Quality Incentive Program
Provider Capacity Survey | Fiscal Year 2026-2027

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SECTION 1: INTRODUCTION

To start the survey, please enter your parent ID that was sent to your email along with this survey link.

Parent ID	

Confidentiality Statement
The Department of Developmental Services (DDS) is conducting the QIP Provider Capacity Survey to collect data from provider agencies about factors that impact the developmental services workforce in California. This survey collects information about Direct Support Professionals, staff at transportation service agencies, and clinical and therapeutic staff at professional service agencies. Provider agencies who participate in this survey will be eligible for the Quality Incentive Rate in FY 2026-2027. See [directive] for information on eligibility compliance requirements.

DDS is committed to promoting and protecting the privacy rights of individuals as enumerated in Article 1 of the California Constitution, the Welfare and Institutions Code, the Information Practices Act of 1977, and other state and federal privacy laws. As a covered entity and provider of health care as well as state agency, it is the policy of the DDS to limit the collection and safeguard the privacy of personal information collected or maintained by DDS. DDS' information management practices conform to the requirements of the Health Information Portability and Accountability Act, Lanterman Developmental Disabilities Act, the California Medical Information Act, the Information Practices Act at Civil Code section 1798 et seq., Public Records Act at Government Code section 7920.000 et seq. (Public Records Act), Government Code sections 11015.5 and 11019.9, and other applicable laws pertaining to information privacy. As such, DDS follows the principles in collecting and managing personal information as set forth in [Privacy Policy: CA Department of Developmental Services](#).

Introduction
The Department of Developmental Services (Department) is collecting data from service providers through three reporting measures as part of the Quality Incentive Program (QIP). This survey collects data for the QIP Provider Capacity measure, which focuses on information about service delivery and workforce capacity.

Eligibility: All existing service providers with QIP-eligible Purchase of Service (POS) authorizations during FY 2024-25 are eligible to participate in this survey. Service providers can earn up to 10% of their Quality Incentive rate effective July 1, 2026, through June 30, 2027 by participating in this survey. Additional compliance requirements for earning the QIP rate may be found here.

Deadline: All data must be submitted by February 27, 2026.

About the Survey: All data for the QIP Provider Capacity measure must be entered here in the Qualtrics Survey platform. All Service Providers will answer a set of Agency Profile questions, followed by specific questions related to their workforce. Questions about your organization's workforce will be organized into the following sections:

- Staff working as Direct Support Professionals (DSPs)
- Staff providing direct care in Professional, Behavioral, and Clinical Services
- Staff providing direct care in Transportation Services

Reporting Requirements: Service Providers must report on all vendor IDs within their organization, as reported in the DDS Provider Directory. Based on QIP-eligible service authorizations, service providers will be completing one or more "Workforce Sections" in this survey. Data on your organization's workforce should be inclusive of staff providing direct care services to persons with intellectual and developmental disabilities whose services are funded through a regional center.

Need Help?
If you have general questions, please email us at QIPquestions@dds.ca.gov.
For support on specific survey questions, please submit a Help Desk Ticket.

Acknowledgement: The California Workforce Survey is adapted with permission from the National Core Indicators® State of the Workforce Survey which was designed in partnership between Human Services Research Institute (HSRI) and the National Association of State Directors of Developmental Disabilities Services (NASDDDS). State policymakers and advocates will use survey data to inform workforce planning policies. This survey is being administered the CA Department of Developmental Services in collaboration with UC Davis Continuing and Professional Education – Human Services.

1) Please review your information listed and respond to the question below.

The information listed is validated in the Provider Directory. Vendor IDs and Service codes listed have Purchase of Service authorizations for FY 2024-2025. Service codes listed are only ones eligible to participate in the Provider Capacity Survey for QIP FY 2026 - 2027. Is the information listed correct?

- **a.** Yes
- **b.** No

Note: The Provider Capacity Team cannot change Parent Name, Parent ID or Contact Email in the Provider Directory. If you would like to change this information in the Provider Directory, please contact the Provider Directory Team: providerdirectory@dds.ca.gov.

<u>**Reminders**</u>

- The Provider Capacity Team cannot change Parent Name, Parent ID or Contact Email in the Provider Directory. If you would like to change this information in the Provider Directory, please contact the Provider Directory Team: providerdirectory@dds.ca.gov.

- Service codes listed are only ones eligible to participate in the Provider Capacity Survey for QIP FY 2026 - 2027.

