



# Tri-Counties Regional Center

SAN LUIS OBISPO • SANTA BARBARA • VENTURA

## *Strategic Performance Plan 2013-2015*



*Mid Year Report*  
2013



## Strategic Focus Area 1 Family Support

### Defined As:

- TCRC consistently provides information and support to help families adapt to the impact of disability particularly at the time of diagnosis and during age related life transitions.

### Strategic Issues:

- Families with children diagnosed with a developmental disability often need support in processing the significant emotional impact.

- There is a legislative emphasis on transition, in particular the transfer of services and supports and case management from Early Start to Regional Center services and from Children's services to Adult services.
- There is an ongoing need for individuals approaching adulthood for resources around employment, housing, day programs, transportation.



### Desired Outcome: What does TCRC want to achieve?

- Families have information and are supported to make decisions at the time of diagnosis and during age related life transitions.

How will we know we are making progress?

#### Outcome Measures

Outcome Measures	Baseline (Mid Yr 2012)	2013 Desired Outcome	2013 Mid Year	2013 State Average	2013 Desired Direction	Target Met
a. Families receive information and resources at the time of diagnosis, upon transition from Early Start services, and upon transition from school to adult services.	<b>Brochures (Early Start, Turning Age Three, Transition to Adult Services) in development</b>	<b>Develop the plan for each topic area, including needs, strategies and impact on resources and development of materials and resources</b>	<b>Information gathered. Plan in development.</b>	N/A	N/A	<b>On Track</b>
Intake		Yes/No	On Track	N/A	N/A	On Track
Early Start		Yes/No	On Track	N/A	N/A	On Track
Adulthood		Yes/No	On Track	N/A	N/A	On Track
b. Children Residing with Families (DDS Performance Contract Measure)	<b>99.04 % (5927)</b>	<b>98.00% - 100.00%</b>	<b>99.00% (5,939)</b>	<b>98.92% (123,089)</b>	<b>▲</b>	<b>On Track</b>

Note: Outcome measures in bold denote alignment with implementation of Trailer Bill Language. (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.



## TCRC Strategic Performance Plan 2013–2015 Mid Year Report 2013

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### Strategic Actions:

Topic	Description	Current Progress
1. Assess resources	Map out existing internal capacity and processes, and external resources.	<p>An Intake and Early Start workgroup convened to assess resources currently available and used at time of diagnosis and at time of transition from Early Start to Children’s Services. Based on input a plan will be developed to create a standard transition resource packet for families.</p> <p>The Early Start brochure has been translated, printed and distributed to our six (6) offices and three (3) Family Resource Centers for use. A team of Services and Supports managers and other Subject Matter Experts have been working via live editing sessions to develop content for the Turning Age Three brochure. The Transition to Adult Services brochure has been drafted.</p>
2. What is Working/Not Working	Gather input about what is currently Working/Not Working regarding support, from families, partners and staff.	<p>Four Hundred (400) individuals and families of transition age youth were invited to complete a transition survey. Ninety four (94) respondents provided input on transition resources and processes that is being considered by Transition Service Coordinators to develop strategies for optimizing support and increasing consistency of information dissemination across TCRC offices.</p> <p>In addition, a focus group of Early Start Service Coordinators and Managers met to discuss what is working and not working about current processes in how we support families as they become eligible for Early Start services and transition to regional center services at age three (3).</p>
3. Plan Template	Create template for plan for each age related area.	In process of being developed with completion target of December 2013.
4. Evaluation	Develop and implement evaluative input.	Implementation in 2014 and evaluation in 2015.



## Strategic Focus Area 2 Autism

### Defined As:

- TCRC develops meaningful services for young persons with autism as they transition to adult life. TCRC also assists families and individuals with autism to access insurance benefits for behavioral health treatment as described in Statute SB 946.

### Strategic Issues:

- There is a need for individualized employment opportunities, individual choice day services and other resources for teenagers and young adults who have autism.
- As resources shrink, it becomes increasingly important to collaborate and create partnerships to enhance services for people with autism.

- Statute SB 946 requires utilization of benefits through private pay insurance companies for Applied Behavioral Analysis (ABA) services.
- Families and service providers need assistance in understanding and navigating insurance benefits and generic resources.

