scale based on ability to pay and services needed.	Jan 29, 2011 9:24 PM
151	Same as stated in previous sections.	Jan 29, 2011 10:15 PM
152	Standardized hourly rates for service. All agencies should receive the same hourly rate for the same services. Monthly reimbursement for agencies for an individual should be based on the number of hours the individual needs from the agency.	Jan 29, 2011 10:21 PM
153	ALL MEANS POSSIBLE , SOME CO- PAY TOO	Jan 29, 2011 11:50 PM
154	The consumer should help pay for the services (i.e. 50% co-pay) unless the consumer is not earning a living wage.	Jan 30, 2011 12:32 AM
155	Regional Center	Jan 30, 2011 12:42 AM
156	There is a rumor that one of the Regional Centers is planning to reduce any consumer who has had supported living services for over 2 years to the personal support rate. The vendors will operate at a loss if this rate is implemented and won't be able to provide services. The new personal support rate does not sustain the wages of the employee with the additional taxes, mileage reimbursement, and insurance. It will not cover training or administrative costs, including our wages. The brunt of the budget cuts cannot continue to fall on the SLS vendor.	Jan 30, 2011 1:48 AM
157	FROM SAME STATE FUND USE TO PAY WHEN CONSUMERS ARE IN A CARE FACILITY ONLY CHEAPER.	Jan 30, 2011 3:59 AM
158	Needs to be paid enough to keep good people - not sure what those people are paid privately but it has to be worth a lot more to pay a good person a lot rather than pay anything to someone who is ineffectual.	Jan 30, 2011 4:59 PM
159	payment at market rate and payment dates that will not jeapordize the service provider/keep them in business	Jan 30, 2011 9:12 PM
160	Supported living rates hould be more structured by the State and not negotiated by the providers and regional centers. Regional centers should focus and using lower costs vendors.	Jan 31, 2011 1:21 AM
161	RC would cover the cost with a co-pay to parents who have children up to the age of 18, if not in school. RC would cover the cost with a co-pay to parents who have children in school up to the age of 22.	Jan 31, 2011 2:51 PM
162	Asked/answered	Jan 31, 2011 3:45 PM
163	Should have a state standardized rate not to exceeed $35.00 per hour. All inclusive rate.	Jan 31, 2011 4:19 PM
164	Regional center should pay for no more than 5 years of independent living skills training. Any need beyond 5 years should be considered maintenance, authorized at no more than 15 hours per month. Consumers could explore IHSS for additional assistance.	Jan 31, 2011 5:47 PM
165	Co-payment should be required based on family's ability to pay.	Jan 31, 2011 5:52 PM
166	The regional center should continue to pay for this service.	Jan 31, 2011 6:09 PM
167	I believe that if a consumer is appropriate for indepentent or supportive living they are also appropriate for job placement. Those consumers who live these situations should be responsible for paying the majority of their housing costs. Funding should be provided for additional job and living support that they require.	Jan 31, 2011 6:15 PM
168	Family members should not be paid to provide care services unless the care they provide is well above that which a family would provide for a normal child. Again, the concept of family responsibility.	Jan 31, 2011 6:33 PM

5. Suggested service standards about the payment for these services:

	Response Text	
169	Each consumer has different needs. Each area of the state has different cost of living. A cap on the $ amount paid for these services would prevent the regional centers from meeting the demands of the Lanterman Act.	Jan 31, 2011 6:36 PM
170	the payment should come from the state. People receiving these services can not afford to pay for them, do to limited resources.	Jan 31, 2011 6:39 PM
171	Regional Center to fund ILS/SLS services for consumer 18 and over	Jan 31, 2011 6:41 PM
172	Payment to the staff should be at a level to get quality people without much turnover.	Jan 31, 2011 6:57 PM
173	none	Jan 31, 2011 7:26 PM
174	RC collaborates with appropriate sources, ie, SSI, IHSS to support consumer's independence	Jan 31, 2011 7:36 PM
175	* A standardized method of payment should be established throughout the state and be based on individualized budgets with a standardized hourly rate for services for supported living. * Individualized funding will be determined by the planning team and that agreement will be solidified in writing prior to initiation of providing procurement or direct service. * That agreement may only be altered with a unanimous decision by the planning team as a whole, as the needs of the person being served change, changes to generic resources or funding changes due to legislative action.	Jan 31, 2011 8:14 PM
176	ILS is appropriate for hourly rate. There should be reimbursement for travel with the consumer. Appropriate hours for clients should vary according to their needs as specified in the IPP and to their length of time using the sevice. For example, a typical consumer starts at a relatively high number of hours and eventually may fade back to 20 or less a month. SLS is more appropriately paid as a monthly "package" as the service varies greatly from consumer to consumer. Initial experience with the service design has shown that hourly rates do not reflect the difference in the various kinds of service that one consumer might receive. At RCEB, the switch from hourly to monthly was a cost saver.	Jan 31, 2011 8:23 PM
177	medicare, medical, insurance, copayment if possible	Jan 31, 2011 9:03 PM
178	A person that has studied and worked hard for their degree should be payed accordingly for their services provided. The service provider deals with so many levels of the clients lives and more then often are exposed to do so many more things for their clients. Giving a good paying scale will insure that people stay interested in doing this type of work and that more opportunities to grow in this field continue.	Jan 31, 2011 9:15 PM
179	Individuals using the service should be required to pay for the services. Even if it is only a dollar, they should be required to pay.	Jan 31, 2011 9:15 PM
180	Considering the financial support from SSI or other resources that are limited, makes it very difficult for consumers to pay for services. I would hope Regional Centers will always be responsible and without financial restraints to cover these expenses.	Jan 31, 2011 9:22 PM
181	Pay what they actually cost; provide for cost of living adjustments and benefits even a frraction of what State employees get	Jan 31, 2011 9:30 PM
182	No idea.	Jan 31, 2011 9:41 PM

5. Suggested service standards about the payment for these services:

	Response Text	
183	Let's keep in mind that alot of the direct staff are not highly educated. (High school or some college) If we keep reducing the rates, the agencies will have a hard time retaining staff. They already have a hard time. This work is VERY hard. They are caring for many of the most vulnerable members of our community. Try not to continue to reduce rates.	Jan 31, 2011 9:52 PM
184	San Andreas has refused to negotiate rates with providers for many many years before the actual rate freeze and refuses to provide contracts to SLS providers. In the absense of a contract, each provider is doing things differently and this has led to many ineffeciencies and confusion from billing to requesting hours. It would be helpful for providers to understand what costs fall into what category and have some standardization about how to request hours and what will be covered. I believe it would save money for providers to be paid directly from DDS and would reduce the conflict of interest with regional centers being in charge of both helping the individual find an appropriate service and then setting a cost for the service and then paying for that service each month.	Jan 31, 2011 9:54 PM
185	minot = parents non-minor - State of CA	Jan 31, 2011 9:56 PM
186	Up to but not to exceed the cost to house one individual in a Developmental Center	Jan 31, 2011 9:58 PM
187	Regionl Center based on Lanterman act.	Jan 31, 2011 10:22 PM
188	Grant funding	Jan 31, 2011 10:25 PM
189	Same cost to house in Developmental Center	Jan 31, 2011 10:30 PM
190	$15.00 -$20.00 hour, tops.	Jan 31, 2011 10:31 PM
191	flat rate monthly reimbursements.	Jan 31, 2011 10:40 PM
192	Regional Centers should no longer have anything to do with SLS and ILS. Like other states, a state department can do this. This would save vast sums of money and as the Regional Centers to nothing more than vendorize providers, nothing would be lost for people receiving support. Servise providers can be paid directly from DDS. Cut out the middleman.	Jan 31, 2011 10:54 PM
193	according to local regional center rates	Jan 31, 2011 11:27 PM
194	private or public insurance	Jan 31, 2011 11:41 PM
195	Costs should be no more than the IHSS rate for the direct servcies staff. Supevisors should be no more than $30 per hour. Cap on all servcies should not exceed the cost of a community care facility of ICF facility. Currently, new vendors are subject to the median rates. Apply median rates to all providers and to all consumers. If a higher level of support is needed than the consumer needs to be placed in an appropriate facility. This would save the state millions of dollars.	Feb 1, 2011 12:22 AM
196	Since these are the services that often help a disabled person to rise to a higher level of social functioning, they are important and must be valued.	Feb 1, 2011 1:15 AM
197	Preserve the Lanterman Act...	Feb 1, 2011 1:20 AM
198	Payment for these services to be through the micrbaord system--common in Colorado and other states. DO not allow the Regional Center to steal these funds from consumers!! (Valley mountains should be audited re no SLS service models support!!! They take consumer money to engage in nest padding and self promotion)	Feb 1, 2011 1:43 AM
199	Payment needs to by quality support. SOme arrangements are called supported living and its disgusting. I also see some independent living as being nothing more than neglect. Its a fine line, but what some call independence, I call out right neglect. when someone can't keep themselves clean and well fed..... that is not caring for them, that is turning your back.	Feb 1, 2011 3:15 AM

5. Suggested service standards about the payment for these services:

	Response Text	
200	should be free, but ask for a donation	Feb 1, 2011 4:51 AM
201	Check if consumer's insurance would cover any aspect, then Medi-Cal, IHSS and other such agencies, finally regional center should cover any unaddressed balance.	Feb 1, 2011 4:52 AM
202	reasonable wage	Feb 1, 2011 5:18 AM
203	N/a	Feb 1, 2011 5:24 AM
204	Must not be used as income for the family as currently being done for mortgages. The consumer should benefit for the help not their family.	Feb 1, 2011 5:26 AM
205	state	Feb 1, 2011 5:59 AM
206	N/A	Feb 1, 2011 7:11 AM
207	Prices vary significantly among different areas of the State. "Standards" are not appropriate because to impose them would penalize consumers in high-cost areas and do not take into account an individual's specific and unique needs and circumstances. If a "standard" is imposed, it should allow for costs up to the amount that the State would pay if the consumer is placed in a developmental center.	Feb 1, 2011 7:15 AM
208	DVR, ADEQUATELY FUNDED BY THE STATE	Feb 1, 2011 8:55 AM
209	Rgional centers, insurance, government	Feb 1, 2011 9:46 AM
210	Rates should be based on the same type of "administrative parameters" the Governor is proposing for regional centers ---- no more than "x"$ of the rate could go toward the costs of supporting the program itself and its indirect staff expenses. The rates should be based on a documented negotiation with the reginoal center (using the current regulatons on contracting that some RCs don't seem to follow regarding the documentation of the negotiating part), with a DDS-set possible range of minimum and maximum wage range for direct staff; DDS should not set one rate or base a rate on one direct staff hourly wage assumption because of the huge differences in wages around the various parts of the state, but a range could be set by DDS --- the problem would be how regional centers use the range, as the tendency is probably for vendors to demand the highest wage range (even if they don't pay staff that wage) and for regional centers to waffle about agreeing to a reasonable wage to base rates on. But different SLS vendors will pay different wages and get different performances from their employees --- frree market principles should be used to get the best service for the best rate, not to enforce a mediocre rate on everyone and expect excellence.	Feb 1, 2011 10:46 AM
211	Most DD adults who live independently need to have help with medications, doctor appointments, and some housekeeping.	Feb 1, 2011 4:28 PM
212	Payment should be above minimum wage, and according to experience.	Feb 1, 2011 4:52 PM
213	Agency will bill funding source for services performed and be paid accordingly.	Feb 1, 2011 5:48 PM
214	The vendor or the provider of the service should not be paid for "watching a client who is sleeping". The vendor should not be paid for "protective supervision" type services. The parent should not be vendored and paid for providing the service for their own adult child. If a vendor is requesting that the Regional Center supplem hours that were reduced by IHSS, the vendor should be paid the IHSS rate or the homemaker rate for the supplemented hours. The hourse provided by IHSS are custodial/domestic hours and should be paid as such.	Feb 1, 2011 6:07 PM
215	free services for the client.	Feb 1, 2011 6:18 PM
216	some insurance companies may be able to pay since they pay for mental health treatment centers - especially if the service is for a crisis residential model	Feb 1, 2011 6:38 PM

5. Suggested service standards about the payment for these services:

	Response Text	
217	Remember, you get what you pay for!	Feb 1, 2011 6:51 PM
218	Share of cost like medi-cal	Feb 1, 2011 6:54 PM
219	Current service standards could be reduced by a maximum of 15%.	Feb 1, 2011 7:25 PM
220	UNIVERSAL PAYMENT AND ORGANIZATIONAL REQUIREMENTS TO ALL SIMILAR ORGANIZATIONS STATEWIDE! EXAMPLE: Statewide all community based supported living programs/Independent Living/personal service programs make X per consumer hour. The services are SO SIMILAR that there is a MASSIVE crossover. The time it takes each organization to provide each of these services are identical. The only variation is the level of the consumer need and that is simply determined by the amount of time it will take to perform the task. Financial consideration must be given to every program for running their organization. It takes money to pay employees, benefits, insurance(s), taxes, office expenses, transporting consumers to appointment or errands and etc. RC's arbitrarily pay varying amounts to organizations that provide identical services. ALL ORGANIZATIONS STATEWIDE should have to run by the same standards example: amount of liability insurance, amount of employee benefits. RC arbitrarily requires identical agencies providing identical services to live up to varying standards.	Feb 1, 2011 7:36 PM
221	Increase services	Feb 1, 2011 7:44 PM
222	1) "Purchase of Service Limits" is a more appropriate name than "standards." 2) We oppose statewide purchase of service "standards." 3) There is no "one size fits all" solution. Purchase of service standards for each individual are defined by the IPP. 4) "Up to but not to exceed the cost to house one individual in a Developmental Center."	Feb 1, 2011 7:56 PM
223	Parent co-pays on a sliding scale	Feb 1, 2011 8:31 PM
224	1) "Purchase of Service Limits" is a more appropriate name than "standards." 2) We oppose statewide purchase of service "standards." 3) There is no "one size fits all" solution. Purchase of service standards for each individual are defined by the IPP. 4) For questions 3 & 4: These standards already exist. 5) "Up to but not to exceed the cost to house one individual in a Developmental Center."	Feb 1, 2011 9:15 PM
225	There should be rate caps for these services.	Feb 1, 2011 9:27 PM
226	STATE AND FEDERAL GOVERNMENT SHOULD APPROPRIATELY TAKE CARE OF US CITIZENS, ESPECIALLY THOSE WITH DISABILITIES OR THE ELDERLY.	Feb 1, 2011 9:40 PM
227	none	Feb 1, 2011 9:40 PM
228	reimbursement rates need to be above $20 per hour for provders to make a profit after admin costs, paying staff, insurance, workman's compensation, etc	Feb 1, 2011 9:58 PM
229	Negotiated contracts for each consumer based on their service needs, not to exceed the cost of what it would cost to serve the individual in a developmental center.	Feb 1, 2011 10:02 PM

5. Suggested service standards about the payment for these services:

	Response Text	
230	Basic services supported by Regional Center with help from clients family friends when available	Feb 1, 2011 10:13 PM
231	The state has ever increased what is required for programs without reimbursement for these additional requirements. Rather, while increasing service standards the state has chosen to reduce rates. This needs to stop.	Feb 1, 2011 11:20 PM
232	List of prices for those extra service for as low as they can for so many hours.	Feb 1, 2011 11:25 PM
233	Should be paid timely by the fifth of each month.	Feb 1, 2011 11:37 PM
234	Rates should be standardized and the bulk of the hourly rate should be payed to the person who priveds the actual service to the consumer. the toal montly cost shsould not exceed the cost of residential care if that same oerson were placed in a licensed community residential facility.	Feb 1, 2011 11:42 PM
235	These services should be free to disabled citizens as they can not otherwise afford these vital services.	Feb 1, 2011 11:43 PM
236	Prevailing standards.	Feb 1, 2011 11:54 PM
237	Whatever is market rate. Some consumers need a high level of support, others less, it will depend.	Feb 2, 2011 12:35 AM
238	Payment for these services should come from the State. State should be required to pay ILS services as well as supported employment.	Feb 2, 2011 12:53 AM
239	The state of California should pay for developmental services in the area of ILS.	Feb 2, 2011 1:00 AM
240	Time limited for areas of training. If goal not met...discontinue and offer support. No more than 2-3 years.	Feb 2, 2011 1:22 AM
241	The workers should be paid according to their experience and educational level.	Feb 2, 2011 2:00 AM
242	Those of us "on the front lines" with the consumer should be paid much more than we earn. We're required to have a degree and be accessible for the hours needed as well as the crises we help our consumers endure. However, none of us goes into this profession for the money. We find ourselves here and remain here because we know these precious people MATTER.	Feb 2, 2011 2:36 AM
243	I would assume the Regional center sets the payment & that is good.	Feb 2, 2011 2:47 AM
244	This is clearly a free for all. The amount of money that is being requested doesn't match the support provided.	Feb 2, 2011 3:07 AM
245	Dependant on the Rate Classification Level of the consumers	Feb 2, 2011 3:26 AM
246	Providers should be paid well to attract good workers.	Feb 2, 2011 3:32 AM
247	Regional Centers, SSI benefits, and work income (if applicable) should be considered in determining payment for these services	Feb 2, 2011 5:03 AM
248	There should be a standard rate for evaluations. Consider a set rate for the hourly service of training and a different rate for support.	Feb 2, 2011 5:15 AM
249	$10 -20 / hour.	Feb 2, 2011 5:21 AM
250	This is a very rewarding but complex field. It hasn't been high paying so it attracts a mixed group of providers. It is like the teaching field. You have those that are dedicated despite the wage.	Feb 2, 2011 5:33 AM
251	Comparison with other agencies in the region.	Feb 2, 2011 5:48 AM
252	Self directed services. Regional center pays vendored agencies.	Feb 2, 2011 6:00 AM
253	DO NOT UNDERPAY, the services end up being farmed out to people making $8 - $10 an hour, which does not help to ensure good, continuous care.	Feb 2, 2011 6:03 AM
254	must be competitive so that providers are available.	Feb 2, 2011 6:35 AM
255	Scale with regional COLA - STOP the negotiation process it is extremely unfair as currently applied, again way to much favoritism and inequity in payments for the same service across providers	Feb 2, 2011 1:56 PM

5. Suggested service standards about the payment for these services:

	Response Text	
256	Have a regulations where it states a minimum and decent hourly payment for staff.	Feb 2, 2011 2:01 PM
257	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 2, 2011 3:35 PM
258	If the payment could be based on pulling funds from the full developmental services budget, rather than just from purchase of service, the people actually providing the real service - assisting with budgeting, medications, behavior management, etc, could be paid a reasonable wage with benefits - one which is respectful of the importance of their position.	Feb 2, 2011 4:06 PM
259	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 2, 2011 4:55 PM
260	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 2, 2011 5:51 PM
261	There are many who have been requiring training in housekeeping for many years...a more cost effective means of meeting these needs would be to hire a housekeeper as neede. Many have lived independently for years withouth improvement in self-advocacy and finance. These persons may continue for years with low cost ILS services.	Feb 2, 2011 6:29 PM
262	a	Feb 2, 2011 6:51 PM
263	Have been terribly under paid in past !!	Feb 2, 2011 7:02 PM
264	I believe the State could save money by eliminating redundant services by county welfare workers who (at least in our area) are about 3 years behind in keeping tabs on their caseloads. The regional centers seem to be doing a better job of assessing and monitoring supported living arrangements for our disabled community. By eliminating the county component, we will save money not just in salaries, but in benefits and pension contributions as well.	Feb 2, 2011 7:29 PM
265	Hourly rate	Feb 2, 2011 7:30 PM
266	A cap on SLS services. A standard for amount of hours for ILS per month at 40 hours max.	Feb 2, 2011 7:41 PM
267	If a person served is working, perhaps some of their wages could pay for some of the domestic portion of SLS services like cleaning or yard work, similar to what persons without developmental disabilities pay for.	Feb 2, 2011 8:27 PM
268	Organizations that provide independently living support make a lot of money and they are always encouraging clients to live independently even if they are not able to do so without a lot of help. They do this because they can make more money if the client lives independently. This is not putting the safety or the quality of live of the client first.	Feb 2, 2011 9:19 PM
269	good, dedicated care requires commensurate compensation	Feb 2, 2011 9:27 PM
270	Qualified Regional Center Clients over 18	Feb 2, 2011 9:35 PM

5. Suggested service standards about the payment for these services:

	Response Text	
271	The lanterman Act, in Sections 4648 (a)(5) and 4690 require the director of DDS to develop and maintain equitable processes for setting rates to assure that regional centrs can secure high quality services for persons with developmental disabilities. The Director should comply with these laws	Feb 2, 2011 9:38 PM
272	pay so they can make a profit	Feb 2, 2011 9:42 PM
273	THE CLIENT WILL PAY FOR THEIR RENT AND ALL THE BILLS ON THIER OWN WITH HELP OF A AIDE.	Feb 2, 2011 9:43 PM
274	If there diasablity is not curable then long term. They will always need assistance esically because as they age so does there family and they are not physically able to contribute in the same way or end up with there own health issues. DDS/Region Cenet	Feb 2, 2011 9:47 PM
275	SAME AS PRIOR	Feb 2, 2011 10:05 PM
276	Flat rates	Feb 2, 2011 10:05 PM
277	Payment needs to be competitive so that consumers receive quality services.	Feb 2, 2011 10:11 PM
278	Do not implement a $750 million cut to the Department of Developmental Services (DDS) budget. It is too drastic! We need these services for our kids on the spectrum!	Feb 2, 2011 10:12 PM
279	The Director of DDS has a fiduciary responsibility to protect services of the IL & SLS programs by developing and maintaining equitable processes for setting rates to assure that regional centers can secure high quality services for thes individuals.	Feb 2, 2011 10:15 PM
280	Please previous topic response....	Feb 2, 2011 10:19 PM
281	Reasonable enough to attract qualified people.	Feb 2, 2011 11:16 PM
282	No co pay. Clients should not be limited to minimum wage workers.	Feb 3, 2011 12:06 AM
283	payment should be made according to vendor rates and per contract.	Feb 3, 2011 12:19 AM
284	Social security could pay for these services on a sliding scale basis with parent copay based on income.	Feb 3, 2011 12:26 AM
285	Should be paid by the government.	Feb 3, 2011 12:42 AM
286	Same answer as previous pages	Feb 3, 2011 12:45 AM
287	I would like to get rid of the Alta service open it to private sector every family gets a designated amount to provide what they know is best for their perso n	Feb 3, 2011 12:51 AM
288	Payment should be sufficient enough to entice qualified providers. State travel reimbursement percentages should apply to rate so that urban and rural areas do not suffer an imbalance of quality vs. quantity.	Feb 3, 2011 12:53 AM
289	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 3, 2011 1:00 AM
290	The state of CA needs to provide these services as per the Lanterman Act.	Feb 3, 2011 1:24 AM
291	monitored by regional center	Feb 3, 2011 1:31 AM
292	Regional center.	Feb 3, 2011 1:49 AM
293	These services should be paid for by the community fund as needed.	Feb 3, 2011 1:51 AM
294	co-pay based on ability to pay	Feb 3, 2011 1:58 AM
295	Evaluate services.	Feb 3, 2011 1:58 AM
296	N/A	Feb 3, 2011 2:04 AM
297	Must be cost effective	Feb 3, 2011 2:24 AM
298	as needed	Feb 3, 2011 4:38 AM

5. Suggested service standards about the payment for these services:

	Response Text	
299	government funding, donations,	Feb 3, 2011 5:04 AM
300	adjust EDD law to allow workers to work under contract for an individual.	Feb 3, 2011 5:10 AM
301	no comment	Feb 3, 2011 5:12 AM
302	If an individual can live on his/her own, he must have resources to do that, and he/she should pay for the services.	Feb 3, 2011 5:32 AM
303	Have the consumer pay a miniscule part of the fee...that will cause them to have a more critical eye and hopefully an outspoken voice.	Feb 3, 2011 6:25 AM
304	free.	Feb 3, 2011 6:48 AM
305	FREE.	Feb 3, 2011 6:50 AM
306	No Comment	Feb 3, 2011 6:52 AM
307	regional center and federal government	Feb 3, 2011 6:57 AM
308	No payment from client. They don't have the money as they are all on SSI. They are adults.	Feb 3, 2011 7:23 AM
309	Regional Center should fund for these services, starting with the most cost effective agencies. No agency should be allowed to charge a flat rate for any consumer.	Feb 3, 2011 3:36 PM
310	My tax dollars. How can a disabled person contribute? You give my tax dollars to illegal immigrants so this issue of support to an American born citizen with disabilities is upsetting. A caring society WILL CARE FOR THOSE UNABLE TO CARE FOR THEMSELVES!	Feb 3, 2011 4:32 PM
311	Federal, State gov.	Feb 3, 2011 4:46 PM
312	People with higher staffing needs should be reimbursed most. If someone only needs assistance with setting up their medications on a weekly basis, or grocery shopping or budgeting, their payment would be at a much lower rate than someone who needs continual support and supervision.	Feb 3, 2011 4:53 PM
313	POS	Feb 3, 2011 5:17 PM
314	Bill for actual hours used.	Feb 3, 2011 5:22 PM
315	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 3, 2011 5:23 PM
316	Payment should be based partially on producing outcomes. The current system of reduced payment coupled with increased regulation does not provide incentive for changing support levels based on consumer needs. Consumer should also be able to choose services based on what the provider will perform, actual choice.	Feb 3, 2011 5:37 PM
317	cost plus 15% and they have to provide documentaion on a yearly basis of this	Feb 3, 2011 5:42 PM
318	No Comment	Feb 3, 2011 5:44 PM
319	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 3, 2011 5:46 PM
320	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws	Feb 3, 2011 6:29 PM

5. Suggested service standards about the payment for these services:

	Response Text	
321	Based on quarterly hour recomendations and hours should be redetermined quarterly, no if's, and's, or but's.	Feb 3, 2011 6:36 PM
322	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws	Feb 3, 2011 6:39 PM
323	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 3, 2011 6:50 PM
324	should come from the state	Feb 3, 2011 6:55 PM
325	The Director of the DDS should comply with the Laws under that Lanterman Act Sections 4648(a)(5) and 4690	Feb 3, 2011 7:23 PM
326	Services as rendered.	Feb 3, 2011 7:46 PM
327	depends	Feb 3, 2011 7:46 PM
328	Regional Cente	Feb 3, 2011 7:49 PM
329	Don't know	Feb 3, 2011 7:54 PM
330	Must be some rate limits.	Feb 3, 2011 7:55 PM
331	Give RCs the ability to withhold payment when certain performance minimums are not being met, as well as other options to address issues, way before a de-vendorization option.	Feb 3, 2011 8:05 PM
332	If families are receiving services for assisted living then they should show that they get the individual involved in community activies nit just keep them enclosed at home. They shouldn't get paid to sit and watch TV.	Feb 3, 2011 8:09 PM
333	Open	Feb 3, 2011 8:10 PM
334	RC should be responsible.	Feb 3, 2011 8:49 PM
335	Tax the capitalists. They have been taking away from the worker for years.	Feb 3, 2011 8:51 PM
336	State	Feb 3, 2011 8:54 PM
337	????	Feb 3, 2011 9:02 PM
338	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 3, 2011 9:20 PM
339	Same as comments in other sections in this area.	Feb 3, 2011 9:38 PM
340	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 3, 2011 9:44 PM
341	n/a	Feb 3, 2011 9:53 PM
342	The rate for this should not be more than the standard rate paid for the same level of residential care.	Feb 3, 2011 10:18 PM
343	I don't know	Feb 3, 2011 10:19 PM

5. Suggested service standards about the payment for these services:

	Response Text	
344	With all of these services, there should be an expectation for reduced services over time. Maybe 3-5 years at a higher amount, then a reduction of 1/3 for 2 years, then another reduction of 1/3 for 2 years. The reduction should occur until some standard amount was reached, which was considered economically viable. If a person started at this level, then no reductions would be necessary. In this situation, any client would be eligible to receive services (there could be a total yearly or monthly cost cap). However, they would have to make progress in becoming more independent. If they failed to do so (as determined by the team) they would have to go into a less expensive living situation (e.g. group home). Or they could simply take the 1/3 cut and continue to live in supported/ind living - this would be a risk at times, but many individuals might surprise us with their ability to survive.	Feb 3, 2011 10:37 PM
345	The Lanterman Act, Sections 4648 (a) (5) and 4649 requires the Director of the Department of Developemental Services to develope and maintain equitable processes for setting rates that assure that Regional Centers can secure high qualiity services for each person. The Director should comply with these laws.	Feb 3, 2011 10:45 PM
346	the rates paid should be those by which Regional Centers can assure that the quality of services provided for people with developmental disabilities is high	Feb 3, 2011 10:47 PM
347	As high a salary as possible to attract qualified employees.	Feb 3, 2011 10:54 PM
348	As currently set.	Feb 3, 2011 11:12 PM
349	The rate should be negotiated between the program and the regional center.	Feb 3, 2011 11:13 PM
350	Agency to fund providers.	Feb 3, 2011 11:18 PM
351	Sliding scale	Feb 3, 2011 11:34 PM
352	DDS should set a standard rate for all SLS agencies with the ability to have separate layered rates for related or ancillary services.	Feb 3, 2011 11:42 PM
353	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 3, 2011 11:44 PM
354	Parents can assist on a voluntary basis	Feb 4, 2011 12:06 AM
355	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws	Feb 4, 2011 12:06 AM
356	Med ins	Feb 4, 2011 12:11 AM
357	Payment every three months an only if detailed monthly reports are provided to RC. Reports should not be copied reports with same information and comments every time. Some IL reports are never received and the powers at be never hold them accountable.	Feb 4, 2011 12:19 AM
358	Hold payment until all contract requirements are met including but not limited to case plans and progress reports.	Feb 4, 2011 12:48 AM
359	Unsure but should be market rate or it seems as if you will not get qualified providers.	Feb 4, 2011 12:53 AM
360	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 1:06 AM

5. Suggested service standards about the payment for these services:

	Response Text	
361	Rates for services should be better categorized and standarized. For example, training of new skills that result in the consumer being able to then accomplish the task independently should be time-limited and paid at a higher rate. "Maintenance" services that are provided as a result of the consumer being unable to master the skill him/herself should be paid at a lower rate.	Feb 4, 2011 1:08 AM
362	A standerd should be set by DDS this could be done by setting a specific rate that could then be regionally adjusted to account for varying costs that differ from regional center to regional center. For example For example hiring a staff to Support a consumer in San Francisco Costs much more than a direct care staff in Mendacino County.	Feb 4, 2011 1:22 AM
363	School districts need to develop and implement proper job training programs for our teenaged children with disabilities.	Feb 4, 2011 1:37 AM
364	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 1:52 AM
365	Adults with disabilities cannot be expected to pay for these services. Their incomes are extremely limited and are barely able to make ends meet as it is now. SSI cuts would make this service unavailable to all adults with disabilities.	Feb 4, 2011 2:02 AM
366	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 2:07 AM
367	covered by insurance or ssi	Feb 4, 2011 2:09 AM
368	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 2:49 AM
369	Regional center need to handle all payment for those cervice.	Feb 4, 2011 3:11 AM
370	Self-directive or self-determination should be used.	Feb 4, 2011 3:52 AM
371	You need to pay people a decent wage. Both the disabled person AND the people who are assisting them need to receive reasonable compensation. When you do that you can attract appropriate people. The long term service fee freezes by the State have gone too far!!!!! It is very difficult to find decent workers when the pay is sooooo low. It is obvious that poor wages bring poor results and under qualified workers and therefore neglect and abuse of the disabled. This is NOT the right thing to do!	Feb 4, 2011 4:42 AM
372	Lanterman Act 4648 a, 5, and 4690	Feb 4, 2011 4:58 AM
373	SLS providers continue to over charge the state. This is because the law allows them to establish the amount of supportive hours a consumer needs. Sometimes the payment for SLS services is more than residential services. The consumer should be evaluated by an outside party (mental health clinician) to determine the amount of hours needed.	Feb 4, 2011 5:12 AM
374	Payment should be less than license home since it is so called supported living.	Feb 4, 2011 5:27 AM
375	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 6:42 AM