- Vendor IDs and Service codes above have Purchase of Service authorizations for FY 2024-2025 (July 1. 2024 to June 30, 2025).

2) Did any of your vendor IDs change after initial validation in the Provider Directory? If yes, select each vendor ID that changed and tell us the new vendor ID(s) and service code(s).

   a. Yes (please explain)
   b. None of these vendor IDs changed after initial Provider Directory Validation.

3) Is your agency an <u>individual provider</u> or <u>provider agency</u>?

DDS is required to collect this data to comply with the CMS Medicaid Access Rule. Per the CMS Medicaid Access Rule:

<u>**Individual Providers**</u> are defined as self-employed individuals who provide direct care to persons with IDD. Individual providers do not employ or supervise any direct care staff. Individual providers contract directly with Regional Centers to provide services and are paid directly by the Regional Center for the services they render.

<u>**Provider Agencies**</u> are defined as agencies who employ or contract with direct care workers (e.g., employees of the agency) to deliver services to persons with IDD. Provider agencies are responsible for hiring, managing, and compensating staff who provide direct care services. These agencies contract directly with Regional Centers to deliver services and are paid directly by the Regional Center for services rendered.

   a. Individual provider
   b. Provider agency
   c. Don't know

4.a.) Language - Across all services and supports, what languages do you offer services in? Check all that apply.
   a. English
   b. Spanish
   c. American Sign Language (ASL)
   d. Arabic
   e. Armenian
   f. Chinese (Cantonese)
   g. Chinese (Mandarin)
   h. Farsi

i. Hindi
j. Hmong
k. Japanese
l. Khmer
m. Korean
n. Laotian
o. Mien
p. Russian
q. Tagalog
r. Vietnamese
s. Other

4.b.) Do you have individuals that you are unable to serve in their preferred language without using interpretation services?

a. Yes
b. No

4.c.) For individuals you are unable to serve in their preferred language, what are their preferred languages? Check all that apply.
a. English
b. Spanish
c. American Sign Language (ASL)
d. Arabic
e. Armenian
f. Chinese (Cantonese)
g. Chinese (Mandarin)
h. Farsi
i. Hindi
j. Hmong
k. Japanese
l. Khmer
m. Korean
n. Laotian
o. Mien
p. Russian
q. Tagalog
r. Vietnamese
s. Other

Please review your responses. To make changes, click the back button to return to previous questions.

Warning: Once you click Save & Continue, you will NOT be able to go back to this section of the survey. If you need to change your responses after clicking Save & Continue, please submit a Help Desk Ticket and an administrator will assist you.

☐ I have reviewed my responses and I am ready to continue to the next section.

Click the button below to open a printer dialogue of your response summary page. Change the destination to "Save as PDF" to download a PDF, or print a copy.

Download a PDF of this page

SECTION 2: ACTIVE VENDORIZATIONS

Listed in the survey are all of your Active Vendorizations in FY 2024-2025. You will complete the following questions for each Active Vendorization Listed.

Example Table

Table 3: Active Vendorizations				
Set	**RC**	**Vendor ID**	**Service Code**	**Status**
1	**ACRC**	**AB1001**	**123**	**Ready to Start**
2	ACRC	AB1001	124	Not Started
3	ACRC	AB1002	125	Not Started

5.) Is the information in the table above correct? Please review carefully. You will **not** be able to change your response after clicking next.

☐ Yes. **[If "Yes"]** Then click "Save & Continue". You will move to Question 6.

☐ No. **[If "No"]**, you will be directed to a question where you can explain your response. Please describe what is incorrect about the information in the table and click "Submit Ticket". Your survey will be paused until an administrator reconciles your ticket. ***You will then be sent a new survey link***.

6.a.) Did this active vendorization stop accepting new service referrals due to inadequate staffing?

Inadequate staffing means there were not enough direct care workers to serve new individuals.

☐ Yes. **[If the active vendorization listed stopped accepting new service referrals at any time and for any length of time in FY 2024-2025**], choose "Yes". Then click "Save & Continue"

☐ No. **[If the active vendorization listed did not stop accepting new service referrals]**, choose "No". Then click "Save & Continue".

If you said "Yes" to Question 6a, you will be asked to select the months in FY 2024-2025 during which the active vendorization listed stopped accepting new service referrals. Check all that apply.

6.b.) Please select which months during FY 2024-2025 that this active vendorization stopped accepting new service referrals. Check all that apply.

