Tri-Counties Regional Center

Strategic & Performance Plan 2007–2009 Mid Year Report 2008





Strategic & Performance Plan 2007–2009 Mid-Year Report 2008

Family Services

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1 Family Services

What are the Family Services Strategic Issues?

• TCRC needs greater flexibility in resources to support families in crisis or at risk.

Desired Outcome: What does TCRC want to achieve?

 Families have information about and access to the community services and agency programs necessary to safely care for their child/children and transition-age young adults residing in the family home.



Outcome Measures: How will we know we are making progress?

	Outcome Measures	2005 Baseline	2006 Final	2008 Desired Outcome	2008 Mid Year	2008 State Average	Desired Direction	Target Met
а.	Percent of minors living at home (P) (in foster and family homes)	97.7% (4,337)	97.88% (4,653)	98.00% (5,224)	98.39% (5,245)	98.24% (113,604)	A	Yes
b.	Number and percent of minors living in facilities serving >6 (P)	0.27% (12)	0.21% (10)	0.25% (12)	0.15% (8)	0.15% (169)	•	Yes
C.	Survey Question (focused, specialized Autism survey) regarding families receiving information from TCRC about and access to services and programs	N/A	N/A	TBD	Baseline Data Collected	N/A	N/A	Yes

Note: (P) = DDS Performance Contract Measure. Goal for (P) measure is met when current TCRC # 1) meets or exceeds state average; 2) is better than TCRC baseline; 3) meets DDS Standard. \triangle Indicates that a higher value is better and ∇ indicates a lower value is better.

	Strategic Actions	Current Progress
1.	Create a model of crisis intervention that includes wrap-around services for children and transition-age young adults.	Proposal for service enhancements was reviewed by Directors team in May 2008. They requested additional information regarding priorities and fiscal implications for the plan. Data are being collected and will be provided to them in Sept 2008.
2.	Develop and implement a person-centered parent training program that includes initial orientation to the system and interaction with Special Education Local Planning Area (SELPA) and public schools in all three counties.	Components of an orientation program for new families will be be developed by end of 2008; the curriculum will mirror the information to be provided to new families of children with autism.
3.	Incorporate the TCRC Early Start Person Centered Plan into the Individualized Family Services Plan (IFSP) through development of collaborative relationships with educators in all three counties.	Action removed from Strategic and Performance Plan. Approved by TCADD in Nov 2007.
4.	Create an on-line resource for information including evidence-based practices and reimbursement information.	Deferred to Quarter 1 2009.
5.	Develop and implement a focused, specialized survey regarding services for persons with autism.	The Autism Survey has been completed and the results were received in Winter 2008. TCRC staff are reviewing the results and sharing them with the TCADD Board, TCRC Clinical and Management staff, and community stakeholders, including the Autism Task Force and Area Board IX. Initial recommendations have been developed and are being reviewed for specific recommendations, to be finalized by the end of 2008.



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Strategic Actions

Current Progress

6. Build capacity in the service provider network of bilingual respite workers with qualifications to be linguistically and culturally appropriate.

Significant outreach efforts by the largest respite provider in Ventura County include radio ads on local Spanish radio stations and word of mouth referrals. Workers are encouraged to serve multiple families through a financial incentive – a higher rate of pay is offered to respite workers serving more than one family. As of May 1, 2008, Channel Islands Social Services has a total of 373 respite workers, 97 of whom are bilingual Spanish/English, and 29 Spanish speaking only. Of their total number of Spanish speaking respite workers, 52 were recruited between Jan 1 & May 1, 2008. A proposal for enhanced respite was received through the April RFP process and a contract is pending final approval for the new service, which will include advanced training in respite care for children with difficult behaviors.



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2 Healthcare

What are the Healthcare Strategic Issues?

- Information is not efficiently available for medical appointments or urgent care.
- Healthcare providers exhibit lack of knowledge regarding developmental disabilities.
- There is a lack of availability of mental health providers.
- Persons experience difficulty with comprehensive follow-up from the healthcare provider.
- A shortage of providers exists for those who are willing to take current rate of reimbursement.



Desired Outcome: What does TCRC want to achieve?

