

**GOLDEN GATE REGIONAL CENTER
PERFORMANCE CONTRACT PLAN 2015**

Approved by DDS: _____
Page 1 of 4

Approved by GGRC Board of Directors: October 21, 2014

SWA = statewide average

PUBLIC POLICY PERFORMANCE MEASURES

MEASURE	2013	2014	GOAL 2015	PLANNED AND CONTINUING ACTIVITIES
A. Number and percentage of regional center caseload in developmental centers.	143 = 1.70% SWA = .57%	132 = 1.55% SWA = .47%	Decrease the number of individuals living in developmental centers to 125.	Implement GGRC's Community Placement Plan. Continue to promote the development of community based residential facilities that separate home ownership and service provision to serve the housing needs 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.	3305 = 98.57% SWA = 98.92%	3294 = 98.77% SWA = 99.02%	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. Family Resource Centers 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.	476 = 9.68% SWA = 11.63%	499 = 9.87% SWA = 11.52%	Maintain percentage above 10%.	Continue to review the needs of individuals at annual review meetings and recommend ILS where appropriate. Continue to sponsor 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.	357 = 7.26% SWA = 5.63%	355 = 7.02% SWA = 5.63%	Maintain percentage above 7%.	Continue 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 and housing services mentioned above.
E. Number and percentage of adults living in Adult Family Home Agency (FHA) homes.	76 = 1.55% SWA = .84%	85 = 1.68% SWA = .87%	Maintain percentage above 1.55%.	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. Develop additional FHA options to address needs of people with more behavioral challenges.
F. Number and percentage of adults residing in family homes (home of parent or guardian).	2618 = 53.22% SWA = 57.99%	2698 = 53.35% SWA = 58.91%	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. Develop supports for families that may participate in self-determination for adults who choose to remain in the family home.

**GOLDEN GATE REGIONAL CENTER
PERFORMANCE CONTRACT PLAN 2015**

Approved by DDS: _____

Page 2 of 4

Approved by GGRC Board of Directors: October 21, 2014

SWA = statewide average				
PUBLIC POLICY PERFORMANCE MEASURES				
MEASURE	2013	2014	GOAL 2015	PLANNED AND CONTINUING ACTIVITIES
G. Number and percentage of adults residing in home settings (including supported living, independent living services, adult FHA homes, and family homes).	3527 = 71.70% SWA = 76.08%	3637 = 71.92% SWA = 76.94%	Maintain the number of individuals living in supported and independent living, FHAs, and family homes collectively above 70%.	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 = .08%	0 = .00% SWA = .06%	Zero.	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).	208 = 4.23% SWA = 3.17%	202 = 3.99% SWA = 3.03%	Decrease the number of adults living in larger settings by seven.	Conduct reviews of individuals residing at nursing homes to determine housing and support needs and locate housing options to meet those needs accordingly.

**GOLDEN GATE REGIONAL CENTER
PERFORMANCE CONTRACT PLAN 2015**

Approved by DDS: _____

Page 3 of 4

Approved by GGRC Board of Directors: October 21, 2014

SWA = statewide average				
COMPLIANCE MEASURES				
MEASURE	2013	2014	GOAL 2015	PLANNED AND CONTINUING ACTIVITIES
A. Unqualified independent audit with no material finding(s).	Yes	Yes	No audit exceptions.	Continue to employ an external CPA to review GGRC's financial records on an annual basis.
B. Substantial compliance with DDS fiscal audit.	Yes	Yes	No audit exceptions.	Comply with all regulations requests for information from DDS and any recommendations made as a result of their audit findings.
C. Accuracy percent of POS fiscal projections (based on February SOAR).	Yes	Yes	Maintain accuracy of GGRC SOAR projections.	Perform budget tracking calculations requested by DDS based upon existing GGRC financial reports; ensure compliance with financial requirements related to new statutes.
D. 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.
E. 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 client enrollment and recertification activities to maintain DDS federal funding goals.
F. 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.
G. CDER/ESR Currency.	99.59% SWA = 97.15%	99.39% SWA = 97.35%	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.
H. Intake/assessment and IFSP timelines (age 0-3 years).	Not available	Not available	Maintain timelines at no less than 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.
I. Intake/assessment timelines for individuals age 3 and above.	94.12% SWA = 99.05%	100.00% SWA = 98.00%	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.
J. IPP Development (WIC requirements).	100.00%	Not available	Maintain 100%.	Goal based on an average of IPP development data within GGRC's Home and Community-based Services Waiver Monitoring Review Report dated May 14-23, 2012.
K. IFSP Development (Title 17 requirements).	100.00%	Not available	Maintain 100%.	Goal based on an average of IFSP development data within Early Start Record Review Report dated March 21-24, 2011.

GOLDEN GATE REGIONAL CENTER
PERFORMANCE CONTRACT PLAN 2015
Approved by DDS: _____

Page 4 of 4

Approved by GGRC Board of Directors: October 21, 2014

POTENTIAL LOCAL PERFORMANCE CONTRACT MEASURES

MEASURE		FREQUENCY
<i>Employment Development Department (EDD)</i>	2013	
Number and percentage of age group 16-64 with earned income.	3,137 / 63%	annual
Average annual wages for age group 16-64.	\$8,649	annual
Annual earnings of age group 16-64 compared to people with all disabilities in California.	2012 - \$46,000 / \$40,400 Data for 2013 not available.	annual
<i>National Core Indicators (NCI)</i>	FISCAL YEAR 2010-2011	
Percentage of adults who reported having a paid job in a community-based setting (e.g., competitive or supported employment, enclave, work crew).	13%	three year cycle
Percentage of adults who reported having integrated employment as a goal in their IPP.	24%	three year cycle
Percentage of adults without a job in the community who reported wanting one.	39%	three year cycle
<i>Client Development Evaluation Report (CDER)</i>		
Number and percentage of adults in day services who interact with people without disabilities: <ul style="list-style-type: none"> • none • a few • most • all 	Data not available.	annual
Number and percentage of adults who engage in paid work: <ul style="list-style-type: none"> • less than 20 hours/week • 10-25 hours/week • 26-39 hours/week • 40 hours/week 	Data not available.	annual
Number and percentage of adults earning: <ul style="list-style-type: none"> • below minimum wage • minimum wage • above minimum wage • salaried 	Data not available.	annual

STATEMENT OF ASSURANCES

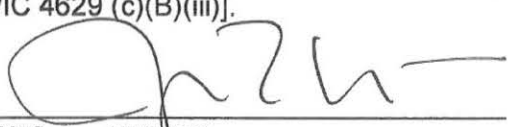


This is to assure that GOLDEN GATE REGIONAL CENTER'S Year 2015 Performance Contract was developed in accordance with the requirements specified in Welfare and Institutions Code section 4629 and the Department of Developmental Services' (DDS) Year 2015 Performance Contract Guidelines.

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
EXECUTIVE DIRECTOR
OCTOBER 22, 2014

Date: