

Tri-Counties Regional Center

Menu of Community Services



*Use this guide for
discussions with your
service coordinator
and planning team.*



Preface

The purpose of this “Menu of Community Services” is to give you and your Planning Team an overview of the supports and services that may be appropriate based on a careful assessment of your interests and needs. For your convenience, we have divided the menu into three main sections: services for children, services for adults, and services applicable to any age. Although we have repackaged the information to make it more readable and useful, the content, word for word, actually comes from Service Policies and Guidelines approved by our agency’s governing board. The menu tells you when a service may be suitable, what the service is and which generic services in the community may be relevant to pursue. Before they purchase services, regional centers, by law (e.g. The Lanterman Act, The Americans with Disabilities Act), must help you seek out services and supports from those generic service agencies that have a legal responsibility to serve all members of the general public and are receiving public funds. Because of this, and also because regional centers have a legal obligation to taxpayers to provide the most cost-effective services, the Board’s Service Policies and Guidelines contain general rules which apply to obtaining and purchasing all services (Appendix I). Furthermore, we have included with our menu two separate listings of generic services we know you will find informative (Appendix II and Appendix III). Read this menu, talk with your service coordinator, visit your local family resource center, use our web site, check out your local county service directory — there are many ways to find the information you need to make important choices and decisions in your life. We are happy we can help!

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Table of Contents

Supports & Services for Children	Page 1
Supports & Services for Adults	Page 8
Supports & Services for All Ages	Page 15

APPENDIX I

Rules which apply to Obtaining Services	Page 23
--	----------------

APPENDIX II

A Listing of Generic Services	Page 25
--------------------------------------	----------------

APPENDIX III

More Generic Resources	Page 42
-------------------------------	----------------

Supports and Services for Children

Prenatal Diagnostic Services

When: A woman is determined clinically at substantial risk of giving birth to a child with a developmental disability and the service has a high likelihood of preventing a developmental disability or of reducing the impact of a developmental disability.

What:

1. Prenatal diagnostic procedures include such generally accepted medical procedures as amniocentesis and/or chorionic villus sampling, ultrasound examinations and/or sonograms, karotyping; biochemical determination, and related procedures used to diagnose certain prenatally identifiable genetic disorders.
2. Genetic counseling includes the collection of family history, review of chromosomal analysis and any other related prenatal diagnostic procedures, discussion of any potential risk factors, and counseling support for the family members throughout the decision making process.



Generic Services: County Department (s) of Health, prenatal centers and genetic centers, Medi-Cal, California Children’s Services, any other public funding source, and/or private insurance.

Early Intervention Supports, Services and Programs

When: Tri-Counties Regional Center will coordinate early intervention supports, services or programs to provide education and training for

parents or caregivers of infants and toddlers up to three (3) years of age in areas such as feeding, social adaptive development, positioning and communication. Such services may include developmental monitoring and consultation, occupational and physical therapy, infant development and pre-school programs.



What: Early intervention supports, services or programs are intended to maximize an infant's development within the existing family structure by:

1. Responding to the personal and family needs expressed by parents or caregivers;
2. Fostering quality parent and infant interaction;
3. Developing and implementing appropriate and specific growth-fostering activities for the infant.

Early intervention supports, services or programs may be provided in the family or caregiver's home or at a pre-school or other program site. Tri-Counties Regional Center is committed to providing early intervention supports, services or programs in the most inclusive environment or natural setting. In considering site-based services for toddlers and pre-school children, this means that necessary supports, services or programs will be provided

in natural, typical neighborhood schools with non-disabled youngsters, as opposed to special or segregated environments.

The following early intervention support, service or program options may also be considered:

1. Center-based: a group of parents, or caregivers, and infants meet together at a designated site under the guidance and supervision of qualified personnel;
2. Individual in-home parent education and support: individual support or service is provided by a qualified professional to an infant and parent, or caregiver, at their residence;
3. Combination: supports or services are provided both at a central site and through a home intervention component.

Generic Services: Some infants or toddlers with or at risk for developing a developmental disability thrive in a nurturing home environment and may not require a regional center purchased intervention. Others may need only the services offered through the Medical Treatment Unit of the California Children's Services or various therapies available through private insurance or other third party payers.

Primary Programming Services for School-Age Consumers

When: Children under the age of three years

What: Supports, services and program options may be provided under the Federal Part H Early Start Services program. These supports, services and program options provide education and training for parents or caregivers in such

areas as feeding, social adaptive development, positioning and communication.

These supports, services and program options are provided through in-home parent education and support, center-based programs (e.g. Early Headstart at two years) and combination programs which are provided both in the home and at center based sites.



When: Children ages 3 to 4.9 years with developmental disabilities

What: Children with intensive special education needs are entitled to a free and appropriate public education at 3 years of age. Special education pre-school programs provided by school districts are designed specifically to meet the unique intensive needs of individuals with exceptional needs whose educational needs cannot be met with modification of the regular instruction program. Tri-Counties Regional Center will advocate for and work with families in the transition to a public school program when the consumer turns 3 years of age. For those consumers over age 3 and under age 4.9 who are not appropriate for special education services within the public schools, Tri-Counties Regional Center may authorize funding for appropriate alternatives.

When: Children ages 4.9 to 18 years with developmental disabilities

What: Children in this age group are entitled to a free and appropriate public education with non-disabled peers of similar ages. Public school programs are intended to include but not be limited to: academic training; pre-vocational and vocational training; speech therapy; occupational therapy and/or physical therapy; transportation services; mobility training; adaptive physical education; counseling services; social skills training; and other designated instructional services as identified in their Individual Educational Plan.

When: Individuals ages 18 to 22 years of age with developmental disabilities

What: Individuals in this age group are entitled to continue in public education if they have not yet completed their prescribed course of study or have not met proficiency standards.

When: Individuals ages 14 to 21 years who are preparing to leave public education programs

What: In developing the Individualized Educational Plan (IEP), Tri-Counties Regional Center will collaborate with the consumer, family, school and other community agencies to develop a transition plan that will lead the individual to success in employment and/or other adult roles in the community.