5. Suggested service standards about the payment for these services:

	Response Text	
376	Answer: The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 7:36 AM
377	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 3:17 PM
378	The Lanterman Act provisions should be followed which require the Director of the Department of Developmental Services to develop and maintain a fair process for setting rates that support the Regional Centers in securing high quality services for their clients.	Feb 4, 2011 3:54 PM
379	I feel that the person should be able to find a job to help pay for some of their living expenses. Even though it is hard on these types of people. Seniors who have no one to help them should be able to get these for free. People with mental disabilities, depending on their disabilities, should also get them for free. The other two I mentioned above should be working as this will also help their recovery.	Feb 4, 2011 4:14 PM
380	Payment should not be more that what would be paid if they lived in residential care. No negotiated rates.	Feb 4, 2011 4:22 PM
381	Insurance	Feb 4, 2011 4:47 PM
382	None	Feb 4, 2011 4:49 PM
383	Same as previous section	Feb 4, 2011 4:55 PM
384	N/A	Feb 4, 2011 5:01 PM
385	The Director of the Department of Developmental Services is to develop and maintain an equitable process for setting rates to assure high quality services for individuals with developmental disabilities as describes by law in the Lanterman Act	Feb 4, 2011 5:12 PM
386	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 5:16 PM
387	Pay through the regional centers.	Feb 4, 2011 5:21 PM
388	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 5:44 PM
389	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 6:12 PM
390	If a client is receiving Social Security, SSI, or Medi-Cal, those funds should be used to reduce payments that the State or Local government is making. Any income that the client earns should also be used to defray the government costs.	Feb 4, 2011 6:18 PM

5. Suggested service standards about the payment for these services:

	Response Text	
391	Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws	Feb 4, 2011 6:37 PM
392	Monthly	Feb 4, 2011 6:46 PM
393	The Lanterman Act in sections 4648 (a) (5) and 4690 requires the Director of Department of Developmental Services to develop and maintain equitable processes for setting rates to assure the Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 7:09 PM
394	Federal and State funding with tax incentives for property owners who participate in making housing available.	Feb 4, 2011 7:17 PM
395	The same as previous #5.	Feb 4, 2011 7:19 PM
396	state or federal government	Feb 4, 2011 7:33 PM
397	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 7:50 PM
398	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 8:15 PM
399	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 8:39 PM
400	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 8:56 PM
401	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 9:19 PM
402	free	Feb 4, 2011 9:36 PM
403	no opinion	Feb 4, 2011 9:43 PM
404	The Lanterman Act in sections 4648 (a) (5) and 4690 requires the Director of Department of Developmental Services to develop and maintain equitable processes for setting rates to assure the Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 9:55 PM
405	All payment should be the same thoughout the state.	Feb 4, 2011 10:07 PM
406	Equal pay for equal work, WITHOUT PARTIALITY...this, too, shoud not even need to be mentioned!	Feb 4, 2011 10:08 PM
407	Service providers should be paid for their services at no cost to the client.	Feb 4, 2011 10:11 PM

5. Suggested service standards about the payment for these services:

	Response Text	
408	The Lanterman Act requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 10:22 PM
409	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 10:38 PM
410	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 10:45 PM
411	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 10:56 PM
412	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 11:15 PM
413	As is in effect already.	Feb 4, 2011 11:20 PM
414	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 4, 2011 11:21 PM
415	You get what you pay for. Use of min. wage should be closely reviewed. perhaps it would be better to pay more for a qualified person who can actually do more than hiring two min. wage people who don't know what they are doing.	Feb 4, 2011 11:23 PM
416	Should be DDS through Regional Centers	Feb 4, 2011 11:41 PM
417	The Lanterman Act, in Sections 4648(a)(5) and 4690 requires the Director of the Department of Developmental Services (DDS) to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 5, 2011 12:22 AM
418	Lanterman Act 4648 and 4690 state that the Director of DDS is to develop and maintain a equtiable process for setting rates to assure that consumers receive high quality services. Director needs to comply with the Act.	Feb 5, 2011 12:23 AM
419	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 5, 2011 12:32 AM
420	Statewide median rate.	Feb 5, 2011 12:41 AM
421	same as for other programs and above answers	Feb 5, 2011 1:28 AM
422	Payment for services should be set within a standardized rate framework similar to that of residential facilities.	Feb 5, 2011 2:04 AM

5. Suggested service standards about the payment for these services:

	Response Text	
423	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 5, 2011 2:19 AM
424	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 5, 2011 3:57 AM
425	sliding scale with copayments for those able to afford such	Feb 5, 2011 4:29 AM
426	ILS Hourly Fee: $37 per hour (minimum)	Feb 5, 2011 6:11 AM
427	The Director of the Department of Developmental Services is charged with setting rates and overseeing processes. The Director should carry out that job!	Feb 5, 2011 6:49 AM
428	As adults, the client should be charged through their MediCal/SSI, or by whatever government agency supports independent living.	Feb 5, 2011 6:51 AM
429	The Lanterman Act requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 5, 2011 2:47 PM
430	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 5, 2011 5:27 PM
431	Standards are always important.	Feb 5, 2011 5:38 PM
432	same as first set	Feb 5, 2011 6:40 PM
433	SDRC, Social Security, MediCal	Feb 5, 2011 8:06 PM
434	I oppose POS standards. Please refer to the Lanterman Act section 4648 (a) (5) and section 4690.	Feb 5, 2011 8:54 PM
435	State. Why pick on the weakest members of our community...it maybe you one day	Feb 5, 2011 10:13 PM
436	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 5, 2011 10:55 PM
437	pay 12.00 per hour not 45.00	Feb 5, 2011 11:28 PM
438	These organizations should not have their budjets cut, if the hours provided to concumers were cut, their lives could be in danger.	Feb 6, 2011 4:08 AM
439	Regardless of any suggested standards, if the consumer is on SSD, SSI and/or MediCal, services should be provided at no cost; for all other consumers services should be provided on a sliding scale such that all necessary services and supports are within the consumer's financial reach.	Feb 6, 2011 5:45 AM
440	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 6, 2011 5:55 AM

5. Suggested service standards about the payment for these services:

	Response Text	
441	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 6, 2011 4:35 PM
442	Health insurance should be required to share the cost.	Feb 6, 2011 5:08 PM
443	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 6, 2011 6:45 PM
444	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 6, 2011 6:47 PM
445	Follow standard business practices. Annual or bi-annual financial audits should be considered to preclude any abuses.	Feb 6, 2011 8:11 PM
446	More of the money from payment should go to the caregivers and much less to the agencies.	Feb 6, 2011 8:46 PM
447	not sure	Feb 7, 2011 2:26 AM
448	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 7, 2011 5:13 AM
449	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 7, 2011 6:40 AM
450	I think the government could handle this cost better if they did fees based on financial need and minimal fees and or service time by family in financial hardship. Service time could include volunteer work or class time (such as parenting classes for behavioral problems)	Feb 7, 2011 6:46 AM
451	The Lanterman Act requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 7, 2011 2:46 PM
452	As indicated in The Lanterman Act, the Director of the Department of Developmental Services is required to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for people with Developmental Disabilities; the director must comply with these laws.	Feb 7, 2011 3:25 PM
453	The agencies keep about 2/3's of the money paid to them. They pay staff minimum wage or a little above. They also have a limit of 10 miles for transportation except when pre approved.	Feb 7, 2011 4:28 PM
454	Sliding scale.	Feb 7, 2011 5:16 PM
455	The Lanterman Act requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 7, 2011 5:45 PM

5. Suggested service standards about the payment for these services:

	Response Text	
456	The Lanterman Act, in sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 7, 2011 6:21 PM
457	4648 (a) (5) 4690.	Feb 7, 2011 7:50 PM
458	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 7, 2011 7:53 PM
459	No comment	Feb 7, 2011 9:31 PM
460	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 7, 2011 10:06 PM
461	hourly rate . consumers from the SDC or at risk of going to the SDC should be catagorized seprarately when in SLS. Their level of support is generally more intense and many have difficulty being room mates or may place peers at risk which is what precludes them from being in Care homes utilize generic resources, IHSS , NF waiver,	Feb 7, 2011 10:37 PM
462	Allow RC's to set the standards in their own communities.	Feb 7, 2011 10:45 PM
463	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 7, 2011 11:12 PM
464	Let the Regional Centers make the decisions regarding program services	Feb 7, 2011 11:13 PM
465	Sections 4648 (a)(5) and 4690 of the Lanterman Act state that the Director of the Department of Developmental Services must develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should make these decisions with that in mind.	Feb 7, 2011 11:15 PM
466	ILS in contract as well. SLS do an annual budget.	Feb 7, 2011 11:25 PM
467	I would suggest another component to the financial structure of the Regional Centers, and that is payments to state-approved service providers (once again, rigid, enforced standards) who are not vendors. There are private programs, sometimes very effective, that charge amounts similar to vendored programs. In many cases, I think families would be willing to accept less assistance from the Regional Centers and make up the difference from their own funds. It's a potential family-state partnership that could end up saving the state money. Remember, we're not out to gouge the state of California, we're just trying to provide minimally decent lives for our children.	Feb 7, 2011 11:56 PM
468	Agencies should provide a clear outline of use of time [schedules for PA's, schedules for Prog Coords, etc], so all members of the ID Team understand how the money is being allocated.	Feb 8, 2011 12:13 AM

5. Suggested service standards about the payment for these services:

	Response Text	
469	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 8, 2011 1:10 AM
470	Payment to a middle agency who pays all, or a regional center can pay the provider.	Feb 8, 2011 1:24 AM
471	Individual and they familynshouldmpay part of fee if tney are able. Medical insurance should ne accessed	Feb 8, 2011 3:55 AM
472	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 8, 2011 4:06 AM
473	Agencies or parents should negotiate with the Regional Center and show cause for all expenses.	Feb 8, 2011 4:26 AM
474	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 8, 2011 5:32 AM
475	If a person is capable of living on their own, they probably are capable of working to bring in funds to pay their rent and not be supported by programs.	Feb 8, 2011 5:33 AM
476	Again as previously stated.	Feb 8, 2011 6:08 AM
477	if they are eligible for disability with the State, these monies could be used to pay for the cost of the services.	Feb 8, 2011 6:37 AM
478	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 8, 2011 3:40 PM
479	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 8, 2011 4:26 PM
480	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 8, 2011 4:27 PM
481	It is infrequent that individuals with intellectual and developmental disabilities are able to afford an education and find employment with a company that would afford them to pay for these services. The State of California should assume responsibility for this population.	Feb 8, 2011 5:22 PM

5. Suggested service standards about the payment for these services:

	Response Text	
482	As employees are necessary to ensure the safety and well being of clients, along with needed increases to match economic cost growth. Stop cutting just the agencies and look at the administration of DDS and the regional centers. Posted salaries of DDS and the Regional Centers suggest that they really do not care about the people in need that are being serviced. Agencies across the state have cut benefits, salaries, employment, and are running on bare minimum. How about cutting vacations from four weeks a year, to two or three. Or cutting holidays from 14 to 10. Or have employees pay a portion of their medical insurance. Nope, all the cuts have been only to the agencies that are providing the services to the people. They are only numbers to the state and DDS now.	Feb 8, 2011 5:33 PM
483	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 8, 2011 5:51 PM
484	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 8, 2011 6:03 PM
485	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 8, 2011 6:10 PM
486	can come from families and IHSS, ACRC. Please DO NOT cut these services. Living in one's own home is priceless compared to living on the street or in a marginally-helpful residential facility. For those who want independence, we should encourage living life to the fullest and being involved in the community. Work options should be provided. Many want to help but do not know how.	Feb 8, 2011 7:47 PM
487	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 8, 2011 7:55 PM
488	Provided for a limited determined time by an agency of the government.	Feb 8, 2011 8:40 PM
489	Individual provider policies.	Feb 8, 2011 8:52 PM
490	DDD & or Regional Center	Feb 8, 2011 9:24 PM
491	Director should comply with these laws.The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 8, 2011 9:31 PM
492	Payment standards should be based on the level of experience and services being vendored. Established vendors with a good record and reputation should be compensated at a higher service rate compared to new vendors who have no experience in this type of working environment. Some vendors have specialized consumers that require a higher level of supervision, with additional requirements for all staff providing services. These requirements should be taken into consideration for a higher reimbursement rate due to the higher level of support and staff providing the services. Without the higher level of support, staff and supervision, many of these consumers would fall back into the state hospital facilities, at a much higher cost to the state.	Feb 8, 2011 10:23 PM

5. Suggested service standards about the payment for these services:

	Response Text	
493	don't know	Feb 8, 2011 10:35 PM
494	Payment standards should be based on the level of experience and services being vendored. Established vendors with a good record and reputation should be compensated at a higher service rate compared to new vendors who have no experience in this type of working environment. Some vendors have specialized consumers that require a higher level of supervision, with additional requirements for all staff providing services. These requirements should be taken into consideration for a higher reimbursement rate due to the higher level of support and staff providing the services. Without the higher level of support, staff and supervision, many of these consumers would fall back into the state hospital facilities, at a much higher cost to the state.	Feb 8, 2011 11:20 PM
495	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 8, 2011 11:48 PM
496	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 8, 2011 11:54 PM
497	I not to sure how to answer this question; however, the current payment plan that I receive for service is working for me.	Feb 9, 2011 12:25 AM
498	I recieve ILS services with my ILS Instructor and ILS classes which are paid by funding through the San Andreas Regional Center. I think that these services should continue to be paid through by the state.	Feb 9, 2011 12:55 AM
499	Once again, the state of California is in a huge budget crisis we need to accept the responsibility of that new taxes are really the way to go. The tax can be on fast food, gasoline, smokers, hotel taxes, or entertainment taxes.	Feb 9, 2011 1:06 AM
500	state and family	Feb 9, 2011 1:24 AM
501	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 9, 2011 1:25 AM
502	Answer: The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 9, 2011 1:28 AM
503	It's important that the developmentally disabled feel as independent as possible and not be forced to live in a group home, thus payment for these services should never be cut.	Feb 9, 2011 1:49 AM
504	same	Feb 9, 2011 2:28 AM
505	The State funding ;should pay for 100% of this. Take it fromthe Welfare community before tyou take it away from our children with developmental problems.	Feb 9, 2011 3:22 AM
506	I receive ILS services which are funded by the San Andreas Regional Center. I think regional centers should continue to pay for all ILS services for anyone who has a developmental disability.	Feb 9, 2011 3:36 AM

5. Suggested service standards about the payment for these services:

	Response Text	
507	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 9, 2011 5:42 AM
508	Families should have to share cost - flat rate based on Level of care needed but not based on income. If families can't afford it, they can look into financial aid or possibly having their child live at home with them. Also, this should include required parent volunteer hours or the tuition goes up.	Feb 9, 2011 8:46 AM
509	Does this service make sense? The IPP team should look at all options and make sure the service is appropriate and the funding for this service is appropriate. The cost of SLS services needs to be examined for cost effectiveness. If a person requires 24 hours staff to live independently is this independence or is there a better more cost effective service available?	Feb 9, 2011 5:19 PM
510	Consistency in payments for comparable services in comparable geographic areas should lead to greater access to services statewide. Further, while regional center consumers should access generic services to the extent possible, payment standards should not presume eligibility for or receipt of any type or amount of generic services (e.g. IHSS) which might pose barriers to individuals who need more intensive SLS or ILS services.	Feb 9, 2011 5:34 PM
511	No payment until actual time spent with person served verified	Feb 9, 2011 6:35 PM
512	by contract to allow for flexibility in time needed for support.	Feb 9, 2011 6:55 PM
513	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 9, 2011 7:57 PM
514	director of dept. of developmental services is required to develop and maintain equitable processes for setting rates to assure regional centers can secure high quality services for people with developmental disabilities, per Lanterman Act 4648 (a))5) and the director should comply with these laws.	Feb 9, 2011 8:11 PM
515	Services need to be paid hourly for one on one instruction. 3 to 1 instruction for ILS is not cost effective. Also, vendors need to be paid fairly. Newer vendors have a higher rate of pay then vendors that have been in business for over 20 years. This does not make sense, nor is it cost effective. There should be a standard rate for new vendors and it should be lower than established vendors that provide services.	Feb 9, 2011 8:16 PM
516	The State of California has accepted responsibilities for persons with developmental disabilities and an obligation to them that must be discharged (Laterman Act Sec. 4501). The state does not ask parents or students of California public schools for co-pays or funding and the same laws should apply here.	Feb 9, 2011 9:06 PM
517	RC should pay electronically. Whenever possible use self-directed services.	Feb 9, 2011 9:15 PM
518	If the client and/or their family can contribute financially, they should be expected to. If not, the RC, State and Feds should provide the funding.	Feb 9, 2011 9:20 PM
519	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 9, 2011 9:48 PM

5. Suggested service standards about the payment for these services:

	Response Text	
520	The Lanterman Act, in Section 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 9, 2011 10:04 PM
521	Cut ALL service provider rates by 10% - this is equivalent to the Governor's proposed cut to Medi-cal rates.	Feb 9, 2011 10:17 PM
522	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 9, 2011 10:34 PM
523	It should be taken from SSI or SSA not out of pocket.	Feb 9, 2011 10:42 PM
524	Another tough one.	Feb 9, 2011 11:32 PM
525	Give everyone the same. Don't look at a small program and state, they are small, we need to give them more, or look at a large agency and think they are making money and give them less. Never assume, Fee for a service.	Feb 9, 2011 11:33 PM
526	Reference comments under day programs	Feb 9, 2011 11:33 PM
527	I am comfortable with taxpayer dollars going to support these programs. If they fail to exist, many disabled people will be homeless and create a burden on society. Independent living programs are much less expensive to operate than residential facilities and afford the client a decent quality of life.	Feb 9, 2011 11:35 PM
528	should be shared	Feb 9, 2011 11:50 PM
529	Pay what they actually cost; provide for cost of living adjustments and benefits even a fraction of what State employees get	Feb 9, 2011 11:58 PM
530	Apply median rates to exisiting providers	Feb 10, 2011 12:07 AM
531	Some sort of co-pay, even if minimal, would increase buy-in from consumers.	Feb 10, 2011 12:21 AM
532	Payments received by the health insurance. the Insurance carrier needs to be held accountable for the health proivded.	Feb 10, 2011 3:15 AM
533	would rather see this implimented and other services dropped if it comes down to that. the individual monitored homes , condos etc are crucial more important than other programs . times are tough for everyone these people need a roof over their heads and food in their bellies number one concern.	Feb 10, 2011 7:54 PM
534	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 10, 2011 8:02 PM
535	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 10, 2011 8:08 PM
536	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 10, 2011 9:32 PM
537	Payment should fit the quality of service offered by the provider.	Feb 10, 2011 9:45 PM

5. Suggested service standards about the payment for these services:

	Response Text	
538	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 10, 2011 9:59 PM
539	The agency should be reimbursed for their time and also be able to cover their expenses and pay their employees.	Feb 10, 2011 10:14 PM
540	Pay should be based on performance evaluations of the agency. Incentives should be provided if the agency's performance is evaluated in the 90% percentile,on a yearly basis.	Feb 10, 2011 10:20 PM
541	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 10, 2011 10:28 PM
542	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 10, 2011 11:42 PM
543	State funded	Feb 10, 2011 11:47 PM
544	Regional Center Funding.	Feb 11, 2011 12:02 AM
545	POS should pay for these services.	Feb 11, 2011 12:15 AM
546	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 11, 2011 12:22 AM
547	he Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 11, 2011 12:50 AM
548	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 11, 2011 12:55 AM
549	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 11, 2011 1:10 AM
550	Patient/disabled person and their family should not be involved in the billing and payment.	Feb 11, 2011 1:32 AM
551	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 11, 2011 1:49 AM
552	Supports should remain the same or increase.	Feb 11, 2011 1:49 AM

5. Suggested service standards about the payment for these services:

	Response Text	
553	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 11, 2011 2:19 AM
554	covered by the Regional Center	Feb 11, 2011 2:57 AM
555	The Lanterman Act Sections 4648(a)(5) and 4690 requires that the Director of the Department of Developmental Services develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for individuals with developmental disabilities. The Director should comply with these laws.	Feb 11, 2011 3:20 AM
556	How about cutting all the frivolous government spending for all the government employees. Also, stop fulfilling all the lobbyist in our ridiculous economically strapped state, rather then taking money and benefits away from the people who really need it and have a difficult or impossible ability to care for themselves	Feb 11, 2011 3:29 AM
557	Payment shall be quarterly, unless this creates a hardship for service providers or clients.	Feb 11, 2011 3:44 AM
558	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 11, 2011 4:10 AM
559	Payment should be specific for specific services provided. There should be specific program design by provider of service.	Feb 11, 2011 4:46 AM
560	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 11, 2011 5:08 AM
561	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 11, 2011 5:44 AM
562	Services seem to be very expensive with some agencies. More control on the rate to ensure most of the costs goes directly to the service.	Feb 11, 2011 5:48 AM
563	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 11, 2011 6:15 AM
564	Dollars have to be found for this, as the truth is these individuals do not have alot of oppty to make much of an income. Individuals with disabilities cannot be put out on the streets. They could not and would not survive. We have to make this a priority in our community...as more and more children are diagnosed with autism and other developmental disabilites everyday.	Feb 11, 2011 6:22 AM
565	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 11, 2011 6:46 AM
566	State income tax should be increased.	Feb 11, 2011 8:01 AM

5. Suggested service standards about the payment for these services:

	Response Text	
567	Consumers and family members should not have to act as small businessmen with the tasks of payroll tasks of withholding and reporting.	Feb 11, 2011 4:24 PM
568	Each RC to develop an hourly rate that is the same for all vendors in their catchment area. Not individual vendors negotiating separate rates.	Feb 11, 2011 6:16 PM
569	As contracted for that time period (3 months)	Feb 11, 2011 6:39 PM
570	SAME AS PREVIOUS #5	Feb 11, 2011 6:47 PM
571	The Director of the Department of Developmental Services should ensure that equitable processes for setting rates and securing high quality services are developed and maintained.	Feb 11, 2011 7:03 PM
572	There should be a stanard flat rate monthy for administrative work.	Feb 11, 2011 7:22 PM
573	high functioning individuals should pay as much as they are able to earn at an appropriate level - say 50% of income. Remainder from Regional Center funds.	Feb 11, 2011 7:23 PM
574	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 11, 2011 7:24 PM
575	Consistency	Feb 11, 2011 7:52 PM
576	See comment under Behavioral Services	Feb 11, 2011 8:49 PM
577	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 11, 2011 9:43 PM
578	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 11, 2011 9:46 PM
579	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 11, 2011 9:47 PM
580	Not quite sure.	Feb 11, 2011 9:48 PM

5. Suggested service standards about the payment for these services:

	Response Text	
581	$15 per hour at least	Feb 11, 2011 9:48 PM
582	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. • Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. • Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 11, 2011 9:49 PM
583	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. • Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. • Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 11, 2011 9:51 PM
584	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws	Feb 11, 2011 9:51 PM
585	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 11, 2011 9:53 PM

5. Suggested service standards about the payment for these services:

	Response Text	
586	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. • Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. • Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 11, 2011 9:55 PM
587	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. • Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. • Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 11, 2011 10:01 PM
588	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 11, 2011 10:02 PM

5. Suggested service standards about the payment for these services:

	Response Text	
589	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. • Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. • Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 11, 2011 10:07 PM
590	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. • Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. • Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 11, 2011 10:14 PM
591	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. • Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. • Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 11, 2011 10:32 PM
592	As it is now.	Feb 11, 2011 10:35 PM

5. Suggested service standards about the payment for these services:

	Response Text	
593	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. • Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. • Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 11, 2011 10:37 PM
594	The Lanterman Act requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 11, 2011 10:43 PM
595	If these individuals are working, which most are them there should be some share of cost as part of teaching them how to be independent and responsible individual in a community. this includes of course using their earnings to support themselves, food vehicle insurance maintenance clothing , entertainment etc... In other words they should not get a free pass at all, and should be required to have gainful employment as a condition of living semi independently.	Feb 11, 2011 10:49 PM
596	Regional Center should pay for these services.	Feb 11, 2011 10:52 PM
597	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. • Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. • Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 11, 2011 10:56 PM

5. Suggested service standards about the payment for these services:

	Response Text	
598	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. •Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. •Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 11, 2011 11:27 PM
599	Payment can not exceed that of a typical residential service. The rate of service shouldn't go higher than a level 4. We can't afford to pay for everyone at DC rates.	Feb 11, 2011 11:31 PM
600	All ILS should be funded at the median rate. The median hourly rate for SLS is too high. If SLS is reimbursed on an hourly rate, the rate should be closer to $22.00 / hr. Consumer's should be excluded from SLS if the cost of SLS exceeds the cost of facility placement. The Lanterman Act may need to be amended to reflect this. This has always been the goal, but regional centers have not had the support in regulations to make this a reality.	Feb 11, 2011 11:50 PM
601	N/A	Feb 11, 2011 11:56 PM
602	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 11, 2011 11:58 PM
603	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 12, 2011 12:10 AM

5. Suggested service standards about the payment for these services:

	Response Text	
604	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 12, 2011 1:17 AM
605	No suggestions	Feb 12, 2011 1:44 AM
606	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 12, 2011 2:15 AM
607	If the State of California can for decades support generational welfare to individuals young, and capable of work - they should be able to support individuals that want to live normal, fulfilling lives who work and try to maintain a life of dignity.	Feb 12, 2011 2:35 AM
608	Tie to satisfaction surveys of the persons served	Feb 12, 2011 2:41 AM
609	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 12, 2011 2:45 AM
610	Equal money for Equal work	Feb 12, 2011 2:47 AM
611	Payment should be as deemed appropriate by agency.	Feb 12, 2011 3:47 AM
612	State aid.	Feb 12, 2011 3:49 AM
613	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 12, 2011 5:19 AM
614	1.Implementation of the Individualized Budget - while this will in fact represent a reduction in actual dollars spent - it will give us a CHOICE and will return suspended social-recreational services including camp	Feb 12, 2011 6:13 AM
615	See previous answers.	Feb 12, 2011 6:28 AM
616	Regional Centers.	Feb 12, 2011 6:52 AM
617	paid by state	Feb 12, 2011 7:18 AM
618	Co-payment by parents/guardians or living space in lieu of pay.(?)	Feb 12, 2011 7:57 AM
619	redirect excessive California sales tax to fund the program!	Feb 12, 2011 9:22 AM
620	I am not sure. But, the client must keep at least l/3 or more for his/her own expenses from their income. Again, it should not be a business like event to make money from the DD population, but in a fair amount for both the service and the client.	Feb 12, 2011 3:34 PM
621	Zero payments	Feb 12, 2011 4:16 PM
622	Parentss,need to contribute TIME or. $$ ------ Co-pays to help pay	Feb 12, 2011 4:36 PM
623	Government programs,scholarships,insurance companies,grants, or whatever opportunity are available to work for the individual with their needs to be successful citizen like anyone else	Feb 12, 2011 5:41 PM

5. Suggested service standards about the payment for these services:

	Response Text	
624	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 12, 2011 6:11 PM
625	In home Supportive Services resources could be used.	Feb 12, 2011 7:14 PM
626	Based on cost of living. (I.E. San Francisco is a more costly city than Riverside)	Feb 12, 2011 7:24 PM
627	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 12, 2011 8:26 PM
628	We need quality afforable Housing	Feb 12, 2011 8:49 PM
629	community recognition, tax credits	Feb 12, 2011 8:55 PM
630	Education for caregivers would be on their own volition. Training would be considered the burden of the agency or provider.	Feb 12, 2011 9:20 PM
631	adequate pay for specialized training and experience	Feb 12, 2011 9:24 PM
632	See Behavioral Services #5	Feb 12, 2011 10:07 PM
633	Lanterman Act -- taxes	Feb 12, 2011 10:12 PM
634	Payments should be made directly to the vendor for services rendored. Should be monitored by the individual whom receives the services as well as parents and regional center advisor.	Feb 12, 2011 11:11 PM
635	This should be guided by the persons income and if they own property. Many people need this care and can not afford it, while others are beating the system and own thousands of dollars in property or have large incomes.	Feb 12, 2011 11:30 PM
636	Covered in prior sections	Feb 12, 2011 11:43 PM
637	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure theat Regional Centers can secure high quality services for persons with developmental disabilities.. The Director should comply with these laws.	Feb 12, 2011 11:56 PM
638	dont provide any of this to anyone.	Feb 13, 2011 12:36 AM
639	taxes and pro rated if family can pay	Feb 13, 2011 1:23 AM
640	read the previous answer	Feb 13, 2011 2:41 AM
641	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 13, 2011 3:43 AM
642	Hourly	Feb 13, 2011 4:22 AM
643	I thought it had been determined that these services are an entitlement. Most adult consumers only have an income of about $850 per month. How can they pay?	Feb 13, 2011 5:15 AM
644	Payments should be based on how effective are they in providing services for the clients	Feb 13, 2011 5:25 AM
645	Help them get there life on track and it will pay more than you Know. They will no longer be depended on the goverment,	Feb 13, 2011 5:58 AM

5. Suggested service standards about the payment for these services:

	Response Text	
646	With SLS and ILS services, reimbursement rates should be established as a standard rate with a set amount of reimbursement paid for the number of individuals served and number of hours required to accomplish the tasks; not because a vendor has set up a system where the amount for Administration can be manipulated for high personal returns. Once a QPBS system is in place, the standard of service is set and the rate of reimbursement should be negotiated between all vendors to give all vendors equal opportunities to grow and prosper by helping others using the APPROVED service standard; not to grow and prosper by paying low wages to community support specialist and pocketing the lion share for administrators and owners. Good owners will have their fair share, but this is not a business to get into if you are planning to build an empire (however, there will always be those who will prosper from others labor). Individual vendors should not be allowed to go outside the standards set by a fair and equitible process. The process used should allow for company growth to occur but not in a way that individual companies can monopolize large amounts of RC allocated taxpayers funds and monopolize the industry. After all, this is a vendor of the State being paid by taxpayer funds and each vendor that provides QPBS is conducting business properly and will reap the due rewards for their effort (Afterall, anyone can be a millionaire if they manage their money wisely).	Feb 13, 2011 7:58 AM
647	Regional Center and State	Feb 13, 2011 3:54 PM
648	Again, care providers are underpaid.	Feb 13, 2011 5:08 PM
649	Sliding Scale? Every Autistic consumer is different so how can we set a time commitment?	Feb 13, 2011 5:51 PM
650	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 13, 2011 6:50 PM
651	Client's SSI and Regional Center budget.	Feb 13, 2011 7:07 PM
652	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 13, 2011 7:14 PM
653	1. consumers of the service.	Feb 13, 2011 8:36 PM
654	going rate	Feb 13, 2011 10:17 PM
655	As an Adult help should be give to them to qulify for Socail Security benifits to help pay for expenses	Feb 13, 2011 10:25 PM
656	Rates should be high enough to attract high quality and trained vendors for these services.	Feb 13, 2011 10:32 PM
657	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 13, 2011 10:35 PM
658	co-payments who make $80,000.00 a year or more	Feb 13, 2011 11:51 PM
659	some places need more money HUD jhousing needs to help more or the goverment needs to realize that their are more special adults than they know of. maybe a survey needs to be taken to see how many jSpecial ajults and children there are so the government can get a reality check	Feb 14, 2011 12:16 AM
660	Rate of payment should be tied to the actual cost of living for the community in which the services are delivered.	Feb 14, 2011 1:06 AM