Persons with developmental disabilities have increased access to quality, affordable and timely healthcare.

Outcome Measures: How will we know we are making progress?

	Outcome Measures	2005 Baseline	2006 Final	2008 Desired Outcome	2008 Mid Year	2008 State Average	Desired Direction	Target Met
а.	Number and percent of persons served who have annual medical exam	85.65% 197/230	71.38% 227/318	88%	N/A*	N/A	A	N/A
b.	Number and percent of persons served who have annual dental exam	69.74% 159/228	49.84% 153/307	72%	N/A*	N/A	A	N/A
C.	Number of presentations to healthcare professionals in training and in practice	Not Tracked	Not Tracked	3	4	N/A	N/A	Yes
d.	Contact information for healthcare professionals is available	N/A	N/A	Distribute	Posted On Web Site	N/A	N/A	Yes

^{*} Strategic Planning Sub-Committee reviewed and directed staff to mark "N/A" and to research a statistically valid method for data collection and analysis. Note: (P) = DDS Performance Contract Measure. Goal for (P) measure is met when current TCRC # 1) meets or exceeds state average; 2) is better than TCRC baseline; 3) meets DDS Standard. Indicates that a higher value is better and ▼ indicates a lower value is better.

	Strategic Actions	Current Progress
1.	Establish independent Purchase of Service (POS) vendor to ensure persons served have knowledge and use of insurance benefits.	A program design on insurance parity laws and how to access private insurance for autism treatment has been developed by a TCRC Service Coordinator (SC). The proposal is under review and decisions are pending regarding revisions and rate setting. Information regarding insurance parity is included in the New SC Orientation module on resource development. Discussions are underway regarding adding a review of private insurance in the procedures followed by SCs in utilization of generic resources. Legislation is pending which may strengthen the parity law and requirement of private insurance to fund autism treatment.
2.	Establish independent POS nurse case manager vendors to support individuals with complex medical health needs.	Work group in proposal development phase. Proposing to contract with nurse to develop curriculum and conduct training for residential providers, services coordinators, individuals and families. Dependent on grant resources for contract.
3.	Research sources of and provide access to contact information about health professionals available to persons served.	Provider directories of physicians accepting Medi-Cal and other programs have been posted on the TCRC website at http://www.tri-counties.org/programs-services/service-generic/index.htm. Also posted on the same page are lists of dentists accepting Medi-Cal.



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	Strategic Actions	Current Progress
4.	Inform and educate resident physicians (Cottage Healthcare System, Ventura County Health System), nurses (Community Colleges), certified nursing assistants and medical assistants in local training programs, dental professionals and licensed.	Four (4) health presentations were conducted by TCRC staff to health professionals in Atascadero, Camarillo, San Luis Obispo, and Ventura. Topics included "Developmental Screening and Autism Seminar", "Introduction to TCRC and Individuals Served", "Abuse Prevention: Issues for Dependent Adults and Seniors", and "Regional Center, Lanterman Act and Developmental Disabilities Review".
5.	a. Train service providers, direct care providers (including IHSS, In-Home Support Services) individuals and family to ensure the effectiveness of medical appointments including preparation prior to appointment, plan for transportation and accountability for the follow-up plan of care services for persons with autism.	Scope of action changed. New Scope (b) approved by TCADD in Nov 2007. Progress for action b: Information to be included in Residential Service Orientation Training in November 2008.
	b. Utilize Residential Service Orientation Training to provide information about facilitating medical appointment scheduling, preparation and follow-up. Utilize TCRC web site to provide links to experts who provide information and education about compliance with health care appointments.	Research being conducted regarding appropriate links for the TCRC web site.
6.	Work group in proposal development phase. Proposing to contract with nurse to develop curriculum and conduct training for residential providers, service coordinators, individuals and families. Dependent on grant resources for contract.	See action #4.



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3 Training

What are the Training Strategic Issues?

- The opportunity exists to empower the people we serve through additional training.
- In order to better develop effective person-centered Individual Program Plans (IPPs), additional training is needed for the people served and the teams arranging for and providing services.
- Building accountability into training programs is important.