Generic Services: Local public education agencies, private pre-schools, public daycare, Headstart.

Family Support Services for School-Age Consumers

When: Family support services for school-age consumers may be purchased when:

1. The consumer has behavior challenges or medical care needs or supervision needs that exceed those of children the same age without developmental disabilities;
2. There are few or no natural supports or generic supports available to provide necessary supervision during times when the parent(s) are away;
3. The behavior or medical needs of the consumer require supervision by a trained professional; or
4. The family is experiencing a short-term crisis or emergency situation.

What: Family support services are supports and services provided to a person with developmental disabilities and his/her family that contribute to the



ability of the family to reside together. Family support services may include but are not limited to in-home respite care; in-home nursing care; out-of-home respite care; day care; after school programs; camp; extended school year programs; and/or crisis intervention services. Tri-Counties Regional Center may authorize funding for the acquisition of specific social skills when the Planning Team has determined the skills cannot be taught by the family or by public and/or generic resources.

Generic Services: Individuals receiving SSI, SSA, and AFDC are eligible for Medi-Cal linked In-Home Support Services provided through the

County Department of Social Services. When appropriate, Tri-Counties Regional Center will assist families to access these services as it could provide the family with additional resources to purchase personal care assistance for the consumer while providing relief to the primary caregiver. As a generic resource, IHSS must be exhausted prior to the authorization of regional center funding.

Transportation Supports for School-Age Consumers

When: As part of the Individualized Family Service Plan (IFSP), Tri-Counties Regional Center may authorize the most cost effective transportation

supports or services for children under the age of three when parent provided transportation, including



public transit, is unavailable. Such transportation support or service will be authorized only when a parent or adult caregiver accompanies the child.

What: Tri-Counties Regional Center will not authorize transportation for school-age consumers who attend special education programs or when transportation is required to meet objectives in the Individualized Education Plan.

Transportation of school-age consumers to social and recreational activities, medical and dental appointments, therapy services and other occasional trips in the community are the responsibility of the parent(s), the primary caregiver(s) or the residential service provider.

Generic Services: Private and/or public transportation services, para-transit services.

Supports and Services for Adults

Family Support Services for Adult Consumers

When: Tri-Counties Regional Center recognizes that some families of an adult child with developmental disabilities are not able to meet all of their family support needs through traditional sources because some individuals with a developmental disability require a degree of care beyond that needed by the majority of individuals of a similar age.

What: Family support services are supports and services provided to a person with developmental disabilities and his/her family that contribute to the ability of the family to reside together. Family support services may include but are not limited to: in-home respite care; in-home nursing care; out-of-home respite care; and/or crisis intervention services.

Generic Services:

Individuals receiving SSI, SSA and AFDC are eligible for In-Home Support Services provided through the County Department of Social Services. When appropriate, Tri-Counties Regional Center will assist families to access these services as it could provide the family with additional resources to purchase personal care assistance for the consumer while providing relief to the primary caregiver. As a generic resource, IHSS must be exhausted prior to the authorization of regional center funding. Various community programs also serve a secondary function by providing family support services and relief to parents from the responsibility of 24-hour care. Such programs include primary program supports and/or services for adult consumers and local



social and/or recreational programs (e.g. through City Recreation Departments).

Primary Program Services for Adult Consumers

When: Primary program service options for adult consumers are structured, comprehensive, community based service programs for persons with developmental disabilities who are no longer eligible for public school programs.

What: These supports, services and/or programs should include opportunities for consumers to participate in self advocacy, employment training, community integration and the development of self-care skills. Primary programs for adult consumers may be center-based. Adult consumers will have the option of receiving skill development supports and services in natural environments and under realistic conditions.

Community based education, training and employment primary program options include but are not limited to:

1. Competitive employment which is paid employment available to all persons in the community;
2. College, including community college and/or state university which includes regular college programs or programs for consumers on a mainstream campus which are primarily geared for consumers with severe physical disabilities;



3. Vocational skill training programs which are those programs focused on vocational skills for regional center consumers, funded by the Department of Rehabilitation or Habilitation;
4. Occupational/vocational/technical schools, including adult education, community college or other publicly funded work training programs, which are those programs offering specific training for consumers with the potential for job entry skills;
5. Integrated or supported employment which are those programs offering paid work in a variety of settings with supervision and support, funded by the Department of Rehabilitation or by Tri-Counties Regional Center.
6. Community based training and activities should occur in natural environments and should utilize the individual critical skills model. Community based training and program options include but are not limited to:
 - a. Skills training programs which are those programs designed to develop, maintain, increase or maximize an individual's independent functioning in areas which may include self care, physical development, emotional growth, socialization, self advocacy, communication, functional academic skills, cultural development, pre-vocational skills and employment. These programs enable adult consumers to engage in productive work or other meaningful activities;
 - b. Socialization-recreational programs which are those programs designed for consumers who may desire an alternative to a vocational or educational program and possess basic self-help and communication skills. These programs provide planned activities that may be community-based and promote social integration. They focus on the

- consumer's utilization of skills necessary for activities of daily living, socialization, recreation and community integration;
- c. Behavior intervention programs which are those programs that serve consumers with severe maladaptive behaviors which preclude participation in traditional settings. These programs provide services through a highly structured positive behavior intervention modalities. Programs for consumers with diagnoses of both developmental and mental disabilities provide services through a combination of behavior modification and other therapeutic clinical interventions;
 - d. Basic self-care training programs which are programs that focus on developing, maintaining or improving basic functional skills such as toileting, eating skills, basic cleanliness and compliance skills and the amelioration or prevention of aberrant behaviors. These programs additionally provide opportunities for skills training, socialization and community integration.

Generic Services: Colleges and universities, community colleges, Department of Rehabilitation.

Primary Programming Services for Senior Consumers

When: During retirement planning, the planning team recognizes that a person over the age of 60 years may need services and supports similar to a senior citizen. However, primary services, funded by the regional center, will continue to be available.

What: Supports, services and/or program options provided to a senior citizen with developmental disabilities should assist that individual to retain his or her ability to function as independently as possible and to remain mobile, physically capable and competent in activities of daily living while maintaining autonomy outside of an institutional setting.



