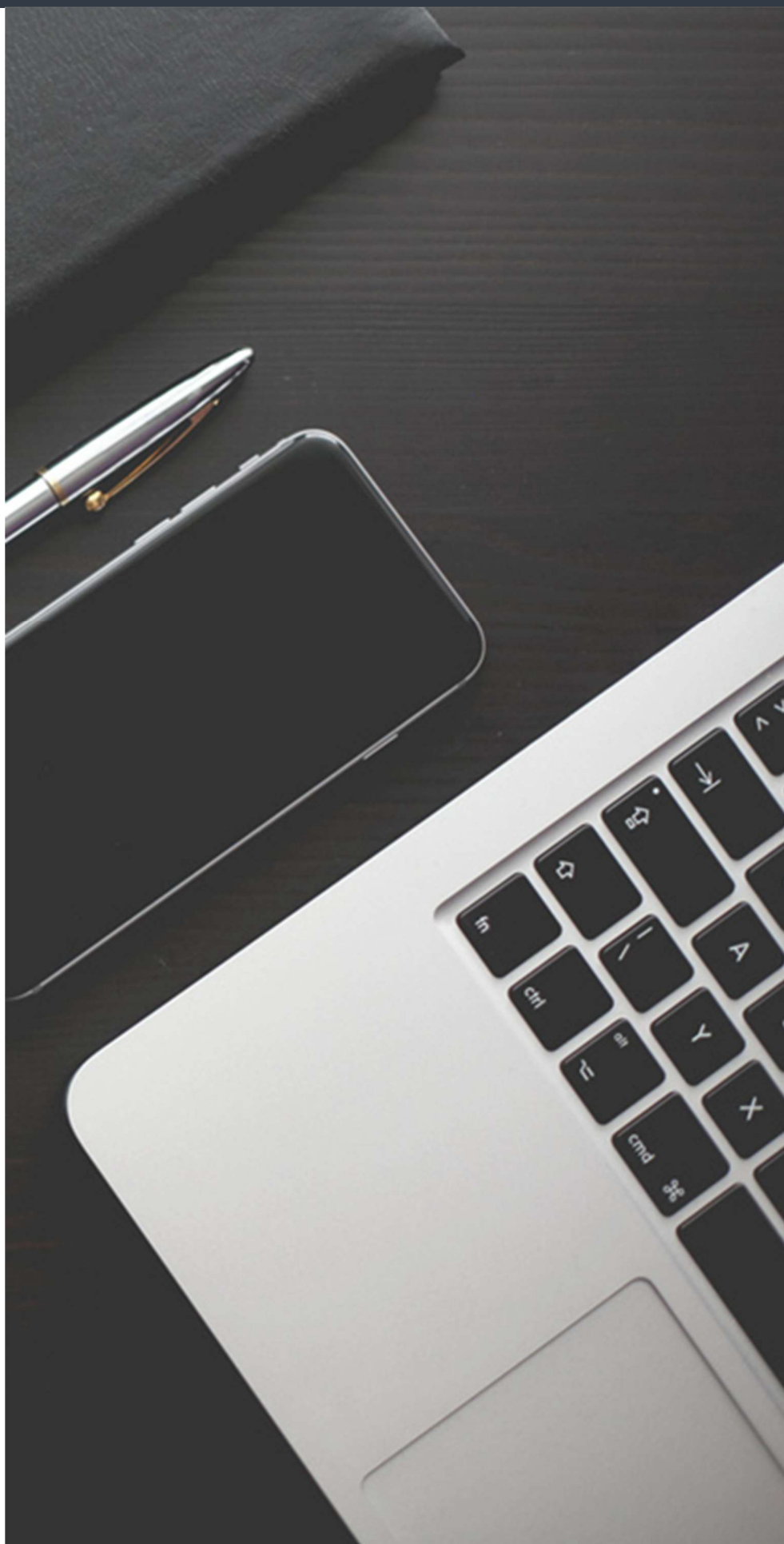
San Diego Regional Center

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

Review Dates: April 7 – 25, 2025

DDS Department of Developmental Services

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SECTION I: REGIONAL CENTER RECORD REVIEW

For the review period of January 1, 2024, through December 31, 2024, a total of 45 records of individuals enrolled on the Home and Community Based Services 1915(i) State Plan Amendment and receiving services at San Diego Regional Center (SDRC), were reviewed for individual choice, notification of proposed action and fair hearing rights, individual program plans (IPP) and periodic reviews and reevaluations of services.

