

**Harbor Regional Center  
Home and Community-Based Services  
1915(i) State Plan Amendment  
Monitoring Review Report**

**Conducted by:**

**Department of Developmental Services  
and  
Department of Health Care Services**

**July 10-25, 2023**

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## EXECUTIVE SUMMARY

The Department of Developmental Services (DDS) and the Department of Health Care Services (DHCS) conducted the federal compliance monitoring review of the Home and Community-Based Services (HCBS) 1915(i) State Plan Amendment (SPA) program from July 10-25, 2023, at Harbor Regional Center (HRC). The monitoring team members were Nadia Flores (Team Leader), Kelly Sandoval, Lena Mertz, Ashley Guletz, and Bonnie Simmons from DDS.

### Purpose of the Review

DDS contracts with 21 private, non-profit corporations to operate regional centers, which are responsible under state law for coordinating, providing, arranging, or purchasing the services needed for eligible individuals with developmental disabilities in California. All HCBS 1915(i) SPA services are provided through this system. It is the responsibility of DDS to ensure, with the oversight of DHCS, that the HCBS 1915(i) SPA is implemented by regional centers in accordance with Medicaid statute and regulations.

### Overview of the HCBS 1915(i) SPA Programmatic Compliance Monitoring Protocol

The compliance monitoring review protocol is comprised of sections/components designed to determine if the consumers' needs and program requirements are being met and that services are being provided in accordance with the consumers' individual program plan (IPP). Specific criteria have been developed for the review sections listed below that are derived from federal/state statutes and regulations and from Centers for Medicare & Medicaid Services' directives and guidelines relating to the provision of HCBS 1915(i) SPA services.

### Scope of Review

The monitoring team conducted a record review of a sample of 18 HCBS 1915(i) SPA consumers. In addition, a supplemental sample of consumer records were reviewed for five consumers who had special incidents reported to DDS during the review period of April 1, 2022 through March 31, 2023.

### Overall Conclusion

HRC is in substantial compliance with the federal requirements for the HCBS 1915(i) SPA program. Specific recommendations that require follow-up actions by HRC are included in the report findings. DDS is requesting documentation of follow-up actions taken by HRC in response to each of the specific recommendations within 30 days following receipt of this report.

## Major Findings

### Section I – Regional Center Consumer Record Review

Eighteen sample consumer records were reviewed for 24 documentation requirements (criteria) derived from federal and state statutes and regulations and HCBS 1915(i) SPA requirements. Criterion 1.7.a was 72 percent in compliance because 5 of the 18 IPPs did not include the type and amount of all services and supports purchased by the regional center. Six criteria were rated as not applicable for this review.

The sample records were 96 percent in overall compliance for this review. HRC's records were 100 and 99 percent in overall compliance for the collaborative reviews conducted in 2021 and in 2019, respectively.

### Section II – Special Incident Reporting

The monitoring team reviewed the records of the 18 consumers on the 1915(i) SPA and five supplemental sample consumers for special incidents during the review period. HRC reported all special incidents timely for the sample selected for the HCBS 1915(i) SPA review. For the supplemental sample, the service providers reported all five incidents to HRC within the required timeframes, and HRC subsequently transmitted all five special incidents to DDS within the required timeframes. HRC's follow-up activities on consumer incidents were timely and appropriate for the severity of the situations for four of the five incidents.

## **SECTION I**

### **REGIONAL CENTER CONSUMER RECORD REVIEW**

#### **I. Purpose**

The review is based upon documentation criteria derived from federal/state statutes and regulations and from the Centers for Medicare & Medicaid Services' directives and guidelines relating to the provision of Home and Community-Based Services (HCBS) 1915(i) State Plan Amendment (SPA) services. The criteria address requirements for eligibility, consumer choice, notification of proposed action and fair hearing rights, individual program plans and periodic reviews and reevaluations of services. The information obtained about the consumers' needs and services is tracked as a part of the onsite program reviews.

#### **II. Scope of Review**

1. Eighteen HCBS 1915(i) SPA consumer records were selected for the review sample.
2. The review period covered activity from April 1, 2022 to March 31, 2023.

#### **III. Results of Review**

The sample consumer records were reviewed for 24 documentation requirements derived from federal and state statutes and regulations and HCBS 1915(i) SPA requirements. Six criteria were not applicable for this review.

- ✓ The sample records were in 100 percent compliance for 15 applicable criteria. There are no recommendations for these criteria.
- ✓ Findings for three criteria are detailed below.
- ✓ A summary of the results of the review is shown in the table at the end of this section.

#### IV. Findings and Recommendations

- 1.3 The IPP is reviewed (at least annually) by the planning team and modified, as necessary, in response to the consumer's changing needs, wants or health status. [42 CFR 441.301(b)(1)(I)]

##### Finding

Seventeen of the eighteen (94 percent) consumer records contained documentation that the IPPs were reviewed at least annually by the planning team. However, there was no documentation that the IPP for consumer #2 had been reviewed annually.