Primary program services for senior citizens should include activities which promote the following: age appropriate leisure and recreation opportunities; general health and well-being; social and friendship networks; life review and reminiscence; and adjustment to loss.

Generic Services: For consumers over the age of 60, primary program options include most programs for senior citizens offered by agencies funded by Area Agencies on Aging under Title III of the Older Americans Act. These program options are available to Tri-Counties Regional Center consumers, as they are for their non-disabled peers of a similar age.

In addition to a primary program, programs for senior citizens may offer congregate and home

delivered meals, case management services, in-home services, escort transportation, legal services, information and referral, health care services, mental health care services and other social activities.

Transportation Supports and Services for Adult Consumers

When: A person needs transportation to ensure inclusion, participation and community belonging.



What: Availability of safe, accessible, cost-effective, public and private transportation for persons with developmental disabilities and, where necessary, their families.

Generic Services: These include para-transit and other specialized transportation as well as fixed route services.

Supported Living Services

When: An adult, who chooses to live in his or her own home, has identified with his or her Planning Team what supports or services are required to achieve this goal.



What: Individuals receiving supported living services choose where and with whom they will live based upon their preferences and resources. A combination of natural, community, generic, environmental, and formal supports ensure the individual is safe, healthy, and has opportunities for friendships and personal growth. Supports and services build on an individual's capabilities and strengths and are provided for those tasks that the

individual may not be able to learn to perform independently. Housing and support services are provided by different entities.

Generic Services: Supplemental Security Income (SSI), In-Home Support Services (IHSS), Section 8 housing certificates or Public Housing rentals.

Independent Living Services

When: A person, needing the services, has acquired basic self-help skills or, because of physical disabilities, does not possess basic self-help skills and employs and supervises aides to assist in meeting personal needs.

What: Independent Living Programs provide community-based, structured, skill-based training programs designed to teach individuals the functional skills and behaviors necessary to secure a self-sustaining, independent living situation in the community. Independent living services may be used to teach or maintain a wide variety of skills such as money and household management, social/leisure skills, mobility training, use of community resources, accessing generic services, facilitating self-advocacy, consumer parenting skills training, and the use of direct supports.

Home-based independent living supports provide functional skills training for adult individuals who are transitioning from supported settings (such as family homes or licensed residential facilities) or who need limited ongoing support to maintain these necessary skills in their own home.

Generic Services: Supplemental Security Income (SSI), In-Home Support Services (IHSS), Section 8 housing certificates or Public Housing rentals.



Supports and Services for All Ages

Physical and Occupational Therapy Services

When: According to a physician, significant deficits exist in gross and/or fine motor skills or in self-help skills; and when the therapy is necessary and likely to make a significant improvement in the individual's capabilities or to prevent deterioration of function or of health.

What: Physical and/or occupational therapy services are prescribed assessments or treatments provided directly by, or under the supervision of, an accredited physical or occupational therapist. These services are provided to individuals who have problems in the areas of fine and/or gross motor skills or the skills related to activities of daily living that can be ameliorated using physical and/or occupational therapies. These treatment modalities encompass multiple activities including range of motion; home evaluations to assess equipment needs; and activities to improve overall coordination, develop self-help, daily living and motor skills (must be therapy services on the list of recognized therapies developed and maintained by Medi-Cal and California Children's Services).



Generic Services: Early intervention service providers, California Children's Services, local education agencies, health care facility providers, health care agencies, private medical insurance, trust funds, Medi-Cal EPSDT for children.

Communication Therapy Services

When: There is a reasonable expectation, based on medical, psychological, audiological, or speech and language assessment that the proposed intervention is clinically indicated and will result in significantly improved communication skills for the consumer:

1. The consumer's communication skills are significantly delayed relative to other areas of their development (for example, a significant discrepancy between performance and verbal scores appears during psychological testing or speech and language evaluation);
2. There appears to be a significant gap between receptive and expressive abilities (for example, the combination of receptive language, cognitive abilities and social adaptive skills is significantly better than expressive language);
3. There are significant deficits in the clarity of the consumer's articulation skills;
4. Augmentative communication systems are contemplated, used or require periodic evaluation or adjustment;
5. Concerns about the choice of communication modalities being taught, (for example, total communication, signing, speech or reading);
6. The communication deficits of the consumer extend beyond the mandated program responsibilities of his/her primary program including the mandated responsibilities of public education.



What: Speech, language and communication therapy services are services that assess and teach receptive and expressive communication skills in any or all modalities. These modalities include oral language (speech), sign language, gestural, written communication and/or the use of appropriate augmentative communication systems.

Generic Services: Early intervention service providers, California Children's Services, local education agencies, health care facility providers, health care agencies, private insurance, trust funds, Medi-Cal EPSDT for children.

Counseling Services

When: Access to specialized mental health care services directly related to a developmental disability may be necessary for the health and functional ability of some individuals. Counseling services may be provided when a consumer and/or his/her family member require a deeper understanding of social or psychological problems that are associated with the developmental disability and that adversely affect the consumer's living arrangements or other supports and services. The provision of counseling services requires a clinical assessment that identifies the presenting problem, the expectations and the time lines for a therapeutic outcome and with an identified method for deciding whether or not that outcome is being achieved. Any referral or provision of counseling services is made by the Planning Team and is contingent on the willingness of the consumer and family to participate in the counseling services.



What: Counseling services are psychotherapeutic treatment provided by a licensed psychologist, psychiatrist, clinical social worker or a marriage family child counselor. On occasion, counseling services may form a necessary part of a comprehensive intervention program, which may include medication, behavioral management and other related treatments. The Planning Team will determine whether the counseling service will be provided by clinical consultants on contract with Tri-Counties Regional Center or by an outside source. Tri-Counties Regional Center may authorize short-term and crisis counseling services.

Generic Services: Mental health agencies, California Children's Services, local education agencies, health care facility providers, private insurance, trust funds, church pastor, Family Service Agencies or other low-cost counseling centers.

