

August 12, 2021

Brian Winfield
Deputy Director
Department of Developmental Services
1600 Ninth Street
Sacramento, CA 95814

#### Dear Mr. Winfield:

This letter is written in accordance with the Lanterman Act [W&I Code §4519.5(f)(1)]. Alta California Regional Center (ACRC) held an online public meeting on Tuesday, March 23<sup>rd</sup>, 2021, from 5:00 p.m. to 7:00 p.m., and again on Wednesday, April 28th, 2021 from 5:00 p.m. to 7:00 p.m. ACRC hosted both events using the Zoom application. There was significant interest in both meetings. There were 92 participants registered for the first meeting with 41 attendees. Many of the registrants indicated difficulties with logging into the meeting. As a result, a second meeting was scheduled for April 28th and there were 102 registrants with 55 individuals in attendance. Hosting the event online allowed clients and families to attend irrespective of their geographic proximity and participate from the comfort of their own homes. The meeting flyer was translated into several languages including Hmong, Punjabi, Russian, Simplified Chinese, Spanish, Tagalog, and Vietnamese and translation services for the meeting were offered upon request. The flyers were posted on ACRC's official website 30 days in advance; information was also shared on social media platforms including Facebook, Instagram and Twitter. The translated flyers were distributed to service coordinators (SCs) to share directly with clients and families with whom they work. Additionally, the notices were widely disseminated across our community partners, including Family Resource Centers, State Council on Developmental Disabilities (SCDD), Disability Rights of California (DRC), Hmong Youth Parents United (HYPU), Health Education Council (HEC), the Centers for Excellence on Developmental Disabilities (CEDD) UC Davis chapter, and the Mexican Consulate. These partner organizations distributed the flyers to members of their organizations via email and mailing lists. Attendance at the meetings included individuals self-identified as clients, parent/family members, professionals, advocates, and staff persons. Nine registrants indicated having a native or preferred language of Spanish on the March 23<sup>rd</sup> meeting and five registrants preferred Spanish language translation for the April 28<sup>th</sup> meeting. ACRC hired a professional Spanish speaking interpreter for the meetings and offered instruction to access a translated audio channel.

# The following items were presented during the meeting:

- ACRC's client demographics across ethnicity/race vs. statewide client demographics
- ACRC presented its outreach activities for 2020

- ACRC's employee demographics, including languages spoken, and the demographics of clients served
- Community feedback during 2020 Annual Discussion of POS expenditures with demonstration of DDS reports being available on ACRC's website
- As requested during the 2020 Annual POS meeting, data on fair hearing requests and 4731 complaints were presented. The data showed that majority of fair hearing requests and 4731 complaints were made by the Caucasian population
- ACRC presented a synopsis of all grants completed from grant years 2016-17 till grant year 19-20. Projects completed, outcomes, and supporting documentation are posted on ACRC's website. Projects approved for modification will continue until the end of the fiscal year in 2021
- Diversity grant projects reviewed included: translations of ACRC materials, cultural competency trainings, electronic interpreting system, targeted outreach/information sessions, service navigator program, ACRC staff-parents-providers workshops and enhanced respite program materials
- Emphasis was given to the technology lending library project and the trainings provided to borrower clients/families through a change request approved by DDS involving the enhanced respite grant and workshop grant. The Chromebooks and hotspots have been acquired by ACRC and trainings to technology trainers have been provided. The electronic devices are ready for distribution and tech trainers were prepared to provide training to families who need the assistance
- The service navigation program approved for 19-20 grant year is ongoing. There are 22 clients receiving navigation services. The target population is 90 participants for the two-year grant. The enrollment is affected by the Pandemic. However, most of the families that are enrolled have been assisted in navigating websites for generic resources and assisted in zoom meetings and interactions during transition meeting and Individual Program Plan (IPP) with their SCs online
- Service navigation program is starting the next phase of activities which are the completion of a resource handbook as well as facilitation of the parent support groups for Early Intervention and Transition to Adult services group. These activities commence on the second quarter of 2021
- ACRC proceeded to the presentation of POS Data for 19-20 Fiscal year. A graphical comparison of average per capita expenditures was presented for fiscal years 2017, 2018, 2019, and 2020. The data consistently showed a disparity in expenditures between the Caucasian population in comparison to their ethnically diverse counterparts
- ACRC presented the data on POS expenditures based on client living arrangements. Services
  for clients in Community Care Facilities remain one of the most expensive categories and is
  accessed disproportionately by the Caucasian population. This is true for the independent
  living/supported living categories as well. The majority of the ethnically diverse communities
  remain in the family home setting, a category of living arrangement where the average per
  capita expenditure is lower than average