The 45 records reviewed were 96 percent in overall compliance for this review. Findings for eight criteria are detailed below.

1.3 The IPP for every individual is reviewed, and revised as appropriate, at least every 12-months by the planning team and modified, as necessary, in response to the individual's changing needs, wants, or health status. *[42 C.F.R. § 441.301(C)(3) (2025)]; [W.I.C. §4646.5(b) (2023)]*

Findings

Forty-two of the forty-five (93 percent) sample records of individuals contained documentation that the individual's IPP had been reviewed annually by the planning team. However, there was no documentation that the IPPs for four individuals were reviewed annually as indicated below:

1. Individual #9: The IPP was dated November 30, 2023. There was no documentation that the IPP was reviewed annually. An annual review was not completed until January 30, 2025;

2. Individual #27: The IPP was dated January 10, 2023. There was no documentation that the IPP was reviewed annually. An annual review was not completed until April 22, 2024; and,

3. Individual #38: The IPP was dated May 18, 2022. There was no documentation that the IPP was reviewed annually. An annual review was not completed until October 2, 2024.

1.3 Recommendations	Regional Center Plan/Response
SDRC should ensure that the IPP for individuals #9, #27, and #38 are reviewed at least annually by the planning team.	The reports and contacts due for individuals #9, #27, and #38 have been reviewed to ensure that the IPP has been reviewed annually by the planning team. Training is being provided to Service Coordinators and is

	available electronically that details the requirement for annual meetings and reports.

1.4.a The IPP is prepared jointly with the planning team and list of agreed upon services is signed, prior to its implementation, by an authorized representative of the regional center and the individual or, where appropriate, the individual's parents, legal guardian, conservator or the authorized representative. *[W.I.C. § 4646(d) (2023)]; [W.I.C. § 4646(i) (2023)]; [42 C.F.R. § 441.301(c)(1)(i) (2025)]; [42 C.F.R. § 441.301(c)(2)(ix) (2025)]*

Findings

Forty-three of the forty-five (96 percent) applicable sample records of individuals contained IPPs that were signed by SDRC and the individuals, or their legal representatives. However, the following individuals' IPPs were not signed by the appropriate individual:

1. Individual #7: The IPP dated August 12, 2024, was not signed by the conservator. The IPP was signed on March 6, 2025. Accordingly, no recommendation is required; and,

2. Individual #26: The IPP dated August 30, 2023, was not signed by the regional center and the individual. The IPP was signed on January 16, 2024. Accordingly, no recommendation is required.

1.7.a The IPP includes a schedule of the type and amount of all services and supports purchased by the regional center. *[W.I.C. § 4646.5(a)(5) (2023)]; [42 C.F.R. § 441.301(c)(2)(v) (2025)]*

Findings

Thirty-six of the forty-five (80 percent) sample IPPs of individuals included a schedule of the type and amount of all services and supports purchased by the regional center. However, IPPs for nine individuals did not include SDRC funded services as indicated below:

1. Individual #13: Transportation was not included covering the review period in IPP dated June 28, 2022;

2. Individual #16: Transportation was not included for the months covering October 2024 through December 2024 in the IPP dated October 5, 2022;

3. Individual #17: Financial Management Service, the Fiscal Employment Agent was not included covering the review period in the IPP dated January 18, 2023;

4. Individual #19: Transportation Additional Component was not included for the months covering July 2024 through December 2024 in the IPP dated October 5, 2022;