Behavior Intervention Services

When: An individual exhibits maladaptive, harmful, socially unacceptable, or developmentally unacceptable behaviors that constitute a danger or have a significant adverse effect on their participation in school or work, on family functioning, or on residential options.

What: Behavior intervention services are prescribed assessments or treatments provided directly by, or under the supervision of, a qualified licensed professional trained in behavior management. Behavior intervention services use specialized methods of teaching important social and adaptive skills and of training family members, or primary caregivers, in the effective use of positive behavior management skills. In addition, the



Planning Team may determine that periodic support is needed on a consultative basis to ensure the continued success of past intervention services. The intent for provision of such consultative services is to offer guidance and preventive intervention. In some situations, long-term family support provided in the form of behavior intervention services may be required to address persistent aberrant behaviors of their children. These long-term behavior intervention services may be offered when the parent or caregiver participates as the primary agent of change.

Generic Services: Mental health agencies, local education agencies, low incidence funds of SELPA/LEA, health care facility providers, private insurance, trust funds, Healthy Families Medi-Cal and EPSDT for children.

Health Care Services

When: The person needs specialized health care services directly related to, or the direct result of, a developmental disability and the care is required to protect health or safety or to prevent regression.

What: Specialized medical, dental, nursing, nutritional or pharmacy services.

Generic Services: Medi-Cal, private insurance, trust funds, Denti-Cal, Healthy Families public insurance and Medi-Cal EPSDT (for children), PACT-net (for all).



Equipment and Supply Services

When: Specialized equipment and supply services are necessary for the health and functional ability of the individual.

What:

1. Durable medical equipment (DME) includes those mechanical, assistive or adaptive devices which are designed to sustain life or to facilitate mobility, communication, community access or environmental control in order to promote increased independence. Durable medical equipment includes wheelchairs, apnea monitors and communication devices.
2. Non-durable medical equipment and supply services include those expendable products which are designed to assist an individual to maintain optimal health and to promote maximum adaptive functioning. Non-durable medical equipment includes prescription medication, eyeglasses, diapers, hearing aids, orthopedic shoes, and equipment maintenance and repairs.



Generic Services: Early intervention service providers, California Children's Services, local education agencies, health care facility providers, health care agencies, private insurance, trust funds, low incidence SELPA/LEA funds.

Certified or Licensed Community Living Arrangement Supports and Services

When: Tri-Counties Regional Center believes that people with developmental disabilities should be able to participate in family life and in the community where they live. Therefore, a high priority will be placed on supporting children living with their families and an equally high priority will be placed on adult consumers living as independently as possible in their communities.



What: Tri-Counties Regional Center will use certified foster family home agencies and/or licensed residential services that maximize consumer growth, self-sufficiency and independence. These living arrangement services will provide an atmosphere that respects the individual's preferences, values, ethnic differences, and beliefs. These living arrangement services will be located in neighborhoods so consumers can independently access community resources. Tri-Counties Regional Center will assure that living arrangement services make provisions for health care and for the overall physical and emotional well-being of consumers.

1. Certified foster family home agencies are agencies that certify and monitor foster family homes into which they coordinate referrals of developmentally disabled minors and adults, where they will be able to reside in home-like settings.
2. Licensed residential services include licensed residential programs/facilities that maximize consumer growth, self-sufficiency and independence by providing supervision and training. These

2. licensed residential services may be licensed by the Department of Social Services Community Care Licensing or by Department of Health Services Health Care Licensing.

Generic Services: Consumers who are eligible for Supplemental Security Income will use this income to pay for living arrangement services, or their Medi-Cal to pay for living arrangement services which are Medi-Cal funded. Parents of minors in residential programs will be assessed a sliding scale reimbursement or parental fee by the Department of Developmental Services. County Departments of Social Services fund children in placement for whom they are responsible.

Consumer and/or Family Attendance at Conferences

When: Parents and consumers need financial assistance to attend, participate in, and present at select conferences, workshops, and seminars.

What: Conference fees, travel, hotel and per diem expenses for the consumers and family members who request such support. A limited number of persons may attend a single event. The regional center asks attendees to “teach-back” information to other groups.



Generic Services: Family Resource Centers, Local Education Agencies (LEAs) or Special Education Local Planning Agencies (SELPA's), California Early Intervention Team Technical Assistance Network (CEITAN) for Early Start.

Appendix I

Rules Which Apply to Obtaining Services

1. TCRC will not fund any service that is considered experimental, optional or elective in nature.
2. Prior to authorization of regional center funding, an exploration of the availability of private, personal or generic resources will be required.
3. For individuals receiving early intervention services, consumers in public school programs and consumers who reside in health care facilities, services (health care and/or therapies including behavior intervention) are expected to be provided as part of the individual's program, rather than as a separately funded service.
4. The Planning Team must determine that services are required as a direct consequence of the developmental disability.
5. Tri-Counties Regional Center will advocate for and work with consumers and their family members to ensure that generic and private therapy service providers discharge their obligations to meet the needs of persons with developmental disabilities.
6. It is the financial responsibility of consumers or their families to pay premiums and meet any required deductible amount or co-payment liabilities as determined by generic resources and/or private insurance carriers. Exception: under the federally funded Early Start Program, the regional center can be required to pay an insurance deductible or co-pay.
7. Except as legally prohibited by the terms of a Special Needs Trust, trust funds established for the care or benefit of a consumer are considered a private resource and, therefore, it is expected that

71. this source of funds be used prior to regional center funds.
18. If a generic or private resource initially denies a required service that Tri-Counties Regional Center has determined to be the responsibility of that resource, the denial will be appealed. Tri-Counties Regional Center may authorize funding for a service while a consumer or family member appeals a denial of service by a generic or private resource under the following circumstances:
 - a. The Planning Team will make the determination that the service is required to protect a consumer's health and safety, or that a prolonged wait for the service will have an irreversible impact on the consumer's health and safety; and
 - b. The Planning Team will consider the consumer's risk for regression and the capacity of the consumer to regain any loss of function or ability if the service is not provided in a timely manner.
19. The purchase of any service must be both clinically and fiscally an effective use of public funds.
10. Exception Policy: Tri-Counties Regional Center recognizes that some individual needs are so unique that they may not be addressed in a Service Policy and may require an exception. Such requests for an exception to a Service Policy will be made through the Planning Team process.