5. Suggested service standards about the payment for these services:

	Response Text	
661	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 14, 2011 1:48 AM
662	If services are delivered and are of the type and duration requested and are delivered by a person or agency qualifed to deliver them - then payment should be made no later than 30 days after delivery.	Feb 14, 2011 1:52 AM
663	A level of co-payment where possible. Also look to community collaboration, ie; students in a health, social services type program could gain some unit credits or tuition aid in exchange for performing some of these services while at the same time gaining some real life experiences.	Feb 14, 2011 2:29 AM
664	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 14, 2011 3:25 AM
665	Enough to ensure that quality services are provided for our consumers	Feb 14, 2011 3:40 AM
666	The cost of living independently should not exceed the cost to the tax payer of community placement. The total cost considered should include the IHSS hours along with the regional center costs.	Feb 14, 2011 5:03 AM
667	They should be adequate to actually meet the needs of the client. Too little payment could fail to actually assist the client in progressing toward more independence.	Feb 14, 2011 5:40 AM
668	CONSUMERS SHOULD HAVE TO PAY SOME SMALL ENTRANCE FEE FOR EACH CLASS SO THEY WILL TAKE IT MORE SERIOUSLY	Feb 14, 2011 7:15 AM
669	No comment.	Feb 14, 2011 1:53 PM
670	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer (e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency). Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems (i.e., friends, neighbors, family) should be sought to provide assistance when possible. Generic resources (e.g., IHSS), should be applied for and utilized when possible.	Feb 14, 2011 4:03 PM

5. Suggested service standards about the payment for these services:

	Response Text	
671	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 14, 2011 4:27 PM
672	Persons who work should have copayments for their service. This may provide additional motivation to learn ILS skills.	Feb 14, 2011 4:29 PM
673	ils rate $31.00 hr sls rate $31.00 hr	Feb 14, 2011 4:51 PM
674	Current ways are sufficient.	Feb 14, 2011 5:01 PM
675	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 14, 2011 5:05 PM
676	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. • Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. • Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 14, 2011 5:26 PM

5. Suggested service standards about the payment for these services:

	Response Text	
677	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 14, 2011 5:46 PM
678	Independent / Supported livingexpenses are funded through SSI-SSA or consumer's earnings. Independent /Supported living support services should be provided for adult un-conserved consumers in conjuction with available generic resources (IHSS; HUD). Regional center should fund on-going independent living skills training and additional temporary assistance depending on the current needs of the individual.	Feb 14, 2011 5:56 PM
679	Prevailing marketplace rates	Feb 14, 2011 6:08 PM
680	Payment should be made monthly. Electronic deposits may save money from printed checks. DIrect deposit of funds may increase efficiency and allow for a reduction in staff.	Feb 14, 2011 6:09 PM
681	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 14, 2011 6:19 PM
682	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. • Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. • Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 14, 2011 6:24 PM

5. Suggested service standards about the payment for these services:

	Response Text	
683	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 14, 2011 6:27 PM
684	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 14, 2011 6:29 PM
685	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 14, 2011 6:30 PM
686	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 14, 2011 6:30 PM
687	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 14, 2011 6:35 PM

5. Suggested service standards about the payment for these services:

	Response Text	
688	The Lanterman Act in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 14, 2011 6:38 PM
689	Again, send an explanation of Benefits/Services to client to make sure they are getting the services	Feb 14, 2011 6:56 PM
690	paid by the state	Feb 14, 2011 6:56 PM
691	Payment should not be made to family help. It is their responsibily to take care of of their family member needing help as much as they can. There is too much financial abuse in this area of need.	Feb 14, 2011 7:03 PM
692	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. • Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. • Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possibl	Feb 14, 2011 7:08 PM
693	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 14, 2011 7:23 PM
694	Set limits on salaries for administrators of Supportive Livinf/Independent programs.	Feb 14, 2011 7:24 PM
695	The Lanterman Act, in Sectioins 4648(a)(5) and 4690 require the Director of the Dept. of Developmental Services to devlop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 14, 2011 7:25 PM
696	Based on the needs of the consumer as determined during the IPP process.	Feb 14, 2011 7:31 PM
697	Half of their SS or SSI	Feb 14, 2011 7:32 PM

5. Suggested service standards about the payment for these services:

	Response Text	
698	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 14, 2011 7:47 PM
699	Continue median rate limits.	Feb 14, 2011 7:57 PM
700	Regional Center, Medicare, MediCal, state funding, consumer (depending on the wages earned)	Feb 14, 2011 7:57 PM
701	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 14, 2011 8:05 PM
702	Accepted norms from a variety of living option providers.	Feb 14, 2011 8:49 PM
703	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 14, 2011 9:00 PM
704	ILP/ILS should have a training rate and a maintenance rate	Feb 14, 2011 9:40 PM
705	Most of these individuals will be on Medi-Cal and/or Medi-Care. I believe this is the proper way to pay for these services.	Feb 14, 2011 9:55 PM
706	regional center	Feb 14, 2011 9:57 PM

5. Suggested service standards about the payment for these services:

	Response Text	
707	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 14, 2011 10:19 PM
708	Include some mechanism to allow SL agencies to bill with some flexibility as to the total monthly hours of support. If consumer requires 24 hours of support, they agency should be allowed a pre-approved increase to cover the Uniform Holiday policy days. ILS- allow up to 10% billing increase to without pre approval through the IPP process. IHSS- With all of the recent changes to IHHS regualtion it is routinely cumbersome and often threatening to providers to actually utilize the approved hours. This generic resource seems to be evaporating over time.	Feb 14, 2011 10:36 PM
709	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 14, 2011 10:38 PM
710	Payments should be set at a standard and that standard should be calculated on costs of business and amount of work expected along with insurance requirements. Wage comparison.	Feb 14, 2011 10:57 PM
711	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 14, 2011 11:05 PM
712	Families, clients and SSI and Regional Center.	Feb 14, 2011 11:33 PM
713	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 14, 2011 11:50 PM
714	No comment	Feb 15, 2011 12:03 AM

5. Suggested service standards about the payment for these services:

	Response Text	
715	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 15, 2011 12:19 AM
716	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 15, 2011 12:21 AM
717	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. • Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. • Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 15, 2011 12:43 AM
718	Direct care staff should be paid the state approved respite rate. Supervisor hours need to be conducted face-to-face with the consumer.	Feb 15, 2011 1:03 AM
719	Regional center.	Feb 15, 2011 1:28 AM
720	The Lanterman Act, in Sections4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 15, 2011 1:32 AM
721	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 15, 2011 1:38 AM
722	Individ. budget model	Feb 15, 2011 1:52 AM
723	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 15, 2011 1:53 AM
724	Regional center	Feb 15, 2011 1:53 AM

5. Suggested service standards about the payment for these services:

	Response Text	
725	Remuneration reflective of similar services received in the "typical" community. Costs consumer would expend in the absence of vendored services. Experienced vendors are able to utilize community relationships/partnerships minimizing typical costs of similar services generally offered to the public.	Feb 15, 2011 1:57 AM
726	?	Feb 15, 2011 1:57 AM
727	Goverment	Feb 15, 2011 2:03 AM
728	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 15, 2011 2:29 AM
729	Care providers should be paid a reasonalbe rate for the level of care they provide.	Feb 15, 2011 2:45 AM
730	STATE FUNDS	Feb 15, 2011 2:53 AM
731	The Lanterman Act requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 15, 2011 3:21 AM
732	based on previous medical necessity; by the time the provider is of age it is common knowledge that he/she will not be tax payer and is in need of assistance for quality of life;help us.	Feb 15, 2011 3:24 AM
733	They should be paid by state and federal funding.	Feb 15, 2011 3:44 AM
734	See the Lanterman Act!!	Feb 15, 2011 4:08 AM
735	Regional Centers should be actively involved in mobilizing funds and support for affordable housing for developmentally disabled people (who are often on a very, very low income and thus excluded from most affordable housing).	Feb 15, 2011 4:23 AM
736	Same across the board.	Feb 15, 2011 4:36 AM
737	see comments on Behavior services	Feb 15, 2011 5:41 AM
738	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 15, 2011 6:06 AM
739	various agency collaborations and non-profits. Ability of consumer/family to pay for such services needed.	Feb 15, 2011 6:29 AM
740	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 15, 2011 6:32 AM
741	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 15, 2011 6:36 AM
742	paid by governments 100%	Feb 15, 2011 7:05 AM
743	Medicare telemedicine and hospice rates for CNAs	Feb 15, 2011 7:18 AM
744	At least a 50% match when the family is able to participate.	Feb 15, 2011 7:33 AM
745	Hourly?	Feb 15, 2011 12:09 PM

5. Suggested service standards about the payment for these services:

	Response Text	
746	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of DDS to develop and maintain equiptable processes for setting rates to assure the Regional Centers can secure high quality servides for persons with developmental disabilities. The Director should comply with these laws.	Feb 15, 2011 3:45 PM
747	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 15, 2011 4:06 PM
748	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 15, 2011 4:23 PM
749	$15 and up, therapist also have to make a living.	Feb 15, 2011 5:09 PM
750	Such a difficult question. I can imagine the variability here to be enormous. Again, depending on the amount of support needed by a person with disabilities, this should determine the amount paid to the support person. If greater skills are required by the support person then a higher rate of pay will be necessary.	Feb 15, 2011 5:24 PM
751	Continuation of current standards	Feb 15, 2011 5:57 PM
752	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 15, 2011 6:01 PM
753	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 15, 2011 6:27 PM
754	If the person is a client of Regional, there should be a definite amount that they can use for their living expenses	Feb 15, 2011 6:34 PM
755	The Lanterman Act requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 15, 2011 6:34 PM
756	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 15, 2011 6:58 PM

5. Suggested service standards about the payment for these services:

	Response Text	
757	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 15, 2011 6:59 PM
758	Insurance companies and state.	Feb 15, 2011 7:01 PM
759	sometimes new programs cost a bit more than others. their uniqueness should be allowed to be funded. setting standards can hinder the development of these programs.	Feb 15, 2011 7:11 PM
760	Independent livingbasic living expenses are funded through SSI-SSA or consumer's earnings. • Regional center will fund independent living skills training which provides training in such areas as menu planning, cooking, cleaning, shopping, budgeting, use of community resources, self advocacy training, and health and safety. • Regional center will fund independent living support services necessary to provide temporary assistance to the consumer, e.g., locating an apartment, coping with a specific life situation or provide temporary assistance due to an emergency. Funding of SLS should be dependent on the use of available generic and private resources, circle of support and natural supports in the community. Natural support systems, i.e., friends, neighbors, family should be sought to provide assistance when possible. Generic resources, e.g., IHSS, should be applied for and utilized when possible.	Feb 15, 2011 7:13 PM
761	State or federal funding	Feb 15, 2011 7:35 PM
762	The payment should be at least 80% of the total costs of the services.	Feb 15, 2011 7:46 PM
763	Payment should not be more than double that of licensed residential facility rates.	Feb 15, 2011 7:51 PM
764	See suggestions for Behavior services and Day programs	Feb 15, 2011 7:56 PM
765	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 15, 2011 7:56 PM
766	The Regional Centers and/or Medical are to provide and fund these services, according to the Lanterman Act, and they are also to pay for the evaluations/assessments.	Feb 15, 2011 8:17 PM
767	Payments should be made upon demonstration that the hours of service were provided. This can be managed by completeing the RC time sheets or some other easy system. In SLS unless the support staff were negligent and leaving the client home the service support would be presumed to be there suporting the client. This is particularly true if there is only one client.	Feb 15, 2011 8:19 PM

5. Suggested service standards about the payment for these services:

	Response Text	
768	Co-pay when ability to pay is proven, but not at the expense of the overall family needs.	Feb 15, 2011 9:02 PM
769	Quality in home support will not be found if only minimum wage is offered.	Feb 15, 2011 9:18 PM
770	The payment should be based on the consumer's capability.	Feb 15, 2011 9:18 PM
771	Co payment to families	Feb 15, 2011 9:20 PM
772	SLS needs to have Statewide consistency. It is unfortunate that the Department has allowed 21 different ways for this service to be provided across the 21 regional centers. A standard rate setting process used consisently by each regional center would eliminate the disparity that now exists.	Feb 15, 2011 9:22 PM
773	The regional centers should continue to pay for all necessary services, as determined by the IPP team.	Feb 15, 2011 9:47 PM
774	The Lanterman Act, in section 4648(a)(5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. This law should be followed.	Feb 15, 2011 9:59 PM
775	Standard: DDS shall acknowledge that a one-size-for-all rate will not do. Housing costs are much higher in urban areas. Transportation is often higher in sparsely populated areas. Standard: Rates shall take into account the vendor's cost of providing services. Standard: Regional Centers and/or DDS shall have adequate staff to audit vendors' costs. Many states do this. Find out what it costs to run a group home and that's your rate. Find out what it costs to have an ILS instructor, including his/her transportation, and set your rate.	Feb 15, 2011 10:06 PM
776	Payment is not provided by the patient. This is provided by government funding.	Feb 15, 2011 10:07 PM
777	The Lanterman Act requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 15, 2011 10:31 PM
778	The administrative rate should be a percentage or on a graded scale rather than the same flat rate for all consumers. For example, if 3 consumers are living in the same home, it isn't necessary for all three to get the same admin rate. Additionally, if a consumer is primarily receiving IHSS hours and only a few PAHA hours, the SLS provider should not recieve the full admin rate.	Feb 15, 2011 10:50 PM
779	The Lanterman Act requires the Director of DDS to develop and maintain equitable processes for setting rates to assure that Regional Centers can provide high quality services for persons with developmental disabilities. The director should comply with these laws.	Feb 15, 2011 11:17 PM
780	ILS rates need to come down to a median rate- reasonable rate Instill a median rate across the board for each geographical area, and eliminate the grandfathered high end administration rates. Admin rates should be tiered according to the amount of service provided.	Feb 15, 2011 11:24 PM
781	Pay hour for hour for awake, sleep, mileage, and flat percentage for admin fees -- make SURE to include specialized training and shadow training of new staff in all hourly allottments. Admin fees should cover non-program costs only. All funding for direct care staff (hourly awake and sleep) should include funding for all personnel related costs including payroll taxes, workers comp, etc.	Feb 15, 2011 11:25 PM
782	Meet reporting requirement, demonstrate progress with objectives, time records, case notes, proof of support given. Authorization obtained, billing on a monthly basis.	Feb 15, 2011 11:29 PM

5. Suggested service standards about the payment for these services:

	Response Text	
783	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 15, 2011 11:33 PM
784	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 16, 2011 12:00 AM
785	pay hourly rate for awake, sleep, client specific training and administration costs at a flat percentage of each person supported. The hourly rate should be set at a rate that will cover employee wages and benefits for the direct care worker, including ongoing training such a shadow training of new staff.	Feb 16, 2011 12:01 AM
786	DDS/Regional Center should continue to offer funding for such services	Feb 16, 2011 12:03 AM
787	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 16, 2011 12:19 AM
788	Must have line item budgets.l AND clients leaving DC's needing "Money following the Person" for more than one year after leaving DC. Takes several years minimum for effects of DC life to be identified and treated - and experienced/appropriate resources identified and secured to handle. And, then - potentially higher than "community average/cohort average" may need to be provided on an on-going basis for some time if not permanently.l	Feb 16, 2011 1:14 AM
789	Raise personal and business taxes	Feb 16, 2011 2:19 AM
790	BI WEEKY VS MONTHLY	Feb 16, 2011 2:19 AM
791	rates should be consistent with other like services (at least that of IHSS workers)	Feb 16, 2011 2:28 AM
792	I currently receive ILS services which are paid for by the San Andreas Regional Center. I think that San Andreas Regional Center should continue to pay for ILS services for adults with developmental disabilities.	Feb 16, 2011 2:41 AM
793	COMPATIABLE TO LEVEL 2 RATE.	Feb 16, 2011 2:47 AM
794	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 16, 2011 3:04 AM
795	Should be funded through Regional Center.	Feb 16, 2011 3:14 AM
796	RCs should not fund services for individuals living alone unless there is absoutly no other way. staff need to be shared asmuch as possible for cost effectiveness. A return to costs not being more than actual community residential rates without approval by DDS that person would actually move to a developmental center. This is harsh but it is reality	Feb 16, 2011 3:53 AM
797	minimum wage at least.	Feb 16, 2011 3:55 AM
798	Payment should be according to the economic status of individual, otherwise free of charge.	Feb 16, 2011 4:29 AM