☐ July 2024   ☐ January 2025
☐ August 2024   ☐ February 2025
☐ September 2024   ☐ March 2025
☐ October 2024   ☐ April 2025
☐ November 2024   ☐ May 2025
☐ December 2024   ☐ June 2025

If you said "Yes" to Question 6a, you will be asked to provide additional information about the months during which the active vendorization listed stopped receiving new referrals. This question is optional. Then click "Save and Continue".

6.c). Optional: Tell us more information about the months this active vendorization stopped accepting new referrals. *This is not a required question.*

7) During the month of September 2025, where did you agency provide services for this active vendorization? Check all that apply.

Sometimes services are site-based or community-based, or both. This information will help us better understand where services are provided to individuals.

Community-based services are provided outside of the vendor's central location. For example, direct care workers may travel to the individual's home and assist individuals in their home. Care workers may work with individuals in community location (e.g., park, job, site, supermarket) to assist individuals in community settings.

Site-based services are provided at a central location, like a clinic, office, or center. For residential service codes, individuals live in a vendor home. For day programs, individuals travel to a program facility for services. For employment services, this may be the vendor's office that individuals visit to meet their job coach and get services. Site-based services refer to where direct care services are delivered to the individual, and excludes administrative staff work, business services, and staff meetings where individual is not present.

Other means of services refers to when services are provided in another format, such as virtual or telehealth services.

    ☐ Community-Based Services
    ☐ Site-Based Services
    ☐ Other (please describe the specifics)

7.a.) **[If response to #7 is "Other"]** Please provide more information about where the active vendorization provided services and click "Save and Continue".

8.a.) **[If response to #7 is "site-based"]** For this Active Vendorization, you selected site-based services as how services are delivered to individuals. Below is the service address on record in the Provider Directory. If this address is the location of your site-based services during [Month selected 2025]. Please confirm this information.

ACTIVE VENDORIZATION		
Regional Center	**Vendor ID**	**Service Code**
ACRC	AB1001	123

Service Location Information	
Address	123 Fake Street
City	Fake City
State	CA
Zip Code	99999

Is the service location information correct?

☐ Yes **[If "Yes"].** Click "Save and Continue". You will move to Question 8b.

☐ No **[If "No"].** You will be asked to explain your response. Please describe what information in the table is incorrect and click "Save and Continue"

8.b.) [If response to #7 is "community-based"] For this Active Vendorization, you selected community-based services as how services are delivered to individuals. Please select all cities and zip codes where you provided services to individuals during [**Month selected 2025**]. These are organized by County or Los Angeles County Service Planning Area (SPA) for the regional center catchment area associated with this active vendorization. Please select all cities and zip codes that this active vendorization serves. You may choose "All counties and cities listed below" if you serve them all. Check all that apply.

a.) If a city/zip code you serve is not listed, go to the bottom of the page under Other Area(s). Add the city/zip code in the box and click "Save and Continue"

☐ Please list any other zip codes outside of catchment area here.

b.) If you choose "community-based" location for Question 7, you will see a list of cities and zip codes. These are organized by County or Los Angeles County Service Planning Area (SPA) for the regional center catchment area associated with active vendorization. Please select all cities and zip codes that this active vendorization serves. You may choose "All counties and cities listed below" if you serve them all.

c.) If a city/zip code you serve is not listed, go to the bottom of the page under Other Area(s). Add the city/zip code in the box and click "Save and Continue".

Navigation – Active Vendorizations Update

The next screen will display an updated table of your active vendorizations. The active vendorizations you completed will be marked as "Complete" in the status column. The next active vendorization will be highlighted in green and will be marked as "Ready to Start" in the status column and you will be at set #2.

Example Table

Table 3: Active Vendorizations				
Set	**RC**	**Vendor ID**	**Service Code**	**Status**
1	ACRC	AB1001	123	Complete
2	**ACRC**	**AB1001**	**124**	**Ready to Start**
3	ACRC	AB1002	125	Not Started

Navigation - End of Active Vendorizations/Agency Profile

Once you have completed all required Agency Profile questions, you will see a page confirming the section is complete.

SECTION 3: WORKFORCE CHARACTERISTICS

Navigation – Workforce Characteristics

Next you will see one of two pages.

    a. If you have Workforce Characteristic sections to complete, you will see a screen with **Table 4: Workforce Section**. The table shows each section you will complete for Workforce Characteristics.

        After each set of questions, you will return to this Workforce Table to track your progress towards completing all questions about your direct care staff.

        If the table is **incorrect**, please submit a [Help Desk Ticket](#) before starting this part of the survey.

