San Andreas Regional Center

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Performance Report for San Andreas Regional Center

Every year, the Department of Developmental Services (DDS) contracts with regional centers in California to serve consumers and families. And, every year DDS looks at how well the regional centers are doing. This report will give you information about your regional center.

Last year, at San Andreas Regional Center (SARC) we served about 17,215 consumers. The charts on page two tell you about the consumers we serve. You'll also see how well we are doing in meeting our goals and in fulfilling our contract with DDS.

At SARC, we want to improve every year, do better than the state average, and meet or exceed the DDS standard. As you can see in this report, we did well in helping more adults live in home-like settings and keeping both children and adults out of large facilities. But, we still need to improve in helping adults to access community-based crisis resources instead of stabilization beds at California's developmental centers and in helping more children to remain with their families.

To that end, SARC is continuing our pilot project with the nationally-renowned Center for START Services at the University of New Hampshire Institute on Disability to provide specialized support to individuals and their entire system of care. We continue to invest in the development of innovative residential treatment models such as Enhanced Behavioral Services Homes and Community Crisis Homes in partnership with experienced providers, fellow regional centers, and the DDS. SARC continues to work with DDS on the improvement and advancement of the Self Determination Program model. In order to provide more culturally-sensitive and appropriate support, SARC remains committed to hiring a culturally and linguistically diverse workforce to better-serve our community.

During the COVID-19 state of emergency, SARC has been and continues to be a social services community leader in distributing personal protective equipment and coordinating both testing and vaccination for the counties we serve. Service coordinators are in regular contact with the individuals they serve, and our Community Services and Fiscal departments have worked tirelessly to implement alternative service models for our providers in order to continue providing services and ensure, as much as we can, the financial health of our service system. SARC leadership and the management team continue to work exhaustively to support our staff, our providers, and our community during this difficult time.

We hope this report helps you learn more about SARC. If you have any questions or comments, please contact us!

This report is a summary. For more information about the regional center, please go to: https://www.sanandreasregional.org/reports-policies/#performance-contract or contact Special Projects Manager James Elliott at (408) 341-3828.

Director, San Andreas Regional Center

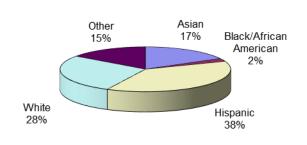
Who uses SARC?

These charts tell you about who SARC consumers are and where they live.

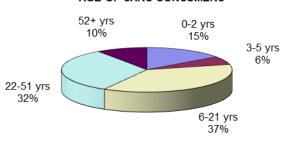
Mild/Moderate Intellectual Disability Autism Epilepsy 11% Cerebral Palsy 9% Severe/Profound Intellectual Disability 6%

DIAGNOSIS OF SARC CONSUMERS

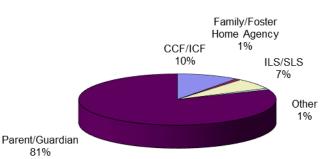
ETHNICITY OF SARC CONSUMERS



AGE OF SARC CONSUMERS



WHERE SARC CONSUMERS LIVE



How well is SARC performing?

This chart tells you about five areas where DDS wants each regional center to keep improving.

The first column tells you how SARC was doing at the end of 2019. And, the second column shows how SARC was doing at the end of 2020.

To see how SARC compares to the other regional centers in the state, compare the numbers to the state averages (in the shaded columns).

Regional Center Goals (based on Lanterman Act)		December 2019		December 2020	
		SARC	State Average	SARC	
Fewer consumers live in developmental centers	0.08%	0.00%	0.07%	0.04%	
More children live with families	99.44%	99.20%	99.51%	99.16%	
More adults live in home settings*	80.84%	79.68%	81.71%	80.55%	
Fewer children live in large facilities (more than 6 people)	0.04%	0.00%	0.04%	0.00%	
Fewer adults live in large facilities (more than 6 people)	2.15%	1.55%	1.92%	1.54%	

Notes: 1) Consumers can be included in more than one diagnosis category. 2) Residence Types: CCF/ICF is Community Care Facility/Intermediate Care Facility; ILS/SLS is Independent Living Services/Supported Living Services. 3) Home settings include independent living, supported living, Adult Family Home Agency homes, and consumers' family homes. 4) Green text indicates the RC remained the same or improved from the previous year, red indicates the RC did not improve.

Did SARC meet DDS standards?

Read below to see how well SARC did in meeting DDS compliance standards:

Areas Measured	Last Period	Current Period
Passes independent audit	Yes	Yes
Passes DDS audit	Yes	Yes
Audits vendors as required	Met	Met
Didn't overspend operations budget	Yes	Yes
Participates in the federal waiver	Yes	Yes
CDERs and ESRs are updated as required (CDER is the Client Development Evaluation Report and ESR is the Early Start Report. Both contain information about consumers, including diagnosis.)	95.76%	98.84%
Intake/Assessment timelines for consumers age 3 or older met	97.71%	94.25%
IPP (Individual Program Plan) requirements met	N/A	97.29%
IFSP (Individualized Family Service Plan) requirements met	89.5%	89.6%

Notes: 1) The federal waiver refers to the Medicaid Home and Community-Based Services Waiver program that allows California to offer services not otherwise available through the Medi-Cal program to serve people (including individuals with developmental disabilities) in their own homes and communities. 2) The CDER and ESR currency percentages were weighted based on the RC's Status 1 and Status 2 caseloads to arrive at a composite score. 3) N/A indicates that the regional center was not reviewed for the measure during the current period.