### Desired Outcome: What does TCRC want to achieve?

- TCRC is responsive to the emerging need to expand services for a growing number of young adults with autism. Individuals served will have access to information about insurance benefits for behavioral health services.



How will we know we are making progress? Outcome Measures	Baseline (Mid Yr 2012)	2013 Desired Outcome	2013 Mid Year	2013 State Average	2013 Desired Direction	Target Met
a. Implement plan to respond to needs for vocational, residential and day services for transition age young adults with autism.	Anecdotal information about changing needs.	Create and administer needs assessment and evaluate results.	Needs assessment administered	N/A	N/A	On Track
b. Expand network of support for post secondary education and vocational opportunities.	No centralized information about current informal relationships.	Research current models and formalize relationships with at least one college or vocational program in each county to explore opportunities.	In Progress	N/A	N/A	?



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	Baseline (Mid Yr 2012)	2013 Desired Outcome	2013 Mid Year	2013 State Average	2013 Desired Direction	Target Met
c. Training is offered to Persons/Families to provide initial information and ongoing updates about methods to access insurance, including a module around behavioral services.	<b>Two training events for families in each TCRC location in 2012.</b>	<b>Quarterly event in each FRC in each county that provides information or training about access to insurance for behavioral health services.</b>	<b>Quarterly events held in each TCRC office</b>	N/A	N/A	<b>On Track</b>

Note: Outcome measures in **bold** denote alignment with implementation of Trailer Bill Language. (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.



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### Strategic Actions:

Topic	Description	Current Progress
1. Survey Needs	Enhance the Autism Survey to be administered spring 2013 with questions that relate to needs for vocational, residential and day services as well as accessing other sources of input as well.	Autism Survey was administered in June to 722 individuals and families with 223 responding (30.9% response rate). Results are being analyzed by Kinetic Flow and a full report is expected at end of October.
2. Create Request for Proposal (RFP)	Administer RFP, review submissions and Program Designs and award contracts.	To be developed in 2014 after results are considered.
3. Define goals and objectives	Define goals and objectives for desired post secondary programming.	Work group will convene after receipt of needs survey results in late October, to define objectives of desired post secondary programming.
4. Create a Plan	Develop summary of currently existing post secondary programming available to young adults with autism and create a plan for relationship building and opportunity development (with the post secondary institutions.)  Dedicate a team of TCRC leadership to conduct outreach.	Ventura County – Established relationship with Drs. Ivor Weiner and Ronald Fishbach, professors at CSUN “Transitions Up” program, designed for persons with autism to attend college with proper supports to have meaningful campus experience and succeed in a degree granting track – anticipated launch date in fall of 2014. Work group is beginning to identify outreach teams in Santa Barbara and San Luis Obispo counties.  Due to medical leaves of Executive Director and Director of Community and Organizational Development (COD) and the unexpected early retirement of the Director of COD, this goal may not be met in 2013.  The Board will decide whether to retain this target for 2013 or move it to 2014.
5. Create communications around training	Develop structure to communicate with families of individuals and adults with autism receiving behavioral services to ensure awareness of training and create feedback about ongoing training.	In Q1 & Q2 178 parents attended Behavioral Services Orientation (BSO) in six (6) TCRC locations and received information about insurance.  Autism Coordinator and Benefits Coordinator partnered with family resource centers to conduct training at six (6) TCRC locations to introduce new insurance regulations with forty-eight (48) individuals and family members attending.
6. Evaluate Training	Revise training module based on feedback.	Evaluate in 2014.



## Strategic Focus Area 3 Information and Communication

### Defined As:

- TCRC communications about regional center services and supports and generic resources are enhanced to be more easily accessible and understood by persons served, families and community partners.

### Strategic Issues:

- Technology and mobility is maximized to actively connect people to accessing and understanding information and resources.

- Stakeholder input suggests an interest in receiving information and communication beyond the existing website and town hall methods.
- Communication and training plans must balance the impact and effectiveness of electronic and face to face communications.

### Desired Outcome: What does TCRC want to achieve?

- TCRC provides understandable, useful and needed information in a variety of ways to persons served, families and community partners.



