2016~2018
STRATEGIC PERFORMANCE PLAN

MID YEAR REPORT 2017

Tri-Counties Regional Center

SAN LUIS OBISPO • SANTA BARBARA • VENTURA

Strategic Focus Area 1 - Family Support

Defined As:
TCRC consistently shares needed information with families about services and resources, at point of eligibility and as they continue to support a family member with developmental disabilities.

Strategic Issues:
- Families want to know what regional center services and generic resources are available.

- Families and persons served seek guidance throughout their lives to access services and supports needed to live, work, and recreate in their communities.

Desired Outcomes: What does TCRC want to achieve?
- Families and persons served by the regional center will see TCRC as the agency that will equip them with knowledge, guide and support them in accessing services based on their needs.
- Families and persons served will have the ability, skills, and knowledge to make informed decisions that work for them.

How will we know we are making progress?

Objectives	Baseline (Mid Year 2015)	2017 Desired Outcome	2017 Mid Year	2017 State Average	2017 Desired Direction	Target Met
a. Develop and implement TCRC Orientation for persons served and families.	No standardized TCRC Orientation.	Implement TCRC Orientation for new families in threshold languages.	Orientations and focus groups held in each office. Quarterly orientations scheduled in threshold languages.	N/A	N/A	On Track
b. Redesign TCRC website, increase ease of navigation and enhance presentation of existing content in an understandable manner.	Website built on Joomla platform.	Complete redesign.	Web navigation developed, tested and approved. Site designed with input from focus groups.	N/A	N/A	On Track
c. Develop, post and maintain descriptions of regional center funded services on TCRC website.	Brief descriptions posted on website.	Implement enhancements.	Descriptions of regional center funded services posted on TCRC website.	N/A	N/A	On Track
d. Percent of children residing at home. (P)	99.30 % (6,515)	98.00% - 100.00%	99.54% (7,080)	99.28%	▲	On Track

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.

* A threshold language is spoken by 5.0% of the population or 3,000 persons in the TCRC catchment area, whichever is lower. TCRC's two current threshold languages are English and Spanish.

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Strategic Focus Areas				Operational Focus Areas	
Family Support	Cultural Competence	Specialized Healthcare	Employment	Performance Contract Measures	Fiscal Compliance

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Strategic Actions:

	Topic	Description	Current Progress
1.	TCRC Orientation.	Coordinate with Family Resource Centers (FRCs) and Service Coordinators in each county to host focus groups with families in English and Spanish that will provide input on desired elements of TCRC Orientation. Use guiding principles of co-creation and co-facilitation with persons served and parents from FRCs when designing Orientation. Based on input, review, develop and/or translate written and multi-media resources to support the Orientation in threshold languages. Implement the TCRC Orientation in Year 2 for new families, and based on feedback, expand to make it available to all interested individuals and families in Year 3.	Three (3) in-person focus groups were held to gather feedback from TCRC staff, families and persons served. Changes to TCRC Orientation content were made based on focus group input. The orientation was launched in English and Spanish. It includes informal conversation, as well as video and written resources in threshold languages. We are in the final stages of training presenters, who will conduct the TCRC Orientations in each office quarterly.
2.	Redesign website.	Conduct multiple online brainstorming sessions with interested stakeholders to review and comment on a variety of websites and navigation types, followed by two (2) in-person focus groups to get more detailed input. Work with programmers during the redesign process to develop and test navigation. Research WordPress features and test compatibility of plug-ins. Identify and train additional web content editors to maintain specific pages within website.	Web navigation has been developed, tested and approved. Aligned with best practice, the main navigation menu will be at the top of the page and have persistent drop-down menus. The site has been designed using a team approach including several focus groups and stakeholder input. The new site has been built in a testing environment. Plug-ins have been selected for a "Quick Answers" menu on the home page, supplemental menus on interior pages, and related content. Approval has been given to move to content migration.