Desired Outcome: What does TCRC want to achieve?

 Training is provided in all appropriate venues to develop and implement person-centered principles that allow for stakeholders to be empowered and make meaningful choices.

Outcome Measures: How will we know we are making progress?

	Outcome Measures	2005 Baseline	2006 Final	2008 Desired Outcome	2008 Mid Year	2008 State Average	Desired Direction	Target Met
a.	Phased-implementation of the current TCRC Training and Development Plan	N/A	Plan Develop- ment	Phase 2	In Progress	N/A	N/A	On Track (funding approved)
b.	Number of stakeholders (staff, service providers, persons served or family, TCADD Board) trained in person centered thinking	2006 Baseline	163	75	225	N/A	N/A	Yes
C.	Number of PCT trainers and mentors	2006 Baseline	0	Mentors in training + 4 trainers	2 additional Trainers for a total to date of 3 Mentors and 2 PCT Trainers	N/A	N/A	On Track

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	Strategic Actions	Current Progress
1.	a. Phase in elements of TCRC Training & Development Plan (adopted in June 2006), based on available resources, and update annually to evolve into a three year rolling plan.	New Scope of outcome measure approved by TCADD in Nov 2007. The change is the blending of categories of mentors and trainers into one outcome.
		In Jan-June 2008 there were 225 people trained in person centered thinking, including 147 who attended Intro to PCT for the first time and 78 who attended a refresher or advanced training. Phase 2 milestones include hiring of Person Centered Thinking Project Coordinator in February 2008; all foundation and orientation programs offered as required training.
2.	Invest in and update technology to support the growth and diversity of projected training needs, including learning management systems with capacity for on-line learning.	TCRC staff participate in joint committee of ARCA Chief Counselors and ARCA Training Coordinators to determine needs and software solutions for online format for core curriculum for Service Coordinators. TCRC is researching different Learning Management System products with intent to purchase by end of calendar year 2008.



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4 Housing

What are the Housing Strategic Issues?

Affordable and accessible housing is limited.

Desired Outcome: What does TCRC want to achieve?

 TCRC has a long-range housing plan that identifies the resources and options required to meet the needs of persons with developmental disabilities for affordable and accessible housing in San Luis Obispo, Santa Barbara, and Ventura Counties.



Outcome Measures: How will we know we are making progress?

	Outcome Measures	2005 Baseline	2006 Final	2008 Desired Outcome	2008 Mid Year	2007 State Average	Desired Direction	Target Met
a.	Completion of an approved Five-Year Housing Plan	Research Options in 2007	N/A	Implement 25%	Plan completed and approved by Housing Task Force	N/A	N/A	Yes
b.	Percent of TCRC caseload in Developmental Centers (P)	0.78% (71)	0.70% (66)	0.51% (53)	0.58% (60)	1.11% (2,556)	•	Yes
C.	Percent of adults living in facilities serving >6 (P)	6.10%	5.70% (265)	5.95% (290)	5.75% (280)	4.74% (5,346)	•	Yes
d.	Percent of adults residing in home settings (P)	74.55%	75.78% (3,526)	75% (3,653)	76.17% (3,710)	71.86% (81,071)	•	Yes

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	Strategic Actions	Current Progress
1.	Allocate contracted resources in support of Housing Coordinator(s) whose responsibilities include monitoring short term opportunities for housing resources in all three counties and coordinating educational outreach efforts related to housing.	07/08 Community Placement Plan (CPP) Operations Budget for the Tri-Counties Commmunity Housing Corporation includes allocation for one position.
2.	Hire a consultant to research all current models for housing inventory development and educate Housing Advisory Taskforce.	Hired Kristine McCann for consultation and development of a Five Year Housing Plan.
3.	Identify strategic partners and build collaborative relationships in order to develop our vision and priorities for a long range housing plan.	Interviewed eight housing authorities in the Tri–Counties area, identifying opportunities and establishing relationships for future partnerships. Sent direct mail informational letter to housing authorities, not for profit and for profit developers regarding interest in collaboration to obtain Prop 1 c dollars.
4.	Develop long range Five-Year Housing Plan.	TCADD Board approved content of TCRC Five Year Housing Plan in Nov 2007.
5.	Complete feasibility study for method to establish an NPO (501(c)3) to receive funds and account for housing inventory.	Kristine McCann recommended development of a 501(c)3 non profit corporation to guide and implement the Five Year Housing Plan.