- ACRC presented other avenues in which the agency strives to address the issue of service
  inequity. This includes the yearly performance contract with DDS and continuing efforts to
  put forth grant activities designed to address the issue. ACRC continues to provide training to
  staff, expanding the service navigator program to include Early Start and the Slavic
  populations, ongoing outreach, partnerships with culture-specific agencies, and providing
  workshops to families, staff, and service providers
- ACRC emphasized that the diversity team continues to participate in community discussions regarding equity in the system. ACRC participates in the monthly DDS conferences with regional centers and CBO agencies, and the ARCA cultural specialists' conferences. ACRC also participates in meetings with the Racial Disparities Reduction Committee which is an advocacy group that looks into the disparity and brings issues to state agencies that should address them. ACRC also works with agencies like the Hmong group HYPU, African American support group Sankofa of CEDD UC Davis, and the Hispanic support group Grupos Apoyos of UC Davis. ACRC continues to work with the Mexican Consulate and migrant centers in Yolo, Yuba, and Sutter Counties
- ACRC submitted and was approved for a 20-21 grant for multicultural and multilingual ACRC services client video modules. These videos will showcase in English, Spanish, and Hmong languages the services commonly accessed by regional center clients and families. Service categories will include day program, respite, supported employment, residential services, applied behavioral analysis, ILS/SLS, environmental access/durable medical equipment, and the self-determination program. The videos will serve as informational materials that service coordinators can take with them to IPP meetings to introduce the service to families, particularly the ethnically diverse communities
- ACRC also introduced Pam Chueh, the new executive director of Warmline who is ACRC's
  partner in the service navigator program grant. Pam briefly discussed her background and her
  excitement in moving Warmline forward as a family resource center and working with its
  many partner organizations
- ACRC polled the participants during the second Annual POS meeting as a way to gather their
  input on service disparity. The first poll asked why they think the ethnically diverse
  communities use fewer regional center services. The second question asked what they think is
  the most important aspect of the relationship between the regional center and clients/families.
  The answers were discussed under "ACRC's Recommendations and Plans to Promote Equity
  and Reduce Disparities"
- ACRC also presented the results of its vaccination efforts during the meeting. It was recognized that outreach is needed to the Slavic populations as their vaccination outcome is very low
- Discussion with the attendees during both meetings ensued with feedback and proposed strategies. The discussions occurred after the presentation
- An email account <u>POSequity@altaregional.org</u> was shared to solicit additional feedback from participants that might be uncomfortable speaking publicly or needed more time to formulate their input

### Feedback/Proposed Strategies from the stakeholders:

- A Hispanic mother suggested that all information sent to Hispanic families should always be sent in English and Spanish. This prevents those families who only speak and read Spanish from having to constantly ask their SCs for translation of written materials
- It was suggested that data about vendors' staff composition should be included in ACRC's annual reports. The participants want to know the diversity of direct service staff and whether they could attend to the needs of the ethnically diverse communities
- A participant discussed one of the reasons why a barrier exists towards access of SLS services. SLS service is expensive and, oftentimes, SSI is not enough to pay for housing. The client needs a housing voucher to access SLS or the family has enough financial resources to supplement the service. Most economically disadvantaged diverse families will not be able to afford the service for their son/daughter. The participant asked if ACRC can give preferential access to diverse communities
- Deputy Executive Director of ACRC emphasized that Alta actively partners with housing agencies for dedicated units for ACRC clients, within a new housing development. The agency reached out to ACRC to supply them with clients and this arrangement would not cost the clients or ACRC anything
- A Hispanic mother indicated that not wanting residential services is a cultural choice for her.
   She emphasized that Latino communities want to keep their children at home. They do not need residential services but they want more respite
- Another Hispanic male participant supported the assertions of the mother. He indicated that he
  has been working as community organizer for the last three years and his focus is diverse
  communities. He emphasized that cultural preferences for home setting is not only true for
  Hispanic families, it is true for Asian families as well. As a representative of Arc of
  California, he expressed their willingness to sit with ACRC to strategize on how to address
  the issue of disparity within the system
- A meeting participant expressed that the honest discussion in the meeting is helpful in flushing out the issue and coming up with solutions. This participant also pointed out that the Early Intervention service authorization for African American is high but their rate of utilization is very low. She suggested that this phenomenon be examined for its causality. What barriers could African American families be experiencing that prevent them from using EI services?
- A mother of an EI child indicated that one of the major challenges she encountered is finding
  time to access services for her daughter outside of work hours. She indicated that majority of
  therapy time offered by vendors occur during her work hours day. She suggested for ACRC
  to consider and examine this issue as a potential barrier to service access
- A representative from HYPU indicated that they have been approved for a disparity grant by DDS and they are struggling to collect data on how many Hmong clients are utilizing and not utilizing services. This data is critical to their reporting to the department as well as targeted efforts for outreach. The other regional center that they worked with has not figured out how