	Strategic Focus Areas				**Operational Focus Areas**	
Family Support	Cultural Competence	Specialized Healthcare	Employment		Performance Contract Measures	Fiscal Compliance

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Strategic Actions:

	Topic	Description	Current Progress
3.	Descriptions of TCRC funded services posted on website.	Review and evaluate current service descriptions, including those provided by DDS, brochures, and existing web content. Consider different modalities in presenting service descriptions, such as an attachment or a series of links. Establish and implement a plan for enhancements, including information about main categories of generic resources. Develop brief modules to educate Service Coordinators and people we serve about accessing existing TCRC content. Incorporate overview of website content in New Employee Welcome, Service Coordinator Orientation and TCRC Orientation for individuals and families.	Service descriptions are posted to our website. A printed version of service descriptions are also shared during quarterly TCRC Orientations for families and persons served new to regional center services.
4.	Support families so that children continue to reside at home. (P)	Continue to use a person centered approach to discover, understand and support families' needs.	TCRC continues to support families with a focus on helping them keep their children living at home. More than 99% of children served by TCRC live at home.

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Strategic Focus Areas				Operational Focus Areas	
Family Support	**Cultural Competence**	Specialized Healthcare	Employment	Performance Contract Measures	Fiscal Compliance

Strategic Focus Area 2 - Culturally Competent Services and Supports

Defined As:

Individuals and families served by TCRC are supported through the process of identifying needs and accessing services and supports in a person centered and culturally meaningful way.

Strategic Issues:

- Individuals served by TCRC and their families are unique, with different cultural preferences and different levels of support needs.
- Community connections are an important part of creating a network of supports and services.

Desired Outcome: What does TCRC want to achieve?

- TCRC will improve equal opportunities for underserved populations to access culturally competent services.

How will we know we are making progress?

Objectives	Baseline (Mid Year 2015)	2017 Desired Outcome	2017 Mid Year	2017 State Average	2017 Desired Direction	Target Met
a. Improve access to services and supports by providing understandable information to persons served and families in threshold languages.*	Brochures printed in English and Spanish.	Implement plan according to recommendations. Deliver training to new SCs.	Held two (2) focus groups in Oxnard and Lompoc. Developing training based on input.	N/A	N/A	On Track
b. IPPs are provided in threshold and non-threshold languages within required timelines.	Partial SANDIS data on preferred language.	Implement plan and improve baseline.	Implementing plan based on revised methodology.	N/A	N/A	On Track
c. Complete two (2) POS Expenditure Data meetings in each county annually.	Two (2) POS meetings in each county.	Two (2) POS meetings in each county.	Six (6) POS community meetings were held in 2017.	N/A	N/A	On Track

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Strategic Focus Areas				Operational Focus Areas	
Family Support	**Cultural Competence**	Specialized Healthcare	Employment	Performance Contract Measures	Fiscal Compliance

	Baseline (Mid Year 2015)	2017 Desired Outcome	2017 Mid Year	2017 State Average	2017 Desired Direction	Target Met
d. Increase organizational linguistic and cultural competence through enhanced training and attention to person centered practices.	Cultural competence training conducted. POS Expenditure Data and community input reviewed.	Implement plan. Deliver one (1) training in each county for TCRC Service Providers.	External consultant secured to offer service provider training in fall 2017.	N/A	N/A	On Track
e. Report the percent of total annual authorized services for individuals by residence type and ethnicity. (P)	To Be Determined.	To Be Determined.	Data received and currently being reviewed.	N/A	N/A	On Track
f. Report the number and percent of families, by race/ethnicity who report that services have made a difference in helping keep their family member at home. (P)	To Be Determined.	To Be Determined.	N/A	N/A	N/A	On Track

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.

* A threshold language is spoken by 5.0% of the population or 3,000 persons in the TCRC catchment area, whichever is lower. TCRC's two current threshold languages are English and Spanish.

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Strategic Focus Areas				Operational Focus Areas	
Family Support	**Cultural Competence**	Specialized Healthcare	Employment	Performance Contract Measures	Fiscal Compliance

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Strategic Actions:

Topic	Description	Current Progress
1. Provide understandable information in threshold languages.	Conduct focus groups in threshold languages to 1) determine if additional resources need to be created or existing resources enhanced to facilitate cultural competency; and 2) explore new ways to share information, particularly to those less inclined to use the website. Develop and implement a training plan and content to support Service Coordinators in helping individuals and families understand information presented by TCRC. Offer to all Service Coordinators by end of Year 1. In Year 2, develop or enhance content as recommended. Enhance or expand the ways in which information is shared. Continue training about explaining materials in an understandable manner for new SCs. Assess efforts and modify as needed in Year 3.	Two focus groups made up of parents of teens and young adults were held in Oxnard and Lompoc. Participants were asked to review the TCRC informational brochure on Transition to Adult Services. Participants were asked: if information was helpful; clear; missing any areas of interest; and how they liked to receive information. Input received from participants was considered and used to develop a glossary of terms and communication tip sheets for the following brochures: • Age 3 Transition • Services for School Age Children • Transition to Adult Services • Adult Services. This communication tool will be available to Service Coordinators to use when presenting these brochures. A training module is being developed as to how and when to present this information in an understandable manner to people we serve and families. Training will become part of the new Service Coordinator Orientation and included in the Cultural Competence Training beginning in Fall 2017.

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Strategic Focus Areas				Operational Focus Areas	
Family Support	**Cultural Competence**	Specialized Healthcare	Employment	Performance Contract Measures	Fiscal Compliance

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	Topic	Description	Current Progress
2.	IPP development in threshold and non-threshold languages within required timelines.	Establish method for tracking IPP preferred language data. Determine baseline and expected actions for meeting required timelines. Implement actions and monitor tracking, modifying actions as needed.	A revised methodology was approved to measure IPPs provided in the threshold language of Spanish in 45 days timeline from the date the IPP was held to the date that IPP was sent out by the support staff starting April 1, 2017. Baseline and annual targets were established: • 2016 Baseline 86% • 2017 Desired Outcome 91% • 2018 Desired Outcome 96% Mid-year data included 110 IPPs in the threshold language of Spanish out of which 98 met the 45 day timeline. The total percentage for this mid-year was 89%.
3.	POS Expenditure Data Meetings.	Review input from prior year attendees and presenters to make recommendations for future POS Expenditure presentations in threshold languages and in an understandable manner. Develop and execute plan for POS Expenditure Data meetings in each county, including development and implementation of method for gathering participant feedback. Assist with a system-wide POS Variance Study through ARCA Equity Committee.	Input was gathered at six (6) Purchase of Services Expenditure meetings held in 2017. Feedback was reviewed by Cultural Competence work group and the PCT Infrastructure committee. The TCRC Multicultural Specialist presented recommendations to Directors and Assistant Directors in May 2017, and final recommendations were included in report to DDS.

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Family Support	**Cultural Competence**	Specialized Healthcare	Employment	Performance Contract Measures	Fiscal Compliance

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	Topic	Description	Current Progress
4.	Improve organizational cultural competency through enhanced training and person centered practices.	In Year 1, the Focus Area Workgroup, in collaboration with the PCT Infrastructure Committee, will review a variety of sources, including POS Expenditure data and associated community input, to better understand what helps and what hinders access to culturally competent services and supports. Develop and implement a plan to enhance training and person centered work processes in order to better serve individuals and families according to their linguistic and cultural preferences. Deliver one (1) training in each county for TCRC Staff. Continue cultural competence training for new SCs. In Year 2, implement enhancements according to the plan. Deliver one training on Cultural Competence in each county for TCRC Service Providers. In Year 3, continue annual review of input, assess implementation and modify as needed.	TCRC Multicultural Specialist has engaged Just Communities to deliver cultural competence training to TCRC providers in each county in 2017. Cultural competence training continues to be delivered to all new TCRC Service Coordinators.
5.	Report the percent of total annual authorized services for individuals by residence type and ethnicity. (P)	Confirm the data collection methodology and establish baseline and annual targets. Analyze data and determine strategic actions.	Data is being reviewed by internal group and will be considered as we implement the Promotora-Family Engagement project.
6.	Report the number and percent of families, by race/ethnicity who report that services have made a difference in helping keep their family member at home. (P)	Confirm the data collection methodology and establish baseline and annual targets.	Data is being reviewed by internal group and will be monitored annually.

Strategic Focus Areas | **Operational Focus Areas**

| Family Support | Cultural Competence | Specialized Healthcare | Employment | Performance Contract Measures | Fiscal Compliance |

Strategic Focus Area 3 - Specialized Healthcare

Defined As:
Individuals with developmental disabilities need access to specialized healthcare services including Specialty Medical Services,* Dental Care, Aging-Related Healthcare, and Behavioral Health.