5. Suggested service standards about the payment for these services:

	Response Text	
799	The Lanterman Act, in Sections 4648 (a) (5) and 4690 require the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 16, 2011 4:47 AM
800	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 16, 2011 5:05 AM
801	pay scale depending on responsibilities and level of consumer	Feb 16, 2011 5:19 AM
802	State funded	Feb 16, 2011 5:29 AM
803	The director of DDS is required by The Lanterman Act to develop and maintain equitable processes for setting rates to assure that regional centers can secure high quality services The director needs to comply	Feb 16, 2011 5:31 AM
804	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 16, 2011 5:31 AM
805	The Lanterman Act, in Section 4648 (a)(5) and 4690 requires Director of Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 16, 2011 5:41 AM
806	Should be adjusted based on regional cost of living and market rates with geographic regions.	Feb 16, 2011 5:41 AM
807	The Lanterman Act, in Sections 4648 (a) (5) and 4690 requires the Director of the Department of Developmental Services to develop and maintain equitable processes for setting rates to assure that Regional Centers can secure high quality services for persons with developmental disabilities. The Director should comply with these laws.	Feb 16, 2011 6:10 AM
808	INCREASE CALIFORNIA'S ANNUAL LICENSE FEES BY $10.00 FOR EVERY REGISTERED VEHICLE, VESSEL AND AIRCRAFT.	Feb 16, 2011 7:09 AM
809	Increase the payment for services. 40 45 dollars per hour	Feb 16, 2011 7:38 AM
810	According to the IPP process. Cuts in amounts rather than elimination of programs will save lives!	Feb 16, 2011 7:51 AM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
1	If in the home, Parent education & modeling	Jan 28, 2011 12:57 AM
2	Ask parents to help out in emergencies, or when a Day Program is not in session due to the new state-imposed "holidays" when day services are not provided.	Jan 28, 2011 1:06 AM
3	the plan for the person and the circle should have a set amount of resources to be able to spend along with other sources of funding or support allowing the person to be successful.	Jan 28, 2011 1:13 AM
4	None	Jan 28, 2011 1:13 AM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
5	goals and objectives	Jan 28, 2011 1:16 AM
6	Clients cost should be at 1% of the clients income.	Jan 28, 2011 1:19 AM
7	INDIVIDUAL CHOICE BUDGET	Jan 28, 2011 1:26 AM
8	n/a	Jan 28, 2011 1:37 AM
9	ICB	Jan 28, 2011 1:51 AM
10	share of cost for parents	Jan 28, 2011 2:10 AM
11	see WAPADH	Jan 28, 2011 2:13 AM
12	If individuals are conserved/ or family is their payee, I think families need to complete a financial eligibility form. If consumer has job and/ or gets SSI, there should be no co-pay. If a consumer has a trust, there should be NO co pay.	Jan 28, 2011 2:20 AM
13	Families share the instructional component by providing the support the others days that the ILS worker is not present	Jan 28, 2011 2:37 AM
14	Co-Op	Jan 28, 2011 2:37 AM
15	My family is already helping me a lot, they are putting a daughter through college too.	Jan 28, 2011 2:39 AM
16	Parents who have the means to help with funding should be able to do so without it counting as income for the consumer as relates to social security and section 8 housing.	Jan 28, 2011 3:01 AM
17	not applicable	Jan 28, 2011 3:12 AM
18	none	Jan 28, 2011 3:17 AM
19	None	Jan 28, 2011 3:33 AM
20	Lanterman Act. Needs of the consumer as written in the IPP	Jan 28, 2011 3:45 AM
21	Parents should be able to help with donations and co payments if possible	Jan 28, 2011 3:47 AM
22	Less than 18 required family input depending on ability of family to do so in all aspect under #6.	Jan 28, 2011 4:05 AM
23	Same as 5.	Jan 28, 2011 4:14 AM
24	Same as in question one.	Jan 28, 2011 4:27 AM
25	parents should share some responsibility.	Jan 28, 2011 4:30 AM
26	Parents that are an active participant of their child in assisted living and or independent living should have to pay a share of cost for the training and or assisted living expenses provided. If the parent and or families are not involved then the cost of the ongoing care etc fall on the regional center and tax payors. To ask a developmentally disabled consumer to help financially for their care is ludicrous as their social security disability entitlement is already very low.	Jan 28, 2011 4:40 AM
27	Same as above	Jan 28, 2011 4:42 AM
28	Parents should participate as deemed by the consumer's IPP.	Jan 28, 2011 4:52 AM
29	This should be determined based on the IPP	Jan 28, 2011 5:00 AM
30	conserved adults should probably be looked at to see if they are directing their service or if their parents are	Jan 28, 2011 5:19 AM
31	Instead of having parents pay until a client is 18, extend the age for payment until the client is 21. Try to add this gradually. Perhaps a smaller co-payment by parents even after age 21 until parents are deceased, retired, unemployed, etc.	Jan 28, 2011 5:27 AM
32	Services for independent and supported living should only be funded for individuals over age 18. Family committment is not always possible for any variety of reasons, so should be addressed individually.	Jan 28, 2011 5:30 AM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
33	1) Parents are expected to maintain communication. 2) Parents are to commit time to support Centers in working with their children. The amount of time should be proportional to the service hours.	Jan 28, 2011 5:45 AM
34	Therapies should be funded through generic resources (medi-cal, medicare, parent insurance), or look into private pay). ALL Exceptions must go through the Dept (DDS)	Jan 28, 2011 6:03 AM
35	1) Payments for ILS or SLS services should not be made to immediate family members who provide care or supervision of any sort. These should be considered natural supports. 2) ILS/SLS should only be provided to support living arrangements that are separate from those of the individual's family. An exception may be made where the individual's family is incapable of providing appropriate supports, due to age or disability.	Jan 28, 2011 6:12 AM
36	See previous comments.	Jan 28, 2011 6:15 AM
37	It is not appropriate for adults to be denied services pending parental co-payment for ILS/SLS; Parental co-payment of housing costs or living costs must be reported and reduces a persons SSI/SSP payments, further undermining a persons ability to live in community; Families already contribute in a full variety of ways relative to covering costs (performing quality control/assurance, covering for staffing glitches, providing financial oversight, helping to participate in community life, transporting) and spending time in the lives of their loved ones living independently in housing and receiving ILS and SLS.	Jan 28, 2011 6:29 AM
38	Parents are already giving time committment and largely providing for the non-shelter items that many individuals need.	Jan 28, 2011 6:43 AM
39	NONE $ Visitors welcome	Jan 28, 2011 6:44 AM
40	Parents should have the opportunity to join their adult child's Circle of Support, if the person wants them to.	Jan 28, 2011 6:44 AM
41	Perhaps a copay of $20.00 per month for ILS services provided to a Consumer still living in the family home.	Jan 28, 2011 7:07 AM
42	Income driven only with room for exceptions if a parent or family member is trying to withhold payment to create a withhold service situation.	Jan 28, 2011 7:10 AM
43	Older consumers often have no family to provide services. Supports can and are provided by family and community members when available but this isnt just a family issue but an issue for our entire society.	Jan 28, 2011 7:17 AM
44	Parents of Adult patients should not be required, unless patient is in their guardianship.	Jan 28, 2011 7:23 AM
45	The consumer needs to know that they are in charge and the staff is there to help. Too many times, staff thinks it is the other way around. Consumers need better training on how to speak up and be better self advocates.	Jan 28, 2011 7:54 AM
46	Most parents already have enough responsibilities and commitment in overseeing their child's services and already spend a lot of time in their child's home to make nothing is amiss. Maybe people with high incomes can be asked to contribute money for services. Consumers certainly should have a co-pay. They are already poor and also often need financial help from parents.	Jan 28, 2011 9:07 AM
47	It is hard to imagine consumers paying any of this while living on SSI. It is also probably impossible to have parents commit to paying for adult children, as they become retirees. Most parents absorb some of the support for their own children, though it varies by need and circumstance.	Jan 28, 2011 2:31 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
48	None. Most adults with developmental disabilities have a very limited income. if they had to pay for services they could not afford them and would end up doing without and therefore failing in trying to live independently.	Jan 28, 2011 4:55 PM
49	I do commitment time to the home, my daughter lives here and it is very important to me to be a part of her life.	Jan 28, 2011 4:56 PM
50	The consumer must be a willing and engaged participant and must make progress towards no longer needing the service or a reduction in service.	Jan 28, 2011 4:57 PM
51	These services are provided to adults, nearly all of whom qualify for public assistance. There should be no parental responsibility.	Jan 28, 2011 5:13 PM
52	Level of commintment should include contracts for dangerous behavior and refusual to take medications.	Jan 28, 2011 5:17 PM
53	I am not sure any standards apply to parents as these are adult standards primarily. Standards for consumers are built into the standardized service design and IAW their Individual Performance Plan.	Jan 28, 2011 5:25 PM
54	Consumers should be held accountable for cooperation and compliance of ILS/SLS living standards. They should have to meet basic standards for financial management e.g. documented budget and living within it; compliance with health care needs e.g. medication management, diet management for medical needs; ability to maintain clean and safe living quarters either individually or with assistance of IHSS and service provider help. If consumers are not able to maintain these things on their own or with assistance they should not be allowed to continue living alone. They must be held accountable to cooperate with the service providers they are provided. Our system has jeopardized the quality of life of many consumers by allowing too much independence.	Jan 28, 2011 5:31 PM
55	Consumers need to be active participants in the service. They need to understand what the service is and what they will be doing. If they are not participating then the service needs to end.	Jan 28, 2011 5:31 PM
56	A niminal fee for consumer who live at home would be a good idea so that there is buy in and so that there is better accounting of hours.	Jan 28, 2011 5:50 PM
57	Should be no charge to consumers or families.	Jan 28, 2011 6:10 PM
58	Independent living is just that - time for the parents to take a step back and time for the person to be as independent as possible. Money should be available to help for example a struggling college student provide these services to someone as a roommate. Without financial support, this struggling college student may not be in a positon to help even though there is a desire.	Jan 28, 2011 6:16 PM
59	Parents of adult children should be asked to assist with payment if possible.	Jan 28, 2011 6:21 PM
60	Keep at the current rates and amounts.	Jan 28, 2011 6:21 PM
61	Families of clients in supported living should have their responsibilities for supporting the client written into the IPP.	Jan 28, 2011 6:23 PM
62	Parents/conservators who have a household income of 100k or more should be asked to pay for 3% of the total cost of the service to Regional Centers. Regional Centers must be the collector as they have the administrative capacity to facilitate. Regional Centers are 100% administrative.	Jan 28, 2011 6:37 PM
63	With unconserved adults this is legally tricky, but parents might be solicited for voluntary contributions to the regional center to cover some of the taxpayer cost.	Jan 28, 2011 6:47 PM
64	none	Jan 28, 2011 6:51 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
65	Consumers should pay rent while using service. Consumers should have no more than 3 non consumer room mates to help pay rent. Provide rent reductions to room mates that help provide daily living services, cooking cleaning, washing cloths, grocery shopping....	Jan 28, 2011 6:55 PM
66	provide support for above basic needs	Jan 28, 2011 7:02 PM
67	Since supported living services are usually provided to adults, it is morally reprehensible to expect parents to provide a co-pay, or a mandated time commitment. The general population is aging at a high rate, and it is unfair to ask aging parents, who may themselves need services, to pay a portion of their adult child's care.	Jan 28, 2011 7:07 PM
68	Read my other response under supported employment it applies here.	Jan 28, 2011 7:09 PM
69	Natural supports and generic resources should be maximized prior to using Regional center funding.	Jan 28, 2011 7:10 PM
70	Generic resources and natural resources must be maximized.	Jan 28, 2011 7:10 PM
71	These standards already exist at levels that many family's cannot bear; (for adult services like day programs) these services are provided to adults, nearly all of whom qualify for public assistance and should not have to pay.	Jan 28, 2011 7:10 PM
72	*The utilization of generic resources and natural supports should be maximized prior to using Regional Center funded services.	Jan 28, 2011 7:11 PM
73	Generic and natural supports should be maximized prior to using regional center funded services.	Jan 28, 2011 7:13 PM
74	Current methods are sufficient.	Jan 28, 2011 7:28 PM
75	These standards exist.	Jan 28, 2011 7:33 PM
76	No co-pays!!!	Jan 28, 2011 7:35 PM
77	Adults are the resposbility of the state so we cannot require their parents to pay or commit to care. However we can and should ask for their help when they are able. Good families tend to stay connected anyway.	Jan 28, 2011 7:36 PM
78	should be limited, if you compare to costs for an institutionalized living.	Jan 28, 2011 7:42 PM
79	Require consumer/parent responsibility for rents or leases. No regional center funds should be allowed to pay mortgages on properties set up by families for consumers.	Jan 28, 2011 7:43 PM
80	Many parents like myself who have been caring for adult children with DD are now elderly and cannot provide care safely. i cannot transfer my daughter and she depends on IHSS and GGRC workers. I was an IHSS worker for many years and the archaic IRS rule that says family members cannot contribute to SSA deprived me of the SSA benefits I should have. Many thousands of hours did not go into my retirement. How can i pay when I live on less than 1100. a month? The system has failed me.	Jan 28, 2011 8:02 PM
81	I think there would be willing participation by parents and consumers in a project such as I have described.	Jan 28, 2011 8:18 PM
82	Parent support should not be required for clients over 18	Jan 28, 2011 8:25 PM
83	yes~ when parents are involved. Many times parents are either not involved, deceased or very elderly.	Jan 28, 2011 8:35 PM
84	My grown children are not disabled but it seems I am giving them money nearly every month lately because house construction took a fall in the state of california and there is no work...hmmm maybe consumer's family can buy the mac n cheese for their grown child..oops nevermind mommy did cocaine all through the pregancy so no IN california the parent does NOT have to contribute	Jan 28, 2011 8:39 PM
85	Immediate family members should not receive payment for any support provided.	Jan 28, 2011 8:45 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
86	As long as your department focuses on buying houses for long-term care living arangements for people coming out of the Regional Center Facilities, in say, the Bay Area, then nothing else can be addressed because you spent all the money on a few privilaed individuals, losing site of your responsibility to reach the most with what we have collectively.	Jan 28, 2011 8:47 PM
87	parents should not have to be responsible for their adult children's supported living services. if the adult children could still receive services paid for by insurance companies (maybe until they are 25 for example), then that should be tapped into.	Jan 28, 2011 8:49 PM
88	These Standards already exist at levels that many families cannot bear; (for adult services like day programs) these services are provided to adults, nearly all of whom qualify for public assistance and should not have to pay	Jan 28, 2011 8:50 PM
89	No responsibility on the part of the consumer or parent.	Jan 28, 2011 8:54 PM
90	Service standard should achieve the promise that people with intellectual and developmental disabilities will have an individualized program plan and access to the services and supports best suited to them throughout their lifetime, to enable them to live an independent, self-directed, and typical life.	Jan 28, 2011 8:56 PM
91	families should be willing to accept some responsibility for supported living coverage- individual budgets should be carefully reviewed so families are not paying high rents while accepting 100% RCOC funding.	Jan 28, 2011 9:09 PM
92	Services should be provided free to clients by the Regional Center System under the Lanterman act.	Jan 28, 2011 9:13 PM
93	See response to question #1 of this section.	Jan 28, 2011 9:22 PM
94	See prior.	Jan 28, 2011 9:23 PM
95	Ditto per previous comments	Jan 28, 2011 9:29 PM
96	supported indivdiuals committment will be to utilize the support to the best of their ability and to work towards their appropriate level of independence.	Jan 28, 2011 9:45 PM
97	ID team should identify natural and generic supports and make reasonable efforts to utilize them as much as possible. (Which is done already per Lanterman Act, but it's a good idea.) I don't recommend copays for this service - SSI rates are already low and potentially going down - consumers can't afford copays at $845 or $830 per month. Encouragement for people who are compatible as roommates and have compatible services should be encouraged to live together and share supports, but there should be room for exception when people have a hard time living with others who share support.	Jan 28, 2011 9:52 PM
98	If living at home, parents should be pursuing IHSS hours, or any other generic resources.	Jan 28, 2011 9:54 PM
99	No copyament for parents since compensation is already greatly reduced by union fees and taxes that will need to be paid on it.	Jan 28, 2011 10:00 PM
100	no suggestions	Jan 28, 2011 10:20 PM
101	Hold at least semi-annual reviews with parents, providers and consumers to assess effectiveness of services provided.	Jan 28, 2011 10:39 PM
102	parents should have share of payments	Jan 28, 2011 10:45 PM
103	SLS not available to minors.	Jan 28, 2011 11:06 PM
104	Yes, co-payment seems realistic.	Jan 28, 2011 11:07 PM
105	sliding scale	Jan 28, 2011 11:19 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
106	If the adult is a young adult, 18 to 30, parents should be expected to help out by relieving staff through spending time with the consumer at their home or in the community.	Jan 28, 2011 11:22 PM
107	in a real self-directed manner there is no one party that is fiscally responsible, every party plays a role	Jan 28, 2011 11:22 PM
108	none	Jan 28, 2011 11:57 PM
109	Parents should pay a co-pay or work with the service.	Jan 29, 2011 12:00 AM
110	Same	Jan 29, 2011 12:06 AM
111	Highly responsible.	Jan 29, 2011 12:29 AM
112	Consumers who have SSI or assets will continue to contribute their benefits toward their living arrangement.	Jan 29, 2011 12:43 AM
113	Same as reported befor in this survey	Jan 29, 2011 12:45 AM
114	See above	Jan 29, 2011 1:04 AM
115	Enforce current laws to protect vulnerable adults so parents can't abuse and neglect their children just to collect the social security check.	Jan 29, 2011 1:34 AM
116	NO CO pay . We get very little money as it is.	Jan 29, 2011 1:39 AM
117	as long as parents are alive and well (aging parents may require care themselves eventually) they sh remain involved in their adult child's life and contribute and help as much as they are able to, and as they wd do for a typical adult child of their own.	Jan 29, 2011 2:04 AM
118	standards for parents to provide age appropriate care for their child. If the developement delays of the client require care above the 'normal' ie: toileting for a 14year old should or protected supervision is needed, families should recieve the financial support to provide that care.	Jan 29, 2011 2:37 AM
119	If parent can be involved it would be great- however it should be optional.	Jan 29, 2011 3:05 AM
120	Again, a contract that spells out what the services are and what the consumer will be expected to pay should be presented at the initial consultation. A contract spelling out the time commitment between parent and child will be very useful here.	Jan 29, 2011 3:05 AM
121	Fully funded by regional center	Jan 29, 2011 3:44 AM
122	co-pay based on income	Jan 29, 2011 3:51 AM
123	If a family can contribute a co-payment they should. While it is nice to have some family support, families should not be forced to support consumers who receive services. Some families are not supporttive and can hinder progress of consumers instead of helping. As families age, they may not be in a position to have to take care of consumers.	Jan 29, 2011 4:30 AM
124	If parents or families are affluent and have the ability to pay, their resources should be utilized under a previously mentioned financial needs test, so that Regional Centers and DDS are not expected to pay everything a person needs or desires, when their family has the means to contribute to the costs of the person's support. There should actually be a small workgroup of SLS providers and self advocates and families to review this concept so that it is fair and equitable, and considers a wide variety of ways that families, who have the means to do so, can contribute towards the cost of their family member's services.	Jan 29, 2011 4:42 AM
125	as needed	Jan 29, 2011 4:42 AM
126	parents should be involved as decision maker for the services.	Jan 29, 2011 5:06 AM
127	No one should be cut	Jan 29, 2011 5:09 AM
128	None	Jan 29, 2011 5:59 AM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
129	It is not possible for consumers to be responsible for these services.	Jan 29, 2011 6:11 AM
130	Ask the parents	Jan 29, 2011 6:36 AM
131	Co-payment based on family income. time commitment in lieu of partial payment.	Jan 29, 2011 6:42 AM
132	Parents will help as much as they can. Again, this should be individually determined.	Jan 29, 2011 7:45 AM
133	No co pay	Jan 29, 2011 7:45 AM
134	n/a	Jan 29, 2011 7:59 AM
135	If living below Federal poverty level services should be free!	Jan 29, 2011 4:04 PM
136	Their should not be any requirements on the parents, as these are adults, not children.	Jan 29, 2011 4:33 PM
137	If the parent(s) or consumers are able and willing to administer responsibilities for any service it could alleviate the burden of cost to Regional Centers and in turn promote their own independence. For the most of consumers, they are in the poverty or very low income category, co-payment is not an option, maybe they can provide an in-kind service that can balance this, their family might do the same or their support system. This would be true for the time commitment as well.	Jan 29, 2011 7:28 PM
138	Parents should be prepared to see that there disabled children have the life expenience and be able to handle living on there own independently. Future plans for consumers by parents should be made such as where is the consumer going to live when they are no longer in the picture, should they be looking into programs that can increase there childs abililtes to survey when they are not in the picture. If consumer is able to live independently make that comitment to the consumer early, if not plan on residential placement. Many consumers parents become elderly and there children have not receive or are prepared to live independently.	Jan 29, 2011 7:38 PM
139	Get the family involved. Determine if tey are able to pay.	Jan 29, 2011 8:32 PM
140	Parents should commit to participating in the team development of the service plan and supporting plan goals. Consumers should also commit to participating in the team development of the service plan and actively participating in the plan.	Jan 29, 2011 9:24 PM
141	Same as stated in previous sections.	Jan 29, 2011 10:15 PM
142	CLIENTS FAMILY, CONSERVATORS STAY INVOLVED AT SOME LEVEL FOR SUPPORT, ACTIVELY INVOLVED IN PLANNING FOR INITIAL PLACEMENTS AND ONGOING ASSESSMENT SOME CO PAY IS REALISTIC	Jan 29, 2011 11:50 PM
143	The consumer should help pay for the services (i.e. 50% co-pay) unless the consumer is not earning a living wage.	Jan 30, 2011 12:32 AM
144	Family members can volunteer with consumers permission to fill some roles help with shopping help with laundry help with cleaning etc.	Jan 30, 2011 12:42 AM
145	CO-PAY NOT APPLICABLE. TIME COMMITMENT - WE CAN SAY AS TIME WILL TELL IS IS CONSUMER WILL BE SUCCESSFUL OR NOT.	Jan 30, 2011 3:59 AM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
146	Families need to be involved, and like I said in prior sections, probably be available, at least by phone, to touch bases on a weekly basis to stay in the loop about what is happening. Some families really have no money, but for those who do I recommend a minimum wage rate of contribution, which is not too much to pay and keeps families aware of how many hours they are using and whether the hours are worth it. I guess if a family is getting a total of 40 hours that would be too much to pay minimum wage (like $400) a week, so maybe there needs to be a cap or a scale to reduce hourly contribution based on income and on how many hours used that week.	Jan 30, 2011 4:59 PM
147	We would personally be willing to accept a sliding-scale reasonable co-pay for personal attendant services rather than a cut in hours or loss of service. My son would have to drop out of college were he to lose his PA services.	Jan 30, 2011 6:10 PM
148	time commitment no/minimum co payment	Jan 30, 2011 9:12 PM
149	Parent co-pay for children until the age of 18, if they are Dept of Rehab ready. Parent co-pay for children until the age of 22, when they are in school.	Jan 31, 2011 2:51 PM
150	asked/answered	Jan 31, 2011 3:45 PM
151	Can't receive these services if client is living at home with family.	Jan 31, 2011 4:19 PM
152	if a client or their parents can afford to copay, this should be done.	Jan 31, 2011 4:45 PM
153	If a client lives with family, the family should be responsible for the training of their loved one. Consumers living independently should take responsibility for their own learning. Services should be terminiated if no progress is seen after two years.	Jan 31, 2011 5:47 PM
154	Active participation by parent. Co-payment based on family's ability to pay.	Jan 31, 2011 5:52 PM
155	these are adults who are living alone, and do not have the means financially to pay any co-pay. Otherwise they would not be in the system.	Jan 31, 2011 6:02 PM
156	If the consumer is over the age of 18 there should not be any parental responsiblity.	Jan 31, 2011 6:09 PM
157	Free services are usual not given the same "value" as when the parent/consumer pays money or provides services "in lieu of"	Jan 31, 2011 6:33 PM
158	These services are for adults. Parents no longer have responsibilities.	Jan 31, 2011 6:36 PM
159	Parents or other family member need to assist consumers with remembering the appointment time and need to communicate with the care provider as needed.	Jan 31, 2011 6:39 PM
160	Family members and consumers are not responsible for co-payments.	Jan 31, 2011 6:41 PM
161	Meet periodically to go over goals and services. Client should not cancel too many appointments without medical reasons.	Jan 31, 2011 6:57 PM
162	none	Jan 31, 2011 7:26 PM
163	Sliding scale	Jan 31, 2011 7:36 PM
164	* The utilization of generic resources and natural supports should be maximized, prior to using Regional Center funded services.	Jan 31, 2011 8:14 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
165	Parents of adult children with developmental disabilities have no legal responsibility for the care of these children! Most parents are elderly and have spent their early lives caring for the child already. May of the consumers with physical disabilities or behavioral problems can no longer be handled by a frail parent. Few of them can promise a regular, consistent committment of time. Most of them try to take their child for holidays etc. Parent co-pay can be counted as income and risk consumer SSI. Consumers who are able to be alone for some part of the day and not have a health or safety risk should be required to do so. Co-payment for consumers living on SSI or SSA is not possible. IHSS participation is already in place.	Jan 31, 2011 8:23 PM
166	I think that it is very important to have the family of a client involved and part of their plans and goals. I think payment or co-payment be a possibility depending on income of families. Maybe their can be an opportunity for the families to do volunteer hours to assist with cost. But often times clients wont have family support and need the support of our government.	Jan 31, 2011 9:15 PM
167	See above comments. Also, establishing what parents can afford to make co-payments in addition to consumers might place Regional Centers in a position of not equally finding some families who should add funds while others cannot or will not do so.	Jan 31, 2011 9:22 PM
168	These standards already exist at levels tha many family's cannot bear; (for adult services like day programs) these services are provided to adults, nearly all of whom qualify for public assistance and should not have to pay.	Jan 31, 2011 9:30 PM
169	After a person achieves the age of 22, the State of California should provide these services.	Jan 31, 2011 9:41 PM
170	I am a parent. As long as I am healthy and physically able, I will continue to spend time with my adult daughter. I spend 8 hours with her on Sunday (8 hours because that works in harmony with the staff schedule), all holidays (people want to be with family, staff and consumers), and have asked that I get calls when there are staffing problems that I may be able to help with. I contribute financially to help with my child's seizure alert dog. All parents can't do the same thing. But, we should ask what they can do and then welcome them onto the team. Some agencies are great at that. Others will need help to get there.	Jan 31, 2011 9:52 PM
171	none.	Jan 31, 2011 9:54 PM
172	None from parents as the consumers are adults.	Jan 31, 2011 10:22 PM
173	ILS services should run for one year and then reevaluated.	Jan 31, 2011 10:25 PM
174	Co-pay if eligible (sliding scale), Must show progress at 3-, 6-, and 9-month intervals. (Time limited.)	Jan 31, 2011 10:31 PM
175	sliding scale dependent on household income.	Jan 31, 2011 10:40 PM
176	There should be a co-payment if the consumer is capable of working and earning money.	Jan 31, 2011 10:47 PM
177	some kind of contractual agreement	Jan 31, 2011 11:41 PM
178	Sliding scale is good, parents and family members who are able to pay might pay a co-fee; low income famiilies (who could not partake of the services if there were a fee involved) should not have to pay.	Feb 1, 2011 1:15 AM
179	As adults, these individuals have limited resources...it is our global responsibility to care for this most vulnerable population.	Feb 1, 2011 1:20 AM
180	Encourage parents to organize microboards and be involved. Payment comes through microboards.	Feb 1, 2011 1:43 AM
181	SLS consumers/candidates must be deemed 'active' participants in their program plan!	Feb 1, 2011 4:46 AM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
182	should be free, but ask for a donation	Feb 1, 2011 4:51 AM
183	monitor independent-living/supported living situation, personnel staffed, hiring, firing, etc. Families may need access to staffing agencies to locate appropriately trained personnel to staff such a situation for their consumer.	Feb 1, 2011 4:52 AM
184	Parents of disable children should pay most of the expenses and shouldn't pass the bill to the society.	Feb 1, 2011 5:17 AM
185	as needed	Feb 1, 2011 5:18 AM
186	no	Feb 1, 2011 5:19 AM
187	N/a	Feb 1, 2011 5:24 AM
188	see other answers for previous questions - same	Feb 1, 2011 5:59 AM
189	N/A	Feb 1, 2011 7:11 AM
190	Parents of minors should be responsible for the normal costs of child rearing up to the age of 18, and regional centers should pay any excess. I believe this is the current prevailing standard.	Feb 1, 2011 7:15 AM
191	Carrot and stick. Follow through or you are dismissed from the program if you are in training in independentl living skills.	Feb 1, 2011 8:55 AM
192	If there are parents have them check their children for health and safety	Feb 1, 2011 9:46 AM
193	No parent-coordinatted supported living (or family member) ---- it is too fraught with fraud, miscommunication, and dependency by the parent on an income. But if there is parent-coordinated supported living (or family member), then require that there be either no compensation for hte parent/family member or a DDS-set monthly stipend for coordinating support services (this stipend or DDS-set rate would cover hiring/supervising employees, filing taxes, doing the bookkeeping, meeting and reporting to the regional center, the whole responsibility). Parents or family members should have a personal responsibility and commitment to doing the SLS services for their consumer, not expect to make a living off of it or depend on it to the point that the consumer's needs or preferences are ignored.	Feb 1, 2011 10:46 AM
194	The cost of SLS is much less then the cost of a board and care. There are many people who are capable of taking care of a family member with a small amount of physical and/or monetary assistance, however would be unable to do so if they had no help.	Feb 1, 2011 4:28 PM
195	Consumers should be committed to the service. A co-pay should be requested if the consumer does not follow-through with accessing the service.	Feb 1, 2011 4:52 PM
196	I support the concept of co-payment from families, trust funds, inheritance	Feb 1, 2011 5:34 PM
197	time commitment and cooperation.	Feb 1, 2011 6:18 PM
198	same answer as provided for day programs	Feb 1, 2011 6:48 PM
199	Parents, caregivers, family members, and everyone else has a big responsibility to their respective person. Co-payments and such are not feasible for alot of the consumers in the south los angeles areas, oakland areas and such therefore should not be required by parents who are already in dire straights.	Feb 1, 2011 6:51 PM
200	share of cost like medi-cal	Feb 1, 2011 6:54 PM
201	Current service standards could be reduced by a maximum of 15%.	Feb 1, 2011 7:25 PM
202	This must be left up to individual. DDS must set the requirements for the level of the consumers needs and if an individual wants to provide the service and wants to be paid, they will have to live up to those standards. Unfortunately there is NO WAY to monitor the individuals as there is with an organization. FOOD for thought: Isn't this called IHSS?	Feb 1, 2011 7:36 PM
203	Same	Feb 1, 2011 7:44 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
204	1) "Purchase of Service Limits" is a more appropriate name than "standards." 2) We oppose statewide purchase of service "standards." 3) There is no "one size fits all" solution. Purchase of service standards for each individual are defined by the IPP. 4) "Up to but not to exceed the cost to house one individual in a Developmental Center."	Feb 1, 2011 7:56 PM
205	There should be some commitment on assisting with teaching at home from parents of individuals who still live at home. We all have to teach our children life skills and the assumption should not be that someone with a disability doesn't require the same assistance	Feb 1, 2011 8:31 PM
206	1) "Purchase of Service Limits" is a more appropriate name than "standards." 2) We oppose statewide purchase of service "standards." 3) There is no "one size fits all" solution. Purchase of service standards for each individual are defined by the IPP. 4) For questions 3 & 4: These standards already exist. 5) "Up to but not to exceed the cost to house one individual in a Developmental Center."	Feb 1, 2011 9:15 PM
207	Current standards are appropriate.	Feb 1, 2011 9:27 PM
208	GOVERNMENT TAXES US TO DEATH. WE HAVE NO MONEY FOR CO-PAYMENT. CUT YOUR LUSH SPENDING ON UNNECCESARY STUFF! THESE ARE REAL PEOPLE WITH REAL FEELINGS AND THEY DESERVE A CHANCE TO FEEL LIKE THEY MATTER TO THE WORLD MR. BROWN.	Feb 1, 2011 9:40 PM
209	none	Feb 1, 2011 9:40 PM
210	parents to co-pay family members should not be paid through IHSS to spend time with their disabled family member	Feb 1, 2011 9:58 PM
211	If parents are able they shall be supportive in any ways possible	Feb 1, 2011 10:13 PM
212	If the parent can afford to assist they should	Feb 1, 2011 10:43 PM
213	If the consumer is an adult then unless they are financially able to pay for services then they should not be subjected to co-payments.	Feb 1, 2011 11:20 PM
214	same as question 5.	Feb 1, 2011 11:25 PM
215	n/a	Feb 1, 2011 11:37 PM
216	For individuals older then 18 families should not need to pay for these services. However, there should be more done to solicit donations to improve upon these programs, not only from family members but also from our community at large, similar as to what is done in non-profit organizations. Communities need to learn to take care of the members of their society by contributing to the good of all.	Feb 1, 2011 11:43 PM
217	On an ability-to-pay basis.	Feb 1, 2011 11:54 PM
218	Generally these services are for DD adults, so I don't know that parents should be held accountable. A co-pay by the client (sliding scale) would be good. May even encourage them to be more motivated about the training.	Feb 2, 2011 12:27 AM
219	No copayment or formal responsibilities after the consumer turns 18.	Feb 2, 2011 12:35 AM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
220	I believe that my family has done more for me than anyone else and that this would be a finacial hardship for them if they were asked to pay for part of these serveices. I believe that my family would not continue to keep me in these services due to the cost. I would lose these services and would be very distraught and very, very angry! Without these services, I see no way to become Independent and would be confined to a Group Home which would cost the State more money and me my Latterman Act Rights!	Feb 2, 2011 12:53 AM
221	I think that my family and myself should not have the responsibility of paying for services. I would not be able to recieve services including ILS, day program, and job coaching if I had to pay services and I would be very upset and angry if I no longer could recieve services. I think that my family would be upset if I could not recieve services and I would be more dependent on my family and the state. The services help me live independently and if I didn't have services I wouldn't be able to live independently.	Feb 2, 2011 1:00 AM
222	none	Feb 2, 2011 1:22 AM
223	Consumers should be commited to the time that they have agreed to with the agency. They should be cooperative when asked to follow the plan they have agreed to.	Feb 2, 2011 2:00 AM
224	Telling a parent they need to pay for services and be committed to their child is ridiculous. Most likely, they've paid for more than you'll ever know, and it is only because of their tenacity that their child--juvenile or adult--has services.	Feb 2, 2011 2:36 AM
225	Again - commitment & follow up.If the parents are still alive, they should be involved in the follow up.	Feb 2, 2011 2:47 AM
226	Parents should take on as much responsibility as they can. Consumers pay as they can.	Feb 2, 2011 3:32 AM
227	$20/mo copayment	Feb 2, 2011 3:44 AM
228	Copay need apply if appropriate.	Feb 2, 2011 4:48 AM
229	Ideally, parents and/or consumers would contribute financially to the costs of these services.	Feb 2, 2011 5:03 AM
230	Mandate roommates, or family to pay the difference. People cannot afford apartments and homes when they are living on SSI. Also, they need to save money towards moving out - just like any other citizen. This idea of just wanting to move and thinking the regional center should fund is unfair and, again, the average tax payer would be upset. What's wrong with having to plan and save for 6 months. If the agreed amount of money isn't saved - then the person doesn't move. Much like I have to do when I moved out of my family home.	Feb 2, 2011 5:15 AM
231	According to abilitywithout exhausting resources upon which others depend as well.	Feb 2, 2011 5:21 AM
232	co-payments-no free services	Feb 2, 2011 5:23 AM
233	The IPP should state who is responsible for what. When I did this in WI there was a certain amount that the consumer paid based on their income. Some consumers paid very little for the services because their income was so low.	Feb 2, 2011 5:33 AM
234	Participants should agree to time comittment and attendance. Or drop them.	Feb 2, 2011 5:48 AM
235	Consumers should be required to share apts etc. if possible. Parents should be required to provide natural supports at a minimum of 4 days a month if they can. Maybe coops could be established where parents are required to provide a certain amount of care each week in the home.	Feb 2, 2011 6:00 AM
236	If an adult needs services, they are in no position to pay. Maybe they should make presents for their care providers, or offer a token sliding-scale payment, so that they feel a sense of agency about their lives, and are invested in having a voice about who is providing their care, and the quality of that care.	Feb 2, 2011 6:03 AM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
237	must be present at all times.	Feb 2, 2011 6:35 AM
238	co-pay	Feb 2, 2011 1:56 PM
239	Consumers' relatives should pitch in during this economic crisis. Family and consumers too, cannot pretend that the Regional Centers should pay for everything at all times.	Feb 2, 2011 2:01 PM
240	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Act Section 4501). The state does not ask parents and student for co-pays in California 's pubic schools and the same logic applies here.	Feb 2, 2011 3:35 PM
241	Parent training and involvement in review	Feb 2, 2011 4:40 PM
242	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Act Section 4501). The state does not ask parents and student for co-pays in California's pubic schools and the same logic applies here.	Feb 2, 2011 4:55 PM
243	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Act Section 4501). The state does not ask parents and student for co-pays in California 's pubic schools and the same logic applies here.	Feb 2, 2011 5:51 PM
244	The consumer needs to commit to doing their chores and what it takes to live on their own with supported staff. They need to learn responsibilies and follow through. The parents have to be active participants and know how their child if doing and follow up on situations that may arise and need attention.	Feb 2, 2011 6:14 PM
245	ILS should be the last choice for Rep Payeeship. A Consulting Service could be available for parents and families who do not understand benefits.	Feb 2, 2011 6:29 PM
246	a	Feb 2, 2011 6:51 PM
247	These adults are living at poverty level !	Feb 2, 2011 7:02 PM
248	Parents should participate where possible.	Feb 2, 2011 7:18 PM
249	Co-payment based on income; family/parental involvement should be encouraged as much as possible.	Feb 2, 2011 7:30 PM
250	ILS and SLS should be avaliable to all consumers without a co-payment. However, if a consumer has a trust- these funds should be used to supplement an expensive SLS program- on a sliding scale based on the amount of the trust.	Feb 2, 2011 7:41 PM
251	Parents should be income tested and pay for a portion of SLS. I am aware of several high income families who's child receives SLS way beyond the cost of a residential placement. Perhaps the parents pay anything above that amount.	Feb 2, 2011 8:27 PM
252	Consumers should not be abusing illegal substances, committing crimes or not working with the agencies. It should not be a service to chase after consumers that break the law.	Feb 2, 2011 8:59 PM
253	If there is family in the area of a client that lives independently then they should be responsible for some of the hours that the client would require to make living independently successful. If the client requires more hours than the organization can provide then the family needs to step up to the plate. If the family cannot soit they they need to pay for some to supply the extra hours needed.	Feb 2, 2011 9:19 PM
254	vigilance on the part of the consumer	Feb 2, 2011 9:27 PM
255	Parents should play a very active role in finding housing	Feb 2, 2011 9:35 PM
256	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge (lanterman Act Section 4501) The state does not ask paretns and student for co-pays in California's public schools and the same logiv applies here	Feb 2, 2011 9:38 PM
257	no co-pay for families	Feb 2, 2011 9:42 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
258	NONE	Feb 2, 2011 9:43 PM
259	none	Feb 2, 2011 9:47 PM
260	SAME AS PRIOR	Feb 2, 2011 10:05 PM
261	See response to this question for Behavioral services	Feb 2, 2011 10:11 PM
262	Do not implement a $750 million cut to the Department of Developmental Services (DDS) budget. It is too drastic! We need these services for our kids on the spectrum!	Feb 2, 2011 10:12 PM
263	My responsiblity to my daughter will be for a lifetime even though she is an adult. The state of CA has accepted responsiblity for persons with developmental disabilites and an obligation to them. Through no fault of their own they are depending on their state for the same quality of life as each healthy independent individual that lives in this great state. Calif has set the standard of care for the disabled that should be the norm for every state in this country.	Feb 2, 2011 10:15 PM
264	Please previous topic response....	Feb 2, 2011 10:19 PM
265	I would be astonished to hear if any child is receiving SLS or ILS.	Feb 2, 2011 11:04 PM
266	Family members need to be involved and also empower the individual and help them use their newly acquired skills.	Feb 2, 2011 11:16 PM
267	Parents and clients should provide oversight of the workers to insure satisfactory performance and the safety of the client. They way these services are currently provided encourages abuse and continued dependency for the client.	Feb 3, 2011 12:06 AM
268	Parents who have the ability to contribute to payment should contribute to services.	Feb 3, 2011 12:19 AM
269	Not for adults.. Parents should be involved as much they can.in all cases.	Feb 3, 2011 12:42 AM
270	Same answer as previous pages	Feb 3, 2011 12:45 AM
271	Possibly a co-payment will be necessary some clients are getting a lot of services they are capable of managing on therir own and have learned to use the system and then there are others who are very involved recieving the same amount.	Feb 3, 2011 12:51 AM
272	Services are for adults. Parents should not be responsible for care or co-payment.	Feb 3, 2011 12:53 AM
273	Either a time commitment with verifiable results, and/or an hourly co-payment as needed. MINIMUM amount of co-payment since the consumers are barely making it as it is--and how many of them even have family that could help them out.	Feb 3, 2011 12:57 AM
274	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Act Section 4501). The state does not ask parents and student for co-pays in California 's pubic schools and the same logic applies here.	Feb 3, 2011 1:00 AM
275	Parents should take an active role in providing the checks and balances, audits, interviews, etc.	Feb 3, 2011 1:24 AM
276	monitored by regional center	Feb 3, 2011 1:31 AM
277	Contract	Feb 3, 2011 1:40 AM
278	This is for individuals who are adults, there should be minimal parent commitment if consumers are being encouraged to live independently.	Feb 3, 2011 1:49 AM
279	Co-payment, when ever possible, should be provided. However, inability to pay should never preclude that a consumer will not receive said services.	Feb 3, 2011 1:51 AM
280	co-pay based on consumer and family's ability to pay	Feb 3, 2011 1:58 AM
281	Evaluate Services.	Feb 3, 2011 1:58 AM
282	N/A	Feb 3, 2011 2:04 AM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
283	time commitment	Feb 3, 2011 4:38 AM
284	some parental support	Feb 3, 2011 5:04 AM
285	no comment	Feb 3, 2011 5:12 AM
286	Immediate family members should be able to help with some of the srvices.	Feb 3, 2011 5:32 AM
287	DO NOT PAY FOR HOUSECLEANING for consumers. I had one client who was just plain sloppy. She could afford to be; you were sending her a housekeeper each week. How many taxpayers do you think would approve of that set-up? That money should have been spent on education, not housecleaning. I hope the budget cuts have ended such improper procedures. It would have been better to send an aide to teach her to clean with him or her cleaning right beside the client, don't you agree?	Feb 3, 2011 6:25 AM
288	no co-payment.	Feb 3, 2011 6:48 AM
289	Time commitment is important. NO co-payment.	Feb 3, 2011 6:50 AM
290	No Comment	Feb 3, 2011 6:52 AM
291	time commitment	Feb 3, 2011 6:57 AM
292	Hopefully the parent will help; but no standard as clients are now adults.	Feb 3, 2011 7:23 AM
293	There are some systems that look at parents ability to pay and where payment doesn't kick in until very high levels of service or income.	Feb 3, 2011 7:30 AM
294	The consumer needs to prove that they are able to live independently or with supported living by completing their own daily living tasks to the best of their ability.	Feb 3, 2011 3:36 PM
295	I think parents should have a set time they should be care provider per month for cost savings.	Feb 3, 2011 4:18 PM
296	I personally am retired and on a fixed income, how can I support a copayment? I spent 40 years working and paying my taxes and now my son needs support and you want to bail.....that is very upsetting to me!	Feb 3, 2011 4:32 PM
297	Time commitment in the form of classes and support groups regarding how to enjoy their loved one more and more.	Feb 3, 2011 4:46 PM
298	Many people have no family support. Family members should be able to access IHSS money if that remains available. These family members should have to meet the same requirements as any other IHSS worker.	Feb 3, 2011 4:53 PM
299	Families to copay who meet an ability to pay standard	Feb 3, 2011 5:17 PM
300	most consumers who would use these services receive social security only and are adults. Co-payments could cause serious financial hardship and may result in consumers declining to use needed services.	Feb 3, 2011 5:22 PM
301	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 3, 2011 5:23 PM
302	Consumers and families should have a greater stake in services. When someone else is actually paying for the services the role of families and consumers can degenerate into griping and complaining that is not always constructive. At the same time consumers should be able to "walk" away from services that are not meeting their expectations.	Feb 3, 2011 5:37 PM
303	No Comment	Feb 3, 2011 5:44 PM
304	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Act Section 4501). The state does not ask parents and student for co-pays in California’s pubic schools and the same logic applies here.	Feb 3, 2011 5:46 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
305	I think it depends on parents. Some parents do not support their children after they graduate from high schools while some continue to support them. Although the latter might feel reasonable to pay some amount of living expenses, the former wouldn't. Personally, I think $100 per month co-payment may be reasonable for parents, but no co-payments for consumers.	Feb 3, 2011 6:25 PM
306	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 3, 2011 6:29 PM
307	Family always comes first. If there are supports in place within the family that should not be replaced by another service. Always remember least restrictive and generic resources come first.	Feb 3, 2011 6:36 PM
308	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California’s pubic schools and the same logic applies here.	Feb 3, 2011 6:39 PM
309	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 3, 2011 6:50 PM
310	parents, caregivers and guardians already spend a lot of time and money caring for the consumers.	Feb 3, 2011 6:55 PM
311	The State of California has accepted a responsiblity for persons with developmental disabilities and an obligation to them which must be discharge. (The Lanterman Act Section 4501) The state does not ask parents and students for co-pays in California public schools and the same logic applies here.	Feb 3, 2011 7:23 PM
312	They can't afford it.	Feb 3, 2011 7:46 PM
313	Perhaps a small co-pay.	Feb 3, 2011 7:46 PM
314	State of California responsible by the Lanterman Act. In hard times those who can afford to co-pay I am sure would, to keep the services for their loved ones.	Feb 3, 2011 7:49 PM
315	If the disabled person is able to go home on weekends, it would save the State money.	Feb 3, 2011 7:54 PM
316	Over the suggested rates can be voluntarily paid by families if they want more than is available.	Feb 3, 2011 7:55 PM
317	A time-commitment and proof that they are actually acting as caregivers and life facilitators bnot as baby sitters should be povided to continue services.	Feb 3, 2011 8:09 PM
318	Same as before for over 150,000 gross earnings -	Feb 3, 2011 8:10 PM
319	I think these consumers should receive mobility training on the bus with their supported living services provider. They can pay for their own bus fare, the SLS prover can pay for his or her bus fare (can be reimbursed just the same as mileage is reimbursed now, only cheaper), and the consumer will eventually develop enough independence to go where he or she needs to go. This will stop the never-ending cycle of dependence on the state to fund services when a person is able to develop independence in skills that will help with living on their own.	Feb 3, 2011 8:22 PM
320	Those who require constant supervision and care, should not consider SLS. If family insists SLS then they should consider co-payment. Service standard should indicate for SLS those who can make gradual progress and changes towards time-framed outcome.	Feb 3, 2011 8:49 PM
321	if family can afford a small co pay	Feb 3, 2011 8:54 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
322	By this time parents are usually hanging on for dear life and need to start addressing their own health issues which may have been contributed by being sole support for so many years. So many parents are beyond exhausted. Allow the parents some time to heal.	Feb 3, 2011 8:55 PM
323	Parents should be required to help whenever possible.	Feb 3, 2011 9:02 PM
324	Reimburse parents and family members for the caregiving, transportation and assisted living supports that the State normally would have to incur.	Feb 3, 2011 9:17 PM
325	When parents are able to make a payment that will make a service cost effective as opposed to not cost effective, susch voluntary contributions should be allowed. Rates of payment must be sufficient to maintain the specific staffing skills and reliability of performance required by the case. Some are easy, some are harder to staff. A flat formula will tend to deny servcie to clients that have special issues, such as behaviors, concurrent mental health. It is reasoable to required more detailed justification of higher costs when group home or other models are truly available in real life, and not just in theory.	Feb 3, 2011 9:17 PM
326	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 3, 2011 9:20 PM
327	Once individuals move into supported living arrangements, the parents will be less involved both physically and financially. It will be difficult to have consumers provide much in terms of a co-pay if they are on gov't support.	Feb 3, 2011 9:38 PM
328	Answer: The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 3, 2011 9:44 PM
329	n/a	Feb 3, 2011 9:53 PM
330	time commitment?	Feb 3, 2011 10:19 PM
331	There should be a co-payment for services for parents and consumers. This is to ensure that services are not simply being taken because they are coming free from the state. The money could come from Special Needs Trusts, from families, and a nominal amount from the clients themselves. However, it would have to be sliding scale to some extent. We have clients who have no family and no other monies available to them. The more services that a client gets, the more money the client has to pay. This would provide a behavioral incentive to, say, behave better during the night for example. If the client realizes that they can't go to the movies 3 times a month because they have to pay towards their overnight staff, maybe they decide not to behave problematically in the night.	Feb 3, 2011 10:37 PM
332	Minimal amounts of $5-$10 as copays could be suggested as long as there funding to cover those who dont have the ability to pay.	Feb 3, 2011 10:45 PM
333	consumers and/or their families should not be required to share in the costs of these services	Feb 3, 2011 10:47 PM
334	Parents should be regularly encouraged to stay actively involved in their childrens' lives.	Feb 3, 2011 10:54 PM
335	As currently set.	Feb 3, 2011 11:12 PM
336	There could be a coopayment for those families in a high income bracket i,e, $200,000 per year.	Feb 3, 2011 11:13 PM
337	If necessary, co-payments can be requested from parents. Parents should make some kind of time commitment.	Feb 3, 2011 11:18 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
338	Sliding scale	Feb 3, 2011 11:34 PM
339	In order to justify the continuatin of ongoing services, there should be standards that all involved parents of consumers should maintain and report on some level of natural supports as well as consistent involvement in the circle of support.	Feb 3, 2011 11:42 PM
340	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 3, 2011 11:44 PM
341	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here	Feb 4, 2011 12:06 AM
342	Same copayment as any med treatment	Feb 4, 2011 12:11 AM
343	Consumers must be on board with their IL plan. If not on board with their plans, services should be limited.	Feb 4, 2011 12:19 AM
344	100% time commitment	Feb 4, 2011 12:50 AM
345	See above Answer 4.	Feb 4, 2011 12:53 AM
346	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 4, 2011 1:06 AM
347	Consumers should generally desire and cooperate with these services, as they are directly related to the person's ability to remain independent. Consumers who want these services beyond a particular goal or time-limit should be allowed to pay for all or part of them.	Feb 4, 2011 1:08 AM
348	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 4, 2011 1:52 AM
349	Adults will be required to participate in these services 100% and parents should not be included when determining the need for this skill building process.	Feb 4, 2011 2:02 AM
350	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 4, 2011 2:07 AM
351	The consumer or family help with paying the rent and utilities.	Feb 4, 2011 2:22 AM
352	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 4, 2011 2:49 AM
353	My son receives SSI benefits and has less than $2,000 to his name. He is an adult.	Feb 4, 2011 3:41 AM
354	Self -directive or self-determination should be implemented. Cost effective - very appropriate with the kind of economy we are having.	Feb 4, 2011 3:52 AM
355	Minimal co-payments based upon ability to pay	Feb 4, 2011 4:00 AM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
356	Don't hold it against the disabled if they have parents that are unwilling or unable to help. In many/most cases the parents and family have already paid a huge sum in supporting their loved one both in actual costs and in time away from work for al the things and time that is required for a disabled person. Don't be stingy and wring more money from them. The typical family of a disabled person already has higher divorce rates. It costs more in the long run to squeeze them for more and more until they break.	Feb 4, 2011 4:42 AM
357	The state of California must have integrity in fulfilling its obligation Lanterman Act Section 4501 .	Feb 4, 2011 4:58 AM
358	Parents should be a part of this responsibilities and be determine through their income. This will help with the budget being abused.	Feb 4, 2011 5:27 AM
359	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 4, 2011 6:42 AM
360	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Act Section 4501). The state does not ask parents and student for co-pays in California's pubic schools and the same logic applies here.	Feb 4, 2011 7:36 AM
361	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 4, 2011 3:17 PM
362	It is immoral and incomprehensible to suggest that parents are not already doing as much as possible for their adult children. Just try to live my life for a week and see how much we already do. I am personally offended by this question in light of the fact that we pay taxes for the education of illegal immigrants and all other children in the public schools, and their parents are not required to make co-payments for services. The Lanterman Act clearly states the State's responsibility for persons with developmental disabilities.	Feb 4, 2011 3:54 PM
363	Should be evaluated by service worker and depend on their abilities.	Feb 4, 2011 4:47 PM
364	ensure client is receiving services stated	Feb 4, 2011 4:49 PM
365	Same as previous section	Feb 4, 2011 4:55 PM
366	N/A	Feb 4, 2011 5:01 PM
367	The State of California has accepted responsibility for persons with developmental disabilities and has an obligation to them which it should not be allowed to discharge. The state does not ask parents for co-payment in Californias public school system, therefore it should not be allowed for persons with disabilities.	Feb 4, 2011 5:12 PM
368	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 4, 2011 5:16 PM
369	Consumers can provide co-payment but that should be set according to the consumer's resources. Should not be any more than $20 per month. Fees should be waived for those without resources. Many consumers have no living family and they would need to be fully supported by the regional centers.	Feb 4, 2011 5:21 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
370	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 4, 2011 5:44 PM
371	Means testing should be used for these services.	Feb 4, 2011 6:08 PM