to extract the data. They requested for ACRC to provide the data. They were informed that ACRC will discuss this with our IT and Accounting departments

- A participant discussed the issue of recognizable differences when it comes to residential services. He commented on the fact that the Caucasian populations prefer the residential option. He emphasized that there are many spectra of available services within the residential setting and this knowledge will need to be communicated to the diverse populations in ACRC system to inform families of the rich and varied nature of residential living
- ACRC Training Manager indicated that conversations about long-term plans for clients involved promotion of Person-Centered Plans which might help in addressing the disparity
- A participant gave a scenario of challenges for ethnically diverse families in accessing independent living and supported living services. She emphasized the current difficulties encountered such as the slim number of care homes and assisted living facilities. When a client wants to live on their own, the first question they deal with is where the arrangement would occur. Paramount considerations like the condition of the place, the amount of food provided, and all others have to be prioritized. These considerations must take in to account that people with developmental disabilities have much greater needs than the general population. She indicated that more regulations may be needed to ensure better treatment of people with developmental disabilities in the places that they live
- ACRC's executive director echoed that these are all important conversations to have. He
  emphasized that barriers to housing access could be impacted by the limited amount of
  financial resources available for clients who receive SSI as a sole source of income
- The Community Services and Supports director of ACRC indicated that his department is increasing the staff's ability to discuss the issue with the clients, and that ACRC prioritizes housing in collaboration with DDS. The Director indicated that there are four or five different projects of affordable housing that ACRC and DDS collaborate on. At this time, one development has 15 units that are guaranteed for ACRC clients. As one client moves out the unit becomes available for another client to occupy and these units will be available for clients over the course of the next 55 years. ACRC is exploring other developments like these, to provide affordable housing to its clients. The director also emphasized that the units in these housing developments are designed to accommodate the need of people with developmental disabilities
- A participant asked if anything is being done to increase the number of Early Intervention services during non-working hours
- ACRC Training Manager acknowledged that this could be a difficulty but emphasized that
  providers are aware that they may have to accommodate non-traditional hours for working
  families. He also emphasized that when private insurances are identified as a funding source,
  they faced the same dilemma when families asked for services outside of the normal work
  hours. ACRC will continue to explore this question and work with CSS department
- A participant identified herself as a program director of Family Home Agency in Sacramento. She emphasized that an FHA is an underutilized and underfunded service and they struggle to find providers willing to open their homes because of the low reimbursement. She stated that an FHA could be placement for the diverse community because of the potential to place a

client with families of the same ethnicity which would eliminate language and cultural barriers. She hoped that FHA could become a service that is better funded

- The ACRC executive director agreed that FHA is a cost-effective placement option that could be promoted for clients from the diverse communities. Phil wanted to advocate for availability of the FHA for clients in the diverse communities. He encouraged the FHA director to participate in the Providers Advisory Committee (PAC) meeting and be a part of the group
- A representative from Arc of California stated that he has been working with the Latino community to encourage them to take the COVID-19 vaccine. He wanted to know how to coordinate with ACRC to promote their vaccination efforts
- Training Manager indicated that ACRC can use its social media platforms to amplify the message that Arc of CA wants to send to the Hispanic populations of ACRC. Any vaccination schedules and information can be posted on ACRC's social media. SCs of ACRC can also notify clients on their caseload of opportunities for vaccination. Arc of CA can share any informational flyers and ACRC will make sure that those are distributed and posted
- A letter was submitted to ACRC by members of the "Racial Disparities Reduction Committee" for their input on the low utilization of Early Intervention services by the African American populations despite higher authorization rates. The content of the letter is included below in its entirety:

To: Lori Banales, Herman Kothe, Helen Neri

From: Kidada Medina, Nicole Mion, Karen Mulvany

Date: 6/8/2021

Re: Fiscal 2020 POS meeting input

Thank you for hosting not one, but two meetings over Zoom to review the annual purchase of service data for Alta California Regional Center clients. We appreciate the opportunity for a collaborative exchange of ideas.