Strategic Issues:
- There are limited health-related resources in the TCRC catchment area, particularly with regard to Specialty Medical Services and Dental Care.
- Individuals with developmental disabilities and co-occurring mental health disorders face systemic barriers to accessing mental health resources.

- Many individuals and families, including underserved populations, do not know what resources are available or how to access Specialty Medical Services.
- TCRC serves a growing population of people who are aging and requiring specialized supports to address adult and age-related changes in overall health and functioning.
- Limited specialized resources are available to support the aging population, specifically in the areas of end of life planning and education about growing healthcare needs.

Desired Outcome: What does TCRC want to achieve?
- Families and individuals are better informed and have needed access to existing Specialty Medical Care, Dental Care, Aging-Related Healthcare, and Behavioral Health.

How will we know we are making progress? Objectives	Baseline (Mid Year 2015)	2017 Desired Outcome	2017 Mid Year	2017 State Average	2017 Desired Direction	Target Met
a. Deliver resources and requested trainings directly to families, through TCRC and Family Resource Centers (FRCs), about insurance, healthcare, end of life issues, and how to navigate the service delivery system.	One (1) training per quarter in each county related to accessing insurance.	Conduct at least one (1) training per quarter in each county in collaboration with FRCs and TCRC teams.	Trainings conducted in each county in first and second quarter.	N/A	N/A	On Track
b. Develop and implement a plan to expand specialized healthcare resources.	Limited access to Dental and Specialty Medical Services, monthly Psychiatric Clinics in each county.	Implement plan.	Implementing plan to offer mobile dental clinincs with registered dental hygenists.	N/A	N/A	On Track

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.

* Specialty Medical Services are outside the purview of normal primary care providers, typically including psychiatry, dental care, and neurology.

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Strategic Focus Areas				Operational Focus Areas	
Family Support	Cultural Competence	**Specialized Healthcare**	Employment	Performance Contract Measures	Fiscal Compliance

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Strategic Actions:

	Topic	Description	Current Progress
1.	Number and type of resources and requested trainings.	In Year 1, link to existing online, printable database of Medical, Dental, and Mental Health Providers who accept MediCal. Develop resource guide for families about how to access specialized healthcare services. Develop methodology and collect input about training needs, preferred training times, and locations from persons served, families and staff. Based on input, conduct one (1) training per county. In Year 2, collaborate across teams and with FRCs to conduct at least one (1) in-person training per quarter in each county, in response to topics, times and places identified by persons served and families. In Year 3, continue to deliver at least one (1) training per quarter in each county on requested topics. Add online training component in Year 3, to alleviate barriers to access and increase participation for families, including those in remote areas.	Survey input was considered to conduct various trainings related to dental care, how to access mental health services, services for the aging population, and how to access services through insurance and special medical conditions. Trainings on Oral Hygiene were held in the first quarter for SB and Ventura counties and training on How to Access Specialty Healthcare Services Through Insurance in SLO county. In the second quarter training was held by Gold Coast/Rainbow Family Resource Center in Ventura County on pre-diabetes. There was a training done on Doctors Assisting Seniors in the Home in Santa Barbara County and training in SLO County on Oral Hygiene through Parents Helping Parents.
2.	Plan to expand specialized healthcare resources.	Research models for Telemedicine and Dental Clinics by consulting with Far Northern, Valley Mountain, Westside, and Redwood Coast Regional Centers, and ARCA Dental Coordinators, as well as federal programs that fund clinics in rural areas. Draft a plan for development of these Specialized Healthcare resources. Expand resources according to the plan and available funding. Continue to collaborate with Gold Coast and CenCal to ensure access to MediCal providers.	A plan was created regarding the implementation of mobile dental clinics to be piloted in Santa Barbara with future plans to expand throughout the Tri-Counties area. Registered Dental Hygienists of Alternative Practice have been vendored and several sites have been identified where the clinics will be held. A draft procedure for Service Coordinators has been created.

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Strategic Focus Areas				Operational Focus Areas	
Family Support	Cultural Competence	Specialized Healthcare	**Employment**	Performance Contract Measures	Fiscal Compliance

Strategic Focus Area 4 - Employment

Defined As:

Employment is given the highest priority when planning with transition age youth and working age adults. Work in this area focuses on the services and supports needed to help people prepare for, obtain, and retain integrated, competitive employment.*

Strategic Issues:

- Adults of all ages want interesting and meaningful things to do in their day.
- Employment levels of people with developmental disabilities are low, and those who are employed are often working in sub-minimum wage jobs.
- There are systemic and cultural obstacles to preparing for, achieving, and supporting competitive employment.

