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## **Regional Center Performance Measures Workgroup**

**December 16, 2021**

**1:00 pm - 3:00 pm**

**Via Zoom**

**Register Here: [https://cal-  
dds.zoom.us/webinar/register/WN\\_nqm9M9kIRky-ePfzjPtunA](https://cal-dds.zoom.us/webinar/register/WN_nqm9M9kIRky-ePfzjPtunA)**

### **Agenda**

- I. Welcome & Introductions**
- II. Recap of Last Meeting and Progress to Date**
- III. Federal Activity: Home and Community Based Services Measures**
- IV. Measure Selection Discussion**
- V. Next Meeting & Schedule**
  - a. January 20, 2022 1:00 to 3:00 pm
    - i. Benchmarks, meaningful comparisons, and variation in measures across and within regional centers
  - b. February 17, 2022 1:00-3:00 pm
- VI. Closing Comments**

## Workgroup Members

1. **Edith Arias**, Family Member
2. **Ken Barnes**, Family Member and CEO, Options for All
3. **Ardena Bartlett**, Family Member and Director of Parenting Black Children
4. **Emerald Brown**, Self-Advocate
5. **Harry Bruell**, Service Provider, PathPoint
6. **Beth Burt**, Family Member and Executive Director, Autism Society Inland Empire
7. **Eva Casas-Sarmiento**, Attorney, Disability Rights California (DRC)
8. **Dora Contreras**, Family Member
9. **Michi Gates**, Executive Director, Kern RC
10. **Anthony Hill**, Executive Director, San Gabriel Pomona RC (SGPRC)
11. **Tim Jin**, Self-Advocate & new Self Determination Program participant
12. **Sherry Johnson**, Family Member
13. **Svetlana Kireyeva**, Family Member
14. **Liliana Manriquez**, Director Access Program, Mixteco/Indígena Community Organizing Project (MICOP) & Proyecto Acceso
15. **Maria Marquez**, Self-Advocate and SCDD Representative
15. **Joyce McNair**, Family Member and SCDD Family Advocate, Sacramento Region Representative
16. **Mark Melanson**, Executive Director, California Community Living Network
17. **NickoleRenee Mensch**, Self-Advocate, Kern Co.
18. **Karen Mulvany**, Family Member
19. **Josefina Nieves**, Family Member
20. **Armida Ochoa**, Family Member and Founder & Director of HR Consulting
21. **Tresa Oliveri**, Family Member
22. **Marty Omoto**, Family Member and Executive Director, CD-CAN & the CA Person-Centered Advocacy Partnership
23. **Diana Pastora Carson**, Family Member and Disability Voices United Board Member
24. **Gabriel Rogin**, Executive Director, North Bay Regional Center
25. **Kathy Sanders-Platnik**, Family Member
26. **Dr. Roy Schutzengel**, Vice President, Elwyn CA
27. **Ronke Sodipo**, Director, Client Services, RC of the East Bay (RCEB)
28. **Kavita Sreedhar**, Family Member and Co-founder of PRAGNYA (for Neurodiversity)
29. **Anna Wang**, Family Member and Co-Founder of Friends of Children with Special Needs (FCSN)
30. **Joshua Weitzman**, Family Member and Executive Director, Alpha Resource Center
31. **Wesley Witherspoon**, Self-Advocate and SCDD LA Office Regional Advisory Committee
32. **Rick Wood**, Family Member & Disability Voices United (DVU) Representative
33. **Larry Yin**, Developmental Behavioral Pediatrician & Director of UCEDD

# National Core Indicator Quality Data Collection Summary

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The National Core Indicators (NCI) surveys are used to assess the services and supports provided to people with intellectual and developmental disabilities. The surveys have been used in California since 2010, pursuant to state law requiring periodic quality assessment using a nationally recognized survey. Here is a snapshot of the NCI quality program:

- 46 states and the District of Columbia use the NCI surveys.
- The surveys are completed directly by adult consumers of Regional Center services (IPS), families and/or guardians of adults who live outside of the family home (FGS), families and/or guardians of adults who live with their family member (AFS); and families of children who receive Regional Center services (CFS).
- Surveys are completed in one of three ways: on paper, online, or in-person.
- DDS is moving to conduct these surveys on a two-year cycle, rather than on the three-year cycle historically used.
- The surveys are confidential and voluntary, no one is required to participate. The primary survey instrument – the IPS, collects both fact-based information and perception based information (individual experience from the person's own perspective, and facts from documents in the person's files.)
- Quality data collected are organized into the following topic areas:
  - ✓ Employment
  - ✓ Health, Medication and Choice and Decision-making
  - ✓ Community Inclusion and Belonging
  - ✓ Wellness
  - ✓ Self-Direction
  - ✓ Safety
  - ✓ Service Coordination
  - ✓ Community Participation
  - ✓ Rights and Respect
  - ✓ Workforce
  - ✓ Access to services and supports
  - ✓ Information and planning
  - ✓ Relationships
  - ✓ Satisfaction
- Every attempt is made to obtain community-representative responses for each of the 21 regional centers.
- Results are presented as reports and through online interactive dashboards, both of which are found here: <https://www.dds.ca.gov/rc/nci/>.