Appendix II

A Listing of Generic Services*

California Children's Services (CCS)

CCS serves children — up to age 22 — with certain genetic, neurological, and orthopedic conditions that can be corrected (or helped). Certain therapies for very young children (e.g., physical therapy) are provided without regard to family income and assets through Medical Therapy Units, often coordinated closely with the schools. Other services (e.g., surgery; durable medical equipment) must be judged medically necessary. If so, CCS can refer to a health-care provider and may provide some financial support. Such support is predicated on the family having an annual adjusted gross income (AGI) of \$40,000 or less, although if medical expenses exceed (or are projected to exceed) 20% of income or more, the child may be eligible, despite higher family income.

Referral to CCS is typically provided via the physician with support by the regional center or school. Along with identifying information, the referral must include medical records which accurately and legibly document original findings.

Child Health and Disability Prevention Program (CHDP)

CHDP provides well-child physicals for children through 21 years of age at the county level, using a combination of federal and state funds.

The complete examination includes hearing, vision, lead level, anemia check, urinalysis and immunizations.

If Medi-Cal eligible, services extend to age 21.

If not Medi-Cal eligible, services are to age 19.

Children not eligible for full-scope Medi-Cal can qualify, if their family income is less than 200% of the federal poverty line. More information is available by calling the local health department or Medi-Cal division of DPSS.

Child Care Resource Centers

Each community has a resource center which assists families in identifying licensed day care and family day care locations. There is some assistance available to families to cover the costs of day care depending on the family's circumstances.

Children's and Family Services

The title of this service may vary from area to area. This is the division of the Department of Social Services which provides protective services for children who may be abused, neglected, or dependent. Allegations of abuse against a child (with or without a disability) are made through the protective services divisions of these agencies. Social services are available to assure a child's safety.

Department of Rehabilitation

The mission of the Department of Rehabilitation is to assist Californians with disabilities in obtaining and retaining employment and maximizing their ability to live independently in their communities.

The Individualized Written Rehabilitation Program (IWRP)

Your counselor will review your information to determine your eligibility for services. If it will take longer than 60 days to determine if you are eligible, your counselor will meet with you to discuss the situation. To complete the eligibility determination, your counselor will assess:

1. If you have a physical or mental impairment;
2. Whether the impairment(s) make it difficult for you to get or keep a job;
3. If you require rehabilitation services in order to become or remain employed.

Once an employment goal has been determined, you and your counselor will then agree on and develop a written plan for reaching your goal. This plan, the IWRP, will include:

- Your employment goal;
- Your responsibilities as the key person in carrying out the IWRP;
- Your counselor's responsibilities in assisting you with your plan;
- Services needed to obtain your goal, including services from other agencies if available.

Services provided by the Department of Rehabilitation may include:

- Counseling and guidance;
- Medical services and equipment;
- Additional assessments through medical specialty exams, psychological and vocational testing as needed;
- Vocational training and education;
- On the job training;
- Referral to other community resources;

- Telecommunications, sensory and other technological aids and devices;
- Transportation assistance;
- Assistance with maintenance costs;
- Reader, interpreter, tutorial and notetaker services;
- Job seeking skills training;
- Supported employment services including job placement and coaching;
- Work tools, uniforms and safety equipment;
- Personal assistance services;
- Services for family members;
- Self employment services;
- Post employment services.

Habilitation Services Program

The Habilitation Services Program administered by the California Department of Rehabilitation, addresses the vocational needs of persons with severe developmental disabilities through a broad range of services directed toward developing the individual's maximum potential for mainstreaming into generic vocational rehabilitation programs. HSP provides both sheltered workshop services through Work Activity Programs and supported employment services. Habilitation services are available only to persons with developmental disabilities who are also Regional Center clients.

Work Activity Program Services

Work Activity Program services through the Department of Rehabilitation include paid work, work adjustment and supportive habilitation services in a sheltered work shop setting. Programs provide

paid work in accordance with Federal and State Fair Labor Standards. Work adjustment services may include developing good work safety practices, money management skills, and appropriate work habits. Supportive habilitation services may include social skill and community resource training as long as the services are necessary to achieve vocational objectives.

Supported Employment Services

Supported Employment services through the Department of Rehabilitation can be provided either through the vocational rehabilitation program or the Habilitation Services Plan. Supported employment services are aimed at finding competitive work in a community integrated work setting for persons with severe disabilities who need ongoing support services to learn and perform the work. Supported employment placements can be individual placements, group placements (called enclaves), and work crews, such as landscaping crews. Support is usually provided by a job coach who meets regularly with the individual on the job to help him or her learn the necessary skills and behaviors to work independently. As the individual gains mastery of the job, the support services are gradually phased out.

Disabled Student Centers

Consumers enrolled in the state university system can enlist the assistance of the Disabled Student Center for help required to be successful in school. This might include help in getting around campus, notetakers, readers, or other adaptations a student requires.

Early and Periodic Screening, Diagnosis, and Treatment Program (EPSDT)

Medi-Cal linked for children to age 22, EPSDT is an important source of funding for selected public health services. EPSDT is intended to detect delays, disabilities, and diseases early, and to treat such conditions early so that later problems are minimized. EPSDT provides assistance in obtaining early health care for eligible children and pregnant women as well as other services directly related to health screening and assessment. Eligible individuals are pregnant women, newborns and eligible children to age 22 requiring health care and health care assistance.

Medi-Cal must pay for any medically necessary service, whether that service is a part of the State Medicaid Plan or not. It is up to parents and advocates to assure Medi-Cal qualification, and that screening is requested (e.g., by the parents) and needed follow-up treatment or intervention occurs. EPSDT services can go beyond what Medi-Cal usually covers.

Education/Special Education

Under special education law, school districts must provide each student with a disability with a free appropriate public education (or FAPE). FAPE means special education and related services which are provided at public expense and without charge, meet appropriate standards, include preschool through secondary education, and conform with an Individual Education Program (IEP). Special education must be provided in the least restrictive environment, which means that to the maximum extent appropriate all students with disabilities will be educated with students who are not disabled.