Desired Outcomes: What does TCRC want to achieve?

- TCRC will improve opportunities of people with developmental disabilities to access meaningful, integrated, competitive employment.
- Adults who receive regional center services have access to innovative day services that reflect their interests and needs.

How will we know we are making progress?

Objectives	Baseline (Mid Year 2015)	2017 Desired Outcome	2017 Mid Year	2017 State Average	2017 Desired Direction	Target Met
a. Strengthen employment infrastructure that can support people to prepare for, obtain and retain integrated, competitive employment.	Employment Collaboratives in each county.	Implement Employment First Policy and Employment Plan.	Implementing Employment Plan. Employment First policy approved.	N/A	N/A	On Track

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.

* Competitive employment is employment for which a person earns the minimum wage or higher and benefits that are the same as those of other employees in a comparable position. Integrated employment is employment in which a person served works alongside people without disabilities, excluding supervisors and service providers, and interacts with other individuals to the same extent as co-workers without disabilities in a comparable position.

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Strategic Focus Areas				Operational Focus Areas	
Family Support	Cultural Competence	Specialized Healthcare	**Employment**	Performance Contract Measures	Fiscal Compliance

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Strategic Actions:

Topic	Description	Current Progress
1. Strengthen employment infrastructure.	Hire Employment Coordinator to collaborate with community partners and support employment initiatives with the goal of increasing competitive, integrated employment of persons served by the regional center. ▪ Secure funding and finalize job description. ▪ Establish and implement timeline for recruitment and hiring. ▪ Develop and implement training and support plan for Employment Coordinator. Establish TCRC Employment First Policy. ▪ Review policies from other regional centers. ▪ Draft TCRC Employment First Policy that is aligned with AB1041. ▪ Develop and implement supporting procedures. Develop a plan to strengthen employment infrastructure that addresses the following elements: ▪ Identification of collaborating partners. ▪ Clarification of phases of employment preparation, as well as roles and responsibilities of collaborating partners within each phase. ▪ Establish Data Collection Methodology to ensure accurate and consistent use of data collection tools (i.e. CDER, NCI, etc.). ▪ Dissemination of information and new laws and trainings. ▪ Education to SCs and other stakeholders.	We are implementing the Employment Plan to strengthen employment infrastructure through collaborative partnerships, dissemination of information to stakeholders, trainings for Service Coordinators and provider agencies, development of employment resources and awareness of competitive integrated employment outcomes. Collaborative Employment Partnerships: • Continued facilitation of ongoing employment collaborative and Employment Task Force groups • Developed ongoing collaboration with all Adult Education Block Grant consortia in tri-counties region • Participated in ongoing job developers round table • Supported five (5) providers in eliminating Special Minimum Wage • Approved five (5) program designs for new vocational services • Developed method for sharing region-specific job opportunities with stakeholders in each county • Employer recognition events, job & transition fairs in each county • Increased workforce development and post-secondary education membership in employment collaborative groups • Increased Department of Rehabilitation & School participation in Planning Team Meetings

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Strategic Focus Areas				Operational Focus Areas	
Family Support	Cultural Competence	Specialized Healthcare	**Employment**	Performance Contract Measures	Fiscal Compliance

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Strategic Actions:

	Topic	Description	Current Progress
1.	Strengthen employment infrastructure Cont...	Hire Employment Coordinator to collaborate with community partners and support employment initiatives with the goal of increasing competitive, integrated employment of persons served by the regional center. ▪ Secure funding and finalize job description. ▪ Establish and implement timeline for recruitment and hiring. ▪ Develop and implement training and support plan for Employment Coordinator. Establish TCRC Employment First Policy. ▪ Review policies from other regional centers. ▪ Draft TCRC Employment First Policy that is aligned with AB1041. ▪ Develop and implement supporting procedures. Develop a plan to strengthen employment infrastructure that addresses the following elements: ▪ Identification of collaborating partners. ▪ Clarification of phases of employment preparation, as well as roles and responsibilities of collaborating partners within each phase. ▪ Establish Data Collection Methodology to ensure accurate and consistent use of data collection tools (i.e. CDER, NCI, etc.). ▪ Dissemination of information and new laws and trainings. ▪ Education to SCs and other stakeholders.	Dissemination of Employment Information and Trainings: • Trained providers and Service Coordinators in person centered employment planning and use of Paid Internship Program (PIP) & Competitive Integrated Employment (CIE) programs • Disseminated list of generic employment resources in each county • Facilitated trainings on CalABLE, Ticket to Work, PASS Plan and other work incentive programs • Created employment service brochures and fliers for individuals and families, provider agencies and local education entities Data Collection Methodology: • Developed queries for tracking employment data on CDER and through Purchase of Services • Utilized federal and state resources for tracking TCRC specific employment outcomes • Verified 29 new placements of individuals served by TCRC who have verifiable documentation of competitive integrated employment.

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Strategic Focus Areas

| Family Support | Cultural Competence | Specialized Healthcare | Employment |

Operational Focus Areas

| Performance Contract Measures | Fiscal Compliance |

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.

Desired Outcome: What does TCRC want to achieve?
- Meets or exceeds statewide average, better than baseline, or meets DDS standard.

Strategic Issues:
- Number and percentage of total population caseload in Developmental Centers.
- Adults Residing in Home Settings.
- Children Residing in Facilities with Seven (7) or More Beds.
- Adults Residing in Facilities with Seven (7) or More Beds.
- Duration in Intake Status for Individuals Ages 3 and Over.

How will we know we are making progress?

Outcome Measures	Baseline (Mid Year 2015)	2017 Desired Outcome	2017 Mid Year	2017 State Average	2017 Desired Direction	Target Met
a. Number and % of total population caseload in Developmental Centers (P)	0.21% (27)	.x% (21)	0.16% (22)	.26%	▼	On Track
b. Adults Residing in Home Settings (P)	79.44% (4,873)	80.00% (x)	80.91% (5,268)	79.27%	▲	On Track
c. Children Residing in Facilities with Seven (7) or More Beds (P)	0.02% (1)	.x% (< or = 12)	0.00% (0)	0.04%	▼	On Track
d. Adults Residing in Facilities with Seven (7) or More Beds (P)	4.09% (251)	3.9% (x)	3.59% (234)	2.55%	▼	On Track
e. Duration in Intake Status for Individuals Ages 3 and Over Intake Status (P) <142 days 143-240 days over 240 days	100.00% 0.00% 0.00%	98.00%-100.00% (x%) (x%)	100.00% 0.00% 0.00%	97.91% 1.85% .24%	▲ ▼ ▼	On Track

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. For Children Residing with Families data, see Strategic Focus Area 1 - Family Support, Objective d.

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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.	Since Jan 1, 2017, we have moved an additional two (2) people from Developmental Centers. There are currently eighteen (18) individuals remaining in Developmental Centers.
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.	In the first half of 2017 two (2) homes supporting adults were developed. One of the homes is in Simi Valley and is a Level 4I home with a totally capacity to support four (4) individuals. The other home is an RCFE (Residential Care Facility for the Elderly) that supports six (6) individuals over the age of 59. This home is located in Santa Maria.TCRC also vendored a total of four (4) beds in three (3) RCFEs throughout the catchment area. In addition, a new Independent Living Services (ILS) provider was vendored to support individuals who wish to live as independently as possible.
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.	In the first half of 2017 a Level 4G home for children ages 12-17 was developed in Simi Valley. This home will serve four (4) children with significant developmental, behavioral, and/or cognitive challenges. Additional bed was vendored in the children's step-down home in Paso Robles. This home can now support four (4) children.
4.	Adults are not living in large facilities.	TCRC continues to support downsizing of large congregate residential settings in the TCRC catchment area.	TCRC continues to partner with residential agencies within the TCRC catchment area interested in downsizing. The partnership includes exploring alternative service delivery models as well as supporting community outreach efforts.
5.	Intake process.	Each intake is monitored for a timely eligibility decision.	TCRC continues to focus on meeting all eligibility timelines. EOY 2016 results were more than 99% of all intakes were completed within the required timelines.

