

New Consumer Orientation

Tonight's Topics

Regional Center History

Individual Program Plan (IPP) process

Legal Rights for service delivery

Behavior services

Overview of Services

Role of CSC

Resources

History

Prior to 1966 the only residential placement options for individuals with Developmental Disabilities was one of four overcrowded state hospitals.

1966

Two pilot regional centers established to provide resources for support in the community.

- 1.** Children's Hospital of Los Angeles.
- 2.** San Francisco Aid to Retarded Citizens

History cont.

1969 – Lanterman Act expanded the network of Regional Centers throughout the state of California.

North Los Angeles County Regional Center was founded in 1974.

Federal Funding

Prior to 1991, all of the services for consumers living in the community were funded by the state of California

In 1991, the Medicaid Waiver program was implemented. This provides federal funding for case management and reimbursement for most services.

With that money comes additional monitoring responsibilities including Annual Audits

Recent changes in how the money can be used drives changes in how many services are provided in the near future.

Medicaid Waiver

Medicaid Waiver Institutional Deeming (ID) is a process to obtain full scope unrestricted Medi-Cal without a share of cost for developmentally disabled children under age 18. Through Institutional Deeming, the child's family income and resources are now required to begin the application process however; the person served by NLACRC is still assessed on their own merit. If the child has income and/or resources of their own (i.e., court appointed child support, trust fund income, etc.) this may result in Medi-Cal with a share of cost.

When approved for Medi-Cal via Institutional Deeming our children have access to all Medi-Cal services including medical, dental and EPSDT (Early and Periodic Screening Diagnosis and Treatment) supplemental services. Medi-Cal can be used to pay for medications as well as co-payments for medical visits.

Two Senate Bills in 1992 set the following priorities and guidelines for Regional Centers:

- ◆ Consumers to be part of all regional center boards
- ◆ Regional center to develop performance contracts
- ◆ Increase residential options and choices
- ◆ Services and supports should promote community integration and self-sufficiency
- ◆ High priority for children to live with family
- ◆ Cost-effective methods of service delivery
- ◆ Regional center shall maximize alternative funding sources

Individualized Program Plan (IPP) Process

Consumer Services Coordinator is assigned to each consumer

During the IPP, it is time to review the Consumer's:

- ◆ Likes/Dislikes
- ◆ Needs (individualized needs assessment)
- ◆ Strengths
- ◆ Short and long term goals
- ◆ Develop measurable outcomes that drive service delivery
- ◆ Determine appropriate services to meet outcomes

Individualized Program Plan (IPP) Process

The IPP team consists of the consumer, his/her parents and/or family members (as applicable), conservator (if applicable), and any important people in the consumer's life.

The IPP is conducted every 3 years and an annual review is conducted each year to review the consumer's goals and progress towards meeting them.

IPP/Annual reports are mailed to consumers within 30 days from the meeting.

Service Requests/Delivery

15 day timeline to respond to service requests

Services must represent a cost effective use of public resources

Services must be effective in achieving IPP outcomes

Service Standards describe what each regional Center provides

The Regional Center is the “payer of last resort” and must pursue all possible sources of generic funding before spending its own monies.

Due Process for disagreements regarding service delivery

4731 Complaint Process for rights violations

Generic Resources

A “generic” resource is any agency which is receiving public funds to provide services and has a legal responsibility to serve members of the general public.

The resources and supports may be identified in the individualized program plan (IPP) even when the regional center is not the agency funding the service.

The Lanterman Act, names the regional center as the “payor of last resort” and requires the regional center to exhaust all available generic resources before using regional center funds for needed services.

Generic resources may include: Medi-Cal, Supplemental Security Income (SSI), In-Home Supportive Services (IHSS), California Children’s Services (CCS), local school district, and others

Behavior Services

Behavior Services Orientation

Informed Consent

SB946 and AB89-Use of private insurance and Medi-Cal for diagnosis of Autism

Group parent education (16 hours)

Early Intensive Treatment for Autism (DTT)

Intensive Behavior Services (serious behavioral concerns)

In-Home Parent Education

All behavior services require substantial parental involvement

All behavior services are required to use evidence based practices

Behavior Services

Behavioral Services are time limited and may end if:

The plan is effective and the goals and objectives have been reached

The plan has not been effective as shown by data collected by the parent, caregiver, or vendor. Prior to the discontinuation of service, NLACRC will consider the need for program revision, change in vendor, or a different type of service.

The plan is not implemented by parents, repeated appointments are missed, or parents lack sufficient time to participate in plan implementation, thus indicating that other competing priorities preclude full participation of all concerned.

Family Support Services

Respite

Services that are provided in the family home that give parents/caregivers a break from the daily care needs.

Respite helps provide relief for a short period of time so a parent can get some alone time, or relax, or some parents can do errands.