5. Individual #22: Independent Living Program was not included for the months covering January 2024 through March 2024, and Public Transportation covering the review period in the IPPs dated May 13, 2021 and June 6, 2024;

6. Individual #25: Independent Living Program was not included for the months covering January 2024, February 2024, and April 2024 through November 2024, and Supportive Employment covering the review period in the IPP dated January 12, 2022;

7. Individual #26: Independent Living Program and Supportive Employment were not included in the months covering July 2024 through September 2024 in the IPP dated August 30, 2023;

8. Individual #27: Transportation was not included for the months covering October 2024 through December 2024 in the IPP dated January 10, 2023; and,

9. Individual #37: FMS F-EA service was not included for the months covering January 2024 through June 2024, and September 2024 through November 2024 in the IPP dated November 30, 2023.

1.7.a Recommendations	Regional Center Plan/Response
SDRC should ensure that the IPPs for individuals #13, #16, #17, #19, #22, #25, #26, #27, and #37 include a schedule of the type and amount of all services and supports purchased by SDRC.	Current IPPs for individuals #13, #16, #17, #19, #22, #25 and #26, #27, and #37 have been reviewed to ensure the type and amount of all active services purchased by SDRC are listed.
In addition, SDRC should evaluate what actions may be necessary to ensure that IPPs include a schedule of the type and amount of services and supports purchased by SDRC.	SDRC provides guidance and examples for the S-IPP that details the requirement for the type and amount of services to be listed on the agreement page with dates of service that align with any one-time service end dates or specifies if the service rolls over at the fiscal year by indicating “ongoing” as an end date.

1.8 The IPP or addenda identifies the provider or providers of service responsible for implementing services and/or support, including, but not limited to, vendors, contracted providers, generic

service agencies, and natural supports. [W.I.C. § 4646.5(a)(5) (2023)]; [42 C.F.R. § 441.301(c)(2)(v) (2025)]

Findings

Forty-three of the forty-five (96 percent) sample records of individuals contained IPPs that identified the provider or providers responsible for implementing services. However, the following IPPs did not indicate the provider for the SDRC-funded services indicated below:

1. Individual #22: Independent Living Program was not included in the IPP dated May 13, 2021; and

2. Individual #39: Translator was not included in the IPP dated September 10, 2024.

1.8 Recommendation	Regional Center Plan/Response
SDRC should ensure the IPP for individuals #22, and #39 identify the providers for the services listed above.	Current IPPs for individuals #22 and #39 identify the active providers responsible for implementing services.

1.9 Periodic reviews and reevaluations of progress for the individual are completed (at least annually) to ascertain that planned services have been provided, that progress has been achieved within the time specified, and the individual and his/her family are satisfied with the IPP and its implementation. *[W.I.C § 4646.5(a)(6) (2023)]*

Findings

Forty-three of the forty-four (98 percent) sample records of individuals contained documentation of periodic review and reevaluation of progress at least annually. However, the record for individual #9 did not contain documentation that the individual's progress had been reviewed annually.

1.9 Recommendation	Regional Center Plan/Response
SDRC should ensure that a review and reevaluation of progress regarding planned services, timeframes and satisfaction for individual #9 is completed and documented at least annually.	Documentation for individual #9 will be reviewed to ensure that progress is reviewed at least annually.

1.9.a Quarterly face-to-face meetings are completed with individuals living in community out-of-home settings, i.e., Service Level 2-7 community care facilities (CCF), family home agencies (FHA), or supported living and independent living settings. *[Cal. Code. Regs tit. 17, § 56047 (2023)]; [Cal. Code. Regs tit. 17, § 56095 (2023)]; [Cal. Code. Regs tit. 17, § 58680 (2023)]; (Contract requirement)).*

Findings

Nine of the eleven (82 percent) applicable sample records of individuals had quarterly face-to-face meetings completed and documented. However, the records for individuals #27, and #30 contained documentation of three of the four required meetings that were consistent with the quarterly timeline.