372	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 4, 2011 6:12 PM
373	What parent/parents should contribute financially should be determined by their income level. I would hope that parents would want their son/daughter to spend time with them some weekends. I think that if the parent/parents are healthy enough, they should be asked to help on an emergency basis with transportation to appointments or "filling in" for a Personal Assistant who may be sick or otherwise unavailable.	Feb 4, 2011 6:18 PM
374	Consumers should be able to make their own choices with staff assistance.	Feb 4, 2011 6:28 PM
375	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 4, 2011 6:37 PM
376	Co-payments should exist according to the financial resources of the family, if the client lives with their family. Most independent clients, though, are on a limited income and should not be expected to assist in the payment for their services. Clients that live with family members should expect some family support in terms of time and services that families would normally provide, like food, laundry, financial assistance to the client.	Feb 4, 2011 6:46 PM
377	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to the which it must discharge. (The Lanterman Act section 4501). The state does not ask parents and students for co-pays in California’s public schools and the same logic applies here.	Feb 4, 2011 7:09 PM
378	Based on ability and availability.	Feb 4, 2011 7:17 PM
379	The same as previous #6.	Feb 4, 2011 7:19 PM
380	GOVERNMENT!!!!!!!!!!!! STATE OR FEDERAL	Feb 4, 2011 7:33 PM
381	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Act Section 4501). The state does not ask parents and student for co-pays in California’s pubic schools and the same logic applies here.	Feb 4, 2011 7:50 PM
382	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 4, 2011 8:15 PM
383	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California’s pubic schools and the same logic applies here.	Feb 4, 2011 8:39 PM
384	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 4, 2011 8:56 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
385	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 4, 2011 9:19 PM
386	fee for service at time of service	Feb 4, 2011 9:43 PM
387	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to the which it must discharge. (The Lanterman Act section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 4, 2011 9:55 PM
388	Prior to, provide equal, fair, and just expectations and training, if needed, then tell them: Be ontime! Be prepared! Do the job well! This should be be an issue if the prior has been done.	Feb 4, 2011 10:08 PM
389	Individuals should use these services when available at no cost to them.	Feb 4, 2011 10:11 PM
390	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 4, 2011 10:22 PM
391	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 4, 2011 10:38 PM
392	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 4, 2011 10:45 PM
393	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 4, 2011 10:56 PM
394	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 4, 2011 11:15 PM
395	If a client refuses to participate and/or cooperate with the service provider then the services should be terminated and client either make it on their own or be placed into a group home or Mentor home. Court assistance may be needed if necessary.	Feb 4, 2011 11:20 PM
396	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Act Section 4501). The state does not ask parents and student for co-pays in California's pubic schools and the same logic applies here.	Feb 4, 2011 11:21 PM
397	Same as before	Feb 4, 2011 11:23 PM
398	If the child is of age then the parent should have no responsibility other than voluntary to contribute to the process. The consumer should do what he is physically able to do and contribute that portion of his funds which would be appropriate for his housing and board from his social security or private funds.	Feb 4, 2011 11:34 PM
399	Again, co-payments are fair to the extent that they are affordable. The need for these services will outlive the parents, so they may not be able to assist.	Feb 4, 2011 11:41 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
400	Family should pay if they can, ... means test....	Feb 4, 2011 11:53 PM
401	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge (The Lanterman Act Section 4501). The State does not ask parents and students for co-pay in California's public schools and the same logic applies here.	Feb 5, 2011 12:22 AM
402	Just as the Lanterman Act 4501 accepts resonsibility for persons with developmental disabilities so does the state for students in public education. Families don;'t pay co-pays for public education and neither should families with consumers with developmental disabilitites.	Feb 5, 2011 12:23 AM
403	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here	Feb 5, 2011 12:32 AM
404	Person served to pay all living expenses, including rent.	Feb 5, 2011 12:41 AM
405	same as for other programs in this questionnaire	Feb 5, 2011 1:28 AM
406	The concept of co-payment makes some sense. The problem is I don't see anyway to implement it without increasing the adminstrative expenses. Also, for those who live in supported living and are adults really have no income to speak of that could be diverted to pay.	Feb 5, 2011 1:30 AM
407	No specific suggestions.	Feb 5, 2011 2:04 AM
408	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 5, 2011 2:19 AM
409	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Act Section 4501).	Feb 5, 2011 3:57 AM
410	as in #5	Feb 5, 2011 4:29 AM
411	co-payment: 15% of hourly wage Based upon client's / family's ability to pay (i.e. clients' employment status; financial & health safety nets)	Feb 5, 2011 6:11 AM
412	Co-pays are not realistic. These people rarely make more than a subsistence wage, if that. End result is a tax on the families that have supported (and continue to support) these individuals. The families are already providing their time and support and financial resources for these persons in other areas.	Feb 5, 2011 6:49 AM
413	N/A The parents have no responsibilities in their adult children's lives. They may choose to take an active part, but by law they have no responsibility.	Feb 5, 2011 6:51 AM
414	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. The state does not ask parents and students for co-pays in California’s pubic schools and the same logic applies here.	Feb 5, 2011 2:47 PM
415	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California’s pubic schools and the same logic applies here	Feb 5, 2011 5:27 PM
416	Commitment from the parent(s) is very important.	Feb 5, 2011 5:38 PM
417	same as first set	Feb 5, 2011 6:40 PM
418	not sure	Feb 5, 2011 8:06 PM
419	I oppose POS standards. Please refer to the Lanterman Act section 4501	Feb 5, 2011 8:54 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
420	Based on age of consumer or high end parent who can help.	Feb 5, 2011 10:13 PM
421	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Act Section 4501). The state does not ask parents and student for co-pays in California's pubic schools and the same logic applies here.	Feb 5, 2011 10:55 PM
422	if they have parents than they should be able to look in on them so they would not need a worker to help	Feb 5, 2011 11:28 PM
423	Many consumers don't have parrents, all consumers are on dissability and have no money. therefore moneys must come from the state.	Feb 6, 2011 4:08 AM
424	Regardless of any suggested standards, the consumer, the consumer's parents and/or caregivers and consumer's teachers and other school service providers where applicable must still have input regarding independent living and supported living services, and the entire IPP team, including the above, must retain the ability to determine the responsibilities of parents and/or caregivers and consumers relative to the services and supports needed by the consumer.	Feb 6, 2011 5:45 AM
425	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 6, 2011 5:55 AM
426	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 6, 2011 4:35 PM
427	Parental involvement in the program should be required.	Feb 6, 2011 5:08 PM
428	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here. It's not caregivers really chose this life.	Feb 6, 2011 6:45 PM
429	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 6, 2011 6:47 PM
430	Parents and/or conservators should be present at all review meetings.They should be consulted for any and all major decisions regarding the client's welfare.	Feb 6, 2011 8:11 PM
431	As I said, if a consumer is fortunate enough to have a family that cares, the regional center should do whatever is possible to help them.	Feb 6, 2011 8:46 PM
432	guardian ship and supervisory efforts should continue by parents and family as much as practically possible	Feb 7, 2011 2:26 AM
433	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 7, 2011 5:13 AM
434	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 7, 2011 6:40 AM
435	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them, which it must discharge. The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 7, 2011 2:46 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
436	The State has accepted a responsbility for developmentally disabled citizens and has an obligation to them, per The Lanterman Act. Just as parents are not asked to make co-pays for public education, they shouldn't be asked in this situation either.	Feb 7, 2011 3:25 PM
437	Consumers need to work on the agreed upon goals and agree to reduction of hours.	Feb 7, 2011 4:28 PM
438	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them, which it must discharge. The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 7, 2011 5:45 PM
439	The State of California has accepted responsibility for persons with developmental disabilities and an obligation to them which it must discharge (Lanterman Act section 4501). Co-payment is not a viable option.	Feb 7, 2011 6:21 PM
440	The Lanterman act section 4501.	Feb 7, 2011 7:50 PM
441	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 7, 2011 7:53 PM
442	If the disabled person is an adult, then all financing throught the Regional Center.	Feb 7, 2011 9:23 PM
443	No comment	Feb 7, 2011 9:31 PM
444	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 7, 2011 10:06 PM
445	utilize trust accounts.	Feb 7, 2011 10:37 PM
446	Allow RC's to set the standards in their own communities.	Feb 7, 2011 10:45 PM
447	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 7, 2011 11:12 PM
448	Let the Regional Centers make the decisions regarding program services	Feb 7, 2011 11:13 PM
449	According to the Lanterman Act, Section 4501, the State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must fulfill. California does not require co-pays in California's public schools, nor should it require them for DDS services. Rather than assuming that consumers and/or their families are looking for a free ride, the DDS should acknowledge that most if not all families continue to overextend their time, energy and finances in support of their developmentally disabled family members.	Feb 7, 2011 11:15 PM
450	N/A	Feb 7, 2011 11:25 PM
451	See #5 above.	Feb 7, 2011 11:56 PM
452	Unless consumer is conserved by his/her parent, Parents should not be held liable in any capacity for their adult children trying to live independently. Parents who wish more oversight from CPC for their adult child that exceeds the State regulated quarterly visit, must be willing to to share that time due to CPC's high caseload numbers [which typically range in the mid-80s].	Feb 8, 2011 12:13 AM
453	The consumers and/or families should have to pay a reasonable amount of rent based on the amount of SSI the individual receives each month, leaving them a reasonable amount left over for food and other monthly needs.	Feb 8, 2011 1:00 AM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
454	Answer: The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Act Section 4501). The state does not ask parents and student for co-pays in California's public schools and the same logic applies here.	Feb 8, 2011 1:10 AM
455	Payment could also go to parent to help the individual live for gas money, groceries, etc. Also for time committed by those who help.	Feb 8, 2011 1:24 AM
456	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here. This very question is disturbing in its assumptions. These are parents and consumers who are already over-taxed and living just this side of solvency and sanity. Surely one of our primary obligations as a civilized state is to support our disabled citizens and their families!!!! This is basic to all functioning societies. In addition, its clear that these families, by facilitating independent living and supported living services for our disabled citizens, are actually saving the taxpayers money. These programs run much more efficiently and effectively and at significantly lower cost than the option of institutionalizing and warehousing on the part of the state.	Feb 8, 2011 4:06 AM
457	Parents of adult children can not be forced to have a co-payment and they can get in trouble with SSI if they contribute to the adult's living expenses.	Feb 8, 2011 4:26 AM
458	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here	Feb 8, 2011 5:32 AM
459	Again as previously stated.	Feb 8, 2011 6:08 AM
460	A sliding scale based on the parenets income could be used.	Feb 8, 2011 6:37 AM
461	No co-payments for low income consumers.	Feb 8, 2011 7:02 AM
462	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 8, 2011 3:40 PM
463	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 8, 2011 4:26 PM
464	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 8, 2011 4:27 PM
465	Parents and consumers are frequently unable to pay for the cost of these services. They are important nonetheless.	Feb 8, 2011 5:22 PM
466	Create a plan based on the family with a disabled individual. Review working hours, income, residence, ect., to evaluate the need of the family with a disabled adult. And what that disabled adult is able to do. Everyone can do something.	Feb 8, 2011 5:33 PM
467	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 8, 2011 5:51 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
468	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 8, 2011 6:03 PM
469	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Act Section 4501). The state does not ask parents and student for co-pays in California's pubic schools and the same logic applies here.	Feb 8, 2011 6:10 PM
470	Work or time commitment is fine, co-pays could be an option.	Feb 8, 2011 7:47 PM
471	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 8, 2011 7:55 PM
472	Always a team effort of involvement by the support group helping the consumer.	Feb 8, 2011 8:40 PM
473	Involve in community, contibute via pledges, monthly allowances, etc.	Feb 8, 2011 8:52 PM
474	time commitment for help at home as applicable	Feb 8, 2011 9:24 PM
475	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501) The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 8, 2011 9:31 PM
476	Parents should be willing to work with the service providers to help them find appropriate housing.	Feb 8, 2011 9:43 PM
477	Most adult consumers do not have parent participation or any type of co-pays. Consumers who commit to participating in supportive living services will need to make a commitment of their time and stick to this commitment. Once minimal participation attendance drops, and intervention is not effective, consumer will not be able to continue with his/her placement within the program thus forfeiting their placement for another consumer who is willing and able to participate.	Feb 8, 2011 10:23 PM
478	Parents should provide necessary support and monetary support for their special needs young adults--help with paying rent, food, etc. And visit often to make sure the young adult is coping adequately with life outside the parents' home.	Feb 8, 2011 10:35 PM
479	Most adult consumers do not have parent participation or any type of co-pays. Consumers who commit to participating in supportive living services will need to make a commitment of their time and stick to this commitment. Once minimal participation attendance drops, and intervention is not effective, consumer will not be able to continue with his/her placement within the program thus forfeiting their placement for another consumer who is willing and able to participate.	Feb 8, 2011 11:20 PM
480	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 8, 2011 11:48 PM
481	Answer: The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 8, 2011 11:54 PM
482	I am quite happy with my current services. I don't have any money or family support to pay for these programs.	Feb 9, 2011 12:25 AM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
483	My parents are involved in my life and talk to my ILS Instructor about my work on my ILS goals. Currently my family does not pay for my ILS services. It would be difficult if I or my family were responsible for paying for ILS services. I don't think that I or my family would be able to pay for ILS services if the state didn't fund ILS. I have ILS Instruction to learn how to live on my own and to learn how live more independently. If I could not recieve ILS Instructor this would be hard because I wouldn't learn how to live on my own and I might be more reliant on my family.	Feb 9, 2011 12:55 AM
484	Yes, we as parents and care providers need to accept the co-payment delt to us. Many comsumers do not have the ability to pay even $5.00 they just do not have the funds.	Feb 9, 2011 1:06 AM
485	family co-pay where possible.	Feb 9, 2011 1:24 AM
486	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 9, 2011 1:25 AM
487	Answer: The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 9, 2011 1:28 AM
488	Requirement that individual agrees to maintain current residence, comply with laws, and to comply with scheduled meetings 90% time.	Feb 9, 2011 1:33 AM
489	same	Feb 9, 2011 2:28 AM
490	I currently do not pay for ILS services and would not like to in the future. I would not be able to pay for ILS services and my family would not be able to pay for ILS services. I would not be able to make it on my own without ILS. My behavior and my housing has improved since I have had ILS services. Through my classes I have learned about nutrition, how to better my sugar habits (I have diabetes), in my anger management class I have learned how to have more control over my anger through learning material.	Feb 9, 2011 3:36 AM
491	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 9, 2011 5:42 AM
492	Commitment & share cost	Feb 9, 2011 8:46 AM
493	We recommend that, with the agreement of the consumer, it would be appropriate to determine the extent to which families of adult consumers voluntarily agree to provide natural supports to offset the cost of SLS or ILS. Such determination should take into consideration the skills and abilities of the family members and the specific needs of the consumer. DDS is encouraged to identify when it is appropriate to require consumers to use funds that are maintained in a trust.	Feb 9, 2011 5:34 PM
494	must follow through and 100% participate	Feb 9, 2011 6:55 PM
495	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 9, 2011 7:57 PM
496	California has accepted the responsibility for people with developmental disabilities and are obligated to them per Lanterman Act section 4501.	Feb 9, 2011 8:11 PM
497	Clients that live with their parents should receive if any, very little hours of Independent Living unless their parent is incompacitated, or unable to assist them with ILS.	Feb 9, 2011 8:16 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
498	The State of California has accepted responsibilities for persons with developmental disabilities and an obligation to them that must be discharged (Laterman Act Sec. 4501). The state does not ask parents or students of California public schools for co-pays or funding and the same laws should apply here.	Feb 9, 2011 9:06 PM
499	Consumer keep appointments and follow up and Direct Care Providers advice in accordance with individual choice.	Feb 9, 2011 9:15 PM
500	As stated in #5, the clients/family members should contribute financially if they can afford to. Standards of income should be established to determine this. Time commitment by parents should be determined by what works best for everyone involved, but keeping the client's needs first: does the client get along with parents/family members? Who do they want to work with them? Let the client decide what they want and need, and if reasonable, proceed with their wishes as the ultimate goal.	Feb 9, 2011 9:20 PM
501	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 9, 2011 9:48 PM
502	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act 4501) The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 9, 2011 10:04 PM
503	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 9, 2011 10:34 PM
504	Whatever they can afford whether it be a donation of time or co-payment. We all need to pitch in until this financial mess can be remedied.	Feb 9, 2011 11:32 PM
505	The problem is the squeeky wheel gets the grease. Most consumers have no active family members, so they have the vendor to advocate and then they are looked at as just wanting money, but if a parent advocates, they get everyhting for their son or daughter. How is this right. This is ACRC reponsability to ensure that every person with needs has them met , not just the ones with pushy family memebers.	Feb 9, 2011 11:33 PM
506	Reference comments under day programs	Feb 9, 2011 11:33 PM
507	If parents can afford to help they should. If parents are deceased or cannot afford to pay then tax payer dollars should be used. Parents should be asked to volunteer if they are able and not a burden themselves.	Feb 9, 2011 11:35 PM
508	see above	Feb 9, 2011 11:50 PM
509	These standards already exist at levels that many families cannot bear; (for adult services like day programs) these services are provided to adults, nearly all of whom qualify for public assistance and should not have to pay.	Feb 9, 2011 11:58 PM
510	Develop measurable plan for family to follow to enable orderly progression to independent living while consumer is still at home.	Feb 10, 2011 12:21 AM
511	Consumers must commit time in order for the service to take place. They should also want the service and commit to completing follow-up activities when the service provider is not present.	Feb 10, 2011 12:44 AM
512	They must show progression with the services provided. As Long as they are cognitvely and medically able too Insurance carrier pays the fees.	Feb 10, 2011 3:15 AM
513	see previous response to other topics	Feb 10, 2011 7:54 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
514	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 10, 2011 8:02 PM
515	If consumers or their parents are able to pay for an apartment or alternate living situation, then the consumer should not receive a Section 8 housing placement; these should be set aside for people who truly need the services and who cannot afford a home on their own.	Feb 10, 2011 8:08 PM
516	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 10, 2011 9:32 PM
517	Adult clients should share some responsibiltiy in funding for the service, a small fee.	Feb 10, 2011 9:45 PM
518	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 10, 2011 9:59 PM
519	After the individual reaches age 21 and becomes independent, they should have resources available in case their parents cannot afford to help them any longer. Most clients who have a family support system already receive a monetary and time commitment from their families, but there should be some assistance available to those who can't help themselves.	Feb 10, 2011 10:14 PM
520	All should be responsible as per IPP contractual agreement.	Feb 10, 2011 10:20 PM
521	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). Time banks might be a way of helping with this, but volunteerism on the whole should not be the basis of carrying out this important function of caring for those who need help.	Feb 10, 2011 10:28 PM
522	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 10, 2011 11:42 PM
523	Parents already have enough to deal with.	Feb 10, 2011 11:47 PM
524	Parents are not a reliable source	Feb 11, 2011 12:02 AM
525	Consumers are reuired to do a co-pay if they can afford it.	Feb 11, 2011 12:15 AM
526	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 11, 2011 12:22 AM
527	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 11, 2011 12:50 AM
528	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 11, 2011 12:55 AM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
529	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge (Lanterman Act Section 4501). The state does not ask parents and student for co-pays in California's pubic schools and the same logic applies here. No means testing.	Feb 11, 2011 1:10 AM
530	Whatever it takes but not placing the family below the poverty level.	Feb 11, 2011 1:32 AM
531	Answer: The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 11, 2011 1:49 AM
532	Supports should remain the same or increase.	Feb 11, 2011 1:49 AM
533	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 11, 2011 2:19 AM
534	55% co-payment	Feb 11, 2011 2:57 AM
535	The State of California has accepted a responsibility for persons with developmental disabilities (both mental and Physical) and therefore an obligation which it must discharge (Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California public schools and should not ask individuals who have the least resources to pay, let alone survive, to pay	Feb 11, 2011 3:20 AM
536	Sliding scale.	Feb 11, 2011 3:29 AM
537	Clients must be fully committed and participatory in the daily living situations.	Feb 11, 2011 3:44 AM
538	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 11, 2011 4:10 AM
539	Specific services to be provided by parents and money to be provided by parents should be defined in the IPP and in the plan.	Feb 11, 2011 4:46 AM
540	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 11, 2011 5:08 AM
541	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 11, 2011 5:44 AM
542	Those who can afford to pay part of this, should pay a copay.	Feb 11, 2011 5:48 AM
543	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge (Lanterman Act Section 4501). The state does not ask parents and student for co-pays in California's pubic schools and the same logic applies here.	Feb 11, 2011 6:15 AM
544	Parents should do what they can and begin when the child is young. Gov't agencies should budget for this for the long term....this isn't "going away".	Feb 11, 2011 6:22 AM
545	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 11, 2011 6:46 AM
546	There should be no co-payment. Individuals and families served should agree to general rules of conduct of the living situation in accordance with the Lanterman Act.	Feb 11, 2011 8:01 AM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
547	While co-payments may be appropriate for minors, they should not be required of families of consumers who are adults.	Feb 11, 2011 4:24 PM
548	Again, I think a copay should be required of those who are above reasonable income guidelines.	Feb 11, 2011 5:53 PM
549	Be mandatory for consumers to utilize natural supports and generic resources. SLS agencies should not be able to transport consumers in private vehicles yet train them to use public transportation, to drive, walk. If this is not possible, then evaluate whether SLS is an appropriate or not. Truly train independence not dependence on support.	Feb 11, 2011 6:16 PM
550	Parents who are able to pay for some of the services should be required to do so. It could be a percentage based on their income. After the parents retire their responsibility could end since their income would be much less. Except for a very small number our consumers do not have the means to pay for their service.	Feb 11, 2011 6:35 PM
551	consumer to be in charge of commitment, failing which services will be terminated and will not qualify until 12 months have passed. Lost opportunity.	Feb 11, 2011 6:39 PM
552	SAME AS PREVIOUS #6	Feb 11, 2011 6:47 PM
553	No fee to clients/families. Government supported	Feb 11, 2011 6:57 PM
554	Parents and families of these consumers often spend an enormous amount of time and resources trying to assist these providers and optimize their family member's success in utilizing the services. Many other consumers have no family support and are unable to assume responsibility for their own circumstances. The State of California must continue its commitment to protect these most vulnerable citizens.	Feb 11, 2011 7:03 PM
555	up to 50% copay by the individuals receiving the services	Feb 11, 2011 7:23 PM
556	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 11, 2011 7:24 PM
557	parenting classes hsould be, must be, a must do once a year get a new certificate	Feb 11, 2011 7:24 PM
558	Copayments based on financial ability to pay	Feb 11, 2011 7:52 PM
559	See comment under Behavioral Services	Feb 11, 2011 8:49 PM
560	Family involvement should always be encouraged, both financially and with personal involvement in activities.	Feb 11, 2011 8:53 PM
561	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 11, 2011 9:43 PM
562	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 11, 2011 9:46 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
563	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 11, 2011 9:47 PM
564	Don't pass expenses onto the families because not everyone can afford it.	Feb 11, 2011 9:48 PM
565	time comiinitment	Feb 11, 2011 9:48 PM
566	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 11, 2011 9:49 PM
567	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 11, 2011 9:51 PM
568	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge (Lanterman Act Section 4501). The state does not ask parents and student for co-pays in California's pubic schools and the same logic applies here.	Feb 11, 2011 9:51 PM
569	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 11, 2011 9:53 PM
570	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 11, 2011 9:55 PM
571	If a client is living in the family home, it must be recognized that the primary responsibility for the client's care is the family's. ILS services are to help train the client, not take care of the family. SLS services are not to be authorized if the client is living with family. The third tier would have to be clearly documented as to specifically what the services are to be used for, e.g. going to doctor appts.	Feb 11, 2011 10:00 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
572	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 11, 2011 10:01 PM
573	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 11, 2011 10:02 PM
574	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center	Feb 11, 2011 10:07 PM
575	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 11, 2011 10:14 PM
576	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 11, 2011 10:32 PM
577	Perform quarterly reviews.	Feb 11, 2011 10:35 PM
578	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 11, 2011 10:37 PM
579	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them, which it must discharge. The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 11, 2011 10:43 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
580	If these individuals have family members or parents they should share some fo the responsibility as to supervision and time commitment along with the regional center.	Feb 11, 2011 10:49 PM
581	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 11, 2011 10:56 PM
582	Family members should share the responsibilities of seeing that the consumer is handling their care and other responsibilities in order to live on their own	Feb 11, 2011 11:08 PM
583	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 11, 2011 11:27 PM
584	Sliding scale where appropriate	Feb 11, 2011 11:31 PM
585	Co-payments / share of cost should be required for consumers with means. Consumers who receive SSI should not have a share of cost. Conservators should be required to provide monthly support on a non-paid basis. Families / consumers should be given the opportunity to pay the difference between truly needed services and "Cadillac" services.	Feb 11, 2011 11:50 PM
586	It a consumer is going into SLS, they should qualify by having some independent skills. There are always exceptions such as those with CP, but overall, they should have a minimum requirement.	Feb 11, 2011 11:56 PM
587	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 11, 2011 11:58 PM
588	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 12, 2011 12:10 AM
589	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 12, 2011 1:17 AM
590	no suggestions	Feb 12, 2011 1:44 AM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
591	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). What little money they will earn should go towards their expenses.	Feb 12, 2011 2:35 AM
592	None	Feb 12, 2011 2:41 AM
593	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 12, 2011 2:45 AM
594	For only those who able to do so and help in payment on these resposiblities	Feb 12, 2011 2:47 AM
595	Should be held to a high level of committment and responsibility for following through as required.	Feb 12, 2011 3:47 AM
596	Client must be willing to participate.	Feb 12, 2011 3:49 AM
597	If parents can afford it, they should be a portion of these services.	Feb 12, 2011 4:55 AM
598	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 12, 2011 5:19 AM
599	2.Share of cost - while this would impose a parent fee for services it would allow consumers to continue to receive needed services without an arbitrary standard that might eliminate them from receiving a service at all	Feb 12, 2011 6:13 AM
600	See previous answers.	Feb 12, 2011 6:28 AM
601	Just as the Corrections Department holds parents of juveniles financially responsible for the costs of incarcerating their minor child, parents of consumers who reside in out-of-home placements should have some sort of co-payment to partially offset the costs of ILS or SLS.	Feb 12, 2011 6:39 AM
602	If they can.	Feb 12, 2011 6:52 AM
603	Financial responsiblities on a sliding scale. Expect time commitment from family of 3 to 5 hours per week. That translates to 1 hours per day during the working week.	Feb 12, 2011 7:57 AM
604	Parents should have the responsibilities to help managing the part of income left for clients' expenses. If parent not living, family member or institution can come in. If the client CAN self manage his/her own portion, fine. make sure he/she really knows how.	Feb 12, 2011 3:34 PM
605	A must during these hard economic times----clients need to be less DEPENDENT on their helpers---- parents need not to see this as an "entitlement" but a bonus for their child------Indendence. In some form BUT not reliance on a system that's broke	Feb 12, 2011 4:36 PM
606	A savings program like college could be started for them early in life is a start ,a bond to be set up for them or others to help support with a interest set reasonably until used at a disseminate age as other laws. This would be a beginning and others service then can help when the situation shows well and would be successful to them	Feb 12, 2011 5:41 PM
607	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 12, 2011 6:11 PM
608	Consumers are independent from parents if they are not living at home. If the consumer has the ability to pay a co-pay, a small one would show committment.	Feb 12, 2011 7:24 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
609	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 12, 2011 8:26 PM
610	30% of Income	Feb 12, 2011 8:49 PM
611	consumers follow the same recommendations as the general population (ie no more than 32% of monthly income goes towards rent)	Feb 12, 2011 8:55 PM
612	Parents and consumers are just trying to survive. The onus is on the State and its agencies.	Feb 12, 2011 9:20 PM
613	long time commitment	Feb 12, 2011 9:24 PM
614	See Behavioral Services #5	Feb 12, 2011 10:07 PM
615	Coordinate and keep in contact with providers directly. Research community plans to build low cost Section 8 housing with easier access to managers and those involved in lease arrangements. Time commitment: 5 hrs. monthly	Feb 12, 2011 10:12 PM
616	depends on persons income and property owned. This should be regulated by a sliding scale.	Feb 12, 2011 11:30 PM
617	Covered in prior sections	Feb 12, 2011 11:43 PM
618	The State of California has accepted a responsibilty for peroxnw with develpmental disablitiies and obligatinon to them which is tmnust descharge. (The Lanterman Act Section 4501). The state does not ask parents and students for copays in California's public schools and the same logic applies here.	Feb 12, 2011 11:56 PM
619	No copayment	Feb 12, 2011 11:58 PM
620	co-pay	Feb 13, 2011 1:23 AM
621	read the previous answer	Feb 13, 2011 2:41 AM
622	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 13, 2011 3:43 AM
623	with respect to time commitment every consumer or parent has the responsibility to fully understand the obligation they incur. By accepting services they become equal partner in providing continuity of care. Any people has, would have, and will have a disability.	Feb 13, 2011 4:22 AM
624	We plan to help support our children for as long as we can But our grown children are ready to step in if needed We have 4 adopted children with disabilities	Feb 13, 2011 5:09 AM
625	I, as a parent am very involved in my child's life, however, I am getting older and cannot do as much. I was a parent service coordinator for 15 years. When I was doing this I felt I was saving Regional Center quite a bit of money then the Goverment decided to discontinue this program. I felt the goverment was not interested in saving money.	Feb 13, 2011 5:15 AM
626	Parents must observed pay a visit and see to it that their child is well takne care they can share payments or gives allowances if they can.	Feb 13, 2011 5:25 AM
627	The person being help should be included in this topic since its them your helping.	Feb 13, 2011 5:58 AM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
628	Receive QPBS and receive a fair and equitable reward by anyone's standard...but if someone does not want to receive services it is their choice. Therefore, services will be discontinued after fair warning and due opportunities. QPBS providers who diligently arrive to provide services and are greated with "no-shows" and "lack of appreciation" can follow protocol and arrange for QR fair practice meetings; meetings in which the RC CSC and QPBS provider and QR's Circle of support discuss what options are available and a plan action is established, which could include change of QPBS provider to discontinuation of RC paid support for the QR.	Feb 13, 2011 7:58 AM
629	Not all have surviving parents or family to take care of them	Feb 13, 2011 4:12 PM
630	Sliding Scale? Every Autistic consumer is different so how can we set a time commitment?	Feb 13, 2011 5:51 PM
631	The consumer probably will learn most of these independent living skills from the parents anyway -- cooking, laundry, hygiene, shopping, arranging transportation, medical care. The ILS services should provide those services that the parents cannot provide.	Feb 13, 2011 5:53 PM
632	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 13, 2011 6:50 PM
633	If there are supportive family available, then a time commitment from them would be optimal.	Feb 13, 2011 6:50 PM
634	Parents to supplement as they are able, but needed services to come form client's budget.	Feb 13, 2011 7:07 PM
635	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 13, 2011 7:14 PM
636	co payment if possible not required- parents if alive support client also	Feb 13, 2011 10:17 PM
637	Caseworkers should visit with consumer on regular basis to make sure needs are met and health and safety issues are addressed.	Feb 13, 2011 10:25 PM
638	The People of California have accepted a responsibility for DD persons to give relieve to parents/relatives according to the Lanterman Act. Any payment would have to be on a sliding scale	Feb 13, 2011 10:32 PM
639	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 13, 2011 10:35 PM
640	I like wht I have	Feb 14, 2011 12:16 AM
641	No co-payments or parent participation requirements are appropriate for adult services. RC consumers are, by definition, indigent and should not be expected to co-pay for their services.	Feb 14, 2011 1:06 AM
642	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Action Section 4501). The state does not ask parents and students for co-pays in California's public shools and the same logic applies here.	Feb 14, 2011 1:48 AM
643	Review monthly and quarterly goals, measurements, successes, areas of need, and ongoing patterns. Most clients of RCOC are as responsible as they can be.	Feb 14, 2011 1:52 AM
644	Exhaust all possibilities from these resources first.	Feb 14, 2011 2:29 AM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
645	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 14, 2011 3:25 AM
646	No co-pay	Feb 14, 2011 3:40 AM
647	Services should not be provided to adult consumers who live with their parents	Feb 14, 2011 5:03 AM
648	Parents could commit time to assisting in client development of independent living skills.	Feb 14, 2011 5:40 AM
649	CONSUMERS SHOULD HAVE TO PAY THEMSELVES FOR ABOVE REASON	Feb 14, 2011 7:15 AM
650	No comment.	Feb 14, 2011 1:53 PM
651	Family members cannot pay for these services	Feb 14, 2011 2:35 PM
652	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 14, 2011 4:03 PM
653	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 14, 2011 4:27 PM
654	Many times, parents are ineffective teachers of independent living skills. They should be evaluated for their ability to copay at least until consumer reaches age 30.	Feb 14, 2011 4:29 PM
655	none	Feb 14, 2011 4:51 PM
656	I believe this would vary depending on capability of the family. Many of us already contribute to this significantly.	Feb 14, 2011 5:01 PM
657	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 14, 2011 5:05 PM
658	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 14, 2011 5:26 PM
659	Parents and consumers should not have any financial responsibility	Feb 14, 2011 5:27 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
660	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 14, 2011 5:46 PM
661	Consumers receiving ILS/ SLS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 14, 2011 5:56 PM
662	Should utilize private insurance if available to supplement	Feb 14, 2011 6:08 PM
663	Parents and family members contribute a great deal of time, energy, and money to their loved one living independently. There is always a need for something that the consumer on very limited funds cannot fund.. whether it is clean work clothes, laundry detergent or emotional support... the job is never ending. Consumers shoudl use isnruance or other resources whenever possible to provide payment for therapy or physicians and regional center should pay when there are no other resources.	Feb 14, 2011 6:09 PM
664	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 14, 2011 6:19 PM
665	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional centers.	Feb 14, 2011 6:24 PM
666	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 14, 2011 6:27 PM
667	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays inCalifornia's pubic schools and the same logic applies here.	Feb 14, 2011 6:29 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
668	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 14, 2011 6:30 PM
669	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays inCalifornia's pubic schools and the same logic applies here.	Feb 14, 2011 6:30 PM
670	Individuals receiving ILS and SLS services should be able to actively participate in the development of their IPP and demonstrate an understanding of the goals and expectations of the program in relation to the individual goals and outcomes outlined on the IPP. Individuals should have the motivation to participate in and the ability to complete the program as agreed upon on the IPP. Individuals receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 14, 2011 6:35 PM
671	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge, (The Lanterman Act Section 4501). The state does not ask parentsand students for co-pays in California's public schools and the same logic applies here.	Feb 14, 2011 6:38 PM
672	Checking and making sure they are getting adecuate services	Feb 14, 2011 6:56 PM
673	Parents should be required to provide service and care without pay.	Feb 14, 2011 7:03 PM
674	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 14, 2011 7:08 PM
675	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 14, 2011 7:23 PM
676	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 14, 2011 7:25 PM
677	Based on the needs of the consumer as determined during the IPP process.	Feb 14, 2011 7:31 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
678	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 14, 2011 7:47 PM
679	I have suggest no change.	Feb 14, 2011 7:57 PM
680	Again, reimplement the PCC program.	Feb 14, 2011 7:57 PM
681	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 14, 2011 8:05 PM
682	No co-pays. Parents don't need to be involved when someone lives on his or her own.	Feb 14, 2011 8:31 PM
683	Rents should be about 30% of SSI payments.	Feb 14, 2011 8:49 PM
684	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 14, 2011 9:00 PM
685	Parents need to be able to step back and allow their child to learn/grow/become independent if supports are in place	Feb 14, 2011 9:40 PM
686	The State of California has an obligation to be responsible for these services.	Feb 14, 2011 9:55 PM
687	the ils instructors need more hours to be more effective	Feb 14, 2011 9:58 PM
688	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 14, 2011 10:19 PM
689	SLS- Parent and Family support to be clearly identifed prior to the implementation of services. It is unreasonable to beleived that parents providing 24 hour support prior to move will not be able to committ to any documented support.	Feb 14, 2011 10:36 PM
690	California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge (The Lanterman Act Section 4501). The state does not ask parents and students for copays in California's public schools and the same logic applies here.	Feb 14, 2011 10:38 PM
691	Family involvement in reviews.	Feb 14, 2011 10:38 PM
692	no comment	Feb 14, 2011 10:57 PM
693	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 14, 2011 11:05 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
694	The standards should include how parents or caregivers can continue to work with their consumer and family member on the independent living skills that the service provider works with the consumer on. There should be a time committment for families and care givers for independent living skills.	Feb 14, 2011 11:42 PM
695	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 14, 2011 11:50 PM
696	No comment	Feb 15, 2011 12:03 AM
697	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge (Lanterman Act Section 4501). The state does not ask parents and student for co-pays in California's pubic schools and the same logic applies here.	Feb 15, 2011 12:19 AM
698	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 15, 2011 12:21 AM
699	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 15, 2011 12:43 AM
700	Natural supports should be considered first, and any paid supports should be built around the non-paid supports in an individual's life.	Feb 15, 2011 1:03 AM
701	Depending on the ability.	Feb 15, 2011 1:28 AM
702	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. The Lanterman Act Section 4501. The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 15, 2011 1:32 AM
703	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 15, 2011 1:38 AM
704	Again, we should consider restrictive to least restrictive support for consumers - encourage independence and growth.	Feb 15, 2011 1:41 AM
705	co-pay share of cost as able	Feb 15, 2011 1:52 AM
706	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 15, 2011 1:53 AM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
707	When a service need is agreed upon by the IT & circle of support, an obligation of both the consumer and parent(s) to participate with that service should reflect the average length of such service provided in the "typical" community. Monetary contribution by the consumer should be a prerequisitew for SLS consideration. Payment should be based upon the discretionary funds available to the financially responsible party(ies).	Feb 15, 2011 1:57 AM
708	?	Feb 15, 2011 1:57 AM
709	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 15, 2011 2:29 AM
710	Again, most parents are under financial pressure because of the extra expenses necessitated by caring for an adult with special needs while being unable to work FT outside the home because of the many hours of care required by their adult child. Parents should be responsible for supervising the care when feasible. (difficult for an elderly or ill parent to care for an adult child with severe special needs).	Feb 15, 2011 2:45 AM
711	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them, which it must discharge. The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 15, 2011 3:21 AM
712	parents or guardians are already doing what they can; by this time they have most likely exhausted their resources. let us all help	Feb 15, 2011 3:24 AM
713	It is the responsibility for the parents to research the qualifications of the care providers in order to have their loved ones cared for in a responsible and comfortable lifestyle. They should keep in touch with Regional Center on a routine basis to be sure both the agency and the care provider is in communication and compliance with the requirements of the job.	Feb 15, 2011 3:44 AM
714	See the Lanterman Act!!	Feb 15, 2011 4:08 AM
715	Regional Centers should be actively involved in mobilizing funds and support for affordable housing for developmentally disabled people (who are often on a very, very low income and thus excluded from most affordable housing).	Feb 15, 2011 4:23 AM
716	none	Feb 15, 2011 4:36 AM
717	No co-payment. Consumers and parents all attend an orientation for people who wants to be in supported living. Consumers must save enough money in order to pay rent. Money management is a must.	Feb 15, 2011 5:29 AM
718	see comments on Behavior services	Feb 15, 2011 5:41 AM
719	I think parents should have a co[payment and be directly involved in their child's care and treatment.	Feb 15, 2011 5:52 AM
720	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 15, 2011 6:06 AM
721	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 15, 2011 6:32 AM
722	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge (Lanterman Act Section 4501). The state does not ask parents and student for co-pays in California's pubic schools and the same logic applies here.	Feb 15, 2011 6:36 AM
723	consumers will learn to perform certain tasks within their abilities	Feb 15, 2011 7:05 AM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
724	Post public grades similar to childcare facilities and dining establishments	Feb 15, 2011 7:18 AM
725	Same as above.	Feb 15, 2011 7:33 AM
726	Must be involve.	Feb 15, 2011 12:09 PM
727	The Sate of Calif has accepted a responsibility for persons with Developmental disabilities and an obligation to them which it must discharge. The Lanterman Act Section 4501. The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 15, 2011 3:45 PM
728	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 15, 2011 4:06 PM
729	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California’s pubic schools and the same logic applies here.	Feb 15, 2011 4:23 PM
730	Parents should check i with the consumer and follow up on the daily routines and habits of their child. Everything should be documented and kepton record.	Feb 15, 2011 5:09 PM
731	It would be great if each consumer &/or parent could assist with some kind of co-payment and/or parents could commit to volunteering time. But realistically, what if the consumer and parent do not live near each other? What if the consumer prefers his/her own schedule to being with family? What if the consumer has no extra money because they don't have a job and they already cannot live on SSI? What if the parents already assist with living expenses and cannot commit to more? What if there aren't any family members?	Feb 15, 2011 5:24 PM
732	Continuation of current standards	Feb 15, 2011 5:57 PM
733	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 15, 2011 6:01 PM
734	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California’s pubic schools and the same logic applies here.	Feb 15, 2011 6:27 PM
735	If the client lives in a more expensive living arrangement, then the parent should be able to help pay the difference.	Feb 15, 2011 6:34 PM
736	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them, which it must discharge. The state does not ask parents and students for co-pays in California’s pubic schools and the same logic applies here.	Feb 15, 2011 6:34 PM
737	Parents and consumers should have time commitment and coorperate.	Feb 15, 2011 6:56 PM
738	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 15, 2011 6:58 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
739	Consumers receiving ILS services should demonstrates an understanding of the goals and expectations of the program in relation to individual goals and have the motivation to participate in and the ability to complete the program in relation to individual goals. Consumers receiving SLS should participate in the development of a plan of action to identify what services and supports are needed, what generic resources are available, and what supports will be provided by the regional center.	Feb 15, 2011 6:59 PM
740	Make parents/consumers aware of their responsibilities.	Feb 15, 2011 7:01 PM
741	a. Licensed community care facilities which provide 24-hour care and supervision; regional centers may provide supplemental funding, SSI-SSA would fund basic rate. b. Licensed health care facilities which provide 24-hour care and supervision, e.g., ICF, ICFDDN, SNF; Medi-Cal would be expected to fund. c. Room and boardthis service would be funded through SSI-SSA or the consumer's earnings. d. Family Home – Regional center staff should work with the consumer and family to identify needed services, e.g., equipment, respite care, attendant care, etc., which may be needed to enable the consumer to remain in the family home. RCOC does not fund for actual living Families should pay a share of cost for their children residing in out-of-home placement.None	Feb 15, 2011 7:13 PM
742	consumers must have co-pay and sign written contracts outlining their responsibilites and consequences for not following plan	Feb 15, 2011 7:16 PM
743	The parents have already spent an enormous amout of time, energy and dollars and I now feel that the Regional Center should be able to contribute something to help out.	Feb 15, 2011 7:41 PM
744	A 20% co-payment is reasonable. The time-commitment of the parents should be based on the nature of the individual's disability and the identified need for on-going parental intervention.	Feb 15, 2011 7:46 PM
745	Co-pay for adults might be difficult. But if possible a co-pay would be appropriate on a sliding fee scale.	Feb 15, 2011 7:54 PM
746	See suggestions for Behavior services and Day programs	Feb 15, 2011 7:56 PM
747	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 15, 2011 7:56 PM
748	Consumer is to participate in the therapy, and follow suggestions from the program supervisor, as well as to make notes and follow-through with the techniques showed in the therapy, throughout the day, There cannot be a specific co-payment because there are many families that barely can make ends meet and there cannot be a time commitment because it all depends on how well or not so well the consumer is doing: there are consumers who could progress fast and others could make really slow progress, which does not indicate that this last consumer does not need the behavior therapy; both need the therapy; this could only be determined by a Program Supervisor and a follow-up assessment.	Feb 15, 2011 8:17 PM
749	I don't believe you can mandate that parents take responsibility for their adult children. Some parents want to be involved and some do not. The consumer is a free standing agent with very little means of support. I don't think you can have the consumer who lives on SSA/SSI paying any copayments. They really have no money to spare.	Feb 15, 2011 8:19 PM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
750	Same as above. Time commitment in this class is for life.	Feb 15, 2011 9:02 PM
751	If applicable, either co-payment or a time committment should be considered.	Feb 15, 2011 9:18 PM
752	Co payment to families	Feb 15, 2011 9:20 PM
753	Parents and family members already perform many responsibilities in supporting and advocating for their family members, as well as caring for them. No additional burden should be placed on families.	Feb 15, 2011 9:47 PM
754	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge.(Lanterman Act 4501). The state does not ask parents and students for co-pays in California public schools and the same logic applies here.	Feb 15, 2011 9:59 PM
755	Standard: Family members of adult consumers shall not pay a co-payment. We don't pay our adult children's Medi-Cal copayments, and we shouldn't pay DDS copayments. Standard: Co-payments shall be on a sliding scale commensurate with ability to pay. Parents of children going to college know all about FAFSA. How many kids you have in college makes a big difference in what they pay. Do something similar.	Feb 15, 2011 10:06 PM
756	The Independent Living Center board members are all disabled. They commit to volunteer a large amount of time to participation in many programs and services provided by the Independent Living Center. E.g., they host information tables at Health Fairs and Senior Information Fairs, and do many volunteer tasks, mailings, donate time and money, attend events, do office work, etc., as they are able.	Feb 15, 2011 10:07 PM
757	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them, which it must discharge. The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 15, 2011 10:31 PM
758	The state of CA has accepted a responsibility for persons with developmental disabilities and an obligation to them, which it must discharge. The state does not ask the parents and student for co-pays in CA schools, nor should it ask parents and consumers of these services.	Feb 15, 2011 11:17 PM
759	Parents have many responsibilities when it comes to taking care of these children or adults that need lots of assistance.	Feb 15, 2011 11:21 PM
760	Familial income needs to be considered a "generic" resouce and families making a certain percentage above the cost of living for their geographical area should contribute. SSI recipients should have no cost for the service.	Feb 15, 2011 11:24 PM
761	When possible, families should be asked to cover some time, such as 1-2 weekends a month. Exceptions to this must be allowed so that individuals who have family unable to provide adequate supports due to physical or emotional challenges are not required to do so. Also, individuals who do not have family should not be penalized or barred from receiving sls or ils services just because they do not have families that can participate in direct caregiving.	Feb 15, 2011 11:25 PM
762	Adults, no responsibilities. SLS is for support, not maid service, consumer has to be active participant along with the service.	Feb 15, 2011 11:29 PM
763	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California 's pubic schools and the same logic applies here.	Feb 15, 2011 11:33 PM
764	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 16, 2011 12:00 AM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
765	parents/friends should be asked to cover an agreed upon amount of time based on IPP and individual ability to participate. Individuals with no family supports should not be penalized or barred from receiving services if no natural supports are available.	Feb 16, 2011 12:01 AM
766	Consumers offered the opportunity for independent/support living should be responsible enough to keep themselves free of danger.	Feb 16, 2011 12:03 AM
767	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge (Lanterman Act Section 4501). The state does not ask parents and student for co-pays in California's pubic schools and the same logic applies here.	Feb 16, 2011 12:19 AM
768	co-payments will make the service more valuable being present and participating and making progress	Feb 16, 2011 12:42 AM
769	All these clients (all adults) need a Conservator if not of mental capacity. If not the Conservator themself providing the supports, then purchased Service Provider should not suffice in lieu of Conservator who is accountable to the Court and any civil action that may be brought against the client for actions they may commit by their "independent" actions which are supposed to be under the supervision of the court-appointed Conservator. Includes Conservator oversight on handling of personal funds of client if Court agrees - as "third party" payees being hired and paid for by Reg. Ctr., need better coordination with client's needs than just a once-year face contact Reg. Ctr. case mgr.	Feb 16, 2011 1:14 AM
770	Someone needs to get our government to STOP threatening to take services away	Feb 16, 2011 1:21 AM
771	TIME COMMITMENT	Feb 16, 2011 2:19 AM
772	if consumer is an adult this may not apply	Feb 16, 2011 2:28 AM
773	I think if the state didn't provide funding for ILS, neither I nor my family would be able to pay for ILS services. I would not be able to live independently without ILS services.	Feb 16, 2011 2:41 AM
774	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 16, 2011 3:04 AM
775	sliding scale	Feb 16, 2011 3:55 AM
776	Parents are hamstrung because of the privacy issues so it is difficult to set responsibility standards.	Feb 16, 2011 3:56 AM
777	Consumers and parents should exhibit a great deal of willingness to follow through with the service.	Feb 16, 2011 4:29 AM
778	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 16, 2011 4:47 AM
779	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 16, 2011 5:05 AM
780	if needed and chosen by consumer	Feb 16, 2011 5:19 AM
781	State funed, Maybe some co-payments	Feb 16, 2011 5:29 AM
782	The state of Calif is obligated under The Lanterman Act which obliges the state to comply with this obligation The state doesnt ask parents to pay for school for kids same logic	Feb 16, 2011 5:31 AM

