

**Frank D. Lanterman Regional Center
Proposed 2011 Performance Plan**

Goal	Objectives
1. Decrease the number of Lanterman clients residing in the developmental center.	A. Develop 4 new individualized living option for clients moving into the community from the developmental center.
	B. In collaboration with the Southern California Health and Living Project, assist 6 previously identified developmental center residents to move into the community through the Community Placement Plan.
2. Increase the number of children residing with families.	A. Provide technical assistance and support to ensure continued operation of support groups.
	B. Provide Peer Support Partners at critical life transitions for all families requesting such assistance.
	C. Increase users of the multi-media resource library by 200 individuals each year.
	D. Maintain the number of requests for Information and Referral Services at approximately 2,000 annually.
	E. Provide Service Coordination and Advocacy Training (SCAT) for all eligible parents who request it to improve their ability to advocate for their child.
3. Increase the number of adults residing in home settings.	A. Continue to partner with California Lutheran Homes to promote donation of homes to the project.
4. Minimize the number of minors living in facilities serving more than 6 clients.	A. Annually review service needs of each child residing in a facility serving more than 6 clients to determine the appropriateness of an alternative living option.

Goal	Objectives
5. Minimize the number of adults living in facilities serving more than 6 clients.	<p>A. Continue to explore downsizing Medicaid Waiver homes having more than 6 beds.</p> <p><u>Note.</u> DDS is providing no funds for downsizing except for CCFs with 16 or more beds. LRC has no CCFs of this size.</p>
6. Increase the number of adults who are employed.	A. Work collaboratively with SELPAs, Department of Rehabilitation, and supported employment providers to ensure that clients transition from school to work.
	B. Conduct training of SCs to help them promote transition of clients from Work Activity Programs to supported employment.
	C. Participate in school transition fairs with three school districts.
	D. Implement strategies for encouraging families to invite service coordinators to ITP meetings. RECOMMEND TO DELETE
	E. Hold at least one joint training session for LRC service coordinators and teachers from each district to discuss transition from school to work. .
7. Increase the average wage of adults who are employed.	Explore utilization of CDER elements to provided data on client wages.
8. Ensure that all clients have access to appropriate medical (including dental and vision) care.	A. Coordinate comprehensive health assessments for adults and children in designated groups.

Goal	Objectives
	B. Continue to support the Women's Reproductive Health and Self Advocacy (RHSA) training program.
	C. Promote good oral health by continuation of screenings, education of caregivers and clients, and referral to dental professionals.
	D. Increase access to psychiatric services, including behavioral training and support, through use of the Lanterman/UCLA-NPI clinic and implement recommendations of the evaluation.
	E. Work with LA Care to ensure smooth transition of regional center clients into managed care organizations.
9. Minimize the incidence of abuse of regional center clients.	A. Conduct annual training of service providers on responsibilities related to client rights and mandated abuse reporting.
	B. Review all Special Incident Reports and ensure appropriate follow up on abuse issues.
	C. Conduct personal safety and awareness programs and sexual abuse and exploitation risk reduction programs at least twice annually and continue to support referrals to Project Heal.

Goals Reflecting Compliance Outcomes

Goal	Objectives
10. Achieve an unqualified independent audit with no material findings	A. Continue to conduct regional center business in a manner consistent with generally accepted accounting principles.
11. Demonstrate substantial compliance with DDS fiscal audit.	A. Clarify DDS standards for substantial compliance and conduct self- assessment to ensure compliance.
12. Project POS expenditures as reflected on SOAR within 10% of actuals as defined in DDS measurement methodology.	A. Review and refine, as appropriate, current strategies for developing accurate SOAR projections.
13. Operate within the center's OPS budget.	A. Operate within the center's allocation as specified in the contract with DDS.
14. Maintain certification to participate in Medicaid Waiver.	A. Review Medicaid Waiver audit report and ensure that all areas of identified follow-up have been addressed.
15. Demonstrate compliance with Vendor Audit Requirements per contract, Article III, Section 10	A. Implement a vendor audit plan that identifies the types and numbers of vendors to be audited and that meets the targets established in the contract.

Goal	Objectives
16. Maintain current CDERs and Early Start Reports for all regional center clients.	A. Generate and monitor monthly reports on CDER and ESR currency and provide timely feedback to program managers and service coordinators on performance by caseload.
17. Demonstrate compliance with timelines for completing Intake/assessment and IFSP development for clients age 0-3.	A. Continue requirement for completion of intake/assessment within 35 days to allow sufficient time for SC to develop IFSP.
18. Demonstrate compliance with timelines for intake/assessment for clients age 3 and above.	A. Maintain current procedures for intake and assessment of clients age 3 and above, assuring compliance with the 120-day assessment period.
19. Demonstrate compliance with requirements for IPP development as specified in W& I Code section 4646.5 (c)(3).	A. B. Conduct SC training addressing audit findings to ensure compliance with specific requirements of W&I Code 4646.5 (c)(3).
	B. A. Continue supervisor review and internal audits, as necessary, to assess SC compliance with requirements of W&I Code section 46446.5 (c)(3).
20. Demonstrate compliance with Title 17 criteria for IFSP development as specified in "IFSP Review Criteria-2001."	A. Continue requirement for completion of intake/assessment within 35 days to allow sufficient time for SC to develop IFSP. (See goal 17.)
	B. Continue supervisor review or audit as necessary to ensure inclusion of frequency and intensity of services.

STATEMENT OF ASSURANCES

This is to assure that Frank D. Lanterman Regional Center Year **2011**
Performance Contract was developed in accordance with the requirements specified in
Welfare and Institutions Code section 4629 and the Department of Developmental
Services' (DDS) Year 2011 Performance Contract Guidelines.

The performance contract was developed through a public process which included:

- Providing information, in an understandable form, to the community about regional center services and supports, including budget information and baseline data on services and supports and the regional center operations
[WIC 4629 (c)(B)(i)]
- Holding at least one public meeting to solicit input on performance objectives and using focus groups or surveys to collect information from the community
[WIC 4629 (c)(B)(ii)]
- Providing at least 10 calendar days advance public notice of the date(s) of the public meeting (DDS Guidelines)
- Circulating a draft to the community of the performance contract plan relative to the public policy and compliance outcomes identified in the DDS Performance Contract Guidelines, and any locally developed policy outcomes prior to presenting the contract to the regional center board for action
[WIC 4629 (c)(B)(iii)]
- Providing an opportunity for additional public input and consideration of that input at the regional center board meeting prior to board action on the proposed performance contract [WIC 4629 (c)(B)(iii)]

Signature of RC Director:


Diane Anand, Executive Director

Date:

November 12, 2010