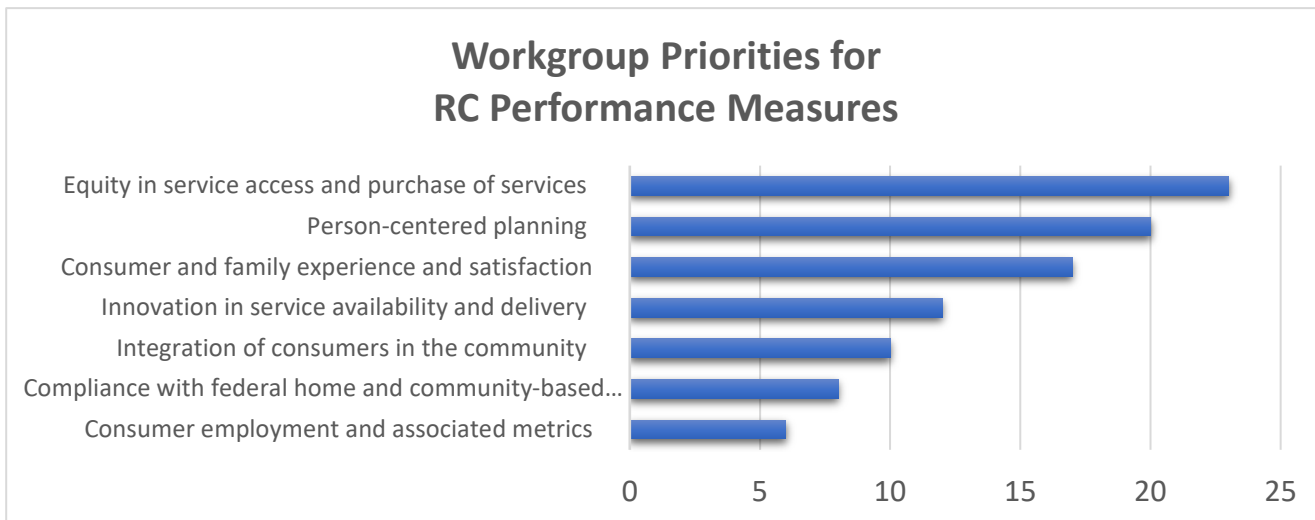


# Results of Measure Discussions from Small Groups

November 17, 2021

During the November 17, 2021, Regional Center Performance Measures Stakeholder meeting, members were asked to rank the topic areas suggested in statute [WIC section 4620.5(1)(A)-(G)] to identify priority areas for measure identification. Following the ranking, Stakeholder workgroup members were assigned to one of four small groups to discuss possible measures for the four highest ranked priority areas. Small groups were asked to discuss potential measures for each priority area, why it is important to measure the area, or why a suggested measure is important. Additional notes from each of the small group discussions are also included in the summary. The suggested measures, measure concepts and accompanying notes are a compilation of the discussions of all four small groups for each priority area.

Priority area poll results from the stakeholder workgroup:



## Measures suggested in small group discussions:

### Priority Area #1: Equity in Service Access and Purchase of Services.

#### Suggested Measures and measure concepts.

- When a family first applies for services--- the number of people who apply compared to the number identified as eligible, stratified by race and ethnicity;
- Clear set of information that should be provided to each family, and assurance that it is consistently provided to all families, in a way that is accessible to them (linguistically, native language, and in simple language)
- The number of families who applied for service and indicate that they felt the options were adequately explained to them– or they were treated fairly.

- Tracking Notice of Actions --- stratified by race and ethnicity and perhaps by category, or a measure of the DENIAL of service by RC's that do not result in a notice of action.
- RC demonstrates they have made an improvement on disparity issue identified by their data.
- Measure to determine the gap between POS dollars authorized and actual dollars being utilized by individuals.
- Measure a person's knowledge of services that are available.
- Measure to determine the cultural appropriateness of a service

## **Why is this important to measure?**

We state that family satisfaction is important to us in Guiding Principles; as a system we identify an equitable system is a core value- we need to have data that tell us whether or not our system IS equitable; we need to know if families of color are being treated with respect; These measures also create a pathway for improvement when an RC is not performing in an equitable manner.