TABLE 4: WORKFORCE SECTION - STATUS			
Program	**Service Codes**	**FY 2024-25 Eligible Vendor ID**	**Status**
Direct Support Professionals (DSP)	**123**	**AB0001**	**Ready to Start**
Professional Services Staff	123	AB0002	Not Started
Transportation Services Staff	123	AB0003	Not Started

    b. If you do not have Workforce Characteristic sections to complete, the next screen you will see will be a text box where you can add any additional comments or questions. This question is optional.

c. For agencies who do not fill out Workforce Characteristics, you will see the Certification Statement screen next. Please select "Yes" and click "Submit Survey" to finalize your submission.

d. For agencies who do **not** fill out Workforce Characteristics, you will see the confirmation that you have submitted your survey. The process is complete, and an administrator will review your responses.

Entering Data: Workforce Characteristics

Before starting Workforce Characteristics, please consider using the Helper Worksheet provided to help organize your data. When filled out completely, this worksheet will auto-calculate all your responses for each required workforce section, apart from vacancies.

a.) Compile a list of your staff in a list or in the Helper Worksheet.

b.) When listing each staff member, you can name your staff, use their initials, or add a unique number to keep track of who each line represents.

c.) Start by adding which workforce they represent. The Helper Worksheet provides a dropdown field with options. If a staff member does not work in one of the workforce types listed, they do not belong on your list or Helper Worksheet.

Staff	Workforce
Staff 1	DSP
Staff 2	DSP
Staff 3	Professional
Staff 4	Professional
Staff 5	Professional

Note: The Helper Worksheet is for your internal use only. You will not be asked to upload this document anywhere in the survey

Navigation – Transition to Workforce Questions

The table below shows each section you will complete for Workforce Characteristics. After each set of workforce questions (Direct Support Professionals (DSP), Professional Services, and/or Transportation Services Staff); you will return to this Workforce Table to track your progress towards completing all questions about your direct care staff. If the table information is incorrect, please submit a Help Desk Ticket before starting this part of the survey.

TABLE 4: WORKFORCE SECTION - STATUS			
Program	Service Codes	FY 2024-25 Eligible Vendor ID	Status
Direct Support Professionals (DSP)	**123**	**AB0001**	**Ready to Start**
Professional Services Staff	123	AB0002	Not Started
Transportation Services Staff	123	AB0003	Not Started

Direct Support Professional (DSP) Questions

DSP9) Did your agency exclusively use contract and/or 1099 DSPs during FY 2024-25?

☐ No **[If "No"].** then click "Save & Continue", you will move to **DSP 10.**

☐ Yes **[If "Yes"].** you will be directed to the following page.

You have completed the workforce characteristics section for Direct Support Professionals (DSP).

Below is a summary of your responses for this section. You will not be able to edit responses for this section after clicking next.

If any responses are incorrect, please go back and correct your answers. If all responses are correct, click next to continue to the next section.

RESPONSE SUMMARY FOR WORKFORCE SECTION - DSP	
9. Did your agency exclusively use contract and/or 1099 DSPs during FY 2024-2025?	Yes

Back   Save & Continue

DSP10) How many DSPs did your agency have on payroll in FY 2024-25?

	Number of Staff
a. Direct Care staff on payroll on **July 1, 2024**	0
b. Direct Care staff on payroll on **June 30, 2025**	0

Note: You must have at least one DSP on payroll on June 30, 2025, to be eligible for the Workforce – DSP section. A warning will be displayed if you reported that you had "0" DSPs on payroll on that date.

    i. If this was a mistake, click "Back" and correct your response.
   ii. If this is correct, click "Save and Continue".

DSP11) How many full-time and part-time <u>DSP's</u> were on payroll on June 30, 2025?

A part-time employee is an employee who is regularly scheduled to work fewer than 30 hours per week (less than 1.0 FTE). This includes both salaried and hourly staff.

A full-time employee is an employee who is regularly scheduled to work 30 hours or more per week (or the equivalent of 1.0 full-time equivalent [FTE]). This includes both salaried and hourly staff, regardless of benefits eligibility.

The total must equal the value entered on question **DSP10b**.

		Number of Staff
a.	Full-time DSPs	0
b.	Part-time DSPs	0
	Total	0

DSP12) As of June 30, 2025, how long had your DSPs been continuously employed in a direct support role?

Continuously Employed means that the staff stayed the entire length of time, without leaving the agency.

Total for this question must equal the value entered on question **DSP10b**.