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5.1 Employment

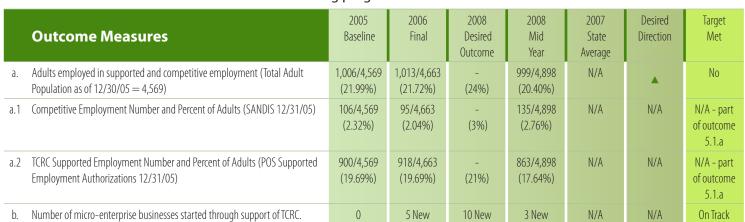
What are the Employment Strategic Issues?

- The community requires education related to accepting and seeing individuals as capable contributors.
- Access to employment through transportation must be considered.
- The State of California is funding additional opportunities and greater focus on this area.
- Choice and inclusiveness are important.



Increased employment opportunities for persons with developmental disabilities exist.

Outcome Measures: How will we know we are making progress?



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	Strategic Actions	Current Progress
1.	Enhance service coordinator training to include employment–related information to TCRC persons served for the protection of benefits and tax implications.	TCRC staff members are developing a training module to address employment related learning objectives. TCRC staff and service providers will receive training in February 2009 about the impact on SSI benefits by employment of persons served.
2.	Communicate the employment-related transportation needs of persons with developmental disabilities to Transportation Commissions and service providers in all three counties.	A transportation task force is facilitated by the Director of Community & Organizational Development and membership is composed of President/CEO R&D, an S&S Manager, and Assistant Director, Services and Supports, South. The task force is reviewing options for affordable transportation to and from work for persons served, including best practices utilized by other regional centers. The task force is expected to make recommendations to OPS by Sept 2008.
3.	Establish an Employment Taskforce to research and evaluate progressive models of employment in order to develop recommendations for systems and protocols.	The action group finished its research and review of the progressive models. SB 1270 recommendations will be adopted as well. The final draft of the recommendations will be reviewed by OPS in September 2008.





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	Strategic Actions	Current Progress
4.	Establish systems to communicate and implement the results of the person centered IPP in interactions among and with the provider, person, job developer and school systems for all ages.	Two presentations were conducted with San Luis Obispo County Offices of Education (SLOCOE) secondary teachers about transition planning and collaboration; plans to add Person Centered Thinking to the inservice training dates for the School Year 09/10. Collaborating with SLOCOE to divide secondary education students into two groups: ages 14–18 with a pre-vocational emphasis and ages 18–22 with a vocational and work experience emphasis. Work is beginning with the Lucia Mar School District special education teachers around transition planning. Collaborating with Ventura County Special Education Local Plan Area (SELPA) to highlight person centered reviews with transition-age youth in fall 2008.
5.	Increase number of contracts supporting the implementation of micro-enterprise opportunities.	Providers express that there are difficulties with retaining qualified staff persons and maintaining the interest of persons served through completion of the process. PathPoint suspended its Micro-enterprise contract in Santa Barbara (SB) and Ventura Counties (VC) due to lack of staff. There are three (3) new microenterprise endeavors starting in 2008: a Sound Management business in VC; an artist in San Luis Obispo; and a document scanning business in VC. In addition, two microenterprises are in the preliminary phases —in VC, a gardening service and in SB a carpet cleaning service. TCRC will be contracting with IncomeLinks, LLP to provide training to all stakeholders about the development of micro-enterprises.
6.	Develop baseline information regarding employment of transition-age young adults.	Two potential data sources have been identified to create a baseline. Reports will be created for these two sources and reviewed for relevance. This work is in addition to earlier studies of the employment of transition-age young adults. Efforts to ensure that the data can be tracked over time with valid results are being made.



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5.2 Life Activities

What are the Life Activities Strategic Issues?

• Not enough choice, integration or opportunities in the community.

Desired Outcome: What does TCRC want to achieve?