How will we know we are making progress? Outcome Measures	Baseline (Mid Yr 2012)	2013 Desire Outcome	2013 Mid Year	2013 State Average	2013 Desired Direction	Target Met
a. Enhance information dissemination.	Have extensive collection of relevant content.	Define comprehension, format, distribution standards for new print publication and Service Policies/ Guidelines.	Brand Manual drafted.	N/A	N/A	On Track

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## TCRC Strategic Performance Plan 2013–2015 Mid Year Report 2013

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### Strategic Actions:

Topic	Description	Current Progress
1. Create Analysis (Year 1)	Determine audience segmentation criteria. Gauge comprehension of various audience segments by grade level, readability and engagement.	A TCRC Brand Manual has been developed to define formatting standards, including guidelines for logo use and pre-formatted document templates.  A Communications Plan has been drafted to describe how information flows through the organization from external sources, is refined with TCRC knowledge, standards and branding, and then distributed back out through appropriate communication channels. The Communications Plan calls for continued use of Flesch–Kincaid readability tests and text leveling by grade, both universally accepted comprehension measures. Standards for translation have begun with the development of an evolving glossary of commonly used Spanish phrases.
2. Review results (Year 2)	Review a current print piece or message for enhanced content and distribution.	Updates will be provided in 2014.
3. Conduct Focus Group (Year 3)	Conduct a focus group to enhance content creation and dissemination procedures that affect internal communications and external, face-to-face communications.	Updates will be provided in 2015.





## Operational Focus Area 1 Performance Contract Measures

### Defined As:

- Measures that demonstrate TCRC's performance around quality of life issues compared with the state average:
- Adults Residing in Facilities with Seven or More Beds
- Duration in Intake Status for Individuals Ages 3 and Over

### Strategic Issues:

- Number and % of total population in Developmental Centers
- Adults Residing in Home Settings
- Children Residing in Facilities with Seven or More Beds

### Desired Outcomes:

- Meets or exceeds statewide average, better than baseline or meets DDS standard.



How will we know we are making progress? Outcome Measures	Baseline (Mid Yr 2012)	2013 Desired Outcome	2013 Mid Year	2013 State Average	2013 Desired Direction	Target Met
a. Number and % of total population in Developmental Centers	0.35% (41)	.x % 40	0.28% (33)	0.57%	▼	On Track
b. Adults Residing in Home Settings	77.85% (4,347)	78.00% (x)	78.53% (4,517)	76.08%	▲	On Track
c. Children Residing in Facilities with Seven or More Beds	0.12% (7)	.x % ( < or =12)	0.18% (11)	0.08%	▼	*On Track
d. Adults Residing in Facilities with Seven or More Beds	4.60% (257)	4.6% (x)	4.38% (252)	3.17%	▼	On Track
e. Duration in Intake Status for Individuals Ages 3 and Over Intake Status (P)						
<142 days	100.00%	98.00% - 100.00%	100.00%	99.05%	▲	On Track
143-240 days	0.00%	(x%)	(0.0%)	0.87%	▼	
over 240 days	0.00%	(x%)	(0.0%)	0.08%	▼	

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Note: Children Residing with Families - see Strategic Focus Area 1 Family Support Outcome Measure b.

\*Outcome measure c is viewed as a local goal with a different outcome expected than what the state expectation is, due to a unique program serving medically fragile children.



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### Strategic Actions:

Topic	Description	Current Progress
1. Individuals moving from Developmental Centers	Implementation of the CPP Plan for the current fiscal year.	As of June 30, 2013, four (4) individuals have been placed out of the developmental center (3 from Fairview, 1 from Canyon Springs).
2. Adults live in home like settings	Residential settings are developed within the capacity of the Purchase of Services allocation and response to Request for Proposals.	Three (3) residential programs were developed in Jan-Jun 2013, including one (1) in Ventura County and two (2) in Santa Barbara County. A new CPP home opened in San Luis Obispo County to serve individuals having a dual diagnosis, and the RFP for a Specialized Residential Facility for persons with Autism was awarded and is currently in development.
3. Children are not living in large facilities	Residential settings are developed within the capacity of the Purchase of Services allocation and response to Request for Proposals.	Resource Development issued an RFP for children's residential providers. No applicants have responded to date and the RFP will remain open until a qualified provider is identified.
4. Adults are not living in large facilities	TCRC continues to support downsizing of large congregate residential settings in the TCRC catchment area.	Responses to recent MY RFP for residential programs will create new opportunities for housing adults in settings that are not large congregate facilities.
5. Intake Process	Each intake is monitored for a timely eligibility decision.	Continue to follow intake protocol and improve timelines as needed to stay on track.