Rather than addressing a larger number of topics, we would like to focus in on one particular area and offer suggestions that could form the basis of an upcoming disparity grant for next fiscal year.

Directing your attention to page 10 of the POS document which details POS expenditures by race and ethnicity and by age group and which is recapped below, we see that Black clients age 0-2 enjoy a relatively high dollar level of authorized services (at \$7.5K versus an average of \$6.9K for all clients), yet due to relatively low utilization of 38% (versus the average of 49% for all clients), their expenditures fall well below the group overage.

Interestingly, this does not appear to relate to any potential racial unwillingness to utilize services in general, as we see in the next older age group that Black client utilization of services is higher than average, at 58% for black clients aged 3-21, versus an average of 50% for all clients.

When we took the opportunity to converse with our racial and ethnic disparities reduction discussion group, which is also often attended by ACRC's Herman Kothe and Helen Neri, we learned from participants that many single parent households encounter barriers to accessing Early Start services (which dominate the services delivered in age 0-2.)

Subsequently three of us, including a Black parent and an Early Start provider, met to detail issues and systemic constraints, and discuss potential solutions that address current barriers to service access while also addressing the burdens that new solutions would place upon providers. Accordingly, we are forwarding the following client-family perspectives, provider perspectives and potential solutions:

# The Black Client-Family Perspective

- o Black parents identified several factors that likely contribute to low Black/African American utilization of authorized Early Start Services:
- o Hours of service availability. Single working parents, particularly hourly wage essential workers, are more likely to be unable to leave their jobs to attend Early Start sessions that are only offered during typical workweek hours (M-F, 9-5).
- O Home setting privacy concerns. Many families of color live in multigenerational households and are concerned that mandated reporters, such as Early Intervention staff visiting their home, could conceivably report them for crowded living conditions, rental housing that is in poor repair, or other housing conditions which incomeconstrained families are not empowered to change. Poor historical experiences and the distrust that has naturally resulted can impact Early Start services that currently are only delivered in the child's home, or the home of a friend or relative that is providing day care in an unlicensed setting.

### The Early Intervention Provider Perspective:

- o Many early intervention agencies that currently only serve clients during traditional business hours are full and have wait lists. Their vendored businesses are constrained by a lack of qualified staff, not a lack of demand.
- o The educational requirements for early intervention staff have expanded over the years. Early Intervention staff include physical therapists (PTs), Occupational Therapists (OTs), and Speech Language Pathologists (SLPs). The PTs require a doctorate and the OTs and SLPs require a master's degree for licensing. Assistants for these licensed professions typically require a bachelor's degree.
- Therapy Centers that provide some early intervention services to children in a group setting are not funded through regional centers. Only services that comply with federal early start regulations to offer services in a natural setting, which is generally interpreted to mean the child's home or a licensed daycare setting, are funded by regional centers.
- o Issues that constrain the availability of qualified staff include:
  - Low wages, particularly relative to educational requirements
  - Wait lists to attain entry into advanced degree programs at educational institutions
  - Lack of high school student awareness of Early Start professions
- Early Start vendors are not reimbursed when clients do not show up for an appointment, and are not reimbursed for transportation costs to travel to a client's home or daycare setting. This is not the case for vendored interpreters, for example.

Such reimbursement disparities may create undue challenges for single parent families who do not have a backup solution when one parent is unexpectedly pulled away from an Early Start appointment, and who can thereby lose access to services through missed appointments.

o Families that live farther away from population centers where Early Start vendors are located can be costlier to serve than clients who live in more populated centers.