1.3 Recommendation	Regional Center Plan/Response
HRC should ensure that the IPP for consumer #2 is reviewed at least annually by the planning team.	HRC will ensure that IPPs are reviewed at least annually. HRC will utilize Virtual Chart Task List to track and monitor due dates of annual meetings.

- 1.7.a The IPP includes a schedule of the type and amount of all services and supports purchased by the regional center. [WIC §4646.5(a)(5)]

##### Findings

Thirteen of the eighteen (72 percent) sample consumer IPPs included a schedule of the type and amount of all services and supports purchased by the regional center. However, the IPPs for five consumers did not include HRC funded services as indicated below:

1. Consumer #2: Community Integration Training Program and Transportation Company.
2. Consumer #8: Supportive Living Services.
3. Consumer #11: Transportation and Personal Assistance.
4. Consumer #12: Transportation and Supported Employment; and,
5. Consumer #18: Homemaker Service.

1.7.a Recommendations	Regional Center Plan/Response
HRC should ensure that the IPPs for consumers #2, #8, #11, #12 and #18	HRC will ensure that the IPPs will include a schedule of the type and

include a schedule of the type and amount of all services and supports purchased by HRC.	amount of all services and supports purchased by HRC through ongoing training and managerial review of IPPs. All 5 of these had updated IPPs which included the missing information in the previous ones.
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- 1.9 Periodic reviews and reevaluations of consumer progress are completed (at least annually) to ascertain that planned services have been provided, that consumer progress has been achieved within the time specified, and the consumer and his/her family are satisfied with the IPP and its implementation.  
 [W&I Code §4646.5(a)(6)]

### Finding

Seventeen of the eighteen (94 percent) sample consumer records contained documentation of periodic review and reevaluation of consumer progress at least annually. However, the record for consumer #2 did not contain documentation that the consumer's progress had been reviewed within the year.

1.9 Recommendation	Regional Center Plan/Response
HRC should ensure that a review and reevaluation of progress regarding planned services, timeframes and satisfaction for consumer #2 is completed and documented at least annually.	HRC will ensure that IPPs are reviewed at least annually. HRC will utilize Virtual Chart Task List to track and monitor due dates. This individual is now up to date and their annual review was completed

Regional Center Consumer Record Review Summary Sample Size = 18 Records						
	Criteria	+	-	N/A	% Met	Follow-up
1.0	The consumer is Medi-Cal eligible. (SMM 4442.1)	18			100	None
1.1	Each record contains a “1915(i) State Plan Amendment Eligibility Record” (DS 6027 form), signed by qualified personnel, which documents the date of the consumer’s initial 1915(i) SPA eligibility certification and annual reevaluation, eligibility criteria, and short-term absences. [SMM 4442.1; 42 CFR 483.430(a)]	Criterion 1.1 consists of four sub-criteria (1.1.a-d) that are reviewed and rated independently.				
1.1.a	The DS 6027 is signed and dated by qualified regional center personnel.			18	NA	None
1.1.b	The DS 6027 form indicates that the consumer meets the eligibility criteria for the 1915(i) SPA.			18	NA	None
1.1.c	The DS 6027 form documents annual reevaluations.			18	NA	None
1.1.d	The DS 6027 documents short-term absences of 120 days or less, if applicable.			18	NA	None
1.2	There is written notification of a proposed action and documentation that the consumer has been sent written notice of their fair hearing rights whenever services or choice of services are denied or reduced without the agreement of the consumer/authorized representative, or the consumer/authorized representative does not agree with all, or part, of the components in the consumer’s IPP. [42 CFR Part 431, Subpart E; WIC §4710(a)(1)]			18	NA	None
1.3	IPP is reviewed ( <i>at least annually</i> ) by the planning team and modified, as necessary, in response to the consumer’s changing needs, wants or health status. [42 CFR 441.301(b)(1)(I)]	17	1		94	See Narrative



**Regional Center Consumer Record Review Summary**  
**Sample Size = 18 Records**

	Criteria	+	-	N/A	% Met	Follow-up
1.4.a	The IPP is signed, prior to its implementation, by an authorized representative of the regional center and the consumer, or where appropriate, his/her parents, legal guardian, or conservator. <i>[WIC §4646(g)]</i>	17		1	100	None
1.4.b	IPP addendums are signed by an authorized representative of the regional center and the consumer, or where appropriate, his/her parents, legal guardian, or conservator.	3		15	100	None
1.4.c	The IPP is prepared jointly with the planning team. <i>[WIC §4646(d)]</i>	17		1	100	None
1.5	The IPP includes a statement of goals based on the needs, preferences, and life choices of the consumer. <i>[WIC §4646.5(a)(2)]</i>	17		1	100	None
1.6	The IPP addresses the consumer's goals and needs. <i>[WIC §4646.5(a)(2)]</i>	Criterion 1.6 consists of six sub-criteria (1.6.a-f) that are reviewed independently.				
1.6.a	The IPP addresses the special health care requirements, health status and needs as appropriate.	3		15	100	None
1.6.b	The IPP addresses the services which the CCF provider is responsible for implementing.			18	NA	None
1.6.c	The IPP addresses the services which the day program provider is responsible for implementing.	4		14	100	None
1.6.d	The IPP addresses the services which the supported living services agency or independent living services provider is responsible for implementing.	3		15	100	None
1.6.e	The IPP addresses the consumer's goals, preferences, and life choices.	17		1	100	None
1.6.f	The IPP includes a family plan component if the consumer is a minor. <i>[WIC §4685(c)(2)]</i>	6		12	100	None
1.7.a	The IPP includes a schedule of the type and amount of all services and supports purchased by the regional center. <i>[WIC §4646.5(a)(5)]</i>	13	5		72	See Narrative