6. Suggested service standards about the responsibilities of parents and

	Response Text	
783	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's public schools and the same logic applies here.	Feb 16, 2011 5:31 AM
784	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Action Section 4501). The state does not ask parents and students for co-pays in California public schools and the same logic applies here.	Feb 16, 2011 5:41 AM
785	Should be based on severity of service supports needed and the ability of the family members to fiscally or phisically care for the individuals.	Feb 16, 2011 5:41 AM
786	The State of California has accepted a responsibility for persons with developmental disabilities and an obligation to them which it must discharge. (The Lanterman Act Section 4501). The state does not ask parents and students for co-pays in California's pubic schools and the same logic applies here.	Feb 16, 2011 6:10 AM
787	Now knowing about the time/money cutbacks, this is obviously at the heart of what is offered as services. The anxiety and adjustment period to not receiving specific services and the time to disseminate over a period of time allocated. It is hard to think that only the quality of life will go down considerably.	Feb 16, 2011 6:48 AM
788	Allow self-directed or self-determination program like San Diego county.	Feb 16, 2011 7:09 AM
789	for the families that are not on a fixed income, yes, ask them for a co-payment.	Feb 16, 2011 7:38 AM
790	There should not be co payments or means testing. Families have enough expenses dealing with their DD family member. They do not need to be disqualified based on random numbers produced by a government agency. It is so expensive to live in California already. Demanding copayments at this time could eliminate consumers from accessing services which will keep them in the less expensive option and the best quality of life..... on their own and not in group homes or institutions!	Feb 16, 2011 7:51 AM

7. Suggested service standards about self-directed or self-determination

	Response Text	
1	Ask for a plan or periodic reports. Do spot checks to ensure quality service is provided.	Jan 28, 2011 1:06 AM
2	supported living is the closest thing to self-directed services; it makes perfect sense that after the indiviudal assessment that a good plan is developed, that there is an appropriate amount of funding both generic and disability oriented and then the individual should also be putting money into the cost of living in the community by working, family contribution, when appropriate, etc.	Jan 28, 2011 1:13 AM
3	Provide the appropriated annual funds to the individual and let the individual locate an agency that will provide the service.	Jan 28, 2011 1:13 AM
4	goals and objectives	Jan 28, 2011 1:16 AM
5	Consumers should be given the same amount as applied towards services for those not under self-determination.	Jan 28, 2011 1:19 AM
6	ICB PASSED LAST YEAR AND NOTHING HAS BEEN IMPLEMENTED.	Jan 28, 2011 1:26 AM
7	available	Jan 28, 2011 1:37 AM
8	ICB	Jan 28, 2011 1:51 AM
9	Should be Self-directed or self-determination in choosing agency. Regional Center can be a broker to connect consumers and agency.	Jan 28, 2011 2:05 AM

7. Suggested service standards about self-directed or self-determination

	Response Text	
10	No self determined services	Jan 28, 2011 2:10 AM
11	see WAPADH	Jan 28, 2011 2:13 AM
12	It is completely unfair that some people have to live in group homes and share bedrooms and live without any choice in what they eat or how their SSI funds are used. All clients need and their families need to know that they have the right to SLS too.	Jan 28, 2011 2:18 AM
13	I agree that all services need to be decided on my consumer choice.	Jan 28, 2011 2:20 AM
14	As stated before, whenever ossible the consumer should be in the driver's seat!	Jan 28, 2011 2:39 AM
15	If the consumer doesn't have input in the choice of where or how they live, behavioral problems, anxiety symptoms, and other issues will require services that cost above what the living arrangement costs the state.	Jan 28, 2011 3:01 AM
16	if a consumer has the ability to choose such a service then the right should be theirs	Jan 28, 2011 3:12 AM
17	none	Jan 28, 2011 3:17 AM
18	The person receiving support, a conservator or an advocate can determine that this is an appropriate option for this person.	Jan 28, 2011 3:35 AM
19	Lanterman Act. Needs of the consumer as written in the IPP	Jan 28, 2011 3:45 AM
20	It should be taken into consideration what types of neighborhoods we place the DD population. Many times the housing is in unsafe neighborhoods.	Jan 28, 2011 4:05 AM
21	Dont think it will work.	Jan 28, 2011 4:30 AM
22	no ideas at this time	Jan 28, 2011 4:40 AM
23	I would love this	Jan 28, 2011 5:00 AM
24	just do it!	Jan 28, 2011 5:19 AM
25	Do not put restrictions on supported living services such as imposing peer roommates -- it would no longer be supported living. Ask for the individual to explore cost saving options such as peer roommates, and allow for the individual's needs and situation to be at the center of the decision making process -- person centered planning.	Jan 28, 2011 5:30 AM
26	1) Such options may be limited by their nature. Should "self-determination" become overwhelming the Centers may not be able to fulfill their responsibilities and service standards.	Jan 28, 2011 5:45 AM
27	See previous comments.	Jan 28, 2011 6:15 AM
28	Always include the consumer in decisions about their own service plans and delivery.	Jan 28, 2011 6:23 AM
29	Parental oversight, organizing, coordinating, staffing, transporting are unreimbursed unreimbursed in all scenarious, including traditional ILS/SLS and in SDS or ICB scenarios.	Jan 28, 2011 6:29 AM
30	Needs to be the priority for the services! Staffing needs to be educated about what SLS is. That it is not babysitting and adult but providing the supports for them to have a full life.	Jan 28, 2011 6:43 AM
31	(see #1)	Jan 28, 2011 6:44 AM
32	Every person served should pick members of a Circle of Support, to help them to live successfully and happily. Every person served should be able to pick their own support staff, from among qualified candidates. Every person served should be able to believe that an organization would screen applicants to weed out unqualified candidates, and would fire support persons who were mistreating the person in any way.	Jan 28, 2011 6:44 AM