 New models of individualized, integrated day services, incorporating person-centered principles, are available in all three counties.



Outcome Measures: How will we know we are making progress?

	Outcome Measures	2005 Baseline	2006 Final	2008 Desired Outcome	2008 Mid Year	2007 State Average	Desired Direction	Target Met
a.	Adaptor model pilot	N/A	N/A	Review	Met	N/A	N/A	Yes
b.	Participate in SB 1270 stakeholder work group to develop recommendations to Governor and Legislature regarding alternative day services and employment options		N/A	Yes	Yes	N/A	N/A	Yes
C.	TCRC to participate in statewide Self-Directed Services Waiver implementation		N/A	Yes	Yes	N/A	N/A	Yes

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	Strategic Actions	Current Progress
1.	Alternatives to Day Services Committee (ADS Cte) will finalize the definitions of models for individualized day services and the process for education of all stakeholders.	ADS Committee will develop a plan for standardizing definitions of models pending direction of TCADD Executive Committee in September 2008. Education of all stakeholders will concurrently occur with the further development of projects.
2.	TCRC to monitor success of pilots according to implementation of person-centered Individual Program Plans (IPPs).	A sub-committee of the ADS Committee developed criteria for qualitative evaluation of the model using a $4+1$ approach. These criteria were then applied to evaluate three of the pilot projects; this information, in combination with a fiscal analysis of the pilots was presented to the TCADD Executive Committee on July 21, 2008. Consideration of the successful implementation of the person-centered IPP in a pilot program is a next step.



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6 Autism

What are the Autism Strategic Issues?

- Autism is a life-long circumstance.
- There are increasing numbers of diagnosed cases.
- There is a need for support for older children as well as early intervention services.



Desired Outcome: What does TCRC want to achieve?

 Innovative and age-appropriate services reflecting best clinical practices are available to meet the needs of persons with autism and their families.

Outcome Measures: How will we know we are making progress?

	Outcome Measures	2005 Baseline	2006 Final	2008 Desired Outcome	2008 Mid Year	2008 State Average	Desired Direction	Target Met
a.	Survey Question (Autism survey) regarding families report of TCRC providing information about services and supports available to them to meet the needs of their child with autism.	N/A	N/A	TBD	Baseline Data Collected	N/A	N/A	Yes
b.	New services in conjunction with Autism Task Force recommendations that are linked with evidence-based practice.	N/A	N/A	3	15	N/A	N/A	Yes
C.	Implementation of agency related Autism Task Force and state-wide recommendations.	N/A	N/A	2	In process	N/A	N/A	On Track

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	Strategic Actions	Current Progress
1.	Orient parents about types of services and TCRC contracted Service Providers.	Director of Clinical Services and Managers of Services and Supports are utilizing the approach of the North LA Regional Center to contract with a service provider to develop a an Orientation to Behavioral Services; the format will be presented to OPS and Directors by the end of 2008.
2.	Provide ongoing (periodic) updates for staff from clinical and resource development teams regarding TCRC policy, current trends and treatment modalities.	The National Standards Committee and the Blue Ribbon Commission will release their findings and recommendations in late 2008. However, the Guidelines for Evidenced-based Interventions from the State Dept. of Education and Developmental Services are being released this fall, 2008. Certain clinical staff, RD and Services and Supports managers will attend training November 18, 2008.
3.	Develop necessary resources with a focus on early intervention, school-age and transitionage young adults according to Regional Center's standards of practice to support Autism Task Force Recommendations.	A total of 15 new resources have been developed including four (4) early intervention services, one (1) in Ventura County (VC) and three (3) in San Luis Obispo (SLO) County, four (4) behavioral services, two (2) in VC and two (2) in Santa Barbara County); and seven (7) therapeutic services , four (4) in VC and three (3) in SLO County.
4.	Utilizing results of State of California research information and best practice guidelines, define intervention standards by age group in collaboration with Autism Task Force.	Deferred to Quarter 2 2009.



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7 Advocacy

What are the Advocacy Strategic Issues?

- More persons are needed to advocate on behalf of persons with developmental disabilities.
- More persons require education about becoming an effective advocate.
- The promotion of action on relevant issues is needed.
- Every strategic goal should have an advocacy element.