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Family Support	Cultural Competence	Specialized Healthcare	Employment	Performance Contract Measures	**Fiscal Compliance**

Operational Focus Area 2 - Fiscal Compliance

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

Desired Outcome:
- Compliance with outcomes expected from DDS.

How will we know we are making progress?

Outcome Measures	Baseline (Mid Year 2015)	2017 Desired Outcome	2017 Mid Year	2017 State Average	2017 Desired Direction	Target Met
a. Internal compliance audit of implementation of new TBL	Yes	Yes	Yes	N/A	N/A	On Track
b. Unqualified independent audit with no material findings (P)	Yes	Yes	Yes	N/A	N/A	On Track
c. Substantial compliance with DDS fiscal audit (conducted within prior 12 months) (P)	Yes FY11/12 FY12/13	Not measured*	Yes FY13/14 FY14/15	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 POS 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)	Yes	Yes	Yes	N/A	N/A	On Track
h. Client Development Evaluation Report (CDER)/Early Start Report (ESR) currency	Yes	Yes	Yes	N/A	N/A	On Track
i. Individual Program Plan (IPP) Development*	99.13% (2014)	98.00% - 100.00%*	100% (2016)	N/A	N/A	On Track
j. Individualized Family Services Plan (IFSP) Development*	96.81% (2014)	96.00% - 100.00%*	97.38% (2016)	N/A	N/A	On Track

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.
*DDS Audits Spring 2016 and Spring 2018 (every two [2] years)

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Strategic Actions:

	Topic	Description	Current Progress
1.	Implementation of new Trailer Bill Language (TBL).	Internal compliance review of implementation of new TBL.	Summary of FY 16/17 Trailer Bill requirements completed and reviewed at TCADD Administrative Committee in July. TCRC completed numerous provider rate increases, converted 21 homes to 4-bed rates, implemented competitive integrated employment and internship programs, completed 5 contracts with Family Resource Centers and Promotoras for DDS approved proposal to reduce POS disparities, completed 5 contracts for DDS approved provider proposals to comply with HCBS regulations, implemented TCRC staff wage increases and reported to DDS in March, and implemented changes to vendor independent audit report and review requirements. Work has begun on ABX2 1 provider rate survey project and RC OPS survey – both due October 1, 2017. TBL for FY 17/18 to be reviewed upon receipt of implementation memo from DDS.
2.	CPA Audit Corrective Action Plan.	Develop corrective action plan from prior CPA audit and implement.	No findings from FY 15/16 CPA audit. TCADD Audit Committee met January 2017 to review. Presentation to Board at February 2017 meeting. Audit Committee completed selection process for new CPA audit firm that will conduct the FY 16/17 audit in October 2017. Processes, reports, invoices and other documents are being reviewed in preparation for the upcoming audit.
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 and DDS audits from prior years was completed. Preparations completed for DDS fiscal audit of FYs 13/14 and 14/15 conducted in May 2016. Draft DDS audit report has not been received. No significant findings have been reported.
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.

TCRC STRATEGIC PERFORMANCE PLAN 2016~2018

Strategic Focus Areas				Operational Focus Areas	
Family Support	Cultural Competence	Specialized Healthcare	Employment	Performance Contract Measures	**Fiscal Compliance**

… continued

Strategic Actions:

	Topic	Description	Current Progress
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 16/17 primarily in salary savings, temp help, rent, and utilities plus additional allocation of OPS funds allowed for $1 million contribution towards PERS unfunded liability.
6.	Participation in Medicaid HCBS Waiver	Monthly peer reviews and internal case record reviews ensure TCRC remains in compliance with documentation requirements for HCBS Waiver.	Peer reviews and internal case record reviews continue. Federal Programs team continues to monitors all required documentation. HCBS Waiver Audit completed in January 2016 with very positive results. More than 54% of people who are status 2 are on the waiver.
7.	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.	Met FY 16/17 vendor audit requirements. Completed eight (8) audits: five (5) billing audits, two (2) staffing ratio, and one (1) Personal & Incidental funds. One of these audits was of an Early Start program, as required. Audit plan for FY 17/18 in process. Audit Team meets every two (2) months or sooner, as needed.
8.	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.	End of year 2016 CDER Currency for TCRC was 99.41%.
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.	2016 DDS Early Start Review/Audit results were 100% for IFSP currency.