## **Notes:**

With each of these measures, it will be important to provide consistent definitions of the key processes and instruments that are used; for example, "applied for services" must be addressed in the same way in all RC's.

Suggest that Purchase of service or expenditures alone are NOT a good way to measure equity --- it might be problematic when comparing across regional centers with varying rates.

## **Priority Area #2: Person Centered Planning**

### **Suggested Measures and measure concepts.**

- Measures of meeting demographics: when, where, whom the consumer wants present.
- How do we still meet need for hard data (ie federal waiver requirement) but look at the soft stuff – were people happy, satisfied, treated well. 360 Degree – at end of meeting everyone take survey about how it went. 1-5 scale and every 1 marked gets a call back so it's a continual feedback loop. Could also bring together scores to equal one measurement that could be used to compare scores (Net promoter score). le score based on satisfaction, timeliness, etc..
- Total number of minutes clients attended meeting.
- Goals that are met within IPP's
- Measures of person-centered process (meetings at convenience of families, timely, include preferences of the person, federal regulations met.)
- Percentage of IPP's that include priorities of the individual and their family; what % of the things the individual and family say are important to them that are actually included in their plan.
- Was the IPP timely? At a location that was convenient to the family? In the person's preferred language?
- Include capacity measures: # of SC's certified or trained in PLAN FACILITATION or The total number of hours of PCP Facilitation training per SC.

- How many individuals have a Person Centered Plan within their IPP
- How are we meeting the goals within the Person Centered Plan

## **Why is this important to measure?**

California IPP is not a person-centered plan; it is important to keep our eyes on the process in order to influence the outcome. The PCP is the foundation for everything else we are trying to build, so we must invest in it up front.

PCP is the foundation for all that follows. It sets up the relationship with the team and the person.

## **Notes:**

These measures should link to the Federal Rules about person centered planning in HCBS;

## **Priority Area #3: Consumer and Family Experience and Satisfaction**

### **Suggested Measures and measure concepts.**

- Measures of satisfaction that are detailed, specific engagement or a specific service rendered by a Regional Center.
- Unmet service needs, quantified by families, on what they are looking for that has not been met.
- From a family's perspective, the impact of lack of capacity; a way to measure whether or not there are adequate staff, and "openings" within vendors to meet the needs of families. One way to measure this would be length of time from service authorization until 1<sup>st</sup> day of billed service.
- Ask families what they suggest for improvement?
- Metrics of consumer satisfaction need to assess: 1. Impression of Quality of care 2. Interpersonal skills by provider of care 3. Transparency between provider and beneficiary of care 4. Ease of access to services
- Individuals served and family members report feeling respected and a valued partner of the RC (this would be an element of employee and board evaluations).
- Establish clear standards for regional center staff and evaluate achievement of those standards(e.g., knowledge, performance, timeliness, etc.).
- Timeliness of response from service coordination for emergent and non- emergent call/request
- Hours of training for SC's on cultural and linguistic competencies;
- Measures of respect and dignity
- Cultural representation of RC employees and Board of Directors matches the representative population served (catchment area)

## **Why is this important to measure?**

It is important to know where there are shortfalls in availability and demand, otherwise we can't fill an unmet need. It's important to know from a family and self-advocate perspective if the system is meeting or exceeding– their needs

## **Notes:**

CMS requested public comment on measures that included experience of families and suggested they will be moving in this direction for HCBS quality measures in the future. One group noted that NCI measures capture some of these areas, including a specific domain for satisfaction and for service coordination. One group noted these measures may require a clear definition of unmet need be established, in response to “we can’t get the services we need” statements from families and consumers.

## **Priority Area #4 Innovation in Service Availability and Delivery**

### **Suggested Measures and measure concepts.**

- The number of services available based on geographic location/catchment area
- The time it takes for individuals to access those services
- Timeliness for Regional Centers to implement new services or a new program (e.g. Self-Determination)
- New ways to serve existing (known) needs
- New services identified
- New clients or new recipients of services
- New technology to support services
- Innovation in process or reporting that saves time/reduces admin burden for families and the system?

## **Notes:**

One group noted some of their measure ideas may not be meaningful measures, but might be considered as a potential incentive process not linked to performance measures.