

GOLDEN GATE REGIONAL CENTER
 PERFORMANCE CONTRACT PLAN 2012
 Approved by DDS: _____

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Approved by GGRC Board of Directors: October 18, 2011

SWA = statewide average				
<u>Public Policy Performance Measures</u>				
MEASURE	2010	2011	GOAL 2012	PLANNED AND CONTINUING ACTIVITIES
A. Number and percentage of regional center caseload in developmental centers.	195 = 2.49% SWA = .88%	178 = 2.23% SWA = .78%	Decrease the number of individuals living in developmental centers to 167.	Implement GGRC's Community Placement Plan. Continue to support efforts of West Bay Housing Corporation (WBHC) to develop housing for individuals leaving the developmental centers. Develop new options in the community such as FHAs, alternative day services, etc.
B. Number and percentage of minors residing with families.	3123 = 98.64% SWA = 98.52%	3146 = 98.78% SWA = 98.64%	Maintain percentage above 98%.	Continue to participate in county interagency meetings to address the needs of children. Continue to expand the availability of nursing and behavioral respite services and in-home behavioral supports. Support families in locating child care programs willing to serve children with disabilities. Develop needed family support resources. Under AB 9, Family Resource Centers have been contracted to provide additional parent trainings in each county. The development of out-of-home respite options will also be prioritized in the future.
C. Number and percentage of adults residing in independent living.	458 = 10.22% SWA = 12.19%	471 = 10.16% SWA = 11.94%	Maintain percentage at 10.16%.	Continue to review the needs of individuals at annual review meetings and recommend ILS where appropriate. WBHC has been vendorized by GGRC for housing services to assist individuals to locate affordable housing and help with housing issues that might arise as a result of living in their own place.
D. Number and percentage of adults residing in supported living.	274 = 6.11% SWA = 5.47%	285 = 6.15% SWA = 5.56%	Maintain percentage at 6.15%.	Support WBHC in their effort to advocate on behalf of people served by GGRC on issues related to increasing affordable housing options. Provide information and education to people on housing alternatives. Utilize the housing services of WBHC mentioned above. Continue monitoring efforts mandated by AB 9 and AB 104.
E. Number and percentage of adults living in Adult Family Home Agency (FHA) homes.	45 = 1.00% SWA = .59%	59 = 1.27% SWA = .70%	Increase the numbers of individuals living in FHAs by four.	Continue to provide consultation and support to vendorized FHAs in GGRC's area. Support the additional development of this model through education/training for people served and families, as well as to GGRC staff.
F. Number and percentage of adults residing in family homes (home of parent or guardian).	2357 = 52.58% SWA = 55.40%	2463 = 53.15% SWA = 56.21%	Ensure that individuals are able to live in the type of living arrangement of their choice.	Establish training/education strategy to ensure that individuals and families are aware of appropriate choices available. Support families in locating necessary resources to maintain home placement. We expect more people to live with their families as the economy worsens and more people struggle to make ends meet.