Desired Outcome: What does TCRC want to achieve?

Key stakeholders convey information about issues relevant to the quality of life for persons with developmental disabilities through relationships established with influential community leaders and decision makers.

Outcome Measures: How will we know we are making progress?

	Outcome Measures	2005 Baseline	2006 Final	2008 Desired Outcome	2008 Mid Year	2008 State Average	Desired Direction	Target Met
а.	Participate in at least one state level event annually regarding personal advocacy activities.	N/A	N/A	Yes	Yes	N/A	N/A	Yes
b.	Participate in a minimum of two 1:1 and two group communications with decision makers in the CA state legislature	Not tracked	N/A	Yes	Yes	N/A	N/A	Yes
C.	Develop a parent advocacy group for Spanish-speaking families.	N/A	N/A	implement	No	N/A	N/A	No

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	Strategic Actions	Current Progress
1.	Build individual capacity through formal and informal training opportunities, with follow up support, for individuals, families, TCRC staff and service providers to promote advocacy skills and individual rights.	Peer Advocacy Specialists (PAS) gathered baseline information on what service providers (programs) are doing to promote group and individual advocacy. The activities include: 1) Responding with letters of concern around pending budget cuts, and 2) Letters regarding unmet public transportation needs at public hearing time. In addition, the regular visits to groups of persons served by the PAS team furthers group teamwork building and individual leadership skills.
2.	a. Access existing community Speakers Bureaus utilizing TCRC staff to educate regarding grass roots advocacy in the communities of all three counties. b. As of Nov 2007: Development of parent advocacy groups for Spanish speaking families.	Action a. removed from Strategic and Performance Plan. Approved by TCADD in Nov 2007. Action a. replaced with Action b. Progress for Action b: A survey to gather information about supports currently in place for Spanish speaking families was developed for Family Resource Center staff in order to establish a baseline of successful activities. A plan for furthering supports that includes additional parent advocacy groups to be implemented Qtr 4 2008.
3.	Sponsor issue oriented events linked with a legislative calendar to generate advocacy actions.	Leadership transferred to TCADD Government & Community Relations Committee; approved by TCADD in Nov 2007.
4.	Calendar key contacts for presentation to legislators.	TCADD and People First of SLO honored Assemblymember Sam Blakesley for his support of the Warren Mattingly Signature Stamp Act. Assemblymember Pedro Nava attended a comprehensive tour of TCRC Headquarters that addressed services and supports provided across all three counties.
5.	Participate in one public forum annually.	Supervisor of Peer Advocacy represented TCRC (as well as IHSS recipients) on the Advisory Committee of the Santa Barbara In-Home Care Network (IHSS Public Authority) which sponsored a 'Caregiver Appreciation Day', he also represented TCRC and the In-Home Care Network at a public forum addressing ending cuts to IHSS.
6.	Develop talking points with TCADD Board Government and Community Relations Committee for standard message of the agency to the community at large.	TCRC staff participate with this Committee to consider messages around and activities to support developing bills in the state legislature. Staff are currently reviewing a power point presentation developed by a TCADD Board member that will serve as a core message for tailoring to particular target audiences.

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Compliance

Compliance Measures: How will we know we are making progress?

 Audits, Budget, Client Development Evaluation Report (CDER)/Early Start Report (ESR) and Intake.

Desired Outcome: What does TCRC want to achieve?

Compliance with outcomes expected from DDS.

Outcome Measures: How will we know we are making progress?