	Number of Staff
Less than 6 months	0
Between 6 to 12 months	0
Between 12 months (+1 day) to 24 months	0
Between 24 months (+1 day) to 36 months	0
More than 36 months	0
Total	0

Note: You need to:
- Know the start date for each staff member;
- Calculate each staff member's individual length of employment from their start date to June 30, 2025;
- Count the total number of staff in each employment category. Please do not count staff who are permanently separated.
- Please enter the number of staff or the numbers generated on tab 3 of the Helper Worksheet if you are utilizing the tool. Then click "Save and Continue".
- The total must equal the value entered on question **DSP10b**.
- Only enter positive whole numbers. If you enter a number with a decimal and/or a negative number, you will get a warning message. Click "Back" and correct your responses.

DSP13) What is the average starting wage for DSPs in FY 2024-25? If you did not hire any new DSPs in FY 2024-25, please type NA

Starting wage refers to the hourly pay a new staff member receives when beginning a DSP position at your agency.

Average starting wage refers to the average hourly wage paid to all new DSPs hired during FY 2024-25.

Average starting wage in FY 2024-25 $ ___ per hour

Notes:

a. If using the Helper Worksheet, on tab 2, you only need to add this for new staff who started between July 1, 2024, and June 30, 2025.

b. If you have an annual, monthly or weekly wage, please use the calculator on tab 1 to convert it to an hourly wage.

c. If no new staff that started between July 1, 2024, and June 30, 2025, please enter NA.

d. Then go to tab 3 of the Helper Worksheet which will show your average starting wage.

e. If you enter an average starting wage that is very high, you will be asked to double-check the number. If the number is correct, you can continue without making changes.

DSP14) What is the average hourly wage for DSPs in FY 2024-25?

Hourly wage refers to the hourly amount of pay that any given direct care staff receives for DSP work in your agency.

Average hourly wage refers to the average hourly wage paid to all DSPs during FY 2024-25.

Average hourly wage in FY 2024-25 $ ___ per hour

Notes:

a. If you are using the Helper Worksheet, on tab 2, fill out each individual's current hourly wage.

b. If you have an annual, monthly or weekly wage, please use the calculator on tab 1 to convert it to an hourly wage.

c. Then you will go to tab 3 on the Helper Worksheet for your average hourly wage number.

d. If you enter an average hourly wage that is very high, you will be asked to double-check the number. If the number is correct, you can continue without making changes.

DSP15) How many full-time and part-time DSP vacancies did your agency have on June 30, 2025?

		Number of Vacancies
a.	Full-time vacancies	0
b.	Part-time vacancies	0

Note: This question is not calculated using individual staff data, so it is not included on the Helper Worksheet.

DSP16) How many DSPs left /separated from your agency permanently between July 1, <u>2024</u> and June 30,2025?

Permanently separated staff refers to direct care staff who were removed from your agency's payroll for any reason whether voluntary or involuntary.

- Do **not** include:
- Staff who were promoted within the agency
- Staff who transferred within the agency
- Staff who left the agency and then rejoined between July 1, <u>2024</u> and June 30, 2025
- Staff who were <u>contract</u> or 1099 workers

Number of staff who permanently separated   0

<u>Navigation – Response Summary for Workforce Section – DSPs</u>
You will be asked to review your responses for the DSP section before continuing. Please click "Back" to edit responses. Please click "Save & Continue" to proceed. You will not be able to change your responses within Qualtrics after submitting this section. If you need to change a response after submission, please submit a [Help Desk ticket](#).

<u>Navigation – Transition to Workforce Questions</u>
Professional Services (purple background) will be shown if you have staff who are categorized as Professional Services Staff. This page includes a table listing each workforce section you will complete along with a column noting the status of each section. Your service codes and vendor ids will also be listed for each section. The section you are about to enter will be highlighted and the status will be "**Ready to Start**". If you do not need to fill out a section, it will not be listed. If you have questions about why a section is missing or present, please submit a Help Desk ticket.

TABLE 4: WORKFORCE SECTION - STATUS			
Program	Service Codes	FY 2024-25 Eligible Vendor ID	Status
Direct Support Professionals (DSP)	123	AB0001	Complete
Professional Services Staff	**123**	**AB0002**	**Ready to Start**
Transportation Services Staff	123	AB0003	Not Started

Professional Services Staff Questions

PSS9) Did your agency exclusively use contract and/or 1099 direct care staff who provided professional, behavioral or clinical services during FY2024-25?