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G. Number and percentage of adults residing in home settings (including supported living, independent living services, adult FHA homes, and family homes).	3134 = 69.91% SWA = 73.65%	3278 = 70.74% SWA = 74.41%	Increase the number of individuals living in supported and independent living, FHAs, and family homes collectively.	Develop new FHA providers for residential services for adults. Provide more opportunities for individuals and families to see residential options. A Housing Task Force has been established to review types of homes and work towards development of new options. AB 9 may result in a reduction of those served under SLS but GGRC plans to increase the overall number of adults residing in home settings (SLS, ILS, FHAs, and family homes).
H. Number and percentage of minors living in facilities serving more than six (includes community care facilities, intermediate care facilities, and skilled nursing facilities).	0 = .00% SWA = .12%	0 = .00% SWA = .11%	Maintain current percentage.	Ensure that development of residential homes for children with fewer than six beds meets community needs. First priority is to keep children at home with their families as supported by GGRC Board of Directors policies.
I. Number and percentage of adults living in facilities serving more than six (not including developmental centers).	229 = 5.11% SWA = 3.94%	224 = 4.83% SWA = 3.65%	Decrease the number of adults living in larger settings by eight.	Conduct reviews of individuals residing at nursing homes to determine housing and support needs and locate housing options to meet those needs accordingly. Continue transition of Laguna Honda Hospital individuals into community based settings.
Number and percentage of adults with earned income and average wage (aggregate).	Not available	Not available	Not applicable at this time.	Data not available.
Number and percentage of adults in supported employment.	Not available	Not available	Not applicable at this time.	Data not available.
Number and percentage of adults in competitive employment.	Not available	Not available	Not applicable at this time.	Data not available.
Access to medical and dental services.	Not available	Not available	Not applicable at this time.	Data not available.
Number of individuals per thousand who are victims of abuse.	Not available	Not available	Not applicable at this time.	Data not available.

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<u>Compliance Measures</u>				
MEASURE	2010	2011	GOAL 2012	PLANNED AND CONTINUING ACTIVITIES
Unqualified independent audit with no material finding(s).	Yes	Yes	Balanced budget – no audit exceptions.	Continue to employ an external CPA to review GGRC's financial records on an annual basis.
Substantial compliance with DDS fiscal audit.	Yes	Yes	Balanced budget – no audit exceptions.	Comply with all regulations requests for information from DDS and any recommendations made as a result of their audit findings.
Accuracy percent of POS fiscal projections (based on February SOAR).	Yes	Yes	Ensure POS expenditures do not exceed DDS Budget Allocation.	Perform budget tracking calculations requested by DDS based upon existing GGRC financial reports; ensure compliance with financial requirements related to new statutes (July 28, 2009 TBL).
Operates within OPS budget.	Yes	Yes	Balanced budget – no audit exceptions.	Continue to monitor the OPS budget on monthly basis and take what actions are necessary to operate within the DDS budget allocation.
Certified to participate in Waiver.	Yes	Yes	Continue certification.	Continue to comply with all requirements necessary for GGRC to maintain current Medicaid Waiver status; continue to rank #1 RC in terms of percentage of caseload individuals qualifying under Waiver.
Compliance with Vendor Audit Requirements per contract, Article III, Section 10.	Yes	Yes	Total compliance.	Continue to comply with DDS vendor requirements as dictated within the DDS/Regional Center annual contract.
CDER/ESR Currency.	96.47%	95.75% SWA = 95.67%	Achieve minimum 97%.	GGRC staff keeps a list of all CDER's and inputs data as they are received. Records are checked to ensure that each CDER is updated. Supervisors check records annually. Administration will review utilization of resources for data entry of CDERs/ESRs.
Intake/assessment and IFSP timelines (age 0-3 years).	Not available	Not available	Maintain 94%.	IS provides a monthly list to social workers of children who are due for transition plans. Early Start supervisors check list each month to ensure that timelines are met. Goal based on an average of Intake/Assessment and IFSP data within Early Start Record Review Report dated March 21-24, 2011.
Intake/assessment timelines for individuals age 3 and above.	95.86%	98.86% SWA = 98.56%	Achieve 100%.	IS provides list of individuals monthly that shows 120 day due date. Supervisors check list each month to ensure that timelines are met.
IPP Development (WIC requirements).	Not available	Not available	Maintain 99%	Goal based on an average of IPP Development data within GGRC's Medicaid Waiver Audit dated July 12-21, 2010.
IFSP Development (Title 17 requirements).	Not available	Not available	Maintain 93%	Goal based on an average of IFSP Development data within Early Start Record Review Report dated March 21-24, 2011.

STATEMENT OF ASSURANCES

This is to assure that Golden Gate Regional Center's Year 2012 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 2012 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:



JAMES L. SHORTER

Date:

OCTOBER 18, 2011