	Outcome Measures	2005 Baseline	2006 Final	2008 Desired Outcome	2008 Mid Year	2008 State Average	Desired Direction	Target Met
а.	Unqualified independent audit with no material finding(s) (P)	Yes	Yes	Yes	TBD Audit Scheduled for Fall 2008	N/A	N/A	N/A
b.	Substantial compliance with DDS fiscal audit (conducted within the prior 12 months) (P)	Yes	N/A	Yes	N/A Conducted Bi-Annually	N/A	N/A	N/A
C.	Accuracy of POS fiscal projections (P)	Yes	Yes	Yes	Yes	N/A	N/A	On Track
d.	Operates within OPS budget (P)	Yes	Yes	Yes	Yes	N/A	N/A	On Track
e.	Certified to participate in the Medicaid Home and Community-Based Services (HCBS) Waivers (P)	Yes	Yes	Yes	Peer review of records done annually for each SC team; DDS Audit Review occurred Aug 2008	N/A	N/A	On Track
f.	Compliance with Vendor Audit Requirements per contract, Article III, Section 10 (within prior 12 months) (P)	Yes	Yes	Yes	Yes	N/A	N/A	On Track
g.	Client Development Evaluation Report (CDER)/ Early Start Report (ESR) currency	98.76%	98.78%	N/A	99.05%	96.41%	A	Yes
h.	Intake Status (P) <142 days 143-240 days over 240 days	97.74% 0.75% 1.50%	100.0% 0.00% 0.00%	N/A	100.00% 0.00% 0.00%	93.02% 5.45% 1.53%	A V V	Yes
i.	Individual Program Plan (IPP) Development	99.02% (2004)	98.10%	N/A	98.10% (2006)	N/A	A	No
j.	Individualized Family Services Plan (IFSP) Development	97.28% (2005)	Data N/A From DDS	N/A	84.67% (2007)	N/A	A	No

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	Strategic Actions	Current Progress
1.	Develop corrective action plan for FY 03/04 CPA audit and implement. (D0FA)	Final audit report and financial statements presented to board in Mar 2008. Meeting with TCADD audit committee and CPA occurred in Jan 2008. No material findings reported.
2.	Review CPA and DDS audit findings from past 5 years & ensure recommendations are being followed. (DOFA)	Auditors to finish fieldwork in Jan 2008. Expect draft audit report in Jul 2008. To date, no significant findings reported.
3.	Submit monthly POS projections to DDS in accordance with instructions and current data.(DOFA)	The most recent projection for FY 07/08, run Jul 2008, shows less than a 1% variance in projected expenditures compared to the original SOAR projection. The current reporting schedule and methodology are continuing in FY 08/09.
4.	Monthly monitoring. Continue cost savings measure. Contribute to PERS at year end to maintain employer rate & contribute to post-retirement health trust. (DOFA)	\$1 mil was contributed to PERS and \$250K to the post-retirement health care trust by June 30, 2008. Budget management continuing in FY 08/09. Approx. \$176K on reserve to contribute to PERS in Jun 2009.
5.	Complete audits from FY 06/07 plan. Establish audit plan for FY 07/08. Periodic meetings with auditors to monitor performance against plan and adjust as needed. (DOFA)	11 audits were performed, 9 were required by DDS. 3 staffing ratio audits, 3 P&l audits and 5 billing audits, 1 of which was also an Early Start audit, were completed. Programs audited included residential, supported living and 1 Early Start, as required. FY 08/09 audit plan being worked on.
6.	Federal Programs team sends reports of coming due CDER/ESR to the Service Coordinators (SCs). SCs complete these as IPP or IFSP meetings are held. Managers monitor compliance. (SS)	Final Performance Contract data for 2007 reflected TCRC had a 99.05% currency rate for all CDER's/ESR's. The previous version of the CDER was replaced effective 1/1/08 and now have 3 years to bring all CDERs into alignment with the new reporting process. Due to this change, currency of CDER/ESR has been temporarily suspended as a Performance Contract indicator during implementation of the revised CDER. At least once a month, reports continue to be sent to all S&S staff reflecting CDER/ESR reports that are overdue or due within the next 30 days.
7.	A tracking system is used in each office to "cue" SCs and clinicians regarding intake timelines. (SS)	All clinical support staff monitor intake time lines through a report in SANDIS. This report reflects the number of days each case has left in the intake status; staff work with the intake coordinator in their area to ensure time lines are met. In addition, a report reflecting all cases that have been intake (Status 0) is automatically generated through SANDIS and monitored by Federal Programs at least twice a month. This report is forwarded to Early Start SCs and their managers. A review of intake coordinators' time lines is also completed and forwarded to them if needed, to follow-up on cases.