7. Suggested service standards about self-directed or self-determination

	Response Text	
33	There should be identical standards for self directed, self determination and outside service agency. Do not use varying standards depending on the funding source or the program.	Jan 28, 2011 7:10 AM
34	Services should be self directed and allowable given budgets that are less than the congregate alternative. Remebering developmental centers are costing an average of $340,000 per year, even people with the most significant disabilities should be able to live, work and recreate with their non disabled peers. The promise of the Lanterman Act is still a fiscally responsible alternative to congregate supports.	Jan 28, 2011 7:17 AM
35	Have inspections to continue verified living	Jan 28, 2011 7:23 AM
36	Provide consumers the funding they need to choose who they want for their independent living program and what service(s) to buy from different programs.	Jan 28, 2011 7:54 AM
37	People with disabilities should certainly be allowed to be part of the decision process.	Jan 28, 2011 9:07 AM
38	They are the most self-directed if properly delivered.	Jan 28, 2011 2:31 PM
39	By definition consumers with Moderate to Profound levels of intellectual disability are NOT able to self-direct their support staff. These levels of retardation should be an automatic exclusion from SLS supports.	Jan 28, 2011 4:37 PM
40	Community living encourages a life to be as normal as possible as well as it builds up the client's confidence in themselves.	Jan 28, 2011 4:44 PM
41	Adults should be able to make this decision and it be funded.	Jan 28, 2011 4:55 PM
42	I have to think about this.	Jan 28, 2011 4:56 PM
43	Do not allow self-directed use of state funds in this area, as the potential for fraud and abuse is overwhelming. Without proper auditing and evaluation, there will be no way to tell if the individual is meeting a basic standard of care or receiving instruction on a service plan.	Jan 28, 2011 4:57 PM
44	Do not use self-determination as a cost saver or an excuse to restrict or eliminate other types of service. Self-directed services will always cost more than the standard service delivery models if they are effective as they require another currently non-existent layer of review and oversight.	Jan 28, 2011 5:13 PM
45	Self determination and self directed standards are the cornerstone of Independent and Supported Living services. But it is hard to determine a standard because each consumer's Independent Living or Supported Living skills are highly variable. I guess if you had to have a standard, it would be measure against the IPP. (ie consumer will and has learned to shop on his/her own and prepare his/her own meals).	Jan 28, 2011 5:25 PM
46	All the same standards as mentioned above should apply	Jan 28, 2011 5:31 PM
47	Too often I hear from consumers, " My instructor is saying I need to...; so can I have..." how can that be consumer driven?	Jan 28, 2011 5:49 PM
48	Self directed services would open the door for massive fraud,	Jan 28, 2011 5:50 PM
49	The adult person with a disability decides how the services are to be carried out with direction from trained personnel and parents or trustees.	Jan 28, 2011 6:16 PM
50	Adult clients should make self determination with assistance from parents or caregivers, but it should be evaluated based on ability to thrive independently.	Jan 28, 2011 6:21 PM
51	Keep at the current rates and amounts.	Jan 28, 2011 6:21 PM
52	Good idea. If the person is able to be self-determining, then they are probably a good candidate. If they can not make it on the budget given, then perhaps SLS/ILS is not for them.	Jan 28, 2011 6:27 PM

7. Suggested service standards about self-directed or self-determination

	Response Text	
53	Also Regional Centers should be cut at an amount equal to the amount of services that are being reduced in the system. It makes no sense to reduce services by 20% then keep the same amount of administration from Regional Centers. They can do with a few less holidays and "flex days"	Jan 28, 2011 6:37 PM
54	Self-determined services would be ideal for both ILS and SLS but you shouldn't tease us. The failure to broaden the SDS program troubles the weary provider's heart, particularly as budgetary challenges that might have been reduced drive us all to the verge of bankruptcy and alcoholism.	Jan 28, 2011 6:47 PM
55	people with developmental disabilities need these services...they may not have the words themselves but their abilities should be taken into consideration	Jan 28, 2011 6:49 PM
56	always their choice	Jan 28, 2011 6:51 PM
57	Consumers should pay rent while using service. Consumers should have no more than 3 non consumer room mates to help pay rent. Provide rent reductions to room mates that help provide daily living services, cooking cleaning, washing cloths, grocery shopping....	Jan 28, 2011 6:55 PM
58	equality for all rcrc clients	Jan 28, 2011 7:02 PM
59	Any consumer who does not require supervision of finances or attendant management should be eligible for self-directed services.	Jan 28, 2011 7:07 PM
60	Self direction and determination is not limited to people who have the ability to communicate their own direction. This should include people of all communication abilities with or without advocates or "speaker on behalf"	Jan 28, 2011 7:10 PM
61	Everyone deserves the right to live in a home of their own. Not having a formal or traditional method of communicating should not preclude people from this option.	Jan 28, 2011 7:10 PM
62	Self-determination is not a cost saving mechanism nor should it continue to be used as an excuse to reduce or eliminate other types of services.	Jan 28, 2011 7:10 PM
63	*Everyone should, and have the right to, live in their own homes. Self-directed services and self-determination do not preclude people who do not have the ability to communicate traditionally, who do not have an advocate, or any of the aforementioned "labels".	Jan 28, 2011 7:11 PM
64	Current methods are sufficient.	Jan 28, 2011 7:28 PM
65	Consumers should be able to have input into the kind of services they need.	Jan 28, 2011 7:33 PM
66	Inherent to the service	Jan 28, 2011 7:35 PM
67	For some of our young adults who want to live on their own and especially with family members willing to play some role in facilitating housing, this is a preferable alternative. It eliminates some of the obstacles an agency has in running these projects ie employment issues.	Jan 28, 2011 7:36 PM
68	Flat rate stipends at median rates could be useful	Jan 28, 2011 7:43 PM
69	Each client should be able to participate in annual needs assessments and planning meetings with whatever assistance is needed.	Jan 28, 2011 8:02 PM
70	waste of time, lots of fraud.	Jan 28, 2011 8:11 PM
71	Participation in Disabled Assisted Living would be voluntary	Jan 28, 2011 8:18 PM
72	As much self determination as the client is capable of	Jan 28, 2011 8:25 PM
73	yes	Jan 28, 2011 8:35 PM
74	need to redirect the I have a disability so you owe me attitude into I have a disability but it does not get in my way much because I live in the great state of California and it HELPED me learn how best to help myself	Jan 28, 2011 8:39 PM

7. Suggested service standards about self-directed or self-determination

	Response Text	
75	As long as your department focuses on buying houses for long-term care living arangements for people coming out of the Regional Center Facilities, in say, the Bay Area, then nothing else can be addressed because you spent all the money on a few privilaed individuals, losing site of your responsibility to reach the most with what we have collectively.	Jan 28, 2011 8:47 PM
76	again, not require a service coordinator if there is another person that could be that person in their life for no cost or less cost than a RC Service Coordinator	Jan 28, 2011 8:49 PM
77	Self-determination is not a cost saving mechanism unless the State is actively cheating people, nor should it continue to be used as an excuse to reduce or eliminate other types of services (as it has been for the last two years	Jan 28, 2011 8:50 PM
78	Service standard should achieve the promise that people with intellectual and developmental disabilities will have an individualized program plan and access to the services and supports best suited to them throughout their lifetime, to enable them to live an independent, self-directed, and typical life.	Jan 28, 2011 8:56 PM
79	See response to question #1 of this section.	Jan 28, 2011 9:22 PM
80	See prior.	Jan 28, 2011 9:23 PM
81	Ditto per previous comments	Jan 28, 2011 9:29 PM
82	Use the same rate structure as listed above. Service hours and needs determined through ISP process and ability to be independent at times.	Jan 28, 2011 9:45 PM
83	Goals of individual service plan and activties are consumer-centered.	Jan 28, 2011 9:52 PM
84	Funded through self-directed budget.	Jan 28, 2011 10:11 PM
85	no suggestions	Jan 28, 2011 10:20 PM
86	--	Jan 28, 2011 10:39 PM
87	self directed	Jan 28, 2011 10:45 PM
88	Allow.	Jan 28, 2011 11:05 PM
89	see above	Jan 28, 2011 11:06 PM
90	no comment	Jan 28, 2011 11:19 PM
91	Do not provide these options.	Jan 28, 2011 11:22 PM
92	it is obvious that i am pushing for this for everyone -- 240,000 people	Jan 28, 2011 11:22 PM
93	Allow options if an individual is willing to work with the program. If a client is non compliant with 50% or more of theservice supports over a 12 month period of time and teams meetings have been held to help the client identify the supports desired/wanted, funding should be discontinued.	Jan 28, 2011 11:57 PM
94	Family or caregivers should be involved in a positive way.	Jan 29, 2011 12:00 AM
95	Based upon the historical expenditure for services for the individual, minus 10%, and use of an adequate resource mechanism, there is no reason why self-directed or self-determined residential services cannot be folded into independent or self directed services.	Jan 29, 2011 12:43 AM
96	Same as reported befor in this survey	Jan 29, 2011 12:45 AM
97	Everyone should be encouraged to express their preference and assisted to make informed decisions	Jan 29, 2011 1:04 AM
98	7. Self Directed or Self Determination Options Require the person/patient/guardian to participate in therapeutic evaluation, goal development, progress monitoring and therapy determination to the best of their abilities	Jan 29, 2011 1:34 AM
99	Help s work at home if we get care so we can buy extras we need that the state doesn't pay for.	Jan 29, 2011 1:39 AM

7. Suggested service standards about self-directed or self-determination

	Response Text	
100	I understand currently there is no self directed or self determination options for services. A client must go via the Regional Center and then pass an interview with a IHSS social worker who determines the level of support needed to keep the client in the home. What would 'self-directed' options be?	Jan 29, 2011 2:37 AM
101	Selt Direct	Jan 29, 2011 3:44 AM
102	optional	Jan 29, 2011 4:42 AM
103	n.a.	Jan 29, 2011 5:06 AM
104	No one should be cut	Jan 29, 2011 5:09 AM
105	Ask the parents	Jan 29, 2011 6:36 AM
106	don't know	Jan 29, 2011 6:42 AM
107	Third party fed back loops.	Jan 29, 2011 7:45 AM
108	n/a	Jan 29, 2011 7:59 AM
109	Service standards, This should be very clear. To keep client out of a institution. This service enables clients to live at home saving the State thousands of dollars monthly. The standard should be the same as the care facility. All of the clients needs need to be meet. Safe, secure interviroment & all medical conditions cared for. Standard of needs to be set by doctor and physiologist.	Jan 29, 2011 4:04 PM
110	The same standards could apply to self-directed or self-determination service options, just a wider and more inclusive choice of services available.	Jan 29, 2011 7:28 PM
111	High quality instructors that are paid a reasonable wage. Many companies are having to pay mimium wages and the workers do not have the skill or knowledge to do the job. Instruction should be what it is instruction not a service that provides the clients cooking, cleaning and transportation.	Jan 29, 2011 7:38 PM
112	AS MUCH A POSSIBLE	Jan 29, 2011 11:50 PM
113	A case-by-case determination would be needed.	Jan 30, 2011 12:32 AM
114	almost everyting in these programs is to give the consumer the power of self-direction and determination of their living environment if properly implimented	Jan 30, 2011 12:42 AM
115	SELF DETERMINATION OPTION - YES.	Jan 30, 2011 3:59 AM
116	Parents need to be in the loop and have a big say on whether they work with a particular person.. So many are ineffectual adn do not communicate and this is unacceptable and a waste of time and money.	Jan 30, 2011 4:59 PM
117	SDS is possible with this group of consumers, but again should be very clear and voluntary. If implemented, consumers need to know what their services cost, if the same rates would be charged to them as independent purchasers, and what other obligations (eg: taxes, workers' comp) they might encounter.	Jan 30, 2011 6:10 PM
118	As I mentioned previously, this should have been implemented long ago.	Jan 30, 2011 9:10 PM
119	None	Jan 31, 2011 2:51 PM
120	same	Jan 31, 2011 3:45 PM
121	None	Jan 31, 2011 5:47 PM
122	Most of these clients can make decisions on who they want taking care of them. They only need assistance when their ability to make a rational, good, safe decision is clouded by outside pressure by others. Then intervention should be evaluated.	Jan 31, 2011 6:02 PM
123	There should be a team with includes the consumer, family, and regional center staff to help make the right choices.	Jan 31, 2011 6:09 PM
124	SLS could be designed on the model that East Bay Services designs their satellite homes. A home for approximately 4 people could be combined with one SLS person at a time for the 4 people rather than the present 1 on 1 arrangement.	Jan 31, 2011 6:26 PM

7. Suggested service standards about self-directed or self-determination

	Response Text	
125	This is the age group where self-determination needs to be taken into account but not totally - if the young adult chooses not to work but to stay home and watch TV that does not provide an avenue for a producive life style and should not be allowed as an option.	Jan 31, 2011 6:33 PM
126	As much as possible the client should be involved in these services.	Jan 31, 2011 6:39 PM
127	It must be clearly documented that the consumer can afford to live independently and not use any monies from the self-directed or self-determination budget to supplement his/her monthly expenses	Jan 31, 2011 6:41 PM
128	Client should attend periodic meetings to go over goals.	Jan 31, 2011 6:57 PM
129	none	Jan 31, 2011 7:26 PM
130	Consumer's wishes for independence and inclusion in the community should take precidence	Jan 31, 2011 7:36 PM
131	* Everyone has the right to live in their own homes. Self-directed services and self-determination do not preclude people who do not have the ability to communicate traditionally, who do not have an advocate, or any of the aforementioned "labels".	Jan 31, 2011 8:14 PM
132	A person who is intellectually able should be allowed to control their services. Any paid consultation should meet vendorization standards and their should be some external review. It has been my experience that consumers without at least an "ombudsman" role attached to their case often falls victim to unscupulous persons when they try to direct their own services.	Jan 31, 2011 8:23 PM
133	do not understand	Jan 31, 2011 9:03 PM
134	No self directed services.	Jan 31, 2011 9:15 PM
135	Low cost, affordable housing should be required.	Jan 31, 2011 9:22 PM
136	Self-determination is not a cost saving mechansim unless the State is activley cheating people nor should it continue to be used as an excuse to reduce or eliminate other types of services (as it has been for the last two years)	Jan 31, 2011 9:30 PM
137	I believe that consumers should have more input regarding their needs. Note: Provision is always made for psychiatric counseling and related medications; however, I believe that if services were provided to support consumers "social activities", such as church, hobbies, etcetera, it is possible that they would have less need for the psychiatric counseling and medications. I also believe that some of the psychiatric medications hamper their ability to function. Of course, that is only my opinion, and I am not a professional, so I could be wrong.	Jan 31, 2011 9:32 PM
138	For this area, this is critical. For all people for whom these services are an option, there should be some degree of choice built in to how and where they wish to live their lives.	Jan 31, 2011 9:41 PM
139	Let's make the budget process and the paper work process as easy as we can for families and people with disabilities.	Jan 31, 2011 9:52 PM
140	Some folks really need support in one area (for example, help with money or help with doctor appointments). It's not a training need, so ILS is not appropriate, but they do not require all the services that come with SLS. It would be in everyone's best interest to have an option to select "domains" of service rather than the entire SLS package and I believe that self directed services can accomplish this.	Jan 31, 2011 9:54 PM
141	??	Jan 31, 2011 10:31 PM
142	none	Jan 31, 2011 10:40 PM
143	Same as SLS.	Jan 31, 2011 10:54 PM
144	local regional centers should judge	Jan 31, 2011 11:27 PM

7. Suggested service standards about self-directed or self-determination

	Response Text	
145	Overall cost for any service should not exceed the median rates for CCF's or ICFs. If a higher level of support is needed than the consumer needs to be placed in an appropriate facility.	Feb 1, 2011 12:22 AM
146	No 24/7 services for self-directed or self-determination	Feb 1, 2011 1:21 AM
147	Microboard administration and only fund consumer choice driven options. End the tyranny of the Regional Centers.	Feb 1, 2011 1:43 AM
148	Again I agree that the consumer should drive the services, but I think we must be real about this. These folks need our oversite and care. We can not pat ourselves on the back and say" Hey they are living independently", when really we are neglecting what they need, a little more assistance. They are developmentally disabled... it means they can not think correctly about all things. HELP out.	Feb 1, 2011 3:15 AM
149	as needed	Feb 1, 2011 5:18 AM
150	no	Feb 1, 2011 5:19 AM
151	N/a	Feb 1, 2011 5:24 AM
152	see other answers for previous questions - same	Feb 1, 2011 5:59 AM
153	The *consumer*, not the State, should determine his/her options. That is, in fact, what self-direction means. The costs for the service should be up to the amount that the State would pay if the consumer would be institutionalized.	Feb 1, 2011 7:15 AM
154	In-home support services should be available with the manner in which these services are provided is determined by the provider and the client. Better paratransit needed.	Feb 1, 2011 8:55 AM
155	Independence	Feb 1, 2011 9:46 AM
156	This would be similar to #6 above.	Feb 1, 2011 10:46 AM
157	N/A	Feb 1, 2011 6:18 PM
158	they don't have to use a RC person if they don't find it to be useful	Feb 1, 2011 6:38 PM
159	Keep it out of the RC court.	Feb 1, 2011 6:48 PM
160	n/a	Feb 1, 2011 6:51 PM
161	Cap the cost to the amount that would be paid if the person were in a licensed facility	Feb 1, 2011 6:54 PM
162	Current service standards could be reduced by a maximum of 15%.	Feb 1, 2011 7:25 PM
163	Let organizations self police and have Regional Center periodically spot check. DDS sets the standards. DDS sets the rates. DDS and RC must be confident that the organizations are providing the services they say they are providing. DDS and RC must monitor and spot check.	Feb 1, 2011 7:36 PM
164	Same	Feb 1, 2011 7:44 PM
165	1) "Purchase of Service Limits" is a more appropriate name than "standards." 2) We oppose statewide purchase of service "standards." 3) There is no "one size fits all" solution. Purchase of service standards for each individual are defined by the IPP. 4) "Up to but not to exceed the cost to house one individual in a Developmental Center."	Feb 1, 2011 7:56 PM
166	Individuals and families should be able to choose from qualified vendors.	Feb 1, 2011 8:31 PM

7. Suggested service standards about self-directed or self-determination

	Response Text	
167	1) "Purchase of Service Limits" is a more appropriate name than "standards." 2) We oppose statewide purchase of service "standards." 3) There is no "one size fits all" solution. Purchase of service standards for each individual are defined by the IPP. 4) For questions 3 & 4: These standards already exist. 5) "Up to but not to exceed the cost to house one individual in a Developmental Center."	Feb 1, 2011 9:15 PM
168	Uncertain how this would work.	Feb 1, 2011 9:27 PM
169	Consumer should be asked how the services are delivered.	Feb 1, 2011 9:40 PM
170	Allow for Individual Service Accounts that could be used to allow for consumer's/families to fund for support needs that are not being met through IHSS. Limit use of vendored agencies to training services.	Feb 1, 2011 9:49 PM
171	Services for self-directed services should be available.	Feb 1, 2011 10:02 PM
172	The client and their TEAM shall make all these decisions-this is a basic human right	Feb 1, 2011 10:13 PM
173	If a consumer is able to decide to live independently then they should be allowed to do so with assistance. It is cheaper to allow a person to live independently with SLS services than to place then in a residential facility.	Feb 1, 2011 11:20 PM
174	If individual consumers can decide, they should be encouraged to do so.	Feb 1, 2011 11:54 PM
175	not sure	Feb 2, 2011 12:27 AM
176	absolutely! Parents/guardians/custodians should always have the opportunity to care for a child without the use of ILS or SLS agency services. A voucher system-- perhaps $25k a year--should be available for the consumer's caregivers to use toward housing and caring for the disabled adult.	Feb 2, 2011 12:35 AM
177	My Case Manager chooses what goals I am currently working on. She also is open to new goals at my request. I find this process helpful and the service provided is exceptional.	Feb 2, 2011 12:53 AM
178	I would like to be more involved in the choice of ILS goals and job coaching goals. I have expressed top ILS Instructor and service coordinator that I would like to work on the goal of reading. I would like to continue to be more involved in deciding goals.	Feb 2, 2011 1:00 AM
179	none	Feb 2, 2011 1:22 AM
180	I believe this doesn't apply to independent living training.	Feb 2, 2011 2:00 AM
181	Really? YOU pay $3,600/month for self-directed services when you only bring home $4,900/month. Where do groceries, housing, clothing, medical fit in?	Feb 2, 2011 2:36 AM
182	Self-determination is important for the client. Follow up is important	Feb 2, 2011 2:47 AM
183	Stop giving out SSP checks twice a year, it clearly shows by our consumers a dependency which I have observed personally that clients fall in to trap of expecting it not for household items but drugs and alcohol.	Feb 2, 2011 4:48 AM
184	no comment	Feb 2, 2011 5:03 AM
185	Help with critical decisions; freedom with others.	Feb 2, 2011 5:21 AM
186	Self determination would work for these services as long as it is funded well, has brokers & providers. I am familiar with this option & it saves money in the long run.	Feb 2, 2011 5:33 AM
187	Should be required of all 16 year old foster kids in the system.	Feb 2, 2011 5:48 AM
188	Criteria should be the same for self directed as it is for non self directed services. Workers should be evaluated on a regular basis.	Feb 2, 2011 6:00 AM

7. Suggested service standards about self-directed or self-determination

	Response Text	
189	These services should be available initially to anyone who requests them, with a 1-year or 6-month review period for necessity. They should not be taken away abruptly, if they need to be phased out, a 3- to 6-month phase-out period is the minimum that is appropriate. Affected adults should be allowed to provide input on which services would be most helpful to then, and pick and choose the agency(ies) that would provide those services in a way that they would prefer.	Feb 2, 2011 6:03 AM
190	should be included to the greatest extent possible.	Feb 2, 2011 6:35 AM
191	Only if they pay for it	Feb 2, 2011 1:56 PM
192	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 2, 2011 3:35 PM
193	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 2, 2011 4:55 PM
194	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 2, 2011 5:51 PM
195	The lowest cost, most minimal service should be provided.	Feb 2, 2011 6:29 PM
196	a	Feb 2, 2011 6:51 PM
197	In this area, ILS and SLS could be used in a self directed area. Parents or consumers could be given a specific sum to use to provide these services. SLS is doing this now in Parent as Vendor SLS programs, although the cost varies greatly.	Feb 2, 2011 7:41 PM
198	Should be included but SD budget model has to be tighter with limits on annual growth.	Feb 2, 2011 8:27 PM
199	?	Feb 2, 2011 9:27 PM
200	This question cannot be answered until California has a clearly defined mechanism for implementing self-directoed or self determination options.	Feb 2, 2011 9:38 PM
201	NONE	Feb 2, 2011 9:43 PM
202	Yes only an individual knows if they need these service or no they can work things out another way	Feb 2, 2011 9:47 PM
203	???	Feb 2, 2011 10:11 PM
204	Do not implement a $750 million cut to the Department of Developmental Services (DDS) budget. It is too drastic! We need these services for our kids on the spectrum!	Feb 2, 2011 10:12 PM
205	What are the implementing standards and definition of self-directed or self-determination options?	Feb 2, 2011 10:15 PM
206	Please previous topic response....	Feb 2, 2011 10:19 PM
207	the services should be completely at the client's/parent's discretion, including choice of providers. Should not be limited to existing providers if they don't provide the service the client wants. Service providers should not be discouraged from becoming vendorized, as is done now.	Feb 3, 2011 12:06 AM
208	None	Feb 3, 2011 12:19 AM
209	Same answer as previous pages	Feb 3, 2011 12:45 AM
210	if you are that capable you may not need services, my son depends on us to maiuntain his health every day he is a type 1 diabetic witgh down syndrome i can not get servicves because of liability and agency regulations	Feb 3, 2011 12:51 AM
211	These services should be under the direction of a regional center, the client and his/her IPP team.	Feb 3, 2011 12:53 AM
212	Consumers who receive these services need to show a real commitment to meeting their goals to becomming more independent.	Feb 3, 2011 12:57 AM

7. Suggested service standards about self-directed or self-determination

	Response Text	
213	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 3, 2011 1:00 AM
214	Again, provide participant-directed option at capped cost.	Feb 3, 2011 1:15 AM
215	If the adult is capable, the responsibility should rely with him/her. If more support is needed, then it should be provided on a case by case basis.	Feb 3, 2011 1:24 AM
216	Should be available at the same rate that Regional Center pays ILS agencies Using this as the gold standard would get rid of the bad agencies	Feb 3, 2011 1:40 AM
217	Please! Consumers and their families are often far more motivated and qualified to find appropriate services than the regional center counselors and case managers.	Feb 3, 2011 1:49 AM
218	Whenever possible the consumer should participate in determining which services she needs.	Feb 3, 2011 1:51 AM
219	Communication is a must!	Feb 3, 2011 1:58 AM
220	N/A	Feb 3, 2011 2:04 AM
221	When my sister was forced out of the State Hospital and into the community, we were told she requested it. Hard for me or anyone in our family to believe, since my sister does not think abstractly, cannot speak in sentences, and is only interested in magazines. Maybe the persons mental facilities/capabilities should be looked at before they are put into "independent living situations".	Feb 3, 2011 2:51 AM
222	self directed after the age of 18 unless guardianship has been taken	Feb 3, 2011 5:12 AM
223	If the individual can afford it, why not, if not, then maybe the family or the estate can help.	Feb 3, 2011 5:32 AM
224	same as today.	Feb 3, 2011 6:48 AM
225	Same standards as Valley Mountain Regional Center.	Feb 3, 2011 6:50 AM
226	No Comment	Feb 3, 2011 6:52 AM
227	should be available and evaluated on an individual basis	Feb 3, 2011 6:57 AM
228	None.	Feb 3, 2011 3:36 PM
229	Possibly less support but the idea of NO support is unacceptable!	Feb 3, 2011 4:32 PM
230	Don't understand question.	Feb 3, 2011 4:46 PM
231	People should be able to direct their own services, including hiring their own staff. People who abuse the system by engaging in illegal behavior or putting themselves or their caregivers in jeopardy should have their supported living services revoked and live in a situation with more supervision and support.	Feb 3, 2011 4:53 PM
232	With RC case management consultation and guidance	Feb 3, 2011 5:17 PM
233	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 3, 2011 5:23 PM
234	Most services should be self-directed with structures created so that consumers can take more control while balancing the wise use of public dollars.	Feb 3, 2011 5:37 PM
235	No Comment	Feb 3, 2011 5:44 PM
236	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 3, 2011 5:46 PM
237	No SDS!!!	Feb 3, 2011 5:50 PM
238	I think consumers have right to choose living options as long as they are not conserved.	Feb 3, 2011 6:25 PM
239	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options	Feb 3, 2011 6:39 PM

7. Suggested service standards about self-directed or self-determination

	Response Text	
240	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 3, 2011 6:50 PM
241	none	Feb 3, 2011 6:55 PM
242	The question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self determination options.	Feb 3, 2011 7:23 PM
243	Not sure	Feb 3, 2011 7:49 PM
244	I don't understand this question.	Feb 3, 2011 7:54 PM
245	Self-determiation is not possible by some individuals so I don't know how to answer this.	Feb 3, 2011 8:09 PM
246	This should be provided in the IPP process due to variation of responses per individual.	Feb 3, 2011 8:51 PM
247	Please clarify this category!!	Feb 3, 2011 9:02 PM
248	Create quality jobs for people with disability. Create mentorships with supports. Are there any Regional Center ADA standards for self-determination such as the Community Choice Act?	Feb 3, 2011 9:17 PM
249	Could be very cost effective and allow flexibility not truly possible in a unit of service billing model.	Feb 3, 2011 9:17 PM
250	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 3, 2011 9:20 PM
251	Same as comments in other earlier sections of the survey.	Feb 3, 2011 9:38 PM
252	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 3, 2011 9:44 PM
253	n/a	Feb 3, 2011 9:53 PM
254	I don't know	Feb 3, 2011 10:19 PM
255	Services must still be chosen by the team. The team must be able to choose the agency that they would most like to work with. This is absolutely necessary. I just think that the above mentioned way of reducing services over time, forcing agencies, clients, and families to focus on independence must be adhered to, independent of the agency chosen to work with the client.	Feb 3, 2011 10:37 PM
256	DDS must have a clearly defined mechanism for implementing such services before any suggestions can be made. Again, the IPP team is the only appropriate body able to determine what services are required by each individual.	Feb 3, 2011 10:45 PM
257	Regular input from clients on all their concerns.	Feb 3, 2011 10:54 PM
258	As currently set.	Feb 3, 2011 11:12 PM
259	Client choice should be respected and the team should be involved.	Feb 3, 2011 11:13 PM
260	Not sure what is being asked regarding "self-directed".	Feb 3, 2011 11:18 PM
261	These individuals need assistance to obtain these services.	Feb 3, 2011 11:34 PM
262	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 3, 2011 11:44 PM
263	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options	Feb 4, 2011 12:06 AM
264	Whichever is needed	Feb 4, 2011 12:11 AM
265	None.	Feb 4, 2011 12:19 AM
266	See above answer 4.	Feb 4, 2011 12:53 AM
267	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 4, 2011 1:06 AM

7. Suggested service standards about self-directed or self-determination

	Response Text	
268	The state must emplement clear guidelines for self determination options.	Feb 4, 2011 1:22 AM
269	Self determination would also be helpful in thise area. XXX amount of money is to be provided to each consumer. They can chose what programs would be most helpful.	Feb 4, 2011 1:30 AM
270	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 4, 2011 1:52 AM
271	Adults and their support team should be the only ones who determine this type of support. These services should not be guided by standarized time frames.	Feb 4, 2011 2:02 AM
272	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 4, 2011 2:07 AM
273	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 4, 2011 2:49 AM
274	no self direct	Feb 4, 2011 3:11 AM
275	What does this question mean?	Feb 4, 2011 3:41 AM
276	Parents, clients, circle of support of the person should be involved re the service standards	Feb 4, 2011 3:52 AM
277	These should be expanded over the current levels. This is especially he case for those people who are interested in supported employment. Companies should be given tax breaks and other incentives for hiring the disabled. Pay now or pay more latter.	Feb 4, 2011 4:42 AM
278	There can be no blanket rule on this as each consumer has very different abilities and needs.	Feb 4, 2011 4:58 AM
279	Supported living should be determine by the consumers capability or independence, and cases should be reviewed by the department making sure that the budget is not abused.	Feb 4, 2011 5:27 AM
280	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 4, 2011 6:42 AM
281	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 4, 2011 7:36 AM
282	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 4, 2011 3:17 PM
283	This is such an inappropriate question. How can someone in need self-direct or determine their needs? Our adult son needs services because he cannot function on his own.	Feb 4, 2011 3:54 PM
284	More support to those clients who wish to move from a group home setting to a more independent living style. Perhaps visits, counseling, "trial runs" and information to assist them in making this change.	Feb 4, 2011 3:55 PM
285	Right to choose depending on their mental capabilities, may need an advocate.	Feb 4, 2011 4:47 PM
286	None	Feb 4, 2011 4:49 PM
287	Same as previous section	Feb 4, 2011 4:55 PM
288	N/A	Feb 4, 2011 5:01 PM
289	I am unsure what these options are and how they are implemented	Feb 4, 2011 5:12 PM
290	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 4, 2011 5:16 PM