Children who have a disability that causes them to need specialized educational services to benefit from their education are entitled to receive special education and related services.

Eligible disabilities include but are not limited to sensory or orthopedically impaired, mentally retarded, seriously emotionally disturbed, other health impaired, or children with specific learning disabilities. In addition, children with autism and traumatic brain injury are eligible for special education under federal law.

Special education services are available to children who meet the criteria if they are between the ages of five and 18 years. A person could continue getting special education services until age 22 under certain circumstances. There are early educational opportunities available to children under age three who have disabilities but are not regional center eligible and for those who are developmentally delayed or at risk of delay.

Children with special needs, ages three to five years, who were served by the Early Start Program are able to enter public school programs as preschoolers if they satisfy the eligibility criteria.

In order to assist a family in coordinating the array of special education resources available, the regional center service coordinator is often included when the Individual Education Plan (IEP) is developed. Some regional centers have educational consultants who assist families in getting the most appropriate services from the school district.

Food Program for Women, Infants and Children (WIC)

WIC is a special supplemental food program for women, infants and young children in need. WIC provides temporary assistance with nutrition education to help improve eating habits, and supplemental food/vouchers. These monthly vouchers for supplemental foods are used at a store selected by the participant. WIC supplemental foods include milk, cheese, eggs, peanut butter, dried beans/peas, juice, fortified-infant formula/cereal and cereal. WIC foods are selected to meet the nutritional needs of young children and pregnant women who are breastfeeding. To be eligible, the person must be a woman who is pregnant, breastfeeding (or has recently delivered a baby), or a child under five years old. In addition, the recipient must:

- (1) Be at a nutritional risk determined by a health professional;
- (2) Have regular medical check-ups;
- (3) Meet poverty income guidelines; and,
- (4) Reside in a local agency's service area.

Food Stamp Program

The Program provides monthly benefits in the form of food stamps for low-income households. These benefits are part of the person's food budget for the month. Individuals who qualify for food stamps must: work for low wages, or be unemployed or work part-time, or receive welfare or other assistance programs, or be elderly or disabled and live on a small income, be U.S. citizens or legal permanent aliens.

The food stamp office provides application forms on the same day of the visit. Interested individuals can ask for the application in person, over the phone, or by mail, or someone else may get one on his/her behalf.

Healthy Families

A new program, operated by the California Managed Risk Medical Insurance Board (MRMIB), with enrollment beginning in June 1998, and services underway shortly thereafter.

Uninsured children (ages one through 18) in families with incomes of less than 250% of the federal poverty level (\$35,376 for a family of three), and who are not eligible for no cost Medi-Cal, can purchase a package of covered benefits just like those enjoyed by children of state and local government employees. Premiums are \$7 to \$27 per month, depending on income and number of children enrolled.

Co-payments are quite low: for example, \$5 for crowns, bridges, partials, and dentures. Continuing with dental services as an example, medically necessary orthodontia is no charge, just like x-rays, examinations, cleanings, fillings, topical fluoride, and sealants.

Hill-Burton Free Care Program, County and Community Hospitals

Located by calling the Hotline (1-800-638-9742) to see which hospitals in your area may have a responsibility to provide free or low-cost health care as a "payback" for federal construction or modernization funds. Some hospitals have other funds for similar purposes. County and community hospitals have certain obligations to treat emergencies, whether the person can pay or not.

In-Home Supportive Services (IHSS)

IHSS provides personal care and domestic services to people who are aged, blind, or disabled and who live in their own homes. To be eligible an individual must:

- Be a lawful resident of California with low income and limited resources, linked to eligibility for Medi-Cal;
- Need IHSS care to remain safely in their own home.

Individuals with disabilities can qualify for IHSS services, which might include meal preparation, laundry, shopping, non-medical and other types of assistance. Eligibility for IHSS services is coordinated through the county Departments of Social Services. Authorized hours may range to a maximum of 283 hours per month, depending on the needs of the individual.

IHSS services which are allowable include:

- Domestic services (cleaning, changing linens, etc.);
- Related services (menu planning, shopping, etc.);
- Heavy cleaning services (due to special health problems, etc.);
- Non-medical personal services (hygiene, grooming, ambulation, etc.);
- Medical transportation service;
- Yard work services;
- Protective supervision service (to protect against risk of injury/accident);
- Teaching and demonstration service;
- Paramedical services under direction of health care professional (exercises, catheter care, injections, etc.).

Medi-Cal (State-Federal Medicaid Program)

Serves low-income Californians who would otherwise not have access to medical/health care. About half the money is federal, half State. Medi-Cal covers a variety of services, when they are medically necessary. Recipients of Supplemental Security Income (SSI) are automatically eligible for Medi-Cal. Some others can qualify as medically needy, with a share-of-cost, if they have high medical expenses in any month. Besides primary, specialty (e.g., psychiatry; durable medical equipment), and acute care, the Medicaid program is used to fund a variety of other services and supports, some of which are described below. All told, over half of all funds for “developmental services” (including targeted case management; long-term health care in skilled nursing and intermediate care facilities; and waiver services) in California are financed through the Medicaid program.

California has applied for (and received) several Medicaid Waivers to provide Home and Community-Based Services (HCBS). Some are tied to intensive medical services and support, where services can be provided as effectively and less expensively at home than within “an institution,” where “institution” includes many small, community facilities, not just hospitals, developmental centers, and the like. Such services are used by some individuals with complex medical care needs, including being technologically-dependent for sustenance, breathing and the like. Other Medi-Cal funded services include (1) adult day health care (a day program option for some); (2) HCBS waiver services, such as personal care, so that more adults with developmental disabilities can live in their own homes (e.g., supported living services); and (3) even some supported employment services.

Medicare

A federally-funded, public health insurance program for the Nation's elderly and selected others. It covers end-stage renal disease (e.g., kidney failure; transplantation) for people of all ages. In California SSDI recipients automatically have access to Medicare, regardless of age and SSA recipients two years following eligibility. Part A covers inpatient hospital care, care in a skilled nursing facility, or hospice care. Part B covers the services of physicians and selected other professionals, outpatient hospital services, medical supplies, and selected other services.

