

## Workgroup 1 Homework Summary

### Priority 2

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**Original Priority 2: Ensure that every individual who meets service eligibility chooses and receives individualized services, including those not currently in the system – regardless of age, language access, race, ethnicity, or location.**

**Revised Priority 2: Make sure that anyone who is eligible for services learns about the services and receives those individualized services timely – no matter who they are or where they live.**

#### **Which Version of Priority 2 Do you Prefer?** **Summary of Homework Responses**

- Most workgroup members who responded in the homework said they prefer the revised version of Priority 2, which is:

**Make sure that anyone who is eligible for services learns about the services and receives those individualized services timely – no matter who they are or where they live.**

- Some members who responded liked how the original version listed reasons why people get overlooked: “age, language access, race, ethnicity, or location.”
- Some members offered other ways to write Priority 2.
- Here is a new version that combines the revised language with the list of reasons people get overlooked for services:

***Make sure that anyone who is eligible for services learns about the services and receives individualized, timely services – regardless of age, language access, race, ethnicity, or location.***

## What is the Problem?

### Summary of Homework Responses

1. Individuals/families:
  - a. Don't know that services or regional centers (RCs) exist.
  - b. Don't have a way of knowing which services are available to them.
  - c. Don't learn about services at an early age.
  - d. Don't know what packets they need to fill out to get the services – or how to fill them out.
  - e. Give up after receiving unclear and inconsistent answers. It all seems too risky.
  - f. Experience long waitlists for services.
  - g. Don't always understand options or services because they are not explained clearly.
  - h. Who do not speak English or are afraid to challenge authority are at higher risk of not getting the services they are eligible for.
  - i. Can't always travel to the service because of lack of transportation.
2. Regional centers:
  - a. Don't have enough staff to set up services timely.
  - b. Have new staff who do not know how to navigate the system to help their clients.
  - c. Vary region by region in terms of timeliness, availability, and delivery of services.
  - d. Are unable to find providers to provide services.
  - e. Can't keep up with policy changes, so staff provide outdated information to families about services and eligibility.
  - f. Place the burden on individuals/families to understand the system.
  - g. Make decisions about the services instead of the individual or family deciding.
3. Service providers don't have enough staff or funding to provide enough service to meet all the needs.

## What is Causing these Problems? Summary of Homework Responses

1. It is hard to get service providers in some areas, especially rural areas.
2. The system makes it too difficult for providers to get vendored.
3. Service Coordinators are required to deny or not offer services.
4. There is not enough outreach in local communities or at the appropriate community locations.
5. Doctors, especially obstetricians, are not familiar with RC services so they don't talk to families about them.
6. Caseworkers are not aware that there are programs that can collaborate with them to support the families.
7. The structure of RCs is outdated and not designed to meet the needs of their clients. We need to have a conversation about reimagining regional centers. If we could build a new system, what would it look like? The Master Plan gives us the opportunity to think outside the box.
8. Lack of democracy – consumers should have voting rights on what RCs do.
9. The current culture of distrust.
10. Lack of training for employees about what internalized ableism looks like and how it can manifest.

## What Data Do We Need to Understand These Problems? Summary of Homework Responses

1. How many individuals utilize services, by:
  - a. age group and life stage
  - b. type of disability
  - c. race and ethnicity
  - d. sexual orientation
  - e. parent involvement or no parent involvement
2. What is the distribution of service providers, by region?
3. How long does it take from the point of intake to services being delivered, by service type?
4. How long are people waiting on the wait lists, by service type and by service company?
5. How satisfied are individuals with service coordination? How satisfied are they with the services they receive?
6. What percentage of IPP goals are met?
7. What evidence validates that an RC should take a stronger role in making major decisions for individuals? What evidence validates that consumers can make great decisions about their own life?
8. What are the “frequently asked questions” at RCs? How can RCs use this information to improve services and communication?

**Priority 2: Make sure that anyone who is eligible for services learns about the services and receives individualized, timely services – regardless of age, language access, race, ethnicity, or location.**

**What Are Your Ideas for Recommendations?**  
**Summary of Homework Responses**

1. Improve and expand outreach to individuals and families:
  - a. Provide better training and information for outreach staff.
  - b. Hire staff to solely do outreach to underserved groups.
  - c. Send RC staff into the community to share information at school and community fairs and other gatherings – and actively invite community members into RCs.
  - d. Develop innovative outreach to reach more individuals who may not be getting information from typical sources.
2. Improve training and education to professionals who interact with families so they can refer families to RCs:
  - a. Teachers, special education teachers, IEP teams, and school administrators.
  - b. Doctors, psychologists, therapists, and other medical professionals.
3. Improve information individuals and families receive:
  - a. Equip RC staff with better training and knowledge of how to help families.
  - b. Have staff who speak the languages of the community.
  - c. Create orientation classes for families with accessible resource booklets that describe services, acronyms, eligibility criteria, etc.
  - d. Update technology at RCs and service providers for easier access to online services.
4. Reimagine the RC system:
  - a. Allow an individual/family to select an advocate that is not a regional center employee who helps them navigate RC services and other services they may be eligible for.
  - b. Create a system where distance to services is not an obstacle.
  - c. Create a system where every region of the state has equal access to all services.
  - d. Pursue a pilot program where people are given agency over their own services, living the principles of the self-determination program, but without the current oversight or red tape or restrictions. Remove the RC, the financial management service (FMS), etc. as much as possible and see what happens. Use the data to help figure out whether the default should be more autonomy or less, more authority and oversight from the RC or less.

5. Improve accountability to ensure individuals and families learn about, access, and receive timely services.
  - a. Create a regular review of data on awareness, access, and timeliness of services.
  - b. Use algorithms that identify individuals who are not receiving the level of service that is available to them and have a dedicated team to help resolve.
  - c. Put autistic people in positions of power including consulting on decisions.
  - d. Create a ranking system within regional centers with benchmarks they need to reach before being placed on suspension.
  - e. Reform the Regional Centers Boards to include the perspectives and voices of the community.
6. Adopt best practices across regional centers:
  - a. Encourage more communication between regional centers to share solutions to problems, increase efficiency, and improve client satisfaction.
  - b. Make efficiency a priority within the system.