The increase in service recipients living in developmental centers reflects the transfer of individuals between regional centers and/or residents of placements such as the Specialized Treatment Program at Porterville Developmental Center. The reduced timeliness of intakes reflects limitations on our ability to conduct observations and assessments imposed by the safety measures required by the COVID-19 pandemic. Despite these limitations, SARC service coordinators continue to complete Individual Program and Family Service Plans in a timely manner.

This is the final year San Andreas Regional Center is including a Local Measure in its Performance Contract. Results for the National Core Indicators for Fiscal Year 20-21 have yet to be released. Our most recent results, from FY 17-18 are reprinted below:

Percentage of adults, according to National Core Indicators, who reported they:

- (a) Chose their home (other than family home): 46%
- (b) Chose their roommates or chose to live alone: 37%
- (c) Chose staff or did not choose but can request to change: 75%
- (d) Choose or have input in their daily schedule: 80%
- (e) Choose or have input in how to spend their free time: 89%
- (f) Choose or have input in what to buy with spending money: 85%
- (g) Chose or have input in choosing their day activity: 47%
- (h) Chose or have input in choosing paid community job: 96%
- (i) Chose or can request to change case manager: 95%

How well is SARC doing at getting consumers working?

The chart below shows how well SARC is performing on increasing consumer employment performance compared to their prior performance and statewide average:

Areas Measured -			Time Period				
			SARC	CA	SARC		
Consumer Earned Income (Ages 16 and above): Data Source: Employment Development Department		Jan through Dec 2018		Jan through Dec 2019			
						Quarterly number of consumers with earned inco	me
Percentage of consumers with earned income		16%	21%	16%	14%		
Average annual wages		\$10,317	\$8,806	\$11,327	\$13,698		
Annual earnings of consumers compared to p	eople with all disabilities in California	2018		2019			
Data Source: Cornell University Disability Status	Report	\$47	,600	Data not available			
National Core Indicator Adult Consumer Survey			July 2011-June 2012		July 2017-June 2018		
Percentage of adults who reported having integra	ted employment as a goal in their IPP	27%	27%	29%	26%		
Paid Internship Program			2018-19		2019-20		
Data Source: Paid Internship Program Survey			SARC	CA Average	SARC		
Number of adults who were placed in competitive, integrated employment following participation in a Paid Internship Program			32	8	12		
Percentage of adults who were placed in competitive, integrated employment following participation in a Paid Internship Program			26%	9%	10%		
Average hourly or salaried wages for adults who participated in a Paid Internship Program			\$13.70	\$13.31	\$14.79		
Average hours worked per week for adults who participated in a Paid Internship Program			14	16	15		
Incentive Payments							
Data Source: Competitive Integrated Employmen	nt Incentive Program Survey						
Average wages for adults engaged in competitive, integrated employment, on behalf of whom incentive payments have been made			\$14.25	\$13.52	\$14.60		
Average hours worked for adults engages in competitive, integrated employment, on behalf of whom incentive payments have been made			16	21	18		
Tabel manifes of the confine account of the	\$1,500	27	55	22	22		
Total number of Incentive payments made for the fiscal year for the following amounts:	\$1,250	39	76	28	30		
the listal year for the following amounts.	\$1,000	43	67	34	35		

^{*}The Cornell University 2019 Disability Status Report was not available at the time that this report was finalized.

How well is SARC doing at reducing disparities and improving equity?

These tables show you how well the regional center is doing at providing services equally for all consumers.

Number and percent of individuals receiving only case management services by age and ethnicity

Measure	Year	Number of Eligible Consumers Receiving Case Management Only		Percent of Eligible Consumers Receiving Case Management Only			
		Birth to 2	3 to 21	22 and Older	Birth to 2	3 to 21	22 and Older
American Indian or Alaska	18-19	0	1	2	N/A	50%	9%
Native	19-20	0	1	2	N/A	50%	9%
Acian	18-19	55	526	122	8%	27%	10%
Asian	19-20	27	581	133	5%	28%	10%
Black/African American	18-19	3	56	27	100%	35%	11%
	19-20	0	56	31	N/A	39%	12%
Llianania	18-19	129	947	244	6%	27%	11%
Hispanic	19-20	80	987	241	4%	28%	10%
Native Hawaiian or Other	18-19	0	6	6	N/A	35%	25%
Pacific Islander	19-20	0	4	5	N/A	27%	22%
White	18-19	68	572	259	9%	33%	8%
	19-20	43	545	238	8%	33%	8%
Other Ethnicity or	18-19	127	399	83	15%	36%	15%
Race/Multi-cultural	19-20	43	371	70	6%	33%	12%
Total	18-19	382	2,502	741	8%	29%	10%
	19-20	193	2545	720	5%	30%	9%

Per capita purchase of service expenditures by individual's primary language (for languages chosen by 30 or more consumers only)

Language	Consumer Count		Per Capita Purchase of Service Expenditures		
	2018-19	2019-20	2018-19	2019-20	
English	13,438	13,215	\$22,806	\$26,189	
Spanish	4955	4817	\$9,480	\$10,523	
Vietnamese	957	947	\$14,107	\$16,164	
Mandarin Chinese	326	329	\$10,811	\$11,126	
Tagalog	131	132	\$19,942	\$23,017	
Hindi (Northern India)	125	107	\$10,530	\$11,423	
Cantonese Chinese	93	88	\$18,386	\$24,208	
Korean	85	85	\$7,230	\$8,368	
Farsi (Persian)	54	48	\$18,022	\$22,965	
Russian	50	41	\$14,648	\$21,100	
Japanese	47	42	\$8,576	\$15,173	
Arabic	39	37	\$6,791	\$12,007	

Want more information?

To see the complete report, go to: www.sanandreasregional.org/#performance-contract Or contact James Elliott at **(408) 341-3828.**