☐ No. **[If "No"].** Click "Save and Continue". You will move to Question **PSS10**.

☐ Yes. **[If "Yes"],** you will be directed to the following page.

You have completed the workforce characteristics section for Professional Services Staff.

Below is a summary of your responses for this section. You will not be able to edit responses for this section after clicking next.

If any responses are incorrect, please go back and correct your answers. If all responses are correct, click next to continue to the next section.

RESPONSE SUMMARY FOR WORKFORCE SECTION – PROFESSIONAL SERVICES STAFF	
9. Did your agency exclusively use contract and/or 1099 direct care staff who provided professional, behavioral, or clinical services during FY 2024-2025?	Yes

PSS10) How many direct <u>care</u> staff who provided professional, behavioral or clinical services did your agency have on payroll in FY 2024-25?

	Number of Staff
a. Direct care staff on payroll on **July 1, 2024**	0
b. Direct care staff on payroll on **June 30, 2025**	0

Notes:

- Please enter the number of staff or the numbers generated on tab 3 of the Helper Worksheet if you are utilizing the tool. Then click "Save and Continue".
- You must have at least one professional services staff on payroll on June 30, 2025, to be eligible for the Workforce – Profession Services section. A warning will be displayed if you reported that you had 0 professional services staff on payroll on that date.
  - If this was a mistake, click "Back" and correct your response.
  - If this is correct, click "Save and Continue".

PSS11) How many full-time and part-time direct care staff who provided professional, behavioral or clinical services were on payroll on June 30, 2025?

A part-time employee is an employee who is regularly scheduled to work fewer than 30 hours per week (less than 1.0 FTE). This includes both salaried and hourly staff

A full-time employee is an employee who is regularly scheduled to work 30 hours or more per week (or the equivalent of 1.0 full-time equivalent [FTE]). This includes both salaried and hourly staff, regardless of benefits eligibility

The total must equal the value entered on question **PSS10b**.

	Number of Staff
a. Full-time DSPs	0
b. Part-time DSPs	0

PSS12) As of June 30, 2025, how long had your direct care staff who provided professional, behavioral or clinical services been continuously employed in a direct support role?

Continuously Employed means that the staff stayed the entire length of time, without leaving the agency.

Total for this question must equal the value entered on question **PSS10b**.

	Number of Staff
Less than 6 months	0
Between 6 to 12 months	0
Between 12 months (+1 day) to 24 months	0
Between 24 months (+1 day) to 36 months	0
More than 36 months	0
Total	0

Note: You need to:

a. Know the start date for each staff member.

b. Calculate each staff member's individual length of employment from their start date to June 30, 2025.

c. Then count the total number of staff in each employment category. Please do not count staff who are permanently separated.

d. Please enter the number of staff or the numbers generated on tab 3 of the Helper Worksheet if you are utilizing the tool. Then click "Save and Continue".

e. The total must equal the value entered on question **PSS 10b.**

f. Only enter positive whole numbers. If you enter a number with a decimal and/or a negative number, you will get a warning message. Click "Back" and correct your responses.

PSS13) What is the average starting wage for your direct care staff who provided professional, behavioral or clinical services in FY 2024-25?

Starting wage refers to the hourly pay a new staff member receives when beginning a direct care position providing professional, behavioral or clinical services at your agency.

Average starting wage refers to the average hourly wage paid to all new professional, behavioral or clinical services staff hired during FY 2024-25.

Average starting wage in FY 2024-25 $ ___ per hour

Notes:
   a. If you are using the Helper Worksheet, on tab 2, you only need to add this for new staff who started between July 1, 2024, and June 30, 2025.

   b. If you have an annual, monthly or weekly wage, please use the calculator on tab 1 to convert it to an hourly wage.

   c. If you do not have any new staff who started between July 1, 2024, and June 30, 2025, please enter NA.

   d. Then go to tab 3 of the Helper Worksheet which will show your average starting wage.

   e. enter an average starting wage that is very high, you will be asked to double check the number. If the number is correct, you can continue without making changes.

PSS14) What is the average hourly wage for direct care staff who provided professional, behavioral or clinical services across all services and supports in FY 2024-25?

Hourly wage refers to the hourly amount of pay that any given direct care staff receives for providing professional, behavioral or clinical services work in your agency.

Average hourly wage refers to the average hourly wage paid to all direct care staff who provided professional, behavioral or clinical services during FY 2024-25.