## Operational Focus Area 2 Fiscal Compliance (Performance Contract) Measures

### Defined as:

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

### Desired Outcomes:

- Compliance with outcomes expected from DDS.

How will we know we are making progress? Outcome Measures	Baseline (Mid Yr 2012)	2013 Desired Outcome	2013 Mid Year	2013 State Average	2013 Desired Direction	Target Met
a. Internal compliance audit of implementation of TBL	yes	yes	On Track	N/A	N/A	On Track
b. Unqualified independent audit with no material findings(s) (P)	yes	yes	On Track	N/A	N/A	On Track
c. Substantial compliance with DDS fiscal audit (conducted within the prior 12 months) (P)	yes (FY 09/10) (FY 10/11)	yes	On Track	N/A	N/A	On Track
d. Accuracy of POS fiscal projections (P)	yes	yes	yes	N/A	N/A	On Track
e. Operates within OPS budget (P)	yes	yes	yes	N/A	N/A	On Track
f. Certified to participate in the Medicaid Home and Community-Based Services (HCBS) Waiver	yes	yes	yes	N/A	N/A	On Track
g. Compliance with Vendor Audit Requirements per contract, Article III, Section 10 (within prior 12 months) (P)	Met	yes	yes	N/A	N/A	On Track
h. Client Development Evaluation Report (CDER)/Early Start Report (ESR) currency	yes	yes	On Track	N/A	▲	On Track
i. Individual Program Plan (IPP) Development	100.00% April 2012	Not applicable*	On Track	N/A	N/A	On Track
j. Individualized Family Services Plan (IFSP) Development	92.00% June 2010	93.00%**	N/A**	N/A	N/A	On Track

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### Strategic Actions:

Topic	Description	Current Progress
1. Implementation of Trailer Bill Language (TBL)	Internal compliance review of implementation of TBL	The TBL Infrastructure Committee met several times in FY 12/13 to discuss compliance. POS service data report was completed and reported on at the June 2013 Board meeting; narrative completed and sent to DDS. SB 946 implemented and changes for FY 13/14 rolled out. CPP requirements implemented and incorporated into ongoing processes.
2. CPA Audit Corrective Action Plan	Develop corrective action plan from prior CPA audit and implement.	CPA audit findings from prior year were reviewed in preparation for the FY 12/13 CPA audit scheduled in September 2013. Audit narratives are being updated. In process of meeting auditor requests for preliminary testing.
3. Review CPA and DDS Audit Findings	Review CPA and DDS audit findings from past 5 years and ensure recommendations are being followed.	Review of CPA audit findings from prior year completed. Further review from earlier years in process. Preparations will begin soon for the DDS fiscal audit expected in March 2014 in which the prior DDS audit findings will be reviewed. Error reports for accurate restoration of the payment reduction have been reviewed.
4. POS Projections	Submit monthly POS projections to DDS in accordance with instructions and current data.	The monthly POS projection was submitted timely to DDS and in accordance with DDS instructions. No discrepancies noted.
5. Monitoring of OPS	Monthly monitoring. Continue cost savings measures. Contribute to PERS at year end to maintain employer rate and consider contribution to post-retirement health trust.	The OPS budget is monitored closely each month. Savings in FY 12/13 primarily in staffing costs, health benefits, telephone and legal fees allowed for \$900K contribution towards the PERS unfunded liability.
6. Audit Plan for current fiscal year	Establish and implement audit plan for current fiscal year. Periodic meetings with auditors to monitor performance against plan and adjust as needed.	FY 13/14 vendor audit plan completed. DDS approval has been obtained on 3 audits. Audits are being scheduled. Met FY 12/13 vendor audit requirements. Audit Team meets at least every 2 months or sooner, if needed.
7. Monitoring CDER/ESR reports	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.	CDER data is reported at End of Year Report. DDS will recommence assessing regional centers' compliance with CDER/ESR Currency in 2014, since full implementation of the ESR by regional centers is anticipated by October 2013.
8. Monitoring Intake Timelines	A tracking system is used in each office to "cue" SCs and clinicians regarding intake timelines.	Continue to implement intake protocol and improve timelines as needed to stay on track.
9. Individual Program Plan (IPP) Development	Agency-wide tracking system for IPPs is implemented by support staff and monitored by managers for PCT practices and timeliness.	A sample of IPPs of each team is reviewed by an internal review team for timeliness and person centeredness.
10. Individualized Family Services Plan (IFSP) Development	Agency-wide tracking system for IFSPs implemented by support staff and monitored by ES managers for PCT practices and timeliness.	Last DDS ESR result from 2010 - DDS is revising the indicator for measure and will combine four elements of the ESR to arrive at an IFSP Development composite score for each regional center, beginning 2014.