The amount of respite is determined by the amount of family support needs, current supports and services in place, and natural supports that may be providing supports.

Family Support Services

Daycare

Services that provide appropriate non-medical care and supervision, while a parent is engaged in employment in or out of the home and/or engaged in educational activities leading to employment to ensure the consumer's safety in the absence of family members.

The regional center may pay only the cost of daycare that exceeds the cost of providing day care services to a child of the same age without a disability. Regional centers must assess for income to determine the share of cost for this service. The share of cost ranges from \$1.00-\$3.00 per hour based on family income

There is an exception process to request temporary relief from the share of cost when there is a catastrophic event or economic hardship that will be assessed on an individualized circumstance

Family Support Services

Personal Assistance

Services that assist with bathing, getting dressed, preparing easy meals, helping with toileting, and provides protective supervision.

The need for the additional help in the home is due to the need for more than one person to provide care.

FCPP

Family Cost Participation Program

For consumers under 18 years old

Share of cost for respite and day care

Sliding scale based on income

Consumer's receiving MediCal are exempt

Annual Family Program Fee

Requires all families with a consumer under 18 years old and who do not have Medi-Cal, to pay \$200 per year for services other than respite or daycare

Fee can be lowered to either \$150 or \$0 based on income

Fee is Paid directly to DDS, not Regional Center

Participant Choice Options

Individuals have many choices when considering their family support services and may choose to do this through a variety of ways, including regional center providers or through the Self-Determination Program (SDP) or Participant-Directed Services:

- Self-Determination Program available to all eligible regional center consumers and allows participants to make their own decision, decide how their budget is spent, and choose their staff.
- Participant Directed Services provides consumers the option to exercise more direction over how, and by whom services are provided. The consumer and or family identifies the person/people who they want to provide the services. Applies to the following family support services: Respite, Daycare, and Personal Assistance.

Additional Services

Adaptive Skills Training

Social Skills Training

Educational Advocacy

Services for Adults

Day programs (Site & Community Based)

Work Activity Centers

Supported employment (Group & Individual)

California Employment First Guidelines

- Competitive Integrated Employment
- Workforce Innovation Opportunities Act (WIOA) Department Of Rehabilitation

Transportation to day programs

Time-limited ILS training for consumers in the family home.

Living Options for Adults

Living options for adults [in addition to staying with parents and family members] include:

Group homes with different amounts of support.

Living in own apartment or home with Independent Living Skills training and support.

Living in own apartments with Supported Living Services.

Role of CSC

Conduct IPP's/AR's every year or as needed

Assist and support in making referrals to generic agencies

Monitor service delivery

Advocacy and Support

Contacts available

As CSC's are often meeting with other families, they have a 24 hour call back policy. (Leave a detailed message.)

If you need immediate assistance, Regional Center has an On Duty specialist for each case management department for urgent or time sensitive issues.

After Hours On-Call for urgent situations that cannot wait until the following workday.

Family Focus Resource Center

The Family Focus Resource Center understands and strengthens families raising children with special needs through education, advocacy, and family support services.

Office at CSUN for non-RC clients

Offices at all of the branch offices for NLACRC
Regional Center consumers

Family Focus Services

Parent to parent mentoring

Workshops and parent education

Resources and Referral

IEP Training

Support Groups

Lending Library

Getting Families Connected

NLACRC is actively engaged in a variety of projects to address disparities in the community to help in accessing services.

The regional center system is complex and caregivers and families need to know how to navigate or understand the concept of “generic resources”

Current Community Engagement programs: Parent Mentor and Integrated Community Collaborative.



Parent and Family Support Specialists

FORMERLY PARENT MENTORS

Parent & Family Support Specialist (PFSS) Hotline

Contact Information

Office Hours

Monday through Friday

8:30 a.m. to 5:00 p.m.

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Email

pfssupport@nlacrc.org

◦

Parent & Family Support Specialist
(PFSS) Hotline

For San Fernando & Sant Clarita

(661) 951-1220 – Press 1

For Antelope Valley

(661) 951-1220 – Press 2

For more information, visit our website:

[https://rebrand.ly/Parent and family Support Specialists](https://rebrand.ly/Parent_and_family_Support_Specialists)

NLACRC resources

North Los Angeles County Regional Center (NLACRC) – www.nlacrc.org/about-us/calendar-of-events/e-news-sign-up

For the latest information from regional center, sign up to receive our “News You Can Use” e-mail newsletter.

Web Resources

Department of Developmental Services (Home Page):

www.dds.ca.gov

Search Bills:

www.leginfo.legislature.ca.gov

Association of Regional Center Agencies:

www.arcanet.org

NLACRC Home Page:

www.nlacrc.org

Disability Rights California(formerly PAI)

<http://www.pai-ca.org/>

NLACRC Resource Library by appointment
through your CSC or Publications Dept.

Questions and Feedback