Average hourly wage in FY 2024-25 $ ___ per hour

Notes:
   a. If you are using the Helper Worksheet, on tab 2, fill out each individual's current hourly wage.

   b. If you have an annual, monthly or weekly wage, please use the calculator on tab 1 to convert it to an hourly wage.

   c. Then you will go to tab 3 on the Helper Worksheet for your average hourly wage number.

   d. If you enter an average hourly wage that is very high, you will be asked to double-check the number. If the number is correct, you can continue without making changes.

PSS15) How many full-time and part-time direct care staff who provided professional, behavioral or clinical services vacancies did your agency have as of June 30, 2025?

		Number of Vacancies
a.	Full-time vacancies	0
b.	Part-time vacancies	0

Note: This question is not calculated using individual staff data, so it is not included on the Helper Worksheet.

PSS16) How many direct <u>care</u> staff who provided professional, behavioral or clinical services left /separated from your agency permanently between July 1, 2024 and June 30,2025?

Permanently separated staff refers to direct care staff who were removed from your agency's payroll for any reason whether voluntary or involuntary.

- Do **not** include:
- Staff who were promoted within the agency
- Staff who transferred within the agency
- Staff who left the agency and then rejoined between July 1, <u>2024</u> and June 30, 2025
- Staff who were <u>contract</u> or 1099 workers

Number of staff who permanently separated   0

<u>Navigation – Response Summary for Workforce Section - Professional Services Staff</u>

You will be asked to review your responses for the Professional Services Staff section before continuing. Please click "Back" to edit responses. Please click "Save & Continue" to proceed. You will not be able to change your responses within Qualtrics after submitting this section. If you need to change a response after submission, please submit a Help Desk ticket.

<u>Navigation – Transition to Workforce Questions</u>

Transportation Services (orange background) will be shown if you have staff who are categorized as transportation staff (specific service codes only). This page includes a table listing each workforce section you will complete along with a column noting the status of each section. Your service codes and vendor ids will also be listed for each section. The section you are about to enter will be highlighted and the status will be "Ready to Start".

TABLE 4: WORKFORCE SECTION - STATUS			
Program	Service Codes	FY 2024-25 Eligible Vendor ID	Status
Direct Support Professionals (DSP)	123	AB0001	Complete
Professional Services Staff	123	AB0002	Complete
Transportation Services Staff	**123**	**AB0003**	**Ready to Start**

<u>Transportation Services Staff Questions</u>

TSS9) Did your agency exclusively use contract and/or 1099 direct care staff who provided transportation services during FY2024-25?

☐ No. **[If "No"].** Click "Save and Continue". You will move to Question **TSS10**.

☐ Yes. **[If "Yes"],** you will be directed to the following page.

You have completed the workforce characteristics section for Transportation Services Staff

Below is a summary of your responses for this section. You will not be able to edit responses for this section after clicking next.

If any responses are incorrect, please go back and correct your answers. If all responses are correct, click next to continue to the next section.

RESPONSE SUMMARY FOR WORKFORCE SECTION – TRANSPORTATION SERVICES STAFF	
9. Did your agency exclusively use contract and/or 1099 direct care staff who provided transportation during FY 2024-2025?	Yes

Back   Save & Continue

TSS10) How many direct <u>care</u> staff who provided transportation services did your agency have on payroll in FY 2024-25?

		Number of Staff
a.	Direct care staff on payroll on **July 1, 2024**	0
b.	Direct care staff on payroll on **June 30, 2025**	0

Notes:

- Please enter the number of staff or the numbers generated on tab 3 of the Helper Worksheet if you are utilizing the tool. Then click "Save and Continue".
- You must have at least one transportation services staff on payroll on June 30, 2025, to be eligible for the Workforce – Transportation Services section. A warning will be displayed if you reported that you had 0 transportation services staff on payroll on that date.
    - If this was a mistake, click "Back" and correct your response.
    - If this is correct, click "Save and Continue".

TSS11) How many full-time and part-time direct care staff who provided transportation services were on payroll on June 30, 2025?

A part-time employee is an employee who is regularly scheduled to work fewer than 30 hours per week (less than 1.0 FTE). This includes both salaried and hourly staff

A full-time employee is an employee who is regularly scheduled to work 30 hours or more per week (or the equivalent of 1.0 full-time equivalent [FTE]). This includes both salaried and hourly staff, regardless of benefits eligibility

The total must equal the value entered on question **TSS10b**.

