Effective XXX 1, 2020 services will be provided either singly or in some combination, in any of the following ways:

**Remote and Alternate Services**  
*(check all that apply)*

- ☐ Supports related to COVID-19 risk management  
- ☐ Completion of individual assessments and/or program plans  
- ☐ Completion of a person-centered plan  
- ☐ Remote services delivered via telephone or video communication  
- ☐ Delivery of supplies and other items to the consumer’s home  
- ☐ Confirmed use of self-guided materials  
- ☐ Services provided in-person* at the consumer’s home  
- ☐ Services provided in-person* at a community setting  
- ☐ Services provided in-person* at the provider’s facility  
- ☐ Supports for transition to the Self-Determination program, if applicable  
- ☐ Other: _______________________________________________

* To safeguard the safety of all parties, in-person services may only be provided if in alignment with the most restrictive state or local guidelines in effect.

**Certifications**

- ☐ A COVID-19 Protection Plan has been developed and is being implemented to ensure participant safety for in-person services and includes training for staff and consumers.
- ☐ A discussion with every consumer is being coordinated to identify the service(s) that best meet their needs and interests. Regional Center Service Coordinators, residential staff, and parents/guardians are being consulted as needed.
- ☐ Phone and email access will be maintained during the following business hours to respond to needs from consumers and their families:

  ____________________________________________________________________________

- ☐ Documentation of alternative services provided for each person will be maintained per Title 17, CCR section 54326.
- ☐ Documentation of staff training, including training attendance logs and curriculum, will be maintained on the following topics:
  - COVID-19 safety precautions
  - Person-centered thinking and planning
  - Informed decision-making
  - Self-Determination Program
  - Use of plain language for written materials
  - Alternative communication methods
  - Cultural and linguistic competencies
  - Use of technology

NAME OF VENDOR: _________________________  VENDOR NUMBER(S):______________________

SIGNED BY: _______________________________  ________________________________

SIGNATURE: _______________________________  DATE:______________________________