Mental Health Services

Physical medicine and mental health services have historically co-existed. Talk therapy and the use of various psychotropic medicines (to affect thinking and feeling) constitutes the domain of psychiatrists, psychologists, LCSW (Licensed Clinical Social Workers), and Marriage and Family Therapists (MFT). Some of these kinds of services, such as behavior management, are often provided through regional centers or the schools.

In an ideal world, “dually-diagnosed individuals,” meaning those with both developmental and psychiatric (or emotional) disabilities, would be treated collaboratively by those best positioned to make a positive difference. However, the mental health and developmental services systems are organized differently. And, mental and physical health practitioners rarely work together. The result is that one has to be very astute in building partnerships and collaboration between regional centers and mental health centers. Mental health services in California have been more poorly funded, most would agree, than developmental services. And, some mental health practitioners (especially those who do talk therapy) feel that such

services are a waste of effort for many people with cognitive impairments. In approaching mental health professionals, one should focus on presenting symptoms (e.g., anxiety, depression, behavior) and not identify the person by a developmental disability label until the person's referral has been reviewed by County Mental Health. County Mental Health Departments use the term “target population” to define the more severely mentally ill people they serve. If services are denied, there is an appeal process.

Public Transportation

The array of available and accessible public transportation services varies from area to area. Most individuals with developmental disabilities qualify for price reductions on bus passes to ride the public bus service. In addition, many communities operate a paratransit system (door-to-door van service) for people with disabilities who need to get to medical appointments and other community services. Such transportation is required by the American with Disabilities Act (ADA). Check with the transportation coordinator or resource developer in your regional center for information about paratransit services and transportation discounts (e.g., bus passes, taxi vouchers).

Recreation

Most communities have a parks and recreation program. These programs offer a variety of sports, art instruction, classes, dance instruction, exercise, swimming, etc. Some park locations have adaptive equipment for people with disabilities as well. The programs are available to the public.

Section 8 Rental Assistance Program

The Section 8 Rental Assistance Program is federally-funded through the U.S. Department of Housing and Urban Affairs (HUD). Local housing authorities administer the program.

The program provides a subsidy for renters who have low incomes. The program's purpose is to provide low-income families (including families of one) with safe, decent and affordable housing. Waiting lists are typically quite long: two or more years in most areas.

Sign ups to be on the list may be only an occasional event. Some large cities provide publicly-owned housing (so-called "projects").

Increasingly, subsidies are provided through certificates and vouchers. If accepted by a private-sector landlord for rent at or below fair market rent (FMR) for units of a given size (say, one-bedroom), a certificate means that the housing authority will pay the difference each month between the FMR and 30% of the family's income. With a voucher, the family can rent units at rates above published FMRs, but the subsidy is the same as if the family had a certificate. The renter pays extra—that is, the difference between what the landlord charges and FMR. Individuals who need round-the-clock attendant care typically will qualify for a two-bedroom unit on their own account. Only a few local housing authorities have amended their HUD contracts to take advantage of the "shared housing option," wherein more than one individual has exclusive right to a bedroom and shared use of common elements of the dwelling. One can sometimes move up on the waiting list if one can obtain preference points, which are given for each of the following:

- (a) paying over 50% of income for housing;
- (b) living in substandard housing;
- (c) being evicted.

Social Security (SSI, SSDI, SSA)

The Social Security Administration administers two programs of importance to many individuals with developmental disabilities: Social Security Disability Insurance (SSDI) and Supplemental Security Income/State Supplemental Payment (SSI/SSP). The former is all federal money; the latter is a combination of federal and state funds. In addition, a disabled adult child of a retired or deceased parent who paid into Social Security is eligible for SSA.

Social Security Disability Insurance

(SSDI) is a social insurance program, wherein a disabled individual receives a cash payment based on their own earnings record. There is no resource (or asset) test for receipt of SSDI. SSDI benefit levels depend on the earnings of the person on whose social security account the benefit is based, and on the number of persons drawing benefits on the same account.

One must have a medically determinable disability expected to last 12 months or more that prevents substantial gainful activity (SGA). At present, the SGA criterion is \$500 per month (\$1,000, if blind). A person eligible for SSDI is also eligible for Medicare, with the premium for Part B services paid for the individual.

Supplemental Security Income/State Supplemental Payment (SSI/SSP)

SSI/SSP is an income maintenance program for aged, blind, or disabled individuals (and couples) with low income and few resources. SGA is defined the same way as for SSDI. At present, “countable assets” (cash and near-cash) may not exceed \$2,000 (\$3,000 for a couple). Cash payments are not predicated on prior contributions to the Social Security Fund.

What about income from other sources?

One can receive \$20 per month from any source (earned or unearned income) without experiencing a reduction in SSI/SSP. One can also earn up to \$65 per month without a reduction in SSI/SSP. Beyond \$85 in any month, however, earnings are “taxed” at 50 cents on the dollar. In other words, if a person would otherwise receive \$650 per month in SSI/SSP, but has earnings of \$185 in a month (and no other income from any other countable source), his or her SSI/SSP benefit would be reduced to \$600 per month (\$85 ignored; \$50 reduction based on added \$100 of earnings).

If adults with disabilities continue living with family —

Children with disabilities, who are living with their families, are often ineligible for SSI because of both family income and assets. But, once the person with a disability reaches age 18, he or she is considered a “family of one,” and family assets and income no longer count against eligibility. Continued assistance from the family can, however, affect the amount of the monthly benefit. Hence, many families choose not to continue to provide food and lodging at no cost to the individual. Rather, they choose to keep records, and to “charge” their children fair market rent and their pro rata share of food, utilities, and the like. Sections 1619 (a) and (b) retain Medi-Cal eligibility even if earnings reduce SSI/SSP to zero.

What assets are “countable”? What assets are ignored?