		Number of Staff
a.	Full-time direct care staff	0
b.	Part-time direct care staff	0
	Total	0

TSS12) As of June 30, 2025, how long had your direct care staff who provided transportation services been continuously employed in a direct support role?

Continuously Employed means that the staff stayed the entire length of time, without leaving the agency.

Total for this question must equal the value entered on question **TSS10b**.

	Number of Staff
Less than 6 months	0
Between 6 to 12 months	0
Between 12 months (+1 day) to 24 months	0
Between 24 months (+1 day) to 36 months	0
More than 36 months	0
Total	0

Note: You need to:

a. Know the start date for each staff member.

b. Calculate each staff member's individual length of employment from their start date to June 30, 2025.

c. Then count the total number of staff in each employment category. Please do not count staff who are permanently separated.

d. Please enter the number of staff or the numbers generated on tab 3 of the Helper Worksheet if you are utilizing the tool. Then click "Save and Continue".

e. The total must equal the value entered on question **TSS 10b**.

f. Only enter positive whole numbers. If you enter a number with a decimal and/or a negative number, you will get a warning message. Click "Back" and correct your responses.

TSS13) What is the average starting wage for direct care staff who provided transportation services in FY 2024-25?

Starting wage refers to the hourly pay a new staff member receives when beginning a direct care position providing transportation services at your agency.

Average starting wage refers to the average hourly wage paid to all new direct care staff hired for transportation services during FY 2024-25.

Average starting wage in FY 2024-25 $ ___ per hour

Notes:

    a. If you are using the Helper Worksheet, on tab 2, you only need to add this for new staff who started between July 1, 2024, and June 30, 2025.

    b. If you have an annual, monthly or weekly wage, please use the calculator on tab 1 to convert it to an hourly wage.

    c. If you do not have any new staff who started between July 1, 2024, and June 30, 2025, please enter NA.

    d. Then go to tab 3 of the Helper Worksheet which will show your average starting wage.

    e. enter an average starting wage that is very high, you will be asked to double check the number. If the number is correct, you can continue without making changes.

TSS14) What is the average hourly wage for direct care staff who provided transportation services across all services and supports in FY 2024-25?

Hourly wage refers to the hourly amount of pay that any given direct care staff receives for transportation services work in your agency.

Average hourly wage refers to the average hourly wage paid to all direct care staff who provided transportation services during FY 2024-25.

Average hourly wage in FY 2024-25 $ ___ per hour

Notes:

    a. If you are using the Helper Worksheet, on tab 2, fill out each individual's current hourly wage.

    b. If you have an annual, monthly or weekly wage, please use the calculator on tab 1 to convert it to an hourly wage.

    c. Then you will go to tab 3 on the Helper Worksheet for your average hourly wage number.

    d. If you enter an average hourly wage that is very high, you will be asked to double-check the number. If the number is correct, you can continue without making changes.

TSS15) How many full-time and part-time direct care staff who provided transportation services vacancies did your agency have as of June 30, 2025?

	Number of Vacancies
a. Full-time vacancies	0
b. Part-time vacancies	0

Note: This question is not calculated using individual staff data, so it is not included on the Helper Worksheet.

TSS16) How many direct <u>care</u> staff who provided transportation services left /separated from your agency permanently between July 1, 2024 and June 30,2025?

Permanently separated staff refers to direct care staff who were removed from your agency's payroll for any reason whether voluntary or involuntary.

- Do **not** include:
- Staff who were promoted within the agency
- Staff who transferred within the agency
- Staff who left the agency and then rejoined between July 1, <u>2024</u> and June 30, 2025
- Staff who were <u>contract</u> or 1099 workers

Number of staff who permanently separated   0

<u>Navigation – Response Summary for Workforce Section-Transportation Services Staff</u>

You will be asked to review your responses for the DSP section before continuing. Please click "Back" to edit responses. Please click "Save & Continue" to proceed. You will not be able to change your responses within Qualtrics after submitting this section. If you need to change a response after submission, please submit a Help Desk ticket.

<u>Additional Comments, Suggestions, or Feedback</u>

Once you have completed the reporting for each workforce type, you will be able to provide comments, suggestions, or feedback on the survey. This question is optional.

<u>Certification Statement and Submitting the Survey</u>

Lastly, you will be shown the Certification Statement. You must select "I agree" and click "Submit Survey to submit your responses. Once you submit, you will be shown a screen thanking you for completing the survey. You will also receive an email confirming that your responses were submitted.

Questions?

Office of Quality Assurance

Email: QIPQuestions@dds.ca.gov