**Regional Center Consumer Record Review Summary**  
**Sample Size = 18 Records**

	Criteria	+	-	N/A	% Met	Follow-up
1.7.b	The IPP includes a schedule of the type and amount of all services and supports obtained from generic agencies or other resources. <i>[WIC §4646.5(a)(5)]</i>	17		1	100	None
1.7.c	The IPP specifies the approximate scheduled start date for new services and supports. <i>[WIC §4646.5(a)(5)]</i>	4		14	100	None
1.8	The IPP identifies the provider or providers of service responsible for implementing services, including, but not limited to, vendors, contract providers, generic service agencies, and natural supports. <i>[WIC §4646.5(a)(4)]</i>	17		1	100	None
1.9	Periodic reviews and reevaluations are completed ( <i>at least annually</i> ) to ascertain that planned services have been provided, that consumer progress has been achieved within the time specified, and that the consumer and his/her family are satisfied with the IPP and its implementation. <i>[WIC §4646.5(a)(8)]</i>	17	1		94	See Narrative
1.9.a	Quarterly face-to-face meetings with the consumer are completed for consumers living in community out-of-home settings, i.e., Service Level 2, 3 or 4 CCFs, family home agencies or supported living and independent living settings. ( <i>Title 17, CCR, §56047; Title 17, CCR, §56095; Title 17, CCR, §58680; Contract requirement</i> )	2		16	100	None
1.9.b	Quarterly reports of progress toward achieving IPP objectives are completed for consumers living in community out-of-home settings, i.e., Service Level 2, 3 or 4 CCFs, family home agencies or supported living and independent living settings. ( <i>Title 17, CCR, §56047; Title 17, CCR, §56095; Title 17, CCR, §58680; Contract requirement</i> )	2		16	100	None

## SECTION II

### SPECIAL INCIDENT REPORTING

#### I. Purpose

The review verifies that special incidents have been reported within the required timeframes, that documentation meets the requirements of Title 17, California Code of Regulations, and that the follow-up was complete.

#### II. Scope of Review

1. The records of the 18 consumers selected for the HCBS 1915(i) State Plan Amendment (SPA) sample were reviewed to determine that all required special incidents were reported to Department of Developmental Services (DDS) during the review period.
2. A supplemental sample of five consumers who had special incidents reported to DDS within the review period was assessed for timeliness of reporting and documentation of follow-up activities. The follow-up activities were assessed for being timely, appropriate to the situation, resulting in an outcome that ensures the consumer is protected from adverse consequences, and that risks are either minimized or eliminated.

#### III. Results of Review

1. HRC reported all special incident in the sample of 18 records selected for the HCBS 1915(i) SPA review to DDS.
2. HRC's vendors reported all of the five (100 percent) special incidents in the supplemental sample within the required timeframes.
3. HRC reported all five (100 percent) incidents to DDS within the required timeframes.
4. HRC's follow-up activities on consumer incidents were appropriate for the severity of the situations for four the five (80 percent) incidents.

#### IV. Finding and Recommendation

SIR #3: The incident occurred on April 3, 2022. However, HRC did not provide follow-up on medical attention or support provided to the consumer.

Recommendation	Regional Center Plan/Response
HRC should ensure that appropriate follow-up is completed for SIR #3.	HRC has completed the follow up to the SIR. In addition, HRC has completed SIR follow-up created in Virtual Chart for all SIRs that require additional information to close out.

## SAMPLE CONSUMERS

### HCBS 1915(i) State Plan Amendment Review Consumers

#	UCI	#	UCI
1	XXXXXX	10	XXXXXX
2	XXXXXX	11	XXXXXX
3	XXXXXX	12	XXXXXX
4	XXXXXX	13	XXXXXX
5	XXXXXX	14	XXXXXX
6	XXXXXX	15	XXXXXX
7	XXXXXX	16	XXXXXX
8	XXXXXX	17	XXXXXX
9	XXXXXX	18	XXXXXX

### SIR Review Consumers

#	UCI	Vendor
SIR 1	XXXXXX	XXXXXX
SIR 2	XXXXXX	XXXXXX
SIR 3	XXXXXX	XXXXXX
SIR 4	XXXXXX	XXXXXX
SIR 5	XXXXXX	XXXXXX