Countable assets include cash and near-cash (e.g., stocks, bonds). If countable assets exceed certain limits, SSI benefits may be terminated until those assets are spent down — that is, until any excess above the asset limit has been eliminated. Some assets are not countable (they are ignored). Such include a car (of limited value, unless used for work or medical appointments), a home in which the recipient is living, furnishings and clothing to a certain dollar amount, a small insurance policy, and selected other assets (e.g., engagement ring and wedding band).

Are there ways of keeping more of one’s earnings or assets?

Yes, there are a set of “work incentives,” under Sections 1619(a) and (b) of the Social Security Act, that can be used. Being able to buy needed health insurance for awhile is one work incentive. Being able to claim certain “impairment-related work expenses” (IRWEs) against earnings can help. An approved “plan to achieve self-sufficiency” (PASS) can shelter some assets and earnings to buy work-related equipment (e.g., a specially equipped van; tools of a trade), to complete an educational program (e.g., bookkeeping certificate program), or to start a business.

Does where a person lives matter for SSDI and SSI?

The answer is “Yes,” because residential services are funded in different ways. Services of ICF/DD-H and DD-N (Intermediate-care facilities /Developmentally Disabled-Habilitative or nursing), for example, are charged to Medi-Cal.

If a person living in an Intermediate Care Facility is SSI-eligible, he or she will receive \$42 per month for “personal and incidental needs,” nothing more.

If a person lives in a licensed community-care facility, on the other hand, the person currently receives \$796 per month in SSI/ SSP, must turn over \$703 to the residential service provider, and keeps \$93 for “personal and incidental needs.” If a person lives “independently,” he or she will typically receive about \$650 per month (more if no access to cooking facilities), and no distinction is made as to purpose. All is for the basics of food, clothing, shelter, and incidentals.

* from *Service Coordination Orientation and Training Curriculum*, Allen, Shea & Associates, 1999

Appendix III

More Generic Resources*

Continuing Education Adult education:

- College
- High School - Night School
- Parks and Recreation
- Classes offered by the city
- Classes offered by individual businesses (e.g. craft stores, cooking supply stores)
- Community colleges - disabled student services (in-class assistance, tutoring, etc.)
- Community colleges - technology centers (adaptive equipment)
- Driver training programs
- Literacy programs
- YMCA, other organizations

Employment

- Department of Rehabilitation
- Employment Development Department
- Private Industry Council
- Regional Occupational Program
- Supported employment agencies

Food/Meals

- Meals on wheels
- Food banks and pantries
- Food stamps (emergency assistance)
- W.I.C. (Women, Infants, and Children)
- Community and church assistance leagues
- SHARE - Two hours of volunteer work + \$14= \$35 worth of groceries

Health Care

- 911 for emergency health care
- Alcoholic Anonymous
- Gamblers Anonymous
- Narcotics Anonymous, etc.
- Assisted living providers
- California state licensing boards (checking on medical license status, making complaints, etc.)
- County Health Department
- Doctor/Dentist referral services
- Free medications; for information call 1-800-PMA-INFO, ask for Directory of Prescription Drug Patient Assistant Programs which is free & very detailed.
- Home health nursing
- Hospice care
- Non-emergency medical transportation companies
- Pregnancy help centers

Housing and Utility Resources

- Adaptive phone equipment, including some emergency calling devices
- Bonding - rental discounts available in some cities for low income tenants
- Cable (some - for basic only)
- Call blocking services (various combinations are possible, at no charge)
- Department of Housing and Building Safety (various names in various cities); can help get landlords to make needed repairs
- EPIC (Emergency Crisis Intervention Program) 1-800-433-4327; provides emergency, one time only, payment of utility bills for people facing shut off. Also, can provide deposits for start-up service.
- Free “411” calls
- HEAP (Once a year assistance with utility bills at 1-800-433-4327)
- Home adaptation providers
- Housing insulation and repair programs, many for tenants as well as home owners
- Housing advocates, fair housing councils
- Legal Aid
- Lifeline rates and discounts (gas, electric, phone, water)
- Medical Baseline Discounts - increased allowance for lowest rate on utilities, based on necessary medical equipment (e.g., power wheelchairs, respirators)
- Newcomers Clubs
- Police (evictions, etc.)
- Waived or discounted deposit fees for utilities
- Welcome Wagons

Mental Health Services/Crisis Intervention

- Battered women’s shelters
- Church sponsored counseling services/ programs
- Counseling centers with sliding fee scales
- County Department of Mental Health

- Crisis intervention teams
- Rape crisis centers
- Suicide hotlines
- Support groups around special issues
- Victim’s of violent crime Assistance Programs

Miscellaneous

- California Relay: Voice to TTD and TTD to voice for those with hearing impairments needing to receive/make calls to those without TTD equipment
- California Speech Relay: same idea as California Relay, designed for individuals whose speech is difficult for others to understand. 1-888-377- 3324 (for info: 916-445-9692; Tom Burns)
- Centers for Applied Rehabilitation Technology
- City Hall
- Computer Access centers
- Discount camping fees at most state and federal parks
- Federal Information Center: 1-800-726-4995; can direct you to the correct federal resource to answer your question, request for information, etc.
- Free fishing licenses - State Department of Fish and Game
- Immigration / Refugee services
- Independent Living Centers
- Roommate Finders type services
- Senior centers / services
- State Information Office:
1-916-322-9900; can direct you to the correct state resource to answer your question, request for info, etc.
- Volunteer bureaus

Other Financial Resources

- BOGG grants pay for registration costs at community colleges for people with low income.
- Consumer Credit Counseling
- Customer service representative at the bank
- Debtors Anonymous
- Dept. Of Public Social Services
- IHSS, AFDC, Food Stamps (Emergency), WIC
- F.E.M.A. (Federal Emergency Management Agency)

Parenting/Family Support

- Adoption/foster care services
- Childbirth preparation classes
- Child care referral services
- Head Start
- Legal aid
- Parenting classes
- Pregnancy help centers

Transportation

- Carpool/Vanpool
- Discount transit vouchers - offered by the city to residents
- Driver training programs
- Para-transit companies

* Adapted from Jennifer Pittam, *CHOICES* (1995).