## Operational Focus Area 3 Organizational Development

### Defined as:

TCRC achieves consistency in the implementation of person centered performance management practices.

### Operational Issues:

- There is an interest in creating greater employee alignment with the strategic plan.
- TCRC must be able to respond effectively in a time of rapid change.
- Person centered practices are implemented in different ways throughout the agency.

- It's important to utilize consistent practices across all regions in which services are provided.

### Desired Outcome:

- TCRC develops a performance management model that reflects consistent application of person centered practices.

How will we know we are making progress? Outcome Measures	Baseline (Mid Yr 2012)	2013 Desired Outcome	2013 Mid Year	2013 State Average	2013 Desired Direction	Target Met
a. Develop and implement a person centered Performance Management Model.	<b>Performance Management Model currently based on Behavioral Event Interviews (BEI) and Competency Model.</b>	<b>Come to an agreement around the elements of the Performance Management Model and create implementation plan.</b>	<b>Elements of Performance Management Model and revisions to performance review process drafted.</b>	N/A	N/A	<b>On Track</b>

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### Strategic Actions:

Topic	Description	Current Progress
1. Input regarding Performance Review Process	Compile input from management and staff to identify what's working/not working about the existing Performance Review Process and clarify the indicators of an effective, efficient, person centered Performance Review Process.	One hundred twenty-nine (129) employees provided input through an online survey or focus groups in six (6) TCRC Offices regarding what's working and not working with the TCRC Performance Review process. Results were analyzed and compiled in three (3) thematic areas: Purpose, Physical Document and Process. The input was reviewed and further prioritized by the Leadership Team in June. Final recommendations will be reviewed in December.
2. Proposal of Revisions for Performance Review Process	Propose revisions to the Performance Review Process.	Work groups convened in these thematic areas to draft suggested revisions to the review process, including clarification on considerations for developing key performance indicators, streamlining the competency rating methodology, and exploring online administration of the performance review. Final recommendations will be shared with Leadership Team in December.
3. Revise Materials	Revise existing materials and platform for implementation of revised Performance Review Process.	The work group has explored the feasibility of using an online performance review module linked with the TCRC ADP payroll system. The TCRC HR Director was successful in securing the module and a small group will test the functionality in November to determine which elements of the review process will be administered online.
4. Training	Develop training to support managers and staff to implement revised Performance Review Process.	Targeted for Winter 2014.
5. Implement changes	Implement Performance Review Process, solicit feedback and modify according to results.	TCRC teams developed and shared annual team goals to support the performance review cycle. The presence of team goals assisted employees in aligning individual performance goals with team goals, and with the TCRC Strategic Performance Plan. This practice will continue annually.
6. Consider additional elements of the TCRC Performance Management Model	Define additional elements of a person centered Performance Management Model and begin to modify.	The core elements of the TCRC Performance Management Model have been drafted and will be reviewed with the Leadership Team in December. Once the model is approved, the Focus Area Work group will outline a plan to implement further enhancements in 2014 and 2015.