### The Proposed Grant Funded Solutions:

At present, DDS and the Governor propose to fund enhanced service coordination for low-to-no POS clients, in order to close the gap for underserved communities. In this particular sector — Early Start Services for Black/African-American clients — the data tells us that services are already being authorized by service coordinators at a POS level that exceeds the averages, but services are underutilized, resulting in low expenditures. No one disputes the proven importance of Early Intervention in improved long-term outcomes. For this reason, we recommend an ACRC disparities grant proposal that will assess the relative success of new Early Start Enhanced Program Design service options for client-families who are compromised by barriers to accessing existing programs. Ideally these will include:

- New Extended Hours Services. Create a new service code for extended hours Early Start Services that offers after-hours services 5-8 pm on weekdays and 9-5 pm on Saturdays. Because existing providers are staff constrained, and additional hours will require overtime expenditures, the extended hours service code rates should be 50% higher than the standard reimbursement rate.
- New Service Settings. Create Early Start Therapy Centers to optionally serve clientfamilies who:
  - Are waitlisted for Early Start services
  - Do not wish to receive Early Start Services in their own home or in a licensed daycare setting. This would offer a person-centered option for those client-families.
  - Common reimbursement framework. Create a common reimbursement framework for vendored service providers to ensure that transportation costs, no-show revenue losses, are uniformly compensated.

#### Summary

Thank you for accepting input on the 2019-2020 Purchase of Service data and presentation. We sincerely appreciate the opportunity to collaborate with the regional center on potential disparities reduction opportunities. Please do not hesitate to contact us for a follow up group meeting if helpful.

Sincerely,

Kidada Medina kidadamedina@gmail.com

Nicole Mion, Community Outreach Coordinator/Early Intervention Specialist, Help Me Grow Yolo County nicole.mion@helpmegrowyolo.org

Karen Mulvany kmulvany@gmail.com

# ACRCs Recommendations and Plans to Promote Equity and Reduce Disparities

- During the second Annual POS Disparity meeting held on April 28<sup>th</sup>, 2021, ACRC polled the
  participants with two questions. One question asked why they think the diverse communities
  use fewer regional center services and the second question asked what they think is the most
  important aspect of the relationship between service coordinators and their families. The
  participants were given a number of choices for their answer.
  - On the first question: Majority of the participants answered that lack of awareness of services that are available to them and lack of understanding of services available to them
  - On the second question: Majority of the participants answered that service coordinators should speak the language of the diverse families that they serve
  - o **Plan of action:** ACRC plans to implement ongoing information sessions regarding available services and the circumstance that they could be of use to families. These sessions target families of different ethnicities in their languages and also the English as a primary language of majority ACRC clients
  - The training department will continue to work with the Human Resources department to ensure that the hiring of employees is responsive to the needs of the diverse caseloads
- ACRC will continue to make available to the ethnically diverse families the Chromebooks and
  hotspots to ensure that their participation in online trainings and workshops, and
  communication with their service coordinators are assured. The technology should also allow
  families access to generic web resources and navigate state agency websites such as Medi-Cal,
  Department of Health Care Services, Department of Developmental Services, and many
  others
- ACRC will collaborate with Family Home Agency (FHA) to ensure that the service becomes
  known to our ethnically diverse communities as a residential option for clients transitioning
  into adulthood or an option for families looking to place a family member with somebody
  who is of the same culture and language. Exposure of the FHAs to the diverse communities
  may also afford them the opportunity to recruit families of the diverse communities to open
  their homes to become providers
- ACRC will continue to update its website and post resources such as videos from community partners such as UC Davis CEDD, ARCA, LUNAS, and fellow regional centers. ACRC will

post videos that become available through its 20-21 video grants about services as soon as the videos become available

- ACRC will continue its community partnerships with culture-specific organizations to explore venues in which to promote the availability of services within the regional center system to the ethnically diverse communities
- ACRC will partner with agencies such as Disability Rights of California (DRC) and State
  Council on Developmental Disabilities (SCDD) to provide opportunities for learning about
  topics of relevance to families such as Medi-Cal, IHSS, SSI, and many others. ACRC will
  ensure that if information is requested in the language of the diverse communities, the request
  is accommodated and provided in the requested language
- ACRC engages in an agency-wide effort of inclusion of the ethnically diverse communities in its provision of services to clients. These efforts involve ensuring that the diverse communities are made aware of any discussion regarding new services such as the self-determination program, supported employment, housing opportunities, workshops availability, and many others. In this inclusion campaign, ACRC will ensure that materials available in English are also available in Spanish as the second largest minority group served by ACRC. Any other languages will be requested by their SCs for their families
- ACRC will continue to explore innovative activities and partnerships geared towards enhancement of the diverse populations' participation in the greater developmental disability community, that could be funded under future grants from DDS

Should you have any questions or require additional information, please contact Lori Banales at 916-978-6424 or lbanales@altaregional.org.

Sincerely,

Lori Banales

**Executive Director** 

Attachment: Power Point: ACRC POS Public Meeting

hori Barala.