7. Suggested service standards about self-directed or self-determination

	Response Text	
291	Family input should be sought and heavily weighed on whether a consumer is ready and whether he/she is capable of indepent living. Family input should be sought on roommates and whether the consumer is handling indepence acceptably. Many consumers have health conditions which would preclude them being on their own entirely. For these the group home setting is far more desirable, because there is a care-taker to monitor and administer meds and make sure the consumer gets the appropriate medical, and therapeutic treatments.	Feb 4, 2011 5:21 PM
292	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 4, 2011 5:44 PM
293	Consumers should have their choice of providers.	Feb 4, 2011 6:08 PM
294	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 4, 2011 6:12 PM
295	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 4, 2011 6:37 PM
296	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determined option.	Feb 4, 2011 7:09 PM
297	As much as possible based on ability.	Feb 4, 2011 7:17 PM
298	The same as previous #7.	Feb 4, 2011 7:19 PM
299	Teach the consumer to become more and more independent. May be it won't change the diagnosis but they will require less assistance in the future.	Feb 4, 2011 7:33 PM
300	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 4, 2011 7:50 PM
301	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 4, 2011 8:15 PM
302	This cannot be answered until CA has a clearly defined mechanism for implementing self-directed options	Feb 4, 2011 8:39 PM
303	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 4, 2011 8:56 PM
304	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 4, 2011 9:19 PM
305	protect the rights of the disabled balanced with protecting the needs of the disabled	Feb 4, 2011 9:43 PM
306	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 4, 2011 9:55 PM
307	What do you mean. Is this for client or provider? If so, same as immediately above.	Feb 4, 2011 10:08 PM
308	don't know	Feb 4, 2011 10:11 PM
309	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 4, 2011 10:22 PM
310	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 4, 2011 10:38 PM

7. Suggested service standards about self-directed or self-determination

	Response Text	
311	Once again, money alloted equally for DD's need to be divided equally. Times are hard for everyone and their families need to understand. The amount spent on them needs to be fair and just to all concerned. I can't understand how some can receive more than others. This is a serious matter that needs to be addressed in all RC's. When the Lanterman Act was passed, the number of consumers where less and services were simple. Today, we have so many dual diagnoses and case are complicated. In addition, we have a hugh population of folks who have autism. Like so many good laws in this country and in this state, they have become irelevant and unsustainable. Changes need to be made.	Feb 4, 2011 10:54 PM
312	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 4, 2011 10:56 PM
313	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 4, 2011 11:15 PM
314	Clients should always be invovled in deciding what services they need and should be aware of the time-lines and what is expected of them. This can all be discussed at a meeting with all interested parties present.	Feb 4, 2011 11:20 PM
315	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 4, 2011 11:21 PM
316	Same	Feb 4, 2011 11:23 PM
317	This should be provided totally at the consumer's CHOICE within reason.	Feb 4, 2011 11:34 PM
318	By definition, these services are self-determined.	Feb 4, 2011 11:41 PM
319	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 5, 2011 12:22 AM
320	When there is a clearly defined mechanism for implementing this, then this can be answered, not now.	Feb 5, 2011 12:23 AM
321	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 5, 2011 12:32 AM
322	Can be included if capped at the costs outlined above rather than historical usage.	Feb 5, 2011 12:41 AM
323	same response as for other programs	Feb 5, 2011 1:28 AM
324	No specific suggestions.	Feb 5, 2011 2:04 AM
325	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 5, 2011 2:19 AM
326	As structured by case workers and supervisory personnel along with family or caretaker input.	Feb 5, 2011 4:29 AM
327	Not possible at this time. Self-determination	Feb 5, 2011 6:49 AM
328	Self-determination should be considered when ~reasonable~.	Feb 5, 2011 6:51 AM
329	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 5, 2011 2:47 PM
330	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 5, 2011 5:27 PM
331	A lot of support and resources are very important.	Feb 5, 2011 5:38 PM
332	same as first set	Feb 5, 2011 6:40 PM
333	not sure	Feb 5, 2011 8:06 PM
334	This is an extremely important topic as a large number of this population moves into adulthood. It's unconscionable to leave incapable people unprotected. We need to come up with a good method for this this.	Feb 5, 2011 8:30 PM
335	The question cannot be answered until Californiahas a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 5, 2011 8:54 PM
336	Assessment!!!!!!	Feb 5, 2011 10:13 PM

7. Suggested service standards about self-directed or self-determination

	Response Text	
337	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 5, 2011 10:55 PM
338	critical for consumer to have self-determination in order to be successful.	Feb 6, 2011 2:20 AM
339	It is a consumers right to live by themselves, with a room mate, or with a group, thay are the ones to make the choice.	Feb 6, 2011 4:08 AM
340	Regardless of any suggested standards, the consumer, the consumer's parents and/or caregivers and consumer's teachers and other school service providers where applicable the consumer's parents and/or caregivers must still have input regarding independent living and supported living services, and the entire IPP team, including the above, must retain the ability to choose the services and supports needed by the consumer, with the input of the consumer and/or the consumer's parents and/or caregivers where appropriate given significant weight.	Feb 6, 2011 5:45 AM
341	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 6, 2011 5:55 AM
342	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 6, 2011 4:35 PM
343	Not experienced in the field. No suggestions.	Feb 6, 2011 5:08 PM
344	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 6, 2011 6:45 PM
345	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 6, 2011 6:47 PM
346	This depends on the client. Many clients would have trouble making good decisions on their own. This is why they need support services in the first place. Efforts to guide some clients in this direction could reduce the workloads of the staff as the client assumes more responsibility for his/her actions.	Feb 6, 2011 8:11 PM
347	Consumers should have a say in where they live and how they live. They should not be forced into group homes far from their families because the cost is less than supported living, and there is also huge potential for abuse.	Feb 6, 2011 8:46 PM
348	not sure	Feb 7, 2011 2:26 AM
349	These service should be evaluated periodically and the individual should have say and not be made to feel embarrassed if their difficulties are not met but think together as to what may be better in a smaller task to complete. Many are told what they are to do or it is written and they aren't aware of what it is about because not read to them again after completion many times they feel controlled and are not Independent in their skills.	Feb 7, 2011 3:42 AM
350	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 7, 2011 5:13 AM
351	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 7, 2011 6:40 AM
352	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 7, 2011 2:46 PM
353	Unknown until it is implemented.	Feb 7, 2011 3:25 PM
354	no suggestions	Feb 7, 2011 4:28 PM
355	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 7, 2011 5:45 PM
356	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 7, 2011 6:21 PM
357	State needs to clearly define mechanism for implementing self-directed or self-determination options.	Feb 7, 2011 7:50 PM

7. Suggested service standards about self-directed or self-determination

	Response Text	
358	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 7, 2011 7:53 PM
359	No comment	Feb 7, 2011 9:31 PM
360	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 7, 2011 10:06 PM
361	self directed services or self determination may not be a good option for all consumers in this catagory. Consumer would need to assure all their health and safety needs were met and that supports were addressing needs related to developmental disablity not just wants and desires.	Feb 7, 2011 10:37 PM
362	Allow RC's to set the standards in their own communities.	Feb 7, 2011 10:45 PM
363	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options. However, all Independent Living and Supported Living Services must be guided by the principles of self directed & sel-determined options.	Feb 7, 2011 11:12 PM
364	Let the Regional Centers make the decisions regarding program services	Feb 7, 2011 11:13 PM
365	This is a moot point until and unless California creates a clearly defined mechanism for implementing such options. However, we would hope that any such options would not unduly limit access to services nor place undue burdens on consumers' or their families' time, energy and/or finances.	Feb 7, 2011 11:15 PM
366	N/A	Feb 7, 2011 11:25 PM
367	I think it would be useful for the Regional Centers to periodically survey families and capable consumers for suggestions. A huge part of the problem, in my opinion, is that agencies tend to keep families at arm's length rather than working together to find solutions. It's all very well and good to talked about shared sacrifice, but it wasn't shared greed and incompetence that got us into this mess. These people have the fewest resources and are the most helpless among us. So why in the name of heaven do we expect them to shoulder any part of the burden! Most people really want to help and pitch in, but the state needs to make us believe and visibly include us in the process.	Feb 7, 2011 11:56 PM
368	Clients who wish to establish a personalized ILS/SLS program will have the ability to do so but must seek assistance from sources outside RC, due to conflict of interest. RC will provide all necessary paperwork for Flexible Support Plan, in addition to monthly cost payments, in order for client and/or family to devise their program and billing accordingly, but should not be any more involved than that.	Feb 8, 2011 12:13 AM
369	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 8, 2011 1:10 AM
370	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 8, 2011 4:06 AM
371	Self-directed services would be good because people might find creative ways to provide low cost housing, such as paying an able-bodied roommate.	Feb 8, 2011 4:26 AM
372	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 8, 2011 5:32 AM
373	Again as previously stated.	Feb 8, 2011 6:08 AM
374	These services should be provided with self-directed and self-determination options.	Feb 8, 2011 7:02 AM
375	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 8, 2011 3:40 PM
376	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 8, 2011 4:26 PM
377	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 8, 2011 4:27 PM

7. Suggested service standards about self-directed or self-determination

	Response Text	
378	Of course, they should be involved in the process of determining the services that would serve them the best, but I think they should also have the assistance of a service coordinator and work together in an IPP meeting to determine the best strategy.	Feb 8, 2011 5:22 PM
379	After determining the individuals need, assist them with locating the proper agency to assist them with elevating themselves.	Feb 8, 2011 5:33 PM
380	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 8, 2011 6:03 PM
381	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 8, 2011 6:10 PM
382	County agencies could inform populations about these services.	Feb 8, 2011 7:47 PM
383	To be dtermined by the support group.	Feb 8, 2011 8:40 PM
384	Set specific standards and time lines for each client.	Feb 8, 2011 8:52 PM
385	If individuals are not following through with instruction, services should be reviewed. If a person does not show some progress during the course of a year, services should be reviewed.	Feb 8, 2011 9:19 PM
386	people who qualify might not have the executive function to be able to satisfy this so this would be on an individual basis	Feb 8, 2011 9:24 PM
387	This questions cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 8, 2011 9:31 PM
388	I feel that the structure for how the local Regional Center currently oversees distribution of monies for these programs should continue to ensure that consumer's are not taken advantage of or financially abused. The IPP Process and Circle of Support should continue with the consumer's input. However, not all consumers have the ability to manage their monies and need support for their life decisions. If a self-determined plan was put into place, individuals may be taken advantage of or lead in to a wrong direction. An outside agency and advocate like the Regional Centers are looking out for the best interests of the consumers.	Feb 8, 2011 10:23 PM
389	The special needs young person should get a job that she can perform to help pay for bills as well as give her a palce in the world and a self worth.	Feb 8, 2011 10:35 PM
390	I feel that the structure for how the local Regional Center currently oversees distribution of monies for these programs should continue to ensure that consumer's are not taken advantage of or financially abused. The IPP Process and Circle of Support should continue with the consumer's input. However, not all consumers have the ability to manage their monies and need support for their life decisions. If a self-determined plan was put into place, individuals may be taken advantage of or lead in to a wrong direction. An outside agency and advocate like the Regional Centers are looking out for the best interests of the consumers	Feb 8, 2011 11:20 PM
391	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 8, 2011 11:48 PM
392	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 8, 2011 11:54 PM
393	?	Feb 9, 2011 12:25 AM
394	I like the ILS goals I work on with my ILS Instructor. I choose all of the goals I work on. I meet with my service coordinator every 3 months to discuss my progress on working on my ILS goals. I give input in my meetings with my service coordinator on how I am doing with my ILS goals. I would like to have a new goal of working towards getting a drivers license. I can talk to my ILS Instructor and service coordinator about the option of adding new goals. I think I should be able to have a choice in the goals I work on.	Feb 9, 2011 12:55 AM
395	if individual qualifies.	Feb 9, 2011 1:24 AM

7. Suggested service standards about self-directed or self-determination

	Response Text	
396	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination option.	Feb 9, 2011 1:25 AM
397	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 9, 2011 1:28 AM
398	same	Feb 9, 2011 2:28 AM
399	I can change my ILS goals when needed. Every 3 months I meet with my ILS Instructor and service coordinator and I am able to express when I want to remove a goal and set a new goal. If I am not happy with an ILS Instructor, I can change ILS Instructors at any time. If I want to adjust my ILS class schedule I can. I think every one who receives ILS services should be able to choose their own goals and ILS Instructors.	Feb 9, 2011 3:36 AM
400	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 9, 2011 5:42 AM
401	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 9, 2011 6:47 AM
402	Consider that if the individual wants to live independently, then he/she can use their job to help contribute to the tuition.	Feb 9, 2011 8:46 AM
403	We suggest an expedient implementation of a self-directed or self-determination options so that consumers may have full programmatic access to all services. We suggest that the standards mirror the core standards developed as part of the individual choice budget process. Key elements of those standards are: 1. Eligibility: A voluntary plan for all regional center consumers excluding those in Early Start. 2. Services: Access to regional center case and financial management services. The ability to purchase the full array of services and supports including suspended services and amounts of services outside any caps and some flexibility in service providers. 3. Individual Budget: Developed through a fair, equitable and transparent methodology. Consumers are informed of how their budget was determined. 4. Appeal: Access to the due process procedures available under WIC Sec. 4700 et seq.	Feb 9, 2011 5:34 PM
404	don't know	Feb 9, 2011 6:55 PM
405	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 9, 2011 7:57 PM
406	Clients need to be involved in their ISP and know that if they do not partake in instruction they will lose their hours and will risk their independence.	Feb 9, 2011 8:16 PM
407	These questions can not be answered until California has a clearly defined mechanism for implementing self directed or self determining options.	Feb 9, 2011 9:06 PM
408	Consumer could contract directly with direct care provider.	Feb 9, 2011 9:15 PM
409	As stated in # 3 -- SDS or Self-Determination and the suggestions made will deliver these services to clients for the lowest cost.	Feb 9, 2011 9:20 PM
410	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 9, 2011 9:48 PM
411	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 9, 2011 10:04 PM
412	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 9, 2011 10:34 PM
413	No Suggestions	Feb 9, 2011 11:32 PM
414	For those who can make good choices, they should but some folks need more assistance for these choices, they should get it.	Feb 9, 2011 11:33 PM
415	Reference comments under day programs	Feb 9, 2011 11:33 PM

7. Suggested service standards about self-directed or self-determination

	Response Text	
416	If the consumer is capable of making good decisions they should be consulted.	Feb 9, 2011 11:35 PM
417	there should be options	Feb 9, 2011 11:50 PM
418	Self-determination is not a cost saving mechanism unless the State is actively cheating people nor should it continue to be used as an excuse to reduce or eliminate other types of services (as it has been for the last two years)	Feb 9, 2011 11:58 PM
419	goofy question	Feb 10, 2011 7:54 PM
420	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 10, 2011 8:02 PM
421	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 10, 2011 9:32 PM
422	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 10, 2011 9:59 PM
423	Just provide what people need to have a quality of life. Those of us with disabilities take pride in doing for ourselves, but we need help with many things that are too hard for us.	Feb 10, 2011 10:14 PM
424	See above.	Feb 10, 2011 10:20 PM
425	Until our state has a clarified method of implementing self-directed or self-determination options, this question must go unanswered.	Feb 10, 2011 10:28 PM
426	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 10, 2011 11:42 PM
427	Clients need to show a commitment and a willingness to work with a team to acquire independent skills.	Feb 11, 2011 12:02 AM
428	Consumers and CPCS are responsible for options.	Feb 11, 2011 12:15 AM
429	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 11, 2011 12:22 AM
430	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 11, 2011 12:50 AM
431	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 11, 2011 12:55 AM
432	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 11, 2011 1:10 AM
433	Preferred. Money directly to the patient/disabled person and let them spend it in the most effective manner. Far cheaper than the present system. Totally supported by the system.	Feb 11, 2011 1:32 AM
434	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 11, 2011 1:49 AM
435	Supports should remain the same or increase.	Feb 11, 2011 1:49 AM
436	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 11, 2011 2:19 AM
437	time commitment	Feb 11, 2011 2:57 AM
438	Until the State of California has clearly defined mechanism for implementing self-directed or self-determination options, this question is a moot point as there are no guidelines on how to implement this.	Feb 11, 2011 3:20 AM
439	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 11, 2011 4:10 AM
440	Consumer should have choice about living situation.	Feb 11, 2011 4:46 AM
441	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 11, 2011 5:08 AM

7. Suggested service standards about self-directed or self-determination

	Response Text	
442	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 11, 2011 5:44 AM
443	Some sort of mandate for choosing more less expensive services.	Feb 11, 2011 5:48 AM
444	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 11, 2011 6:15 AM
445	Agencies and the community need more involvement with one another to find jobs for indivudals with special needs...to help ease some of the financial burden.	Feb 11, 2011 6:22 AM
446	Those who desire to live on their own and can safely do so should be entitled to live independently.	Feb 11, 2011 8:01 AM
447	Family members need choices, but cannot become full-time administrators for consumers due to other family and employment responsibilities.	Feb 11, 2011 4:24 PM
448	Mnay of the options for self directed services are very expensive and in this economic climate I don't see how they can be implemented.	Feb 11, 2011 6:35 PM
449	none	Feb 11, 2011 6:39 PM
450	California does not have a clearly defined mechanism for implementing these options. When that mechanism is established, this question may be answered.	Feb 11, 2011 7:03 PM
451	provided until normalcy.	Feb 11, 2011 7:23 PM
452	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 11, 2011 7:24 PM
453	See comment under Behavioral Services	Feb 11, 2011 8:49 PM
454	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 11, 2011 9:43 PM
455	Not quite sure.	Feb 11, 2011 9:48 PM
456	respect the consumers' preference	Feb 11, 2011 9:48 PM
457	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options	Feb 11, 2011 9:51 PM
458	N/A	Feb 11, 2011 9:53 PM
459	With these services I can see self-directed through an agency as being a viable option. Where this might get sticky is the parents are divorced and the client is living with mom, but they want the dad to be the SLS worker. Or it could be sibling, cousin, aunt, grandparent, etc. Now, are they allowed to be paid for providing a service through a vendor or are they a natural support and cannot be hired and paid to perform a service. this question needs to be clearly addressed.	Feb 11, 2011 10:00 PM
460	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 11, 2011 10:43 PM
461	self- directed option should be available.	Feb 11, 2011 10:52 PM
462	None	Feb 11, 2011 11:27 PM
463	same.	Feb 11, 2011 11:31 PM

7. Suggested service standards about self-directed or self-determination

	Response Text	
464	SLS / ILS if done properly are already a form of self-directed services. Standards for self-directed services should not be lower than for other services. This regional center has seen an upswing in parents wanting to provide support to their own children--not to meet the needs of the children, but to meet the financial needs of the families. Self-directed services could end up feeding the "cash cow" mentality where people are seen as commodities with a price tag on their heads. Without standards and quality assurance practices, self-directed services could lead to rights violations, abuse, and neglect. Self-directed services may be seen as a potential money saving opportunity, but logistically it does not appear that it will end up that way. If implemented, rate caps should be firm and not subject to fair hearing. Specific guidelines should be developed for what constitutes failure of a situation. There should be quality assurance oversight provided by a party other than the service provider or the service recipient.	Feb 11, 2011 11:50 PM
465	I believe that this system could be abuse very easily if not monitored closely by the consumers case manager.	Feb 11, 2011 11:56 PM
466	None	Feb 11, 2011 11:58 PM
467	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 12, 2011 1:17 AM
468	no suggestions	Feb 12, 2011 1:44 AM
469	This questions cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options	Feb 12, 2011 2:35 AM
470	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 12, 2011 2:45 AM
471	Most of the people who use these programs need some type of program to make sure that these are taken care of.	Feb 12, 2011 2:47 AM
472	Only as able to objectively perform	Feb 12, 2011 3:47 AM
473	Client must be given access to resources to be sucessful.	Feb 12, 2011 3:49 AM
474	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 12, 2011 5:19 AM
475	See previous answers.	Feb 12, 2011 6:28 AM
476	The option should be available.	Feb 12, 2011 6:52 AM
477	Ask support from family/friends to come up with ideas to patch in help.	Feb 12, 2011 7:57 AM
478	If anyone can do SELF these and that they won't be needing all these services.	Feb 12, 2011 3:34 PM
479	Trial and error. The initial level of self-direction depends on recommendations by professionals and family/friends who know the functioning level of the individual.	Feb 12, 2011 4:25 PM
480	They themselves could help a cost if shown how implement into their life style or commitmnet for them to help others and be mentors	Feb 12, 2011 5:41 PM
481	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 12, 2011 6:11 PM
482	Volunteer agencies could be a resource for these types of services.	Feb 12, 2011 7:14 PM
483	Only if not more costly.	Feb 12, 2011 7:24 PM
484	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 12, 2011 8:26 PM
485	adult consumers be given opportunity to pursue individual likes (ie school or work)	Feb 12, 2011 8:55 PM
486	Standards should be equivalent to those found in any other area of life or business.	Feb 12, 2011 9:20 PM
487	my children cannot self direct	Feb 12, 2011 9:24 PM
488	Better support and evaluation of services and need for services need to be provided	Feb 12, 2011 10:07 PM

7. Suggested service standards about self-directed or self-determination

	Response Text	
489	Provide in house role modeling of what it would be like to live independently, with responsibilites involved, etc. for a 24 hr. period.	Feb 12, 2011 10:12 PM
490	Covered in prior sections	Feb 12, 2011 11:43 PM
491	This question cannot be ansered until California has a clearly defined mechanism for implemen tinf self-directed or self-determination options..	Feb 12, 2011 11:56 PM
492	MORE SUPPORT the BETTER	Feb 13, 2011 1:23 AM
493	read the previous answer	Feb 13, 2011 2:41 AM
494	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 13, 2011 3:43 AM
495	Some people are great at this other are not	Feb 13, 2011 5:09 AM
496	I don't really understand this question.	Feb 13, 2011 5:15 AM
497	Self determination and self directed options for these services can be formulated by observing the progress of the individual concern	Feb 13, 2011 5:25 AM
498	If you have and standards as a person you will do great.	Feb 13, 2011 5:58 AM
499	Excellent area for self-directed/self-determination program/services.	Feb 13, 2011 7:52 AM
500	In this category of service the standard of committment and reception of QPBS from a QPBS provider is completely in the hands of the QR. All options are available because it is the QR's success and independence that is at stake. Mediation meetings to determine fair provision and proper delivery of services is always an option.	Feb 13, 2011 7:58 AM
501	There would need to be some form of monitoring the legitimacy of services and proper use of the money by the consumer or conservator, etc.	Feb 13, 2011 5:51 PM
502	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 13, 2011 6:50 PM
503	Client should always be asked preferences, if able to express.	Feb 13, 2011 7:07 PM
504	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 13, 2011 7:14 PM
505	client has say in what needs and desires and goals are	Feb 13, 2011 10:17 PM
506	Has to be determined by a team or panel of persons involved, including, including but not limited to, consumer, parents/caretaker/relative(s) and social worker.	Feb 13, 2011 10:32 PM
507	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 13, 2011 10:35 PM
508	All RC services should be available to clients under a self-directed program.	Feb 14, 2011 1:06 AM
509	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 14, 2011 1:48 AM
510	Review monthly and quarterly goals, measurements, successes, areas of need, and ongoing patterns. Most clients of RCOC are as responsible as they can be.	Feb 14, 2011 1:52 AM
511	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 14, 2011 3:25 AM
512	Standards are not possible for those who need self-directed options.	Feb 14, 2011 3:40 AM
513	?????	Feb 14, 2011 5:40 AM
514	CONSUMERS WILL NEED SELF-DETERMINATION IN ORDER TO COMPLETE LIVING SKILLS SUCCESSFULLY	Feb 14, 2011 7:15 AM
515	No comment.	Feb 14, 2011 1:53 PM
516	Individualized plans are necessary.	Feb 14, 2011 4:29 PM
517	Please see my comments written in the behavioral services section.	Feb 14, 2011 5:01 PM

7. Suggested service standards about self-directed or self-determination

	Response Text	
518	Self directed services are wonderful. It is not a one size for all concept. Services that are right for a specific consumer can be purchased. Providers need to be evaluated for skill at providing services either through licensing, certifiation or experience.	Feb 14, 2011 6:09 PM
519	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 14, 2011 6:29 PM
520	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 14, 2011 6:30 PM
521	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 14, 2011 6:38 PM
522	This cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 14, 2011 7:25 PM
523	Based on the needs of the consumer as determined during the IPP process.	Feb 14, 2011 7:31 PM
524	I have no suggestions.	Feb 14, 2011 7:57 PM
525	?	Feb 14, 2011 7:57 PM
526	Not a good idea with the current structure. Service coordinators have too large of a caseload to properly oversee this service.	Feb 14, 2011 8:31 PM
527	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 14, 2011 9:00 PM
528	N/A	Feb 14, 2011 9:40 PM
529	I cannot answer this question.	Feb 14, 2011 9:55 PM
530	dont understand the statement.	Feb 14, 2011 9:58 PM
531	The mechanism for implementing self-directed and self-determination has not been made clear.	Feb 14, 2011 10:38 PM
532	no comment	Feb 14, 2011 10:57 PM
533	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options	Feb 14, 2011 11:05 PM
534	No comment	Feb 15, 2011 12:03 AM
535	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 15, 2011 12:19 AM
536	Self-Directed services: consumers can have the ARM rate for which they qualify and use those funds to purchase their own direct care staff.	Feb 15, 2011 1:03 AM
537	don't know.	Feb 15, 2011 1:28 AM
538	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 15, 2011 1:32 AM
539	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options	Feb 15, 2011 1:38 AM
540	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 15, 2011 1:53 AM
541	Repeating my earlier statement, I fervently reject the ideology of self-directed options. Certainly, the consumer should be a part of the selection process of necessary service. However, there are significant concerns related to the appropriateness of service selection when a singular voice has the authority to determine legitimacy and necessity. The opportunities to manipulate the process are rife.	Feb 15, 2011 1:57 AM
542	?	Feb 15, 2011 1:57 AM
543	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 15, 2011 2:29 AM

7. Suggested service standards about self-directed or self-determination

	Response Text	
544	When possible the individual can choose or direct. When not feasible, a family member should assist with medical advice, if appropriate.	Feb 15, 2011 2:45 AM
545	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 15, 2011 3:21 AM
546	by this time; yes; families have been giving 24/7 care	Feb 15, 2011 3:24 AM
547	This is based on the abilities and capabilites of the client. The more support needed, the more support should be required. If the client is capable of making decisions about the care provider, they should be involved in the selection process.	Feb 15, 2011 3:44 AM
548	It's too soon to say!!	Feb 15, 2011 4:08 AM
549	Regional Centers should be actively involved in mobilizing funds and support for affordable housing for developmentally disabled people (who are often on a very, very low income and thus excluded from most affordable housing).	Feb 15, 2011 4:23 AM
550	see comments on Behavior services	Feb 15, 2011 5:41 AM
551	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 15, 2011 6:06 AM
552	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 15, 2011 6:32 AM
553	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 15, 2011 6:36 AM
554	Post public grades similar to childcare facilities and dining establishments	Feb 15, 2011 7:18 AM
555	Still waiting for self-directed service program.	Feb 15, 2011 7:33 AM
556	again should be made available to the consumer,	Feb 15, 2011 8:24 AM
557	Child must generalize the corrected behavior.	Feb 15, 2011 12:09 PM
558	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-deterioration options.	Feb 15, 2011 3:45 PM
559	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 15, 2011 4:06 PM
560	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 15, 2011 4:23 PM
561	Help the consumer become independant and doing things on their on without depending onsomeone else.	Feb 15, 2011 5:09 PM
562	Continuation of current standards	Feb 15, 2011 5:57 PM
563	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 15, 2011 6:01 PM
564	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 15, 2011 6:27 PM
565	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 15, 2011 6:34 PM
566	Self-directed services are a wonderful option, but new programs sometimes cost more money. they should be funded.	Feb 15, 2011 7:11 PM
567	None	Feb 15, 2011 7:13 PM
568	No comment.	Feb 15, 2011 7:46 PM
569	Job directed. Groups of adults with micro-businesses	Feb 15, 2011 7:54 PM
570	See suggestions for Behavior services and Day programs	Feb 15, 2011 7:56 PM
571	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determined options.	Feb 15, 2011 7:56 PM

7. Suggested service standards about self-directed or self-determination

	Response Text	
572	Service standards about self-directed or self-determination options for these services should be only specified by a Behavior Assessment, conducted by reputable companies, and then worked out with each consumer.	Feb 15, 2011 8:17 PM
573	SLS and ILS should be prepared and planned by the individual, family or representative. The regional Center should have limited input as they usually do not know the person well. There should be continuity maintained in the person's life through the services provided, reliable and qualified staff and becasue those who know the client should participate in the program development.	Feb 15, 2011 8:19 PM
574	Still waiting for self-directed program to be implemented!	Feb 15, 2011 9:02 PM
575	No service standards for self-directed or self-determination standards should be issued without clear rules for how these programs would work, and without the necessary funds to allow consumers to actually purchase the quality services and supports they might choose. In addition, under the existing Lanterman Act, consumers currently have rights to make choices about their own lives and to have those choices respected. These existing guarantees should be met and respected, rather than creating new standards.	Feb 15, 2011 9:47 PM
576	The system must be in place to ensure self-determination and self-directed services.	Feb 15, 2011 9:59 PM
577	Standard: People who write questionnaires shall write them in such a way that ordinary people can understand what in the heck they mean.	Feb 15, 2011 10:06 PM
578	People who are living independently already have learned alot about doing tasks without assistance.	Feb 15, 2011 10:07 PM
579	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 15, 2011 10:31 PM
580	California must have a clearly defined mechanism for implementing self directed options.	Feb 15, 2011 11:17 PM
581	I do not agree with self directed or self determined services.	Feb 15, 2011 11:24 PM
582	continue to allow self-vendoring and parent-vendoring of sls and/or ils services.	Feb 15, 2011 11:25 PM
583	Not available except in rural settings...	Feb 15, 2011 11:29 PM
584	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 15, 2011 11:33 PM
585	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 16, 2011 12:00 AM
586	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 16, 2011 12:19 AM
587	for clients with absolutely unique needs - if a Conservator appointed to assist who knows and has hi level of interaction with client, with length and breadth of knowledge of client - then this is absolutely necessary as Supported Living Model has liimitations that are currently impossible to serve the very most unique needs client.	Feb 16, 2011 1:14 AM
588	NONE	Feb 16, 2011 2:19 AM
589	This living arrangement would be determined and recommended by the therapeutic team, consumer and case worker.	Feb 16, 2011 2:28 AM
590	I am given choice in my ILS goals and I am able to add new goals if I want. I think any one who has a developmental disability and receives ILS services should be able to choose their ILS Instructor and the goals they work on.	Feb 16, 2011 2:41 AM
591	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 16, 2011 3:04 AM

7. Suggested service standards about self-directed or self-determination

	Response Text	
592	Clients progress should determine this.	Feb 16, 2011 3:55 AM
593	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 16, 2011 4:47 AM
594	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 16, 2011 5:05 AM
595	The self-directed option is valuable for this service	Feb 16, 2011 5:17 AM
596	up to the consumer depending how well they advocate for themself	Feb 16, 2011 5:19 AM
597	cant be answered until Calif has a clearly defined mechanism for implementing self directed or self determination options	Feb 16, 2011 5:31 AM
598	No answer	Feb 16, 2011 5:31 AM
599	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 16, 2011 5:41 AM
600	Should follow the education philosophy of the IDEA that living should be provided in the :least restrictive environment.	Feb 16, 2011 5:41 AM
601	This question cannot be answered until California has a clearly defined mechanism for implementing self-directed or self-determination options.	Feb 16, 2011 6:10 AM
602	how do you (SARC) ask the consumer about self-directed and self-determination options. What is actually offered. This question baffles me a bit, in part the consumer does not contemplate in this manner. SARC, in a perfect world, could/should offer a guideline to begin from. Alway at the heart with the consumer centric needs for their quality of life.	Feb 16, 2011 6:48 AM
603	Grant to all who want to use a self-directed or self-determination program	Feb 16, 2011 7:09 AM
604	The Lanterman Act.	Feb 16, 2011 7:38 AM
605	Services should be determined through the IPP process, preserving the Lanterman Act.	Feb 16, 2011 7:51 AM