1.9.a Recommendations	Regional Center Plan/Response
SDRC should ensure that all future face-to-face meetings are completed and documented each quarter for individuals #27 and #30.	The contacts for individuals #27 and #30 have been reviewed. All quarterly meetings are monitored for timely completion or documented attempts as to why meetings were inconsistent with the quarterly timeline.
In addition, SDRC should evaluate what actions may be necessary to ensure that quarterly face-to face meetings are completed and documented for all applicable individuals.	SDRC provides ongoing HCBS Waiver training that details the Title 17 requirements for quarterly face-to-face meetings. Training on quarterly face-to-face requirements is also addressed in documentation training for new hires and for Service Coordinators serving out-of-home individuals. SANDIS generates the reports and contacts due list for Service Coordinators to track and schedule their quarterly meetings in advance to when they are due. This list is submitted to the Program Manager for review and approval and is also monitored by the Assistant Director. A quality improvement task force has been formed to address compliance with quarterly contact requirements. This team is tracking SDRC's data on quarterly meetings and developing tools for monitoring compliance and completion of quarterly meetings.

1.9.b Quarterly reports of progress toward achieving IPP objectives are completed for individuals living in community out-of-home settings, i.e., service Level 2-7 community care facilities (CCF), family home agencies (FHA), or supported living and independent living settings. *[Cal.*

Code. Regs tit. 17, § 56047 (2023)]; [Cal. Code. Regs tit. 17, § 56095 (2023)]; [Cal. Code. Regs tit. 17, § 58680 (2023)]; (Contract requirement).

Findings

Nine of the eleven (82 percent) applicable sample records of individuals had quarterly reports of progress completed for individuals living in community out-of-home settings. However, the records for individuals #27, and #30 contained documentation of three of the four required quarterly reports of progress that were consistent with the quarterly timeline.

1.9.b Recommendations	Regional Center Plan/Response
SDRC should ensure that future quarterly reports of progress are completed for individuals #27 and #30.	The reports due for individuals #27 and #30 have been reviewed. All quarterly reports due are monitored for timely completion or documented attempts as to why meetings and reports were inconsistent with the quarterly timeline.
In addition, SDRC should evaluate what actions may be necessary to ensure that quarterly reports of progress are completed for all applicable individuals.	SDRC provides ongoing HCBS Waiver training that details the Title 17 requirements for quarterly reports. SANDIS generates the reports and contacts due list for Service Coordinators to track and schedule their quarterly meetings in advance to when they are due. This list is submitted to the Program Manager for review and approval and is also monitored by the Assistant Director. A quality improvement task force has been formed to address compliance with quarterly contact requirements. This team is tracking SDRC's data on quarterly meetings and developing tools for monitoring compliance and completion of quarterly meetings. SANDIS contains a TCM template for the quarterly report.

SECTION II: SPECIAL INCIDENT REPORTING

The records of the 45 individuals supported by San Diego Regional Center (SDRC) and selected for the Home and Community-Based Services (HCBS) 1915(i) State Plan Amendment (SPA) sample were reviewed to verify that special incidents have been reported. A supplemental sample of five records of individuals receiving services were also reviewed to verify that special incident reports (SIR) 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 appropriate and complete. In addition, the monitoring team verifies that an incident report was completed for all individuals on the SPA supported by SDRC who passed away during the review period.

Summary of Findings

SDRC reported all special incidents in the sample of 45 records selected for the HCBS 1915(i) SPA review, to the Department. SDRC's vendors reported all (100 percent) incidents in the supplemental sample to the regional center within the required timeframes. SDRC reported all (100 percent) incidents in the supplemental sample to the Department within the required timeframe. SDRC's follow-up activities on incidents in the supplemental sample were appropriate for the severity of the situations for all 5 incidents. In addition, SDRC reported all